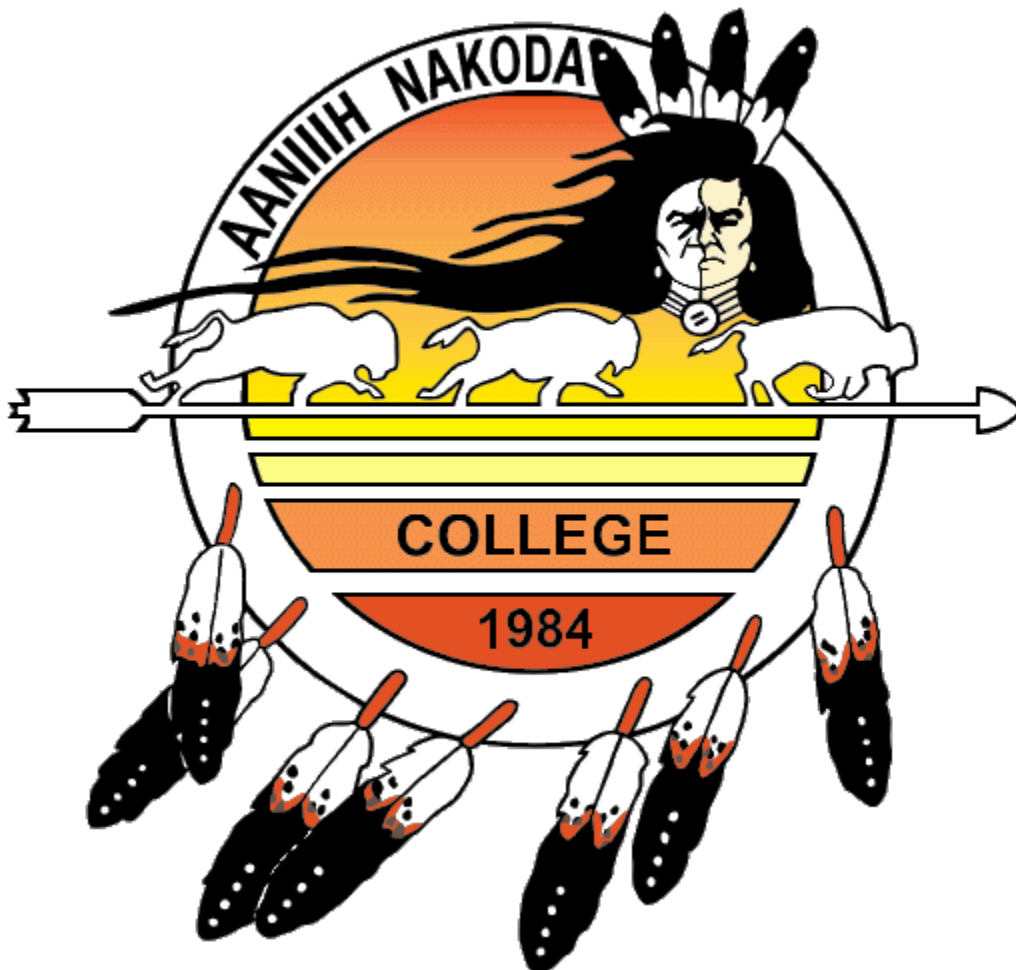


Aaniih Nakoda College
Associate of Science
Níihaanísíi?ǎh?ǎnín?ǎ *Grow Our Own*
ᐱᐣᐣᐣᐣᐣᐣᐣ *Growing Our Own*
Nursing Program

Nursing Student Handbook



2023-2024

Direct experience is the only way to build up an understanding that is not only intellectual but intuitive and practical, involving the senses and the heart as well as the rational mind. ~Rupert Sheldrake in "The World We Used to Live In: Remembering the Powers of the Medicine Man" by Vine Deloria.

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Aaniiih Nakoda College Mission

The mission of Aaniiih Nakoda College is to provide quality post-secondary education for residents of the Fort Belknap Indian Reservation and surrounding communities. The college promotes individual and community development by maintaining and revitalizing the indigenous lifeways of the Aaniinen and Nakoda Tribes and by preparing students to succeed in an American technological society.

Department of Nursing Mission

The mission of the Aaniiih Nakoda College Associate of Science *Grow Our Own* Nursing Program reflects the college core values and is congruent with its Mission and Goals. The Nursing Department adheres to the 'grow our own' philosophy by helping to empower the student nurse with the attainment of the Associate of Science degree, allowing the student to be eligible for licensure as a Registered Nurse in the State of Montana. The Aaniiih Nakoda nurse will deliver health care in a holistic and culturally sensitive manner that reflects the community "Life Ways." Aaniiih Nakoda College educated nurses will have had state of the art education and technological experiences befitting the demands they will encounter practicing in the rural, frontier environment that is their home.

Department of Nursing Philosophy: Grow Our Own

Aaniiih Nakoda College nursing education program is dedicated to the following:

- Upholding the Aaniiih and Nakoda "Life Ways" by educating student nurses from the community who are steeped in the culture, history, and language that is place-based on the Fort Belknap Indian Reservation.
- Employing the indigenous, holistic worldview, embedded in the Medicine Wheel as the teaching and learning paradigm.

Medicine Wheel Paradigm

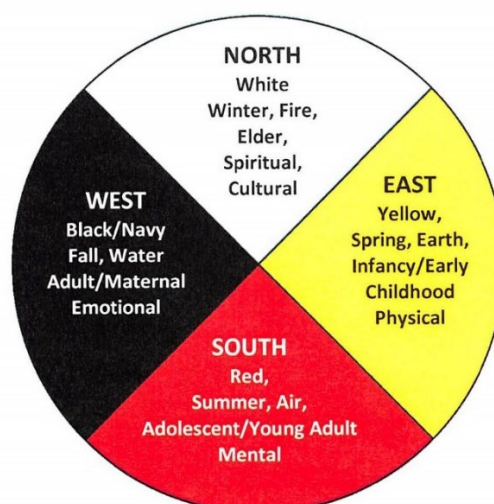
Woven into the nursing education program is the grounding paradigm of the Medicine Wheel, which represents the holistic and balanced nature of traditional life ways and ways of knowing for cultural groups. This model, in multiple variations, is common to many American Indian tribes, and is utilized to represent the cycle of life and guide work with individuals, families, or communities from the perspectives of health, education, sociology, or spirituality.

The four quadrants or directions (East, South, West, North) represent holistic characteristics which fit with the four concepts of nursing's metaparadigm (health, nursing, person, and environment) (Moss, 2016). Each direction is represented by a color (yellow, red, black/navy blue, white), a season (spring, summer, fall, winter), a dimension of the person/being (physical, mental/cognitive, emotional, spiritual), and a specific age group and/or stage of development (infancy/childhood, Adolescence/youth, adult, elder).

As the seasons and stages of development cycle with the sun and direction of the clock, the concept of the person is comprehensive and holistic throughout and across all seasons/stages of development. This careful balance of comprehensive, multi-dimensional perspectives from the Medicine Wheel align with the holistic nature of nursing and nursing education.

Utilization of these concepts throughout the nursing education program will support cultural safety for both the nursing students and their future patients of culturally diverse backgrounds. Use of the Medicine Wheel to guide the inclusion of culture into the development and implementation of the Nursing Program upholds the mission of the institution to link cultural tradition with contemporary education for ensuring highly competent, safe, and holistic nursing care. (Moss, 2016)

Aaniiih Nakoda College Grow Our Own Nursing Medicine Wheel



Aaniiih Nakoda College *Grow Our Own* Nursing Program Outcomes

Program Outcomes:	
Upon completion of the program, nursing student graduates will be able to meet the following program outcomes:	
1.	Graduates from each cohort will meet or exceed an 80% first-time NCLEX-RN licensure examination pass rate for the first-time test takers.
2.	75% of all students admitted to the Nursing Program will complete the required four semester nursing coursework in two successive academic years. (Students tracked for this outcome after the college withdrawal date in their first semester of admission to the nursing courses.)
3.	80% of graduates actively seeking employment will be employed as an RN within 3 months of RN licensure.
4.	50% of graduates are employed in local and regional healthcare organizations that serve the tribal members of the Fort Belknap Indian Reservation.

Aaniiih Nakoda College *Grow Our Own* Nursing End-of-Program Student Learning Outcomes:

To meet the challenge of preparing graduate nurses who will have the knowledge, skills and abilities necessary to continuously improve the quality of the Montana healthcare workforce, the Aaniiih Nakoda ASN End-of-Program Student Learning Outcomes are based on the Medicine Wheel:

End-of Program Student Learning Outcomes:	
Upon completion of Aaniiih Nakoda College's <i>Grow Our Own</i> Nursing Program, the graduate will be able to:	
1.	Apply the Medicine Wheel Paradigm (Moss, 2016) of Aaniiih Nakoda College's <i>Grow Our Own</i> Nursing Program to provide multi-dimensional nursing care to meet the healthcare needs of patients in the local and regional communities.
2.	Integrate an American Indian focus to administer culturally safe patient and family-centered holistic care throughout the Medicine Wheel (Moss, 2016) lifespan seasons.
3.	Utilize the nursing process to incorporate evidence-based knowledge and resources to provide balanced, quality patient care.
4.	Incorporate the values of the Aaniiih and Nakoda lifeways to combine cultural, legal, and ethical accountability into professional nursing practice.

Alignment of End-of-Program Student Learning Outcomes, Medicine Wheel Concepts (Moss, 2016), Professional Competencies and Contemporary Professional Nursing Standards

End-of-Program Student Learning Outcome (SLOs)	Medicine Wheel (MW) Concepts (Moss, 2016) related to Aaniiih Nakoda College Nursing Mission and Philosophy (M&P)	Professional Competencies	National Student Nurses Association Code of Ethics Core Values (Contemporary Professional Nursing Standards)
1. Apply the Medicine Wheel Paradigm (Moss, 2016) of Aaniiih Nakoda College's <i>Grow Our Own</i> Nursing Program to provide multi-dimensional nursing care to meet the healthcare needs of patients in the local and regional communities.	MW: Holistic ANC M&P: Holistic and cultural sensitivity	QSEN: Patient-centered care NLN: Human Flourishing	Quality Education Advocacy Care Diversity
2. Integrate an American Indian focus to administer culturally safe patient and family-centered holistic care throughout the Medicine Wheel (Moss, 2016) lifespan seasons.	MW: Multi-dimensional Care ANC M&P: Maintain and revitalize indigenous lifeways of Aaniin and Nakoda Tribes	QSEN: Teamwork and collaboration NLN: Human Flourishing Nursing Judgment Professional Identity Spirit of Inquiry	Leadership & Autonomy Quality Education Advocacy Care Diversity
3. Utilize the nursing process to incorporate evidence-based knowledge and resources to provide balanced, quality patient care.	MW: Cultural Safety ANC M&P: Linking cultural tradition & contemporary knowledge in culturally appropriate manner	QSEN: Safety NLN: Human Flourishing Nursing Judgment Professional Identity Spirit of Inquiry	Quality Education Advocacy Professionalism Care Diversity
4. Incorporate the values of the Aaniiih and Nakoda lifeways to combine cultural, legal, and ethical accountability into professional nursing practice.	MW: Balanced Care ANC M&P: Individual and community development, empowerment, <i>Grow Our Own</i> nurses	QSEN: Informatics Evidence-based practice NLN: Nursing judgement Professional Identity, Spirit of inquiry	Advocacy Professionalism Diversity

Medicine Wheel and Alignment References:

- Alignment concepts completed by Brown, B., Werk, A. and Hemmer B. (2018). Aaniiih Nakoda College.
- Moss, M. (ed.). (2016). *American Indian health and nursing*. New York, NY: Springer Publishing Company. (Medicine Wheel with adaptations from Brown, B. & Werk, A., Aaniiih Nakoda College in 2018).
- National League for Nursing. (2022). *NLN competencies for graduates of nursing programs*. Retrieved from [Competencies for Graduates of Nursing Programs \(nln.org\)](https://www.nln.org/competencies-for-graduates-of-nursing-programs).
- National League for Nursing. (2012). *Outcomes and competencies for graduates of practical/vocational, diploma, associate degree, baccalaureate, Master's, practice Doctorate, and research Doctorate programs in nursing*. New York: National League for Nursing.
- National Student Nurses Association (2022). *Code of ethics*. Brooklyn, NY: National Student Nurses' Association, Inc. Retrieved from: [Code of Ethics.pdf \(dropbox.com\)](https://www.dropbox.com/s/100000000000000000000000000000000/Code%20of%20Ethics.pdf?dl=1)
- Quality and Safety Education for Nurses. (2018). *Competencies*. Retrieved from <http://qsen.org/competencies/>.

Educational Program Accreditation and Approval

The Associate of Science *Grow Our Own* Nursing Program has been approved by the Montana State Board of Nursing. Aaniiih Nakoda College is accredited by the Northwest Commission on Colleges and Universities. After prerequisite coursework is completed, the Aaniiih Nakoda College (ANC) Registered Nurse Program consists of an additional two years. The actual coursework for the Associates of Science *Grow Our Own* Nursing Program is competency-based and integrated with clinical hands-on experience. The primary goal is to prepare graduates with the knowledge, skills and values to enter the workforce, after successful passage of the national NCLEX license exam given to all students of nursing.

Effective March 28, 2022, this nursing program is a candidate for initial accreditation by the Accreditation Commission for Education in Nursing. This candidacy status expires on March 28, 2024.

Accreditation Commission for Education in Nursing (ACEN)
3390 Peachtree Road NE, Suite 1400
Atlanta, GA 30326
(404) 975-5000
<http://www.acenursing.com/candidates/candidacy.asp>

****Note:** Upon granting of initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was approved by the ACEN as a candidate program that concluded in the Board of Commissioners granting initial accreditation.

Admission to Aaniiih Nakoda College

Students must be admitted to the College prior to the submission of the Associates of Science Nursing Program Application. Therefore, no applications will be reviewed unless the applicant applies first to the College and official transcripts are reviewed by the Registrar.

Acceptance to Aaniiih Nakoda College requires a completed admissions application file, which may be obtained by visiting the campus, calling the Registrar, (406) 353-3907, or downloading it from the institution's website http://www.ancollege.edu/?page=student_services/Admissions

Admission and transfer information can also be found in the *Aaniiih Nakoda College Student Handbook* which can be found at http://www.ancollege.edu/?page=online_resources

Admission into the Associates of Science Grow Our Own Nursing Program

To be eligible to apply for admission into the Associates of Science *Grow Our Own* Nursing Program, applicants must have the following:

- Show that they have been admitted to Aaniiih Nakoda College and are currently in good standing
- Completed all prerequisite course work with a minimum overall GPA of 2.5. Prerequisite coursework can be taken at other institutions but it is the applicant's responsibility to confirm those courses are equivalent to the program's prerequisites and are transferable to this institution (consult with the Registrar if you have questions) http://www.ancollege.edu/?page=student_services/registrar

Nursing Program admission process is outlined in the ***Associate of Science Nursing Student Information and Application Packet*** available in the library and from the Registrar's office.

Students who are applying for admission that have previous bachelor's, master's, or doctorate degrees will be evaluated and advised on a case-by-case basis as to what classes need to be completed in order to be admitted into the nursing program.

Licensed practical nurses (LPN) who are applying to the Aaniiih Nakoda *Grow Our Own* Nursing Program will be evaluated on a case-by-case basis as to their eligibility to transfer in and potential plans for completing required prerequisites. Placement will be dependent on previous classes taken, classes needed, how long the student has been an LPN and the curriculum in which the student earned his/her LPN licensure.

Student Requirements for the Associate of Science Grow Our Own Nursing Program

It is a privilege for Aaniiih Nakoda College nursing student to work with the various health care facilities in Montana. To ensure safety and well-being of all patients, background checks, urine drug screens, and immunizations to prevent communicable diseases have become standard requirements for employment in health care today. This has likewise become a requirement of our valued clinical agencies. It is therefore important that students within this nursing program complete the requirements and healthcare compliance before beginning clinical practice each year. If a student does not complete requirements prior to clinical experiences, that student will not be allowed to attend clinical experiences and therefore will not be able to progress in the nursing program. It cannot be guaranteed that students who cannot meet clinical facility requirements for background checks, urine drug screens and immunizations will be able to be accommodated to complete clinicals in an alternative setting. Thus, failure to complete requirements for clinical will be evaluated on a case-by-case basis. It is to be noted that if a student cannot complete the clinical requirements of the nursing program, as approved and required by the Montana Board of Nursing, the student cannot progress in the program.

1. **Liability insurance:** Each student must have professional liability insurance while enrolled in the program. The cost for this coverage is included in the fees paid each semester. A copy of the liability insurance form is on file with the Nursing Program.

2. **Fingerprint/Background Checks:** Students in the Aaniiih Nakoda *Grow Our Own* Nursing Program will be required to undergo multiple background checks in order to participate with assigned clinical agencies. The process and policy for background checks will be on file with the Nursing Program Administrative Assistant and will be distributed to students upon acceptance to the Nursing Program. Students are encouraged to review the [*Criminal History and Nursing Licensure*](#) section at the end of the handbook. Students are encouraged to complete background checks immediately upon acceptance to the Nursing Program in order to be able to attend nursing clinicals in the fall. *Students will need to start the background check/fingerprint process by working with the Nursing Program Administrative Assistant.*

3. **Health requirements:**
 - a. **Health Insurance** Aaniiih Nakoda College requires all students to carry their own medical health insurance. Students involved in injury or exposure during the clinical experience should seek treatment in the Emergency Room. Students will be responsible for their own medical expenses.
 - b. **Immunizations:** In addition to immunizations required for admission to Aaniiih Nakoda College (MMR and negative PPD testing or x-ray verifying absence of contagious disease), nursing students will be required to have the following:
 - **Flu vaccinations:** annual flu vaccinations are required before being admitted to some clinical sites. Students who are allergic to eggs or who have other medical or religious reasons for not getting the vaccine must wear a mask during their clinical rotation when they are within 6 feet of any other person.
 - **Annual Tuberculin Skin Testing (TST)*** *(per CDC recommendations at: http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm?s_cid=rr5417a1_e): Required before being admitted to clinical sites. Aaniiih Nakoda College requires a “4-visit” approach for 2-step TB tests:
 1. **Visit 1, Day 1:** TST administered
 2. **Visit 2, Day 3:** TST test is read (within 48-72 hours of placement). If negative, proceed to 2nd TST. If positive, it indicates a TB infection and a chest x-ray and further evaluation from a healthcare provider is necessary.
 3. **Visit 3, Day 7-21:** A second TST is applied for those that had a negative TBT on visit 2.
 4. **Visit 4, 48-72 hours after** placement of 2nd TBT, the 2nd TBT is read. If negative, see #5 below. A positive 2nd test indicates TB infection in the distant past. Chest x-ray and further evaluation from a healthcare provider will likely be necessary.
 5. When you turn in your results to the Department of Nursing at Aaniiih Nakoda College, please ask your provider to include actual skin test measurements if there are any (for a positive or near positive test).
 6. For your next year in clinical sites at Aaniiih Nakoda College, nursing students who had the TST the previous year as nursing students will only be required to have a one-step Tuberculosis Test the second year.
 - **Hepatitis B series:** Series of 3 vaccinations against bloodborne Hepatitis B virus. These vaccinations can be completed at Fort Belknap outpatient ambulatory care or Fort Belknap Public Health.
 - **MMR certification** (as required by the college)
 - **Other vaccinations** may be required by clinical facilities. If a student does not have such vaccinations, then the student may not be able to complete clinical requirements at that facility. If other arrangements cannot be made for clinicals and the student cannot complete clinical requirements, then the student will not be able to attend clinicals and will not be able to progress in the program.
 - c. **CPR:** A current healthcare providers CPR course will be required before clinical rotations begin.

- **CPR** must be from an approved health care providers course such as American Heart Association or The Red Cross where chest compressions must actually be checked off.
4. **Proof of health requirements listed above and CPR are due to the Nursing Program by the end of the first week of class in order for students to attend clinicals in clinical facilities. Failure to turn in paperwork by the end of the first week of class will result in student withdrawal from the Nursing Program. The Aaniiih Nakoda College withdrawal policy can be found on pages 37 and 49 of the Aaniiih Nakoda College Catalog.**
 5. **Students are required to attend the Nursing Orientation prior to starting nursing classes.** Nursing orientation is mandatory and if a student misses nursing orientation, the student will no longer be in the Nursing Program and will not be able to attend nursing classes or nursing clinicals.
 6. **Attendance:** In accordance with the *Aaniiih Nakoda College Student Handbook*, class attendance is an important factor in the student's success at Aaniiih Nakoda College. In fact, upon registering for classes, a student is, in effect, signing a contract in which they are assuming responsibility for attendance and completing the class assignments. Attendance is maintained in all classes for financial aid purposes as a student must maintain a 60% attendance rate in order to receive a Pell grant. Failure to maintain this rate may affect the amount of Pell grant a student receives and may result in the payback of the Pell funds. Some instructors require attendance as part of the course requirements for grading purposes.
 - a. Authorized or excused absences do not relieve students of their class responsibilities. When the number of absences hinders a student's progress in a course, the instructor may initiate a recommendation to the Retention Officer to contact the student for withdrawal from the class.
 - b. The Aaniiih Nakoda *Grow Our Own* Nursing Program recognizes the importance of cultural considerations in regards to ceremonies and funeral leave. The Aaniiih Nakoda Advisory Board will determine attendance requirements and excused absences for students in the Nursing Program so that clinical and theoretical coursework can be completed.
 - c. Students must attend lab in order to pass class. Clinical and lab absences must only occur if completely unavoidable and students must contact instructors *prior* to missing clinical or lab time and make arrangements for make-up. Clinical time will be made up as students are required to complete all hours of clinical time per required for clinical classes. If a student misses three (3) clinicals, labs, or lab check-offs as scheduled the student will be dismissed from the clinical or lab portion of that class, and will not be able to attend further clinicals or labs, resulting in a withdrawal from the nursing program, or a failing grade for the clinical or lab portion of that class. If a student withdraws or fails a clinical or lab portion of any class in the Nursing Program, the student also fails the theory/lecture portion of that class.
 - d. If you are going to be absent, please call or see the instructor in advance. In the case of an extraordinary event that will cause absences, the student, instructor and Director of the Nursing Program will set up a make-up schedule. If a student misses 2 classes or will be missing 2 classes, the student will be required to meet with the instructor to discuss a plan of action to limit absences in order to be successful in the Nursing Program.
 - If a student cannot attend a class in person, (illness for example), the expectation is that the student will attend via alternative method as required.
 - e. Personal appointments need to be made outside of class and clinical time at every opportunity possible.
 7. **Freedom from drug and alcohol impairment:** The Aaniiih Nakoda *Grow Our Own* Nursing Program will follow the College's no tolerance policy on drugs and alcohol policy, both of which can be found in the *Aaniiih Nakoda College Student Handbook*. Any evidence of suspicion of drug or alcohol use is grounds for immediate dismissal from classroom, lab or clinical setting and may result in dismissal from the Nursing Program. Suspected use of drugs or alcohol, or any other condition or circumstance that constitutes unreasonable risk to the safety and well-being of the patient can result in dismissal from the Nursing Program.

8. Students commit to full time status in the Nursing Program at Aaniiih Nakoda College (ANC), at which time they are in class or at clinical for the fall and spring semesters. This program, while very exciting, is extremely fast-paced and challenging. There are many tests, quizzes, and assignments each week, to complete prior to class/clinical outside of class time. The majority of students will find it necessary to spend outside classroom time as well as practicing lab/clinical skills. A fully equipped SIMS lab is located in the nursing laboratory, on the ground floor of the Tataga Kni ("Returning Buffalo") building for students to enhance their education and skills needed in patient care. A good rule of thumb is that for every class hour, at least 3 hours in preparation or in the completion of assignments will be needed.

9. Physical, mental, sensory, communication, behavioral and cultural requirements

Cultural Knowledge	<ul style="list-style-type: none"> • Students should be aware of the respect and dignity afforded to all patients and with great empathy for Seniors and Elders of the Indian Community • Students must be aware that silence is a powerful form of communication and learn to modulate their behavior when interacting with patients • Students must realize family and community members need to be close to the patient and treat non staff in the room as an asset for the patient not a deterrent for care • Students should be able to greet their Aaniinen and Nakoda patients in their own language and become a patient advocate for them • Students should have the foundation to ensure the Cultural Safety of their patients
Physical demands include being able to:	<ul style="list-style-type: none"> • Use computer input and output devices effectively, including typing and data entry • Provide all aspects of patient care including medication administration and treatments according to nursing unit guidelines • Physical stamina to work quickly and for long intervals without sitting • Turn/reposition bedfast patient, alone or with assistance, to prevent hazard of immobility. This may require lifting with assistance 200-300 pounds. • Transfer patients from bed to chair, bed to stretcher, chair to bed as needed throughout shift alone or with assistance. • Transport patients in wheelchairs as necessary • Answer patient call lights or intercom system to determine patient needs. • Perform CPR – ventilation/compression • Spend at least 6 to 8 hours on your feet while delivering care • Ability to use left and right hand function, from simple grasping to low speed assembly such as picking up a lancet and obtaining a blood sample with the lancet to get a fasting blood glucose level on a client • Do twisting, sitting, standing, walking, bending, reaching, climbing, squatting, kneeling, and reaching under beds during your shift • Lift, carry, push, and pull from 1 pound to over 100 pounds
Mental demands include being able to:	<ul style="list-style-type: none"> • Use effective time management • Concentrate and maintain acceptable level of accuracy in spite of frequent interruptions • Be courteous, tactful, and cooperative throughout the working day • Maintain confidentiality with regard to all phases of work • Read and write English and do basic math calculations • Accept assignments to other nursing units and perform patient care • Utilize effective verbal communication • Answer the telephone • Function in a stressful environment
Sensory demands include being able to:	<ul style="list-style-type: none"> • Do computer work for hours under artificial light, decipher handwritten and typewritten information in medical records • Differentiate colors • Understand spoken voices and understand various accents, both face-to-face and while using various communication technologies • Work in a noisy environment • Possess the capabilities to accurately assess patients using auditory, tactile, visual, and olfactory senses

Communication	<ul style="list-style-type: none"> • Effective communication in oral and written forms; • Process and communicate information on patient's status with accuracy and in a timely manner to members on the health care team, including faculty.
Behavioral/Emotional	<ul style="list-style-type: none"> • Student must have emotional stability to function effectively under stress; • Must be able to adapt to an environment that may change rapidly without warning and/or in unpredictable ways; • Student must know that his/her values, attitudes, beliefs, emotions, and experiences affect his/her perceptions and relationships with others. • Student must be able and willing to examine and change his/her own behavior when it interferes with productive individual or team relationships; • Student must possess skills and experience necessary for effective and harmonious relationships in diverse academic and working environments.

The above listing is composed of general examples. Specific jobs may have other demands.

Progression

In the following situations, students may not continue in the Nursing Program:

1. Failure of the same course twice
2. Failure or withdraw/ failure of two nursing courses
3. Withdrawal from the same nursing course twice
4. Less than a minimum cumulative college grade point average (GPA) of 2.0
5. Less than a grade of "C" in all nursing and core courses.
 - a. Nursing courses are sequential. If a student receives below a 'C' in a nursing course, that course must be successfully completed before the student can progress in the sequence. To successfully complete a laboratory or clinical course, a student must meet the passing criteria for all components of evaluation to pass that course. If criteria are not met, the student will not pass that course. All nursing course and clinical requirements must be met in order to earn a grade of C or better.
6. Inability to complete approved standardized testing or additional testing (such as math exams) as required by the Nursing Department.
7. Dismissal of the student from the Nursing Program for the following reasons. Please note that administrative withdrawal can be implemented when signed by the Academic Dean and Director of Nursing.
 - a. When the student's health, performance, and/or behavior compromise the safety of patients, students or college personnel. Performance in an unsafe manner while providing care to a client. In addition, the student will be immediately removed from the clinical area
 - b. Exhibiting conduct that is unprofessional, incompetent, unethical, or illegal in the clinical/practicum settings as outlined by the *NSNA Code of Ethics/Code of Academic and Clinical Conduct*.
 - c. Committing an act of academic dishonesty such as cheating on examinations, plagiarism, or improper documentation or falsification of clinical activities as outlined in the ANC Nursing Student Handbook.
 - d. Any lapse in health and liability insurance or CPR certification
 - e. If any student arrives at the clinical area chemically impaired by drugs or alcohol. In addition, the student will be immediately removed from the clinical area.
 - f. Failure to immediately report a client/care error to the clinical instructor.
 - g. Fraudulent or untruthful charting in a medical record.
 - h. Failure to protect client confidentiality.

A student who is not able to progress will no longer be considered to be in the Nursing Program and must reapply for readmission to the Nursing Program. The Nursing Department will request supporting documents for readmission. The student must demonstrate the ability to be successful, explain the reason or circumstance that prevented them from progressing and present a plan that clearly shows the steps they have taken to assure that their individual situation has

been remedied. An application for readmission is due by June 15 for readmission to the following academic year. A student may be readmitted one (1) time only.

Students at Risk

Students who are struggling academically and/or clinically will be monitored closely in the Nursing Program and required to complete a plan of action for performance improvement. The following circumstances include, but are not limited to, examples of when a plan of action for performance improvement will need to be implemented to advocate for student success in the Nursing Program:

- Exam and homework grades that are falling below 75%
- Attendance issues:
 - Missing more than one didactic class
 - Missing any one scheduled clinical day
 - Missing scheduled exams
- Tardiness – clinical, class and/or exams
- Lack of completion of assigned class work
- Low scores on standardized exams (Kaplan)
- Lack of compliance with criteria noted in any of the following: *Aaniiih Nakoda College Student Handbook, Aaniiih Nakoda Nursing Student Handbook, NSNA Student Code of Academic and Clinical Conduct, NSNA Code of Ethics*
- An “Unsatisfactory” for a clinical day as noted on daily clinical evaluation

A plan of action for performance improvement will require a meeting between the instructor and the student documenting specific concerns about the student’s current performance and a plan for improvement about immediate concerns. Recommendations will be made by the instructor and the student will have opportunity to document additional information regarding concerns and plan for improvement. Plans of action for performance improvement will be shared with the Nursing Program Director.

Readmission

1. Students who withdraw or fail to successfully complete any nursing course must apply for readmission into the program. This application should be in the form of a letter detailing:
 - a. Classes student needs to retake
 - b. What semester and year student did not successfully pass nursing classes
 - c. Plan of study for how the student plans to successfully complete required classes, including those that are needing to be retaken
 - d. When student wants to be readmitted (semester and year)
2. Any failed nursing course may be repeated one time only with faculty approval. A second failure in any nursing course means that the student must withdraw from the program.
3. The program director, in consultation with nursing faculty, has the right to approve or disapprove readmission letters; previous documented educational, behavioral, or civility concerns may be considered for readmission to the program.
4. If a student fails a course due to unsafe physical or emotional care of patients, the faculty may, on a case by case basis based on patient safety, decide not to allow the student to repeat the course.
5. Due to the complexity of the Nursing Program, safety and a commitment to graduating competent nurses, some coursework will likely need to be retaken and/or reviewed before or as the student returns to the curriculum. Students will work with the program director and faculty to create a plan of study. If this plan of study is not completed as agreed upon, the student will be dismissed from the program.
6. Students who are requesting readmission may be required to take exams to measure competency, including performance of care and skills for a simulated patient.
7. Being readmitted to the program does not automatically ensure successful completion; it is dependent upon meeting or exceeding the curricular and behavioral standards of the program.

8. Students who have been dismissed from the program for documented unsafe practice, unethical or illegal conduct will be excluded from the ASN program and will be ineligible for readmission.
9. The Nursing Program must be completed within 5 years.

Associates of Nursing Curriculum - Prerequisites

Aaniiih Nakoda College Prerequisite Courses that must be completed before admission into the Associates of Science *Grow Our Own* Nursing Program.

Semester I				
Course Number	Course Title	Didactic Credits	Lab Credits	Clinical Credits
BIOH 201/BIOH L201	Anatomy & Physiology I & Lab	3	1	
CHMY 121/CHMY L121	Introduction to General Chemistry & Lab	3	1	
M121	College Algebra	4		
AIS 155/150 -OR- AIS 100 -OR- SOCL 100	Aaniiih OR Nakoda Language I, -OR- Intro to American Indian Studies, -OR- Intro to Sociology	3		
60 hrs lab	Semester Total (15 credits overall)	13	2	
Semester II				
Course Number	Course Title			
BIOH 211/BIOH L211	Anatomy and Physiology II/Lab	3	1	
WRIT 101	College Writing I	3		
NUTR 221	Basic Human Nutrition	3		
PSYX 100	Introduction to Psychology	3		
BIOM 250/BIOM L250	Microbiology for Health Sciences/Lab	3	1	
60 hrs lab	Semester Total (17 credits overall)	15	2	

****Each of the following are requirements for graduation from Aaniiih Nakoda's *Grow Our Own* Nursing Program.** They may be taken as prerequisites or co-requisites, depending on when the classes are offered.

- AIS 155 Aaniiih OR AIS 150 Nakoda Language I
- AIS 100 Intro to American Indian Studies
- SOCL 100 Intro to Sociology

Aaniiih Nakoda College Nursing Program Curriculum/Program of Study

1st year nursing

Fall Semester III				
Course Number	Course Title	Didactic Credits	Lab Credits	Clinical Credits
NRSG 135	Pharmacology	3		
NRSG 130	Fundamentals of Nursing	4	3	
NRSG 138	Gerontology	1		1
45 clinical hrs; 90 lab hours	Semester Total (12 credits overall)	8	3	1
Spring Semester IV				
Course Number	Course Title			
NRSG 140	Core Concepts of Adult Nursing	3		3
NRSG 256	Pathophysiology	3		
**AIS 155/150 -OR- AIS 100 -OR- SOCL 100	Aaniiih OR Nakoda Language I, -OR- Intro to American Indian Studies, -OR- Intro to Sociology	3		
135 clinical hrs	Semester Total (12 credits overall)	9		3

- Before students start the 2nd year, I.V. Therapy skill will be a hands-on part of nursing orientation.

2nd Year nursing

Fall Semester V				
Course Number	Course Title	Didactic Credits	Lab Credits	Clinical Credits
NRSG 258	Mental Health Nursing	3		1
NRSG 262	Complex Care Needs – Adult Client	3		2
NRSG 142	Core Concepts of Maternal/Child	2		1
180 clinical hrs	Semester Total (12 credits overall)	8		4
Spring Semester VI				
NRSG 266	Managing Client Care	2		2
NRSG 252	Complex Care Needs – Maternal/Child Client	2		1
NRSG 265	Advanced Clinical Skills		1	
AIS 155/150 -OR- AIS 100 -OR- SOCL 100	Aaniiih OR Nakoda Language I, -OR- Intro to American Indian Studies, -OR- Intro to Sociology	3		
NRSG 298	Preparing for Professional Nursing Practice (NCLEX	1		
135 clinical hrs; 30 lab hrs.	Semester Total (12 credits overall)	8	1	3
495 clinical hrs total 120 lab hrs total	Total ASN Program Credits (38 credits pre-/co-requisites and 42 nursing)	61	8	11

1 clinical credit = 45 hours clinical/simulation time

1 lab credit = 30 hours lab time

1 lecture credit = 15 hours classroom time

Once enrolled in nursing courses, a minimum of a grade of “C” in all courses is required to continue in the program. In the clinical settings, students must achieve a grade of 75% in all rotations of each clinical experience **in order to continue in the program.**

Grievance Process and Chain of Command

Per the *Aaniiih Nakoda Student Handbook*, students have access to recourse through a grievance process. To file a grievance, students must go to Student Services in Nakoda Hall. The grievance process is described in the current *Aaniiih Nakoda Catalog*.

Students who have concerns with admission process to the Aaniiih Nakoda *Grow Our Own* Nursing Program will be required to follow-up with the Registrar who will follow up with the Nursing Admissions Committee.

Students who have concerns with homework, clinical evaluations, grading, academic and clinical issues will need to follow the chain of command (in the following order):

1. Class lead instructor
2. Nursing Program Director: Brigit Hemmer
3. Dean of Students: Kim Barrows
4. President of Aaniiih Nakoda College: Dr. Sean Chandler

If a student is having an immediate concern within a clinical experience, the student will need to notify the clinical resource registered nurse (CRRN) that he/she is working with that day and the CRRN will discuss issues noted with the lead instructor.

Advisors

Each student will be assigned a nursing faculty advisor. Students are encouraged to:

- Make appointments with their advisor throughout the semester for consistent academic advice. It is recommended that students meet with advisors monthly to evaluate progress and address questions and concerns.
- Visit with the course instructor immediately if academic difficulties arise – don't wait until the end of the semester.
- Visit a professional who is available for both academic and personal issues that may arise (see Retention Counselor below).
- Consult an elder as appropriate about following appropriate protocols.

Retention Counselor

Instructors can refer the student to the Retention Counselor in Nakoda Hall or Student Success Center Coordinator if they feel the student is experiencing difficulty with class, lack of academic progress and/or attendance. The Retention Counselor will contact the student by telephone, letter or in person.

Some examples of concerns that students are encouraged to discuss with advisors and/or the retention counselor include:

- Childcare issues and considerations, particularly if a student is a single parent or has a limited support system. There is Head Start and Early Head Start near the college and nursing department.
- Financial concerns – whether personal or school-related. Resources could be identified for the student to access if needed.

Academic Integrity

Students will be required to adhere to the Aaniiih Nakoda College Academic and Student Integrity guidelines set forth in the *Aaniiih Nakoda College Student Handbook*. Should violation of that code occur, a complaint will be filed with the Dean of Student Affairs and disciplinary action will occur as noted in the *Aaniiih Nakoda College Student Handbook*. A copy of the *Aaniiih Nakoda College Student Handbook* can be found at:

http://www.ancollege.edu/?page=online_resources

Use of Classrooms and Laboratory

When not in use for class, these areas may be available for practice and study. Permission from an instructor is required for lab use outside of designated class/lab time.

- Each student is responsible for any material or instruments used and for cleaning and putting away those items. Each student is responsible for their desk area; additional clean up duties will be assigned throughout the program.
- No equipment or instruments may be removed from the lab area.
- Handle equipment carefully. Be sure you know how to use the equipment which includes clinical setting. If in doubt, check with the instructor.
- When in the simulation lab, a technician must be present at all times.
- Simulation lab door must be closed at all times.

Grading and Testing

College students are responsible for their own study procedures. This material in the Nursing Program is quite extensive and detailed. Skill building labs, clinical tutoring, and additional help are available by contacting the course instructor. Course testing and policies are noted on each individual course syllabus. Early attention to learning needs both in and outside the classroom, and use of available resources will serve students well. Tests may be online or paper tests.

A 2.0 cumulative grade point average is required to graduate from the College. Any course grade below a “C” in the ASN program must be repeated before proceeding through the program. Classes in the ASN program can only be taken twice, and this will be dependent upon the application process and space availability.

Grading System:

A=92-100%

B=84-91%

C=75-83%

D=68-74%

F=0-67%

Should a course have a clinical/lab component, the student needs to be aware that a passing grade in each of the classroom and clinical/lab components is required in order to earn a passing grade for the class.

Testing Guidelines for Testing off-campus with a test proctor (with Respondus)

- Each course will have instructions for setting up Respondus for your computer that you need to look over and read and then take a practice quiz to set up Respondus.
- Academic Honor and Student Integrity (Aaniiih Nakoda College Catalog):
ANC is dedicated to the excellence of each individual. Essential to the process of education, academic honesty and integrity is required of all ANC students. Cheating on examinations or plagiarizing submitted work are serious offenses. Please refer to the Student Handbook for the complete Academic Honor and Student Integrity Policy.
Any student who violates academic integrity may be subject to the following:
 - *First Offense - fail the assignment;*
 - *Second Offense - fail the course;*
 - *Third Offense - expulsion.*

If at any point there is concern that students are not following the testing procedures with honor and integrity, testing will be completed in person and this could be a decision that would affect the entire class.

Standardized Testing

ATI will be the standardized testing program utilized in this program. Classes that utilize ATI will include information within the syllabus about which focused review tests, integrated tests, and assignments from ATI will be required as part of each class.

Late Assignments

10% of total points deducted from the assignment for each day the assignment is late. If the assignment is five (5) days late, it earns zero points. The assignment still needs to be completed in order for a final grade to be submitted for a student's class.

Missed Exams

Exams are not to be missed unless serious or emergent circumstances arise. If a student has to miss an exam, it is the student's responsibility to notify the instructor as soon as possible *prior to the exam* taking place. It is the instructor's discretion about how a make-up exam will occur and when it will occur. Failure to contact the instructor in advance or as soon as possible may result in zero points being earned for that exam.

Cell Phone Policy

It is understood that cell phones are an essential tool in our lives to have access to family and essential contacts. However, they can be a distraction to the learning environment. Therefore the following policy is in place and will be enforced if noted that students are not participating, or utilizing their cellphones inappropriately.

1. All cell phone should be silenced or turned off (not vibrate) during class to avoid disturbance to class members and instructors.
2. Cell phones are not to be seen or used in patient care areas unless specifically used to look up patient care information (such as a drug reference). Personal phone calls and text messaging is not allowed during clinicals as it interferes with attention to client care and it's an infection control concern. Should you need to be reached in an emergency, provide contact numbers of the clinical site as well as your clinical instructor. If a special arrangement is needed, the student should contact the instructor.
3. Cell phones cannot be used or in the area during testing.
4. Students who violate the cell phone policy will have a performance improvement plan implemented. If repeated disturbances/usage of cell phone is occurring, the student will be dismissed from class, lab, or clinical and will receive an unsatisfactory for that day.

Required Equipment for Clinical and Classroom

- Stethoscope
- Bandage scissors (forceps or clamp)
- Penlight
- Black ink pens
- Name tag
- Small pocket notebook
- Watch with second hand or digital
- Calculator (basic is adequate)
- Pocket binders
- Plastic folders
- Jump/flash drive

Professional Appearance for Clinical Sites and Lab

Nursing students of Aaniiih Nakoda College represent the College and the profession of nursing. Students are expected to be aware that first impressions are important and students must conduct and present themselves in a professional manner at all times. Clinical instructors may exercise the option of dismissing students from clinical sites for non-adherence to the following professional presentation policies:

1. Dress

- Clean, white, long-sleeved laboratory jackets with name tags must be worn at all times over non-uniform clothes when on clinical sites doing patient work-ups prior to scheduled clinical days.
- Aaniiih Nakoda College nursing students will be required to wear the designated ANC nursing uniform as approved by the College President
- Jeans are not to be worn with lab jackets or any part of the uniform
- Uniforms are to be worn in the lab
- For clinical sites, unless otherwise specified, students must wear designated uniform for the program and the uniform must remain professional – clean, ironed, neat and not threadbare or low-cut.
- Skirt lengths should be approved if worn as part of the uniform
- Uniform pants should fit properly – not too tight or too large that they will slide below the waist. Pants may not be worn below the waist and must be neatly hemmed and not touch the floor.
- Undergarments (underwear for all and bra for women) must be worn at all times and must be clean, white or beige in color, and free of prints and adornments and not visible when uniform is being worn.
- Clean, neutral color shoes (grey, black, white) must be worn with neutral color socks, preferably covering the ankle. Shoes must be non-skid and closed-toed.
- Program decal/patch must be worn on the right sleeve, 3 inches below shoulder level.
- If you find the clinical area too cold, you may wear a long-sleeve garment under your uniform top in one of the following colors: white, black.
- Clinical instructors have the final say on appropriateness of all uniforms. You may be asked to purchase a different uniform or sent home if professional dress code is not adhered to.
- For tours and in-services outside of the college, or when collecting report on clients ahead of time, students must wear clean dress clothing with name tags. No jeans, shorts, low neck/waist lines allowed. Clothes are to be clean and pressed.

2. Hair, Nails, Make-up

- Hair must be clean and styled in a way that no hair hangs over the face. Hair beyond shoulder length must be pulled back and up off the shoulders when wearing uniforms or laboratory jackets.
- Due to CDC recommendations for hospitals, NO artificial nails or extenders may be worn. Nail tips must be less than one-quarter inch long, clean and without dark polish.
- Make-up to enhance your natural appearance may be worn at any time. Scented perfumes, lotions, or aftershave are not to be used on clinical sites.

3. Jewelry, Tattoos, Personal Hygiene

- Students may wear wedding rings, one pair of small plain posts for pierced ears (no hoops!) and a watch while in clinical or lab. Other adornments such as NOSE, CHEEK, TONGUE, LIP, BROW or other oral/facial jewelry, of any kind, are not permitted.
- Visible tattoos should be limited and in good taste, non-offensive, otherwise covered during clinical time.
- Students will maintain personal hygiene. This includes bathing regularly, using deodorant, and not having offensive body odor or cigarette smell.

Professional Conduct and Special Considerations (both classroom time and clinicals)

1. Professional conduct is expected at all times (see definitions below).
2. Healthcare facilities are now smoke-free. Students are expected to not smoke during clinical hours, including prior to arrival, during breaks and during lunch. If this is a problem, students should see their physician for smoking cessation recommendation.
3. Smudging could be done at Aaniiih Nakoda College before attending a clinical rotation.
4. **Cellphones will not be allowed during any clinical rotation.** If you need to be contacted, make arrangements with your clinical instructor. If students are using a cellphone during clinical, that student will earn an unsatisfactory for that clinical day.
5. No drinks or food of any kind are allowed in any classroom or laboratory or on clinical units in clinical facilities. Drinks may be allowed in classrooms if indicated by the instructor.
6. Gum chewing is not allowed during clinical time at facilities or in the laboratory.
7. Profanity will not be tolerated.
8. Demonstrate professional attitudes and civility in the classroom and clinical when dealing with instructors, other students, guest speakers, ancillary staff, and other professionals at Aaniiih Nakoda College.
9. Pregnant students may want to take special precautions due to the physical requirements and possible exposure to harmful diseases or substances in clinical. A written physician's recommendation related to physical lifting restrictions is required before the student begins clinical rotations. If the student has a complicated pregnancy with additional limitations, documentation from the attending physician will be required. Students will be expected to meet all program objectives and expectations in order to progress; however, accommodations will be made if reasonable and possible. Following delivery, returning to class and clinical assignments will require physician clearance as well.
10. Aaniiih Nakoda College *Grow Our Own* Nursing Program supports those mothers who breastfeed their newborns while in the program. If a student needs a space to pump, a room will be scheduled and secured for this purpose to provide privacy for the student. Instructors will allow a reasonable amount of time for this accommodation. Students are encouraged to do their best to schedule pumping in order to best accommodate completion of class and clinical time. Students who need to pump need to make arrangements with each class and clinical instructor for this accommodation.
11. Personal appointments for self and family should be scheduled for days off or after class and clinical time.
12. Students are required to follow the American Nurses Association tips for using social media found in [appendix C](#) of this handbook. These tips are social media policies for students to follow as part of Aaniiih Nakoda's *Grow Our Own* Nursing Program. Failure to comply with social media recommended practices will result in disciplinary action.

Students are expected to adhere to the Aaniiih Nakoda College Student Conduct Code found in the *Aaniiih Nakoda College Student Handbook*. Students are expected to adhere to a professional code of conduct; the Montana Board of Nursing and National Student Nurses Association specifically addresses conduct of nurses:

"Professional conduct for nurses is behavior including acts, knowledge, and practices, by practicing nurses as conduct which is reasonably necessary for the protection of public interests." (State of Montana Statutes, Rules, and Declaratory Rulings, 24.159.2301) *See Statutes, Rules, and Declaratory Rulings for entire document.

National Student Nurses Association *Code of Academic and Clinical Conduct* in appendix A and B of this handbook and at the following website: <https://www.dropbox.com/s/a229ong58d5jx4p/Code%20of%20Ethics.pdf?dl=0>

Student Scope of Practice for the Nursing Program

Students are expected to adhere to the standards of behavior required of healthcare professionals and to the standards expected at each clinical site. *If a student demonstrates unsafe and/or unprofessional behavior and fails to achieve the standard of care, violates professional standards or state practice acts of the Nursing Program, or calls into question the professional accountability of the student, corrective action will follow. Depending upon the degree of actual or potential harm a patient may suffer, a one-time deviation from safe practice may be sufficient to judge a student unsafe resulting in dismissal from the program.*

Students will be working with clinical instructors, nurses and other healthcare providers and personnel throughout their clinical experiences. While students will be provided a variety of opportunities to participate in patient care, students need to know that they must:

- Practice within their student scope of practice which also falls under the nursing scope of practice per the Montana Statutes, Rules and Declaratory Rules:
<http://www.mtrules.org/gateway/RuleNo.asp?RN=24%2E159%2E1204>
- If the student is not sure whether an action is within the nursing scope of practice in Montana, and within the skills, abilities, and knowledge as a nursing student, then the action should not be performed by the student
- Be directly supervised by a clinical instructor or registered nurse for medication administration
- **Avoid giving or adjusting the following medications:** blood (do not even co-sign), chemotherapy, coagulation factors, heparin, experimental drugs, oxytocin, epidural medications, nitroglycerin, PCA pumps, IV potassium chloride boluses, IV push narcotics, conscious sedation. When giving narcotics via any route, students need to make sure to follow the policy for students in the facility and Aaniiih Nakoda College guidelines.
- **Avoid taking doctors' orders** verbally, in person or by telephone and avoid acknowledging orders. Get a registered nurse to do this if orders are needing to be given.
- **Avoid obtaining consent** from patients and families for procedures
- **Avoid completing patient admission and discharge procedures** without direct oversight by a clinical instructor and/or the patient's assigned nurse for discharge.
- **Know the standards of care** of the facility students are in and for each unit students are assigned

Medication Administration

Students are expected to function at the level of education and experience according to specified Nursing Program's course competencies. This will be provided by the Nursing Program prior to a student assignment. General guidelines that all students must follow are:

1. All students must review the agency's medication policies prior to administering medication on the unit.
2. All students must follow the principles of safe medication administration using the 6 Rights of Medication Administration:
 - a. Right Medication
 - b. Right Dose
 - c. Right Client
 - d. Right Route
 - e. Right Time
 - f. Right documentation

The verification of 6 rights is done 3 times:

- a. Medication administration record (MAR) is reviewed
- b. A second time as medication is prepared
- c. Third time just prior to administration to patient, pending the facility procedure/policy

In addition, the students are to:

- a. Use 2 patient identifiers at bedside
 - b. Check expiration date
 - c. Document after medication has been given
3. All students must follow the agency's policies and procedures for medication administration.
 4. All students must demonstrate competency in calculating medications prior to administering medication.
 5. Students must report all medication errors to the CRRN immediately.
 6. The CRRN reserves the right to limit a student's medication administration experience.

Responsibilities of Students Attending Clinical

1. Refer to general policies related to clinical experience included with syllabus and clinical schedules and guidelines provided by instructors.
2. You are expected to arrive at least 15 minutes prior to your scheduled clinical times in order to review charts, prepare for report, meet nurses you will be working with, etc.
3. Students should plan to listen to reports for all patients on unit and have all patients' names with room numbers on report sheet and record during report unless instructed otherwise. Record specific information on your patients.
4. Make sure you have necessary equipment and materials to care for your clients.
5. If a patient refuses a student, you must pick another patient in collaboration with the clinical resource RN (CRRN. If you should be on a unit to gather information (with permission from instructors) prior to assigned clinical time, please wear lab coats, name tags, nice clothing (no jeans). Do not go on the floors one hour before or one hour after report.
6. Preparation for clinical must be completed satisfactorily when arriving in the clinical area. Required assignments must be current and updated prior to each clinical day.
7. Students must be prepared to utilize and apply information and skills learned from previous classes and clinicals to current classes and clinicals. Students may be required to review diagnoses and procedures prior to attending clinicals in order to be informed about client populations being cared for.
8. Complete all required clinical hours as assigned. Make-up days are provided in accordance with availability of instructor and clinical facility. If a day is shortened by the nurse the student is working with, the student must contact the clinical instructor or CRRN prior to leaving a clinical site.
9. Students must notify his/her clinical instructor prior to doing any procedures. Should questions or problems arise, students must call the instructor. Remember clinical instructors are there to help you.
10. Parking is generally restricted in healthcare facilities. Students are expected to park in designated employee areas, unless otherwise informed.
11. You must have a current flu immunization, Hepatitis B immunization (or starting the sequence), a current CPR card, **AND** PPD done within the last year, BEFORE coming to the clinic unit. Upon completion of these requirements, students will be provided with a signed clinical preparation card to document such. Students are to keep this card with them at all times during clinical experiences, and if asked, can show this card to clinical facility staff.
12. Each facility will have its own emergency code system. Further explanation will be given during clinical orientation. You must know where the code cart is located.
13. Students are not allowed to use mechanical lifts without the assistance of facility staff.
14. Students will be required to participate in facility-specific confidentiality training, to include signing waivers and agreements to follow their policies as per training provided.
15. **STUDENTS ARE TOTALLY RESPONSIBLE AND ACCOUNTABLE FOR THEIR OWN ACTIONS AND NURSING CARE. REMEMBER A PATIENT'S LIFE IS IN YOUR HANDS.**
16. Failure to comply with any requirements for *professional conduct, professional appearance, scope of practice* and *responsibilities* will result in failure of the clinical course.

Clinical Grading

Should a course have a clinical/lab component, the student needs to be aware that a passing grade in each of the classroom and clinical/lab components is required in order to earn a passing grade for the class.

The instructor will mark an S/U for each of the 16 competencies listed **for each clinical day**

1. 75% of **each column** must be *satisfactory* and competencies must be met in order to earn a *satisfactory* for that clinical day. Three (3) Unsatisfactories in any given row (dates of clinical) equals an unsatisfactory and not passing grade for the entire clinical portion of this class.

Students will be required to bring a clinical evaluation tool (included with each syllabus that has a clinical component) to each clinical day and the instructor will mark an S/U for each competencies listed on the clinical evaluation tool. This is a formative evaluation. 75% of **each category** must be *satisfactory* and competencies defined by rubric must be met in order to earn a *satisfactory* for that clinical day. Three (3) Unsatisfactories in any given row equals an unsatisfactory and not passing grade for the entire clinical portion of this class.

Final clinical grades will be determined utilizing the *Clinical Evaluation Tool for Final Clinical Grade*. The tool is included at the end of the Nursing Student Handbook. This is a summative evaluation.

Travel

On occasion, students will have opportunities to travel for clinical and potentially didactic courses. The following guidelines are provided for such instances:

- Students need to prepare ahead of time, know where they are going, how to get there, and plans for clinical (times, assignments, instructors/preceptors).
- In cases where gas, lodging and/or per diem for food allowances are provided, students are to ensure that they:
 1. Complete and sign required documents prior to travel,
 2. save receipts for gas, lodging and food and turn into nursing program upon return,
 3. complete a trip report and sign required documents within 1 week of return,
 4. complete assignments as required.
 5. Be aware that when students do not complete requirements for travel, funds provided will have to be paid back in full.
- Students should refrain from bringing family and friends to clinical experiences. Students need to be prepared for clinicals by arranging for enough time and rest prior to clinicals, arranging childcare while they are away, and preparing for clinical assignments so that they can participate in clinicals safely.

State Licensure

In order to practice as a Registered Nurse you must pass the National Council of a State Board of Nursing Licensure Examination (NCLEX-RN). Applications for this examination will be provided and explained prior to graduation. Applications are available by contacting the Montana State Board of Nursing at www.nurse.mt.gov or at the following address: Montana State Board of Nursing, 301 South Park, P.O. Box 200513, Helena, MT 59620-0513, Telephone: (406) 841-2300

Licensure in Other States

Montana is one of 34 states who belong, via state legislative ruling, to the Nurse Licensure Compact (NLC). "The NLC increases access to care while maintaining public protection at the state level. Under the NLC, nurses can practice in other NLC states, without having to obtain additional licenses." Information about the NLC and the participating states can be found at: <https://www.ncsbn.org/nurse-licensure-compact.htm>. When a student nurse graduates from Aaniiih Nakoda College and passes the National Council Licensure Exam (RN-NCLEX) in Montana, the Registered Nurse can legally work in Montana as a Registered Nurse as well as 33 other states, so long as they applied and met criteria for a multi-state license. The licensee must continually hold an unencumbered license in order to meet the requirements of the NLC.

Aaniiih Nakoda College has not yet made a determination regarding whether its curriculum meets requirements for licensure by examination in states outside of Montana. If a nursing student will be choosing to take the NCLEX-RN exam in another state that is not part of the NLC, that student will need to verify with that state's Board of Nursing whether the nursing curriculum at Aaniiih Nakoda College meets the educational requirements to apply for a Registered Nurse (RN) license in that state.

Criminal History and Nursing Licensure

From: MONTANA STATE BOARD OF NURSING

To Whom It May Concern:

Individuals who are considering entering the nursing profession may have a criminal history and often ask about potential barriers to licensure following successful completion of an approved program of nursing. While it would be nice to know this prior to making a decision to enter the program, obtaining that information is not possible under current Montana law. The Board makes decisions about licensure based on a number of factors to which questions are directed in the license application. An application cannot be accepted by the board office until after the completion of a program. The application indicating a criminal history is considered non-routine and must be reviewed and approved by the Board.

However, each application is reviewed on its own merits. Some states have permanent bars to licensure, but Montana is not one of them. Montana law provides for the opportunity to be reviewed for qualifications pertaining to licensure, even with a criminal history. Documented rehabilitation is essential to the Board of Nursing when making licensure decisions. Very few applications are denied. Sometimes the board requires a one-year probationary period in which nursing practice is supervised and evaluated prior to receiving a clear, unencumbered nursing license. Others may be required to enter the Nurses' Assistance Program if drugs and/or alcohol are of concern. Most non-routine applications are approved for an unencumbered license.

Some Nursing Programs in the U.S. are now performing criminal background checks prior to acceptance into the program. They are doing this because many healthcare facilities utilized by Nursing Programs require background checks as a condition to being allowed access to the facility for clinical experience. That is a decision each program must make.

The license application requires disclosure and the provision of related court documents for board review prior to making a licensure decision. Entry into the nursing education program is the prospective student's decision based on the knowledge that he/she may or may not be granted a nursing license. All of the above factors should be taken into consideration prior to making a decision about a nursing career. Please contact the board office at (406) 841-2300 or nurse@mt.gov if you would like further information about the applicable Montana laws and regulations. You may also access the laws and rules on the board's website: www.nurse.mt.gov <http://www.discoveringmontana.com/dli/nur>. Thank you!

Appendix A

[Code of Ethics.pdf \(dropbox.com\)](#) of which guide student academic and clinical conduct expectations throughout the program

CORE VALUES

LEADERSHIP and AUTONOMY

- Definition: A process of social influence which promotes innovative problem solving to move an autonomous, independent organization forward by providing a clear vision, maximizing the efforts of others, by respecting each individual and in collaboration with other appropriate resources.
- Interpretive Statement: NSNA promotes each member to build their democratic leadership skills with conflict resolution through shared governance and community, with respect for others. Student nurses in leadership positions of NSNA make their own decisions based on fiduciary research, and historical and current evidence along with membership input when appropriate. NSNA chapter leaders establish and acknowledge their autonomy and independence in bylaws, policies and procedures.

QUALITY EDUCATION

- Definition: An act or process of imparting or acquiring general knowledge, developing the powers of reasoning and judgment, and generally of preparing oneself or others intellectually for a profession
- Interpretive Statement: NSNA informs, prepares, and inspires members to develop continuous, life-long learning and ethics of the profession. Nursing students are encouraged to take full advantage of their education and develop their professional leadership skills as members of NSNA.

ADVOCACY

- Definition: An activity or process to work on behalf of self and/or others to raise awareness of a concern and to promote solutions to the issue
- Interpretive statement: The nursing profession is based on advocating for patients and families in order to help facilitate the healing process; NSNA serves as an advocate for nursing students by representing them as one united voice.

PROFESSIONALISM

- Definition: Characteristics that describe an individual striving to maintain the highest standards for one's chosen path – honesty, integrity, responsibility and conducting oneself with responsibility, integrity, accountability, and excellence.
- Interpretive Statement: As NSNA members, it is important to create a culture of professionalism in our organization and to uphold the values of professionalism in order to conduct ourselves and our organization in the most respectful, honest way. This value translates into respecting our patients and maintaining the ethics of our profession.

CARE

- Definition: A feeling and exhibiting concern and empathy for others while showing or having compassion for others.
- Interpretive Statement: Caring is a fundamental value of registered nurses and the nursing profession. The NSNA cultivates a climate of caring in its publications, programs, relationships, and leadership development. NSNA members care for their patients, peers and the future of the profession.

DIVERSITY

- Definition: Differences that can be along the dimensions of race, ethnicity, gender, sexual orientation, socioeconomic status, age, physical abilities, religious beliefs, political beliefs, nationality or other ideologies.
- Interpretive Statement: Each individual is unique, and we recognize our individual differences through acceptance and respect. We explore these differences in a safe, positive and nurturing environment. It is about understanding each other and moving beyond simple tolerance to embracing and celebrating the rich dimensions of diversity contained within each individual.

National Student Nurses' Association, Inc.® Code of Ethics: Part II
Code of Academic and Clinical Conduct and Interpretive Statements

As students are involved in clinical and academic environments we believe that ethical principles are a necessary guide to professional development. The following *Interpretive Statements* are offered as a framework to help guide nursing students in ethical analysis of responsibilities, professional conduct, and decision making in academic and clinical settings as they adhere to the *NSNA Code of Ethics for Nursing Students*.

*** Indicates sections taken directly from the NSNA Code of Ethics: Part II: Code of Academic and Clinical Conduct*

Part II: Code of Academic and Clinical Conduct

**** Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide safe, quality nursing care. The clinical setting presents unique challenges and responsibilities for the nursing student while caring for human beings in a variety of health care environments.**

**** The *Code of Academic and Clinical Conduct* is based on an understanding that to practice nursing as a student is an agreement to uphold the trust society has placed in us. The statements of the code provide guidance for nursing students in their personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment, but can assist in the holistic development of the person.**

**** As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments we:**

**** 1. Advocate for the rights of all clients.**

1.1 Advocacy: A responsibility of nursing students is to advocate for the rights of all clients. This requires the nursing student to understand the client's rights and responsibilities, the scope and applicable standards of nursing practice to meet the client needs, and the relevant federal (e.g. Health Insurance Portability and Accountability Act (HIPAA), Patient Self-Determination Act, etc), state (e.g. Nurse Practice Act, etc.), and local laws in accordance with the health care institution's policies and procedures. This knowledge enables the nursing student to function as an advocate for the rights of all clients in collaboration with nursing faculty and members of the health care team.

1.2 Rights of clients: Nursing students provide care for persons who have rights both as human beings and as clients. As such, nursing students must be cognizant of public, professional and institutional policies concerning patients' rights and access to resources across the care continuum. For example, nursing students help ensure that these fundamental rights of clients to receive culturally and linguistically appropriate services are protected and maintained.

**** 2. Maintain client confidentiality.**

2.1 Confidentiality: Access to and sharing of information that identifies a specific client, their condition, and other information must be guarded with the best interests of the client in mind.

Access to and sharing of such information must be limited to only those personnel with the medical need to know and family members who are authorized by institutional policy and patient consent (according to HIPAA guidelines).

2.2 Academic Setting: In discussing client cases in the academic setting, care must be taken to avoid breaching confidentiality and violating HIPAA regulations; this includes appropriate selection of the time and place of discussion, people attending the discussion, and omitting data that is not necessary to the purpose of the discussion or that discloses the client's personal identity.

2.3 Special Circumstances: In order to protect the safety of the patient, other parties, and in cases of mandatory disclosure for public health reasons there may be times where the nursing student is obligated to report confidential information. The nursing student must immediately share these concerns in a confidential setting with the nursing faculty or clinical preceptor and with the registered nurse in charge of the patient's care who will provide appropriate guidance.

**** 3. Take appropriate action to ensure the safety of clients, self, and others.**

3.1 Appropriate action to ensure safety of clients: The nursing student must be able to identify hazardous conditions which may include faulty equipment, an unsafe environment, incompetent practices of other healthcare team members and colleagues, suspicious persons and activities, and self-limitations. If an unsafe condition or incident becomes apparent, the nursing student should use good judgment and follow institutional policies and procedures for emergencies, reporting hazardous conditions and

incidents. The nursing student should be aware of personnel responsible for directing patient and personnel safety and immediately share these concerns with the registered nurse in charge of the patient's care and with the nursing faculty or clinical preceptor.

3.2 Safety of self: Nursing students cannot be expected to work in unsafe conditions or in situations where they are incompetent to practice. Academic and clinical environments should allow for a nursing student to voice concerns about safety to self without retribution. Nursing students have the responsibility to come prepared to meet the objectives assigned in caring for clients in clinical settings and to ask questions.

3.3 Safety of others: Nursing students should not condone or participate in lateral violence or incivility towards other professionals, students, or faculty. Further, students observing such behavior should take appropriate steps to remove her/himself from the situation and report to the nursing faculty or clinical preceptor.

**** 4. Provide care for the client in a timely, compassionate, and professional manner.**

4.1 Timely care: Client care is time sensitive. Therefore, nursing students should be aware that adhering to the schedule set forth by the health care team is important and discharge planning should begin upon the client's admission to the clinical environment. By prioritizing tasks, patient education, treatments and procedures the nursing student will ensure that they are utilizing time in the most effective and efficient way.

4.2 Compassionate care: Providing care with compassion creates a better nursing student-client relationship. It reflects the nursing student's desire to respect the client as an individual, to help the client maintain their safety and dignity, to provide support and comfort, to assist the client to achieve optimal independence and meet their health goals.

4.3 Professional care: Professional communication, appearance, and behavior by the nursing student demonstrates respect for the client and for self. The nursing student has the responsibility to be prepared to meet the objectives assigned in caring for clients and to demonstrate safe, quality nursing care. These professional actions by the nursing student enhance the image of nursing and contribute to building a trusting relationship between the nursing student and the client, and between the nursing student and the health care team. An essential component of professional care by the nursing student and the health care team in the 21st century is to assure that the client receives culturally and linguistically appropriate health education and services (NSNA Resolution #15, 2009).

**** 5. Communicate client care in a truthful, timely and accurate manner.**

5.1 Truthful communication: Veracity is key to developing trusting relationships in academic and clinical environments. Truthful and thorough communication between nursing students and nursing faculty or preceptors, and between nursing students and healthcare professionals is a key component to providing safe, quality care within an optimal clinical learning environment.

5.2 Timely communication: Communicating client care information at the appropriate time is a duty of nursing students. Timely communication allows for assessments, interventions, and that changes to the plan of care be initiated and completed in a timely manner.

5.3 Accurate communication: Accurate communication is a responsibility of the nursing student. The nursing student, by providing an accurate, concise and timely report on the client's assessment and status changes helps the nurse in charge of the client's care and the primary care provider to make informed client care decisions and follow-up with further assessment as required.

**** 6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.**

6.1 Promote the highest level of moral and ethical principles: Nursing students should be familiar with the *NSNA Student Bill of Rights and Responsibilities* and the *NSNA Code of Ethics for Nursing Students (Part I: Code of Professional Conduct and Part II: Code of Academic and Clinical Conduct)* and supporting documents. Being well informed and encouraging others to read and adhere to the *NSNA Code of Ethics for Nursing Students* and the *ANA Code of Ethics for Nurses (ANA House of Delegates, 2001)* actively promotes the values and ethics of the nursing profession. Acting under ethical principles ensures that the care being provided does not jeopardize the client's basic rights or endanger professional relationships.

6.2 Accepting responsibility for our actions: Nursing students are accountable to the educational institution, the health care institution that provides the clinical learning environment, and above all to clients and society as a whole. The nursing student must function within the state's Nurse Practice Act, the *Scope and Standards of Nursing Practice* (American Nurses' Association, 2004) and the Policies and Procedures of the health care institution. The nursing student will care for clients only under the supervision of

the nursing faculty or preceptor. Supervision must be completed in accordance with the clinical education agreement between the nursing program and the health institution providing a clinical learning environment to meet the student's clinical learning objectives.

**** 7. Promote excellence in nursing by encouraging lifelong learning and professional development.**

7.1 Excellence in Nursing: Nursing is a profession that demands a nursing student's commitment to evidence-based practice and to the health, well-being, and safety of clients. The client willingly gives the nursing student their trust in her/his ability to provide nursing care in accordance with their clinical education objectives.

7.2 Encouraging lifelong learning: The health care environment is ever changing. Nursing students, after attaining licensure as a registered nurse, have a responsibility to continue to educate themselves formally and informally throughout their careers to remain clinically competent to meet the health care needs of an increasingly diverse client population across an ever changing health care environment.

7.3 Professional development: Professionalism is a key factor for gaining the trust of others. Participation in professional organizations is imperative to one's professional development. It begins by nursing students becoming active members and participants in NSNA; participants in nursing research utilization to advance evidence-based practice (NSNA Resolution #3, 2009); and in advocating for interdisciplinary education opportunities (NSNA Resolution # 13, 2009). Professional development continues for registered nurses as evidenced by membership in state nurses association (ANA) and specialty nursing organizations, and through continuing formal education.

**** 8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.**

8.1 Treat others with respect: Nursing is based on client care that is supported by a foundation of respect and trust. Respect should be a fundamental component of intra-professional and interprofessional collaboration in which the nursing student participates (*Nursing's Social Policy Statement*, ANA, 2003).

8.2 Promote an environment that respects human rights: As members of NSNA, nursing students pledge to refuse to engage in, or condone discrimination on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, lifestyle, disability, or economic status (*NSNA Code of Ethics: Part One, 1999; NSNA Bylaws, Article III Purpose and Functions, Section 2, item f, 2007*). By providing an atmosphere that allows clients to voice their needs, and to collaborate with the health care team, clients are empowered to meet their health care goals.

8.3 Values: All clients have a unique set of beliefs that form their values. Nursing students are obligated to holistically provide care to clients in ways that respect the client's belief system and empowers them to attain their health goals.

8.4 Choice of cultural and spiritual beliefs: All individuals have a unique set of values that are influenced by their culture and spirituality. Nursing students have a responsibility to demonstrate respect for the client by seeking to understand the client's health care goals, their strengths and values, their cultural and spiritual beliefs, and how they influence and support the client's care.

**** 9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care**

9.1 Collaborate in every reasonable manner: Clinical learning environments are places for applying the skills that nursing students have learned in the classroom and nursing lab. Nursing students are compelled to deliver the highest quality of care possible in these clinical learning environments. If the student has questions or needs clarification on a procedure or nursing intervention they are obligated to refer those questions to the nursing faculty or preceptor assigned to manage the student's clinical learning experience. The client's safety is the highest priority and the student should not let their questions go unanswered.

**** 10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.**

10.1 Nursing is a fast paced ever-changing field that leaves little or no room for error. It is imperative for nursing students to communicate what they are learning as well as the need for further education in a clinical practice area through any means possible such as, verbal conferences and written evaluations. Learning as a process may vary for each individual student. However, each student shares responsibility for ongoing evaluation of their clinical learning and participates as an active learner by demonstrating and documenting that their clinical learning objectives have been met and maintained.

**** 11. Encourage faculty, clinical staff, and peers to mentor nursing students.**

11.1 Encourage faculty: Nursing faculty are an important and readily available source of information and serve as role models for professional practice. By encouraging faculty to mentor students in evidence-based practice, in professional involvement in NSNA as a student, and in other nursing organizations after graduation, nursing programs prepare students to advocate for clients and to provide safe quality nursing care.

11.2 Encourage staff: Clinical staff and clinical preceptors are important sources of information about safe quality nursing practice and evidence-based Policies and Procedures in the clinical practice environment. By encouraging staff to mentor nursing students and to role model professional behaviors, health care institutions can create welcoming and effective learning environments.

11.3 Encourage peers: Peer mentoring has a unique advantage because of the shared experience of being a nursing student. Peers provide a different perspective on a nursing student's performance than faculty or staff, which can be facilitated through peer reviews and discussions. These reviews promote a career-long activity of collaborative learning and peer mentoring, and should be practiced as a component of clinical learning.

**** 12. Refrain from performing any technique or procedure for which the student has not been adequately trained.**

12.1 Operating within appropriate scope of practice: The client's well being is the highest priority. By performing procedures or interventions that the student is not ready to perform, the student and faculty are placing the client's well being in jeopardy. The student must inform the faculty or clinical preceptor assigned to supervise the clinical experience whenever they are unprepared to safely provide an assigned intervention or procedure. This allows the faculty or clinical preceptor to provide the needed information for safely conducting the procedure.

**** 13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self or others.**

13.1 Academic or clinical setting: Nursing students must recognize that actions influence the reputation of the nursing program and the profession of nursing. Therefore, whether on campus or in clinical settings, nursing students have a responsibility to come prepared to provide safe quality nursing care under the direction of the faculty or preceptor. By not engaging as an active learner or violating the nursing program's code of conduct (i.e. not coming prepared to class, missing a significant amount of class time, cheating or condoning other student's actions to cheat on exams, etc.) violates ethical and academic responsibilities of nursing students and future nurses. As an NSNA member, nursing students pledge in the *NSNA Code of Professional Conduct* (1999) to refrain from any form of cheating or dishonesty, and take action to report dishonorable practices to proper authorities using established channels.

13.2 Creating unnecessary risk of injury to the client, self, or others: Nursing students have shared responsibility with the health care team for maintaining the safety of clients, themselves, and others in the academic and clinical learning environment. Any action that creates the potential for harm or increases the risk for failure to maintain and support the physical or mental integrity of clients, self, or others is contradictory to these responsibilities. Competent delegation and supervision is a shared responsibility between the registered nurses and the health care team to control for unnecessary risks of injury to the client, self, or others. Nursing education should provide nursing students with opportunities to develop competencies related to delegation, including assessment and planning, communication, surveillance and supervision, evaluation and feedback (National Council of State Boards of Nursing (NCSBN), 2005; NCSBN & ANA, 2006).

13.3 Refraining from any deliberate action or omission of care that creates unnecessary risk to the client, self, or others:

Knowingly withholding action, acts of omission of care, and deliberate actions that create unnecessary risk to the client, self, or others is a violation of the ethical and professional responsibilities of nursing students. Such acts are subject to review by the academic institution, and others as deemed appropriate.

**** 14. Assist the staff nurse or preceptor in ensuring that there is a full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.**

14.1 Assist staff or preceptor: While the nursing student may observe and assist the staff nurse or preceptor with the education and care of the client, primary responsibility for informed consent and managing and implementing the plan of care/research protocols remains with the physician/primary care provider/researcher in collaboration with the client, the staff nurse, and health care team.

14.2 Ensuring that there is full disclosure: The nursing student should immediately, in a confidential setting, make full disclosure of any questions the client verbalizes and any concerns pertaining to the client's safety, privacy, or informed consent to the nursing faculty or preceptor as well as to the staff nurse assigned to the client.

14.3 Proper authorizations are obtained from clients: The staff nurse assigned to provide the client's care has the responsibility with the physician/primary care provider/researcher to assure that the client understands the treatment and/or research being provided and that proper authorizations are obtained from client after all of the client's questions are answered (National Institutes of Health (NIH), 2006).

14.4 Regarding any form of treatment or research: Human subject research requires that participants be given full disclosure of the purpose and procedures in the research study, including the potential benefits and risks. The client maintains the right to decide to participate or not to participate in the research (NIH, 2006).

**** 15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.**

15.1 Abstain from the use of alcoholic beverages or any substances that impair judgment: Nursing students strive to promote client, family, co-worker, and self-safety in academic and clinical settings. This cannot be accomplished when health professionals or nursing students are under the influence of any substance, legal or illegal, which impairs judgment. Impaired decision making can contribute to poor patient outcomes and can lead to disciplinary action.

15.2 In the academic and clinical setting: In classroom and clinical settings nursing students gain opportunities to build their critical thinking skills and learn to make sound clinical judgments. Nursing students should hold their colleagues and peers to this same standard. In that regard, if one suspects a colleague of alcohol or substance intake, he or she should discuss the situation in a confidential setting with the nursing faculty or preceptor.

**** 16. Strive to achieve and maintain an optimal level of personal health.**

16.1 Optimal level of personal health: As agents of a research-based industry we must remember the objective and scientific guidelines of optimal health. Taking care of one's self is important to providing good nursing care. Personal health encompasses both physical and mental health.

16.2 Striving to achieve and maintain: It is important for nursing students to be familiar with and routinely practice a *healthy* lifestyle. Nursing students and nurses are ambassadors, role models, and health educators for clients. It is an important responsibility for nursing students to maintain their own physical and mental health to provide safe quality nursing care to clients.

**** 17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.**

17.1 Support access to treatment and rehabilitation for students experiencing impairment: Nursing students should be familiar with the established policies and regulations related to substance abuse. Nursing students who are substance abusers must seek assistance to address this issue. By not doing so places both the student and clients in jeopardy and may result in dismissal from the program; disqualification for taking the licensure examination; and in the case of professional misconduct or malpractice, may result in legal action.

17.2 Mental or physical health issues: Nursing students suffering from mental and/or physical health issues must address these issues as soon as they become known. Assistance may be available at the student health center or other providers either on or off campus. By maintaining a high level of mental and physical health, nursing students will have the capacity to help others.

**** 18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.**

18.1 Uphold school policies and regulations related to academic and clinical performance: Adherence to the rules and regulations that are established for students including honesty, integrity, and professionalism within all academic and clinical settings is imperative. Nursing students must hold themselves and others accountable to these high standards. Being aware of the rules, regulations, and policies is part of this accountability; ignorance is not an excuse for violations.

18.2 Reserving right to challenge and critique rules and regulations as per school grievance policy: Nursing students have the right to challenge and critique rules and regulations following the process outlined in the school's grievance policy. Student perspectives and evaluations should be integral components of quality improvement for classroom and clinical learning environments, and the curriculum. NSNA adopted the *Student Bill of Rights and Responsibilities (NSNA House of Delegates, 1975, 1991, 2006)* and

Grievance Procedures (NSNA Board of Directors, 1975, 1991) to provide nursing students, faculty, and nursing programs a resource for developing and revising school grievance policies. Nursing students have a responsibility for adequate preparation for participation in academic classroom and nursing lab environments, and for safe quality clinical practice under the direction and supervision of nursing faculty and clinical preceptors.

Adopted by the NSNA Board of Directors, October 27, 2009 in Phoenix, AZ. Amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 8, 2022 in Salt Lake City, Utah.

Notes:

- Starting with the National Student Nurses' Association (NSNA) Bill of Rights and Responsibilities in the 1970s until the release of the NSNA Core Values by the Board of Directors in 2015, NSNA members have been in the forefront of inspiring moral courage and demonstrating exemplary ethical conduct for almost five decades. The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).
- The 2015-16 NSNA Board of Directors took on the challenge of reviewing NSNA's primary documents related to ethics and found that they all need a general review by the membership to ensure continued relevance today and in the future.
- The NSNA Code of Ethics will combine the current 3 documents into one NSNA Code of Ethics with three distinct parts. The three documents include: The Code of Professional Conduct; the Code of Clinical and Academic Conduct; and the Nursing Student Bill of Rights and Responsibilities.
- NSNA members discussed the Code at the MidYear Conference in Kansas City, Missouri on November 10, 2016. Over 100 members and faculty participated. At the 65th Annual NSNA Convention, delegates discussed the Code at the Forum on the Code of Ethics and voted on revisions and amendments to the Code of Ethics on April 7, 2017. The anti-discrimination description received the most comments and was amended on the floor of the House of Delegates. Many thanks to the 2016-17 NSNA Board of Directors and to the members and 2017 delegates who were engaged in this work.
- NSNA members discussed the Code at the 2021 NSNA Virtual 39th Mid-Year Conference, November 11-13, 2021. NSNA members and faculty participated. At the 70th Annual NSNA Convention, delegates discussed the Code at the Forum on the Code of Ethics and voted on revisions and amendments to the Code of Ethics on April 8, 2022. Many thanks to the 2021-22 NSNA Board of Directors and to the members and 2022 delegates who were engaged in this work.

NSNA Code of Academic and Clinical Conduct retrieved from [Code of Ethics.pdf \(dropbox.com\)](#)

Appendix B

6 Tips for Nurses Using Social Media

Social networks and the Internet provide unparalleled opportunities for rapid knowledge exchange and dissemination among many people, but this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits, and consequences of participating in social networking of all types. Online content and behavior has the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession.

ANA's Principles for Social Networking

1. Nurses must not transmit or place online individual identifiable patient information.
2. Nurses must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

6 Tips to Avoid Problems

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers, or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

References:

American Nurses Association. (2017). Social networking principles; Our principles for social networking; Social media tips. Retrieved from <https://www.nursingworld.org/social/>

American Nurses Association. (2011, September). Principles for social networking and the nurse. Silver Spring, MD: Author. National Council of State Boards of Nursing. (2011, August). White Paper: A nurses's guide to the use of social media. Chicago, IL: Author

Appendix C: Critical Thinking Map

Name _____

CRITICAL THINKING MAP

Assignment: _____ Date: _____

Concept / Related Concept (s)

Exemplar (s)

Medicine Wheel Quadrant(s):



Medical Diagnoses:

Brief Pathophysiology (Physiological Adaptation)

Potential & actual complications from treatments/procedures (Physiological Adaptation /Reduction of Risk Potential)

- 1.
- 2.
- 3.

Assessments (Physiological Adaptation)

- 1.
- 2.
- 3.

Risk Factors (Health Promotion & Maintenance/Reduction of Risk Potential)

- 1.
- 2.
- 3.

Psychosocial Concerns (Psychosocial Integrity)

- 1.
- 2.
- 3.

Labs & Diagnostics (Reduction of Risk Potential)

- 1.
- 2.
- 3.

Nursing Interventions (Basic Care & Comfort / Safety & Infection Control)

- 1.
- 2.
- 3.

Medications (Pharmacological & Parenteral Therapies)

- 1.
- 2.
- 3.

Patient Teaching (Health Promotion & Maintenance / Safety & Infection Control / Management of Care)

- 1.
- 2.
- 3.

Appendix D: Nursing Care Plan Guidelines

Care Plan Component	Points to think about:
1. Assessment Data <ul style="list-style-type: none"> Client data that you collect Which data fit with your client's diagnosis? Keep in mind what is subjective and objective data. 	<ul style="list-style-type: none"> Make sure your data relates to the diagnosis Organize it by system to get started, but realize that assessment data for one system can cross over into assessment data for another. Also, assessment data for one problem/diagnosis can cross over into another problem/diagnosis What are some of the risk factors noted in your assessment data that contribute to the patient's potential to develop a problem or diagnosis?
2. Nursing Diagnosis <ul style="list-style-type: none"> Related to....(etiologies associated with a diagnosis) As Evidenced By (AEB).... (defining characteristics or secondary characteristics which are assessment data that support the nursing diagnosis) <p><i>**Consider psychosocial/cultural diagnoses as well.</i></p>	<ul style="list-style-type: none"> What is the focus of nursing care? What setting can we expect care for this problem to occur? Is it an actual or potential diagnosis (see your <i>Fundamentals</i> text). Is this a possible, collaborative, or wellness diagnosis? Identify gaps and inconsistencies – what are some questions you have or further information you are needing about this patient? Prioritize the diagnosis – what are the top 3 diagnoses that need to be addressed? In what order? <ul style="list-style-type: none"> Think about airway, breathing, circulation and think about safety. Think about Maslow's hierarchy of needs
3. Planning outcomes (or goal statements)– common and expected for your patient <ul style="list-style-type: none"> Need to be specific and measurable as well as patient-centered. 	<ul style="list-style-type: none"> What is your desired outcome or goal for this client? What are the client's goals? Are the goals realistic? What does the client need right now? What might the client need for discharge? Is the goal/outcome long-term or short-term? Each goal statement should have a subject, action verb, performance criteria (how, what when, where something is to be done).
4. Planning therapeutic interventions (both independent and collaborative) <ul style="list-style-type: none"> Provide a Rationale for each intervention as well as a citation of a source for each intervention. 	<ul style="list-style-type: none"> Is your intervention an independent nursing action, collaborative nursing action or dependent nursing action (see page 103 of your <i>Fundamentals</i> text). Note I, C or D on your care plan. Are you observing, preventing or treating or, are you promoting health? Do the interventions you use (the strategies that you have), are they directed by your goals? Are your interventions individualized for your client? Do they make sense for your client?
5. Evaluation – <ul style="list-style-type: none"> Were the goals met, not met, partially met? Why or why not? <p><i>*This is not noted on your careplans, but is something to consistently think about as you plan care from shift-to-shift and day-to-day.</i></p>	<ul style="list-style-type: none"> How effective were your nursing actions and your nursing care plan overall? What is the client's progress toward his/her goals? What is the quality of the client's care – are there barriers to implementation of the planned interventions? Do you need to go back and reassess any areas of concern at this point? Look in your <i>Fundamentals</i> text about reflecting critically about your plan of care.

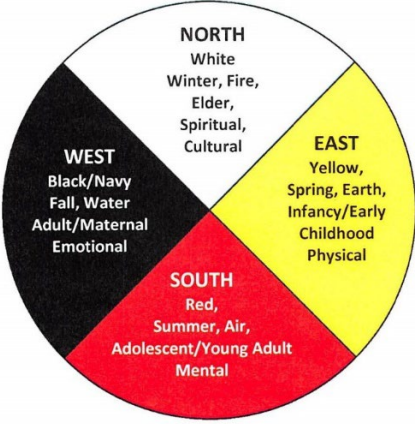
Appendix E: Nursing Care Plan

(Based on NurseTim Template)

Student Name: Client Number (1,2,3): Age/DOB: Allergies: Ht/Wt: BMI:	Date of Admission: Date of Care: Anticipated discharge (if known): Admitting Diagnosis: Planned Treatments/Procedures:
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***Do not use client name or initials – assign your initials with a number*

Co-morbidities: Chief Reason for seeking care: Complete 1 page patho paper on this.	History of Present Illness: Brief medical history:
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	<p>Assess: Where are the imbalances?</p> <ul style="list-style-type: none"> What imbalances are a priority to the patient? Do they align with the patient? <p>Diagnosis: What is causing the imbalances and does the patient agree? Implementation: How can the best possible balance be achieved for this person?</p> <p>Planning: Does the patient agree with the plan?</p> <ul style="list-style-type: none"> What are we doing to achieve balance? Explain. <p>Evaluate: Is balance achieved?</p> <ul style="list-style-type: none"> Is what we are doing effective? Why? Is what you are doing not effective? Why? Did we get to try everything we had planned with the patient? Explain?
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Allergies (in red):	
Medications	Reason for taking (attach additional sheet if needed)
Vital Signs & Pertinent Lab Trends	
START of the Shift Analysis	END of the Shift Analysis

Nursing Assessment Data	
<u>Neurological/HEENT</u> <u>Cognition/Coping/Adaptation/Function:</u> <u>GI/Nutrition/Elimination:</u> <u>GU/Reproductive</u> <u>Fluid/Electrolytes/Acid-Base:</u> <u>Resp & Cardiac: Gas Exchange/Perfusion:</u>	<u>Pertinent Labs & Glucose Regulation</u> <u>Health Promotion/Developmental Stage:</u> <u>Skin/Infection/Immunity/Inflammation:</u> <u>Mobility/Musculoskeletal:</u> <u>Pain/Comfort/Tissue Integrity:</u> <u>Safety:</u>

Note one Nursing Diagnosis at beginning of shift:

Note a second Nursing Diagnosis at the end of shift:

START of Care (or Shift) Priorities		
Priority Assessment or Cues	Priority Labs & Diagnostics	Priority Nursing Interventions – <i>note I, C, D (see guidelines)</i>
1.	1.	1.
2.	2.	2.
3.	3.	3.
Priority Medications	Priority Potential & Actual Complications	Priority Collaborative Goals – interdisciplinary care needs
1.	1.	1.
2.	2.	2.
3.	3.	3.

Answer these questions about today's client:

- END of Care (or Shift) Priorities –**

Priority Assessment or Cues

Priority Nursing Interventions

- **Additions**

- **Deletions**

Priority Collaborative Goals / interdisciplinary care needs
<p>1. Improve patient safety: Implement standardized protocols for medication management, fall prevention, and infection control across all units.</p> <p>2. Enhance patient and family engagement: Develop patient education materials in multiple languages and formats, and implement family-centered care initiatives.</p> <p>3. Optimize resource utilization: Streamline workflows, reduce wait times, and improve staff scheduling to maximize efficiency.</p> <p>4. Strengthen interdisciplinary communication: Establish regular interdisciplinary rounds and communication channels between all team members.</p> <p>5. Improve staff satisfaction and retention: Implement a comprehensive staff development program, including ongoing training and mentorship opportunities.</p>

- **Additions**

- **Deletions**

Nursing Note:

Wrap up and Debriefing:

1. Any skills performed or observed by the student (indicate whether performed or observed)
2. Compare this client with one you cared for previously in clinical, simulation, or a class case study. What things were the same and what was different related to their condition, assessment findings, provider prescriptions, medications, etc.?
3. Compare this client with the “textbook” notation of what such a client might present with or look like. What was the same and was different?
4. Clinical Pearl/Jewel: Identify what you think went well in caring for your patient. Identify areas for improvement or additional learning opportunities you would like to pursue in caring for future patients.

Appendix F: Care Plan Grading Rubric

Components			
Introductory Data - co-morbidities, reason for seeking care, history of present illness and brief medical history and 1-page patho paper	Complete and pertinent. Areas without information noted to be "N/A" or unknown, unable to collect. BMI calculated correctly. Allergies noted. Patho complete and informative. 12 pts total (Paper – 5 pts of total)	Data incomplete or not pertinent. Several elements missing, BMI calculated incorrectly. Patho incomplete. 6 points	Lacks significant pertinent data. Patho not present. 2 points (0 points if missing)
Assessment Data: Vital signs and lab trends. Medication list	Complete and pertinent. Areas without noted data explained and noted. Information complete to tell a story of patient presenting for care. All elements addressed. VS and lab trends noted with end of shift analysis. Medication list complete and reasons for meds noted appropriately. 25 points (14 -assessment, 6-VS, 5-meds)	Data incomplete or not pertinent. Gaps in assessment. Some of elements missing or incorrectly categorized. VS and lab trends may be lacking in information, analysis limited. Medication list incomplete, reasons for meds noted but inaccurate. 15 points	Lacks significant pertinent assessment data. VS and lab trends missing or lacking analysis completely. Medication list limited or incomplete. Reasons for taking not noted. 5 points (0 points if missing)
Nursing Diagnosis 2 of them: one for beginning of shift, one for end.	Accurately selected, prioritized and written in relation to assessment data, present illness, and history. Written in complete form with etiology and AEB statements, as necessary. 12 points	Incompletely written or does not contain all elements of a nursing diagnosis. Priority diagnoses not identified given patient's assessment data, present illness or history. 6 points	Inaccurate selection of diagnoses or unable to identify diagnoses. Etiology and AEB statements missing. 0 points
Prioritization (Start of Care) (End of Care)	Assessment, labs, interventions, medications, complications, collaborative goals are prioritized effectively and based on best practices and safety. Information complete and specific. End of shift changes are noted on some level. 20 points	Assessment, labs, interventions, medications, complications, collaborative goals may not be prioritized effectively, but demonstrate some attempt at prioritization. Information has some gaps and needs clarification. Some end of shift changes noted, some missing. 10 points	Assessment, labs, interventions, medications, complications, collaborative goals are not prioritized based on best practices and safety. Many gaps in the information. End of shift changes not noted. 5 points (0 points if missing)
Nursing Interventions	3 nursing interventions noted on start of care (and possibly end of care) priorities. They should be patient-centered, directed by the assessment data. They should be evidence-based (referenced if a student cannot find the evidence easily), and notations of independent (I), collaborative (C) and dependent (D) are noted. 9 points	Incomplete nursing interventions. 1-2 interventions noted. Interventions may or may not be patient-centered and are not directed by assessment data. 3-6 points	Nursing interventions not related to nursing diagnosis and not directed by assessment data; not patient-centered; Interventions are not nursing actions. Notations of ICD are missing. 0 points
Mid-Shift Clinical Judgement	Questions addressed sufficiently to determine changes that might be occurring with the patient, what those changes mean, and how those changes should be managed and evaluated. 6 points	Questions are moderately addressed and could use some additional clarification or detail as well as evidence of clinical judgment. 3 points	Questions are not addressed sufficiently. Many gaps noted. Evidence of clinical judgment is not noted within the answers. 0 points
Wrap-up and Debriefing	Information complete, questions, answered completely and thoughtfully. References where needed. 12 points	Information lacking details and could be more complete. Could utilize additional reflective details. 6 points	Information largely missing, incomplete and/or lacks reflective thinking. . 0 points

Mechanics Formatting, Grammar, references	Correct grammar and use of medical terminology, information has references noted (should be evidence-based), care plan completed and readable. 4 points	Incomplete or inaccurate use of medical terminology. Some grammar, punctuation, or terminology issues present, information not referenced or evidence-based. 2 points	Missing or repeatedly inaccurate terminology, improper references or evidence noted throughout. 0 points
---	---	---	--

Points Earned: _____/100

Satisfactory = 75% and higher

Unsatisfactory = less than 75%

****If your care plan is unsatisfactory, corrections need to be made and the care plan needs to be submitted by the following Monday.**

Appendix G. Aaniiih Nakoda College *Grow Our Own* Nursing Program**Formative Clinical Evaluation**

Course _____

Semester _____

Student: _____ Total Hours: _____ hours

Location: *See Clinical Schedule

- The instructor will mark an *S/U* for each of the 16 competencies listed **for each clinical day**.
- 75% of **each column** must be *satisfactory* and competencies must be met in order to earn a *satisfactory* for that clinical day.
- Three (3) Unsatisfactories in any given row (dates of clinical) equals an *unsatisfactory* and *not passing grade* for the entire clinical portion of this class.
- Satisfactory (complete or 75% or higher) = S Unsatisfactory (not complete or less than 75%) = U**

Write in Clinical Sites	Week :		Week :		Week :		Week :	
	Date	Date	Date	Date	Date	Date	Date	Date
Patient Preparation								
1. Preparation complete prior to clinical day (journal complete)								
2. Care plans complete. Identifies needs of adult medical/surgical client and family including maintenance, prevention and education.								
3. Clinical day or laboratory class complete.								
4. Corrections completed on time as assigned.								
Multidimensional and Balanced Patient Care								
5. Demonstrates sensitivity to holistic beliefs of patients, families, peers, health care team members, and others.								
6. Protects the patient's cultural safety and privacy, and preserves human dignity while providing care.								
7. Communicates therapeutically with patients utilizing verbal and nonverbal skills.								
8. Identifies physiological changes and nursing assessment for patients.								
9. Demonstrates time management skills.								
10. Exhibits timely, legally accurate, and appropriate documentation that is complete and approved by instructor/preceptor.								
11. Holistic needs of patient & family are identified & incorporated into plan of care considering cultural safety.								
12. Actively seeks new learning experiences.								
Patient Safety								
13. Demonstrates 6 rights of medication administration consistently.								
14. Performs patient care safely in accordance with program guidelines.								
Professional Responsibility								
15. Demonstrates ability to function in a professional manner at all times.								
16. Practices within the legal boundaries and ethical framework of the practice of nursing								
Add up number of "S's" in each column and write in: <i>Circle S/U based on whether the number of "Sats" (out of 16 criteria) equal 75% or higher. This is satisfactory/unsatisfactory for that clinical day</i>	/16 S/U	/16 S/U	/16 S/U	/16 S/U	/16 S/U	/16 S/U	/16 S/U	/16 S/U

Average Percentage Score for this page (Divide points earned by total points): $\frac{\quad}{(\quad)} \times (100) = \quad\%$

This calculation determines whether a student has achieved the 75% required to pass the clinical portion of this class.

Enter this number on the last page of the summative clinical evaluation tool

Appendix H: Aaniiih Nakoda College *Grow Our Own* Nursing Program

CLINICAL and SIMULATION LABORATORY SUMMATIVE EVALUATION TOOL FOR FINAL LAB or CLINICAL GRADE

Student :		Faculty:	
Course:	Semester:	Year:	**See Formative Evaluations & Schedule for Clinical sites

Introduction: This clinical and simulation laboratory summative evaluation tool:

- Consists of five essential competencies with specific performance criteria drawn from Aaniiih Nakoda College Medicine Wheel Paradigm, Aaniiih Nakoda College Nursing Program end-of-program Student Learning Outcomes, NLN Competencies for Graduates of Nursing Programs, and Quality and Safety Education in Nursing (QSEN).
- The performance criteria for each competency include cognitive, affective, and psychomotor domains of learning and provide a thorough evaluation of an individual student's lab or clinical performance.
- Makes it possible to determine whether a student has met the required competencies for the course and the Nursing Program each midterm (if needed) and end-of-semester.
- Provides standard measures for student, course, and program evaluation, and assists the program in determining if students are meeting the nursing end-of-program student learning outcomes. Is utilized at midterm to provide feedback to a student (with use of formative evaluation tool) if deemed by instructor that it's needed.
- Is utilized at the conclusion of a rotation or a course that has a lab or clinical component.

The formative evaluation will be:

- Utilized for day-to-day clinical evaluation to determine progression of a student in a specific lab or clinical.
- Attached to this summative evaluation tool The course-specific formative evaluation will be attached to this summative evaluation to further determine if the student is meeting the required competencies required to progress in the Nursing Program.

Instructions:

1. Faculty will discuss the tool with students at the beginning of each lab and clinical rotation and describe how and when it will be used.
2. To determine the performance level for each competency, faculty will consider student performance on the formative evaluation tool.
3. Students will rate themselves and faculty will rate each student on each of five competencies using the designated performance level scale (page 2), considering the **quality of the performance** (*Almost Never Exhibits* to *Almost Always Exhibits*) and the **amount of guidance** required (*Almost Always Requires* to *Almost Never Requires*). Referring to the scale below, as students improve in accuracy, safety, and efficiency, it is expected that they will require less guidance.
4. Faculty and students may also include comments related to each competency.
5. On the final page of this evaluation tool, it will be determined if a student meets criteria for **satisfactory** or **unsatisfactory** and written in the **grade** based on the summative and formative evaluation tools. This may be done at midterm, if needed, and at end of semester.
6. Faculty may include summary comments and document recommendations for further development/improvement.
7. Faculty will review the evaluation with the student and document the date of the meeting.
8. The student should be provided with a copy of the evaluation.

The Performance Level Scale

Amount of Guidance		Quality of Performance	
Self-Directed (Level IV) – Semester 4			
Almost Never Requires <ul style="list-style-type: none">• direction• guidance• monitoring• ongoing support		Almost Always Exhibits <ul style="list-style-type: none">• a focus on the patient or system• accuracy, safety, and skillfulness• assertiveness and initiative• efficiency and organization• an eagerness to learn	
Supervised (Level III) – Semester 2, 3, 4			
Occasionally Requires <ul style="list-style-type: none">• direction• guidance• monitoring• support		Very Often Exhibits <ul style="list-style-type: none">• a focus on the patient or system• accuracy, safety, and skillfulness• assertiveness and initiative• efficiency and organization• an eagerness to learn	
Assisted (Level II) – Semesters 1, 2, 3			
Often Requires <ul style="list-style-type: none">• direction• guidance• monitoring• support		Often Exhibits <ul style="list-style-type: none">• a focus on the patient or system• accuracy, safety, and skillfulness• assertiveness and initiative• efficiency and organization• an eagerness to learn	
Novice (Level I) – Semester 1			
Very Often Requires <ul style="list-style-type: none">• direction• guidance• monitoring• support		Occasionally Exhibits <ul style="list-style-type: none">• a focus on the patient or system• accuracy, safety, and skillfulness• assertiveness and initiative• efficiency and organization• an eagerness to learn	
Dependent (Level 0)			
Almost Always Requires <ul style="list-style-type: none">• direction• guidance• monitoring• support		Almost Never Exhibits <ul style="list-style-type: none">• a focus on the patient or system• accuracy, safety, and skillfulness• assertiveness and initiative• efficiency and organization• an eagerness to learn	

Meeting expected level of performance for student's current semester is required for each of the competencies listed below. For the summative evaluation, students must achieve the minimal expected level of performance for each competency and a minimum of 75% from the course-specific simulation laboratory/clinical formative evaluation tool in order to pass the course and progress in the program.

NOTE: In these competencies, **patient** is defined as the recipient of professional nursing services and may be an individual, family, or group.

Competencies, Performance Criteria, and Comments

Competency 1: Patient Preparation: Student...		
<u>Performance Criteria</u>		
a. Preparation complete prior to each lab/clinical day. b. Care plans complete. Identifies multi-dimensional needs of the patient including maintenance and prevention. <ul style="list-style-type: none"> i. Develops holistic plan of care based on analysis of assessment data. ii. Accurately determines priorities for care and cultural safety. iii. Communicates priorities and rationale for decisions to instructor. 		
iv. Considers needs/preferences and cultural safety of the patient in planning multi-dimensional care. v. Establishes realistic goals/expected outcomes to ensure balanced care. vi. Identifies appropriate resources to inform care planning. c. Clinical day or laboratory class complete. d. Corrections to care plans completed on time as assigned		
Faculty Comments	FINAL	Student Comments
Performance Level (from page 2 – Level 0,I,II,III,or IV):		Performance Level (from page 2 – Level 0,I,II,III,or IV):

Competency 2: Multi-dimensional Patient Care - Exhibits relationship-centered care to facilitate balanced health care. Student...		
<u>Performance Criteria</u>		
a. Demonstrates sensitivity to holistic beliefs of patients, families, peers, health care team members, and others. <ul style="list-style-type: none"> i. Incorporates cultural safety and multi-dimensional factors to ensure delivery of balanced care. ii. Encourages family and/or significant others' participation in care as appropriate. 		
iii. Assists patients with coping and adaptation strategies to ensure well-being. b. Protects the patient's cultural safety and privacy, and preserves human dignity while providing care. c. Communicates therapeutically with patients utilizing verbal and nonverbal skills.		
Faculty Comments	FINAL	Student Comments
Performance Level (from page 2 – Level 0,I,II,III,or IV):		Performance Level (from page 2 – Level 0,I,II,III,or IV):

Competency 3: Balanced Patient Care: Student...**Performance Criteria**

- | | |
|--|--|
| <ul style="list-style-type: none"> a. Identifies physiological changes and nursing assessment for patients. <ul style="list-style-type: none"> i. Demonstrates initiative to gather evidence-based research to incorporate balanced care. ii. Evaluates sources of data for appropriateness, usefulness, and accuracy. iii. Uses correct techniques for assessment. iv. Relates pathophysiology and epidemiology of disease(s) to patients' assessment findings, medications, laboratory and diagnostic test results, medical and nursing interventions. v. Interprets laboratory/diagnostic test results. vi. Incorporates data from patient, family/support persons and health care team members. vii. Reports changes in patient status to instructor and primary nurse; reports off when leaving unit. viii. Evaluates nursing interventions and care based on evidence-based practices and goals/expected outcomes and revises in consultation and collaboration with health care team, patient and family. | <ul style="list-style-type: none"> b. Demonstrates time management skills. c. Exhibits timely, legally accurate, and appropriate documentation that is complete and approved by instructor/preceptor. d. Holistic needs of patient and family are identified and incorporated into plan of care considering cultural safety. <ul style="list-style-type: none"> i. Demonstrates and promotes innovation and creativity in providing holistic care to patients. ii. Utilizes appropriate principles of teaching/learning when implementing a teaching plan with consideration of cultural safety and balanced care. e. Actively seeks new learning experiences. <ul style="list-style-type: none"> i. Integrates concepts of health promotion and disease prevention into patient care. ii. Demonstrates interest in growing and improving nursing practice. iii. Integrates multi-disciplinary theory and practice to enhance patient care. |
|--|--|

Faculty Comments**FINAL****Student Comments**

Performance Level (from page 2 – Level 0,I,II,III,or IV):

Performance Level (from page 2 – Level 0,I,II,III,or IV):

Competency 4: Patient Safety. Student...		
Performance Criteria a. Demonstrates 6 rights of medication administration consistently. b. Performs patient care safely in accordance with program guidelines. <ul style="list-style-type: none"> i. Plans and implements evidence-based interventions that are consistent with assessment data. ii. Considers cultural safety of patients when providing care by collaborating with patient, family, and health care team members to ensure a safe environment. iii. Performs nursing skills and therapeutic procedures safely and competently for skill and educational level. 		<ul style="list-style-type: none"> iv. Follows principles of infection control. v. Recognizes own limitations related to nursing skills or technologies and takes appropriate steps for improvement vi. Demonstrates flexibility in adapting to changing patient care situations vii. Reports abnormal data and changes in patient condition to instructor or appropriate health team members. viii. Honors and promotes the cultural safety of patients, family, and community by advocating for them. ix. Documentation is clear, relevant, thorough and organized, to ensure clear communication and patient safety.
Safe Behavior Criteria: The student is required to practice professional nursing safely in specific patient-centered situations with lab/clinical supervision according to the Aaniiih Nakoda College Student Nursing Handbook. Students will be dismissed from the Nursing Program if the following occurs: <ul style="list-style-type: none"> • Student's health, performance, and/or behavior compromise the safety of patients, students or college personnel; • Performance in an unsafe manner while providing care to a client; Exhibiting conduct that is unprofessional, incompetent, unethical, or illegal in the lab/clinical/practicum settings as outlined by the <i>NSNA Code of Ethics/Code of Academic and Clinical Conduct</i>; • If any student arrives at the lab/clinical area chemically impaired by drugs or alcohol; • Failure to immediately report a client/care error to the lab/clinical instructor; • Fraudulent or untruthful charting in a medical record; • Failure to protect client confidentiality. 		
Faculty Comments	FINAL	Student Comments
Performance Level (from page 2 – Level 0,I,II,III,or IV):		Performance Level (from page 2 – Level 0,I,II,III,or IV):

5. Professional Responsibility: Student...		
Performance Criteria a. Demonstrates ability to function in a professional manner at all times. <ul style="list-style-type: none"> i. Follows college and facility policies. ii. Maintains professional appearance. iii. Arrives on time for lab/clinical. iv. Notifies faculty prior to start of lab/clinical day if he/she will be absent or late. v. Completes preparation for lab/clinical practice. vi. Assumes accountability for own actions and practices. vii. Demonstrates initiative in seeking learning opportunities and resources for lifelong learning. viii. Analyzes personal strengths and limitations in providing care to patients. ix. Incorporates constructive feedback for performance improvement. 		<ul style="list-style-type: none"> x. Communicates to instructors, patients, health care team members, and families clearly and consistently. Protects patient rights (privacy, autonomy, confidentiality). xi. Listens attentively and respectfully to others. xii. Is actively involved in team building, fostering collegiality, and encouraging cooperation. xiii. Works collaboratively with the health care team to facilitate holistic health of patients.
Faculty Comments		Student Comments
FINAL		
Performance Level (from page 2 – Level 0,I,II,III,or IV):		Performance Level (from page 2 – Level 0,I,II,III,or IV):

Midterm Evaluation Comments (if completed at midterm)

- Student's level of performance (from page 2) _____

Faculty Comments:	Faculty recommendations for further development/improvement:

Final Evaluation

_____ **SATISFACTORY (75% or higher)** Student is meeting or exceeding expected level of for each of the five competencies listed above.

- Student's level of performance (from page 2) _____
- Student's lab or clinical grade percentage (from course-specific evaluation tool) _____

_____ **UNSATISFACTORY (less than 75%)** Student is not meeting expected level of performance for one or more of the five competencies listed above and is not achieving a 75% on the course-specific evaluation.

- Student's level of performance _____
- Student's lab or clinical grade percentage (from the course-specific evaluation tool) _____

<p>Faculty Comments:</p> 	<p>Faculty recommendations for further development/improvement:</p>
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By providing their names below, the student and the faculty acknowledge that a meeting was held on (date) _____ to discuss this evaluation and that a copy of this evaluation was provided to the student.

Student Signature: _____

Date: _____

Faculty Signature: _____

Date: _____

****References Used for Tool Development**

Adapted from Chapel Hill Clinical Evaluation Tool

NLN Competencies for Graduates of Nursing Programs

Quality and Safety Education for Nurses Competencies based on the Institute of Medicine competencies for Nursing

Holaday, S., & Buckley, K. (2008). A standardized clinical evaluation tool-kit: Improving nursing education and practice. In M. H. Oermann & K. T. Heinrich (Eds.), *Annual Review of Nursing Education*, Vol. 6. New York: Springer Publishing.

Appendix I: What will I need to include for APA format?

APA 7 format includes the following:

- ☐ Title page with running head and page numbers
- ☐ Lines are double-spaced
- ☐ 1-inch margins on all sides
- ☐ Times New Roman 12-point font
- ☐ Headings – JUST THE FIRST 3 LEVELS OF HEADINGS REQUIRED FOR CLASS
https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/apa_headings_and_seriation.html
- ☐ In-text Citations
- ☐ Reference page

How do we document sources used?

Citations are needed for both paraphrasing and using quotations. A references page should include complete information about each source used in your citations.

How do you use citations when paraphrasing?

Paraphrasing is using the author's ideas in the student's words. You do not add any new ideas. If the author states, "The grass is green," you might paraphrase by writing either of the following:

- Green is the color of the grass (Author surname, year).
- According to Author (year), green is the color of the grass.

Make sure to pay attention to punctuation – it's very important in APA style!

How do you cite a quote?

Quoting is using the author's ideas and exact words. Do not add or change words. For the quotation, "The grass is green," you might cite this quotation in either of the following formats:

- According to Author surname (year), "the grass is green" (p. xx).
- "The grass is green" (Author surname, year, p. xx).

What does a reference page look like?

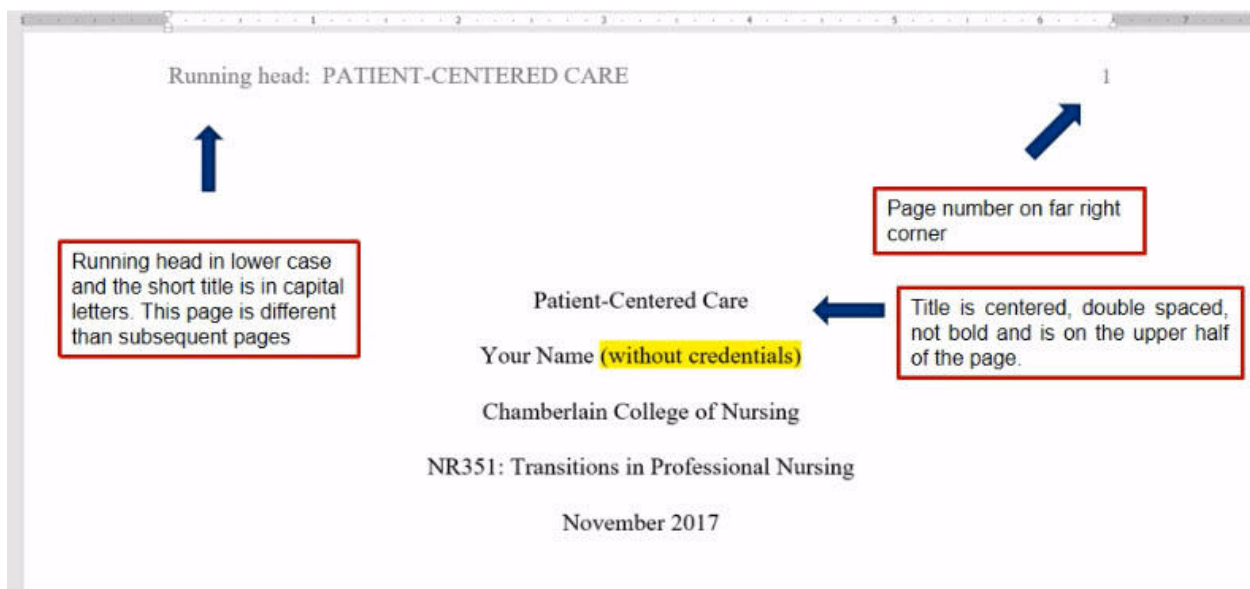
A few things to keep in mind: A reference page should be double-spaced with no added spaces between lines and in alphabetical order, based on the first author of each source. The second line of each reference should be indented (Hanging indent). Here's an example:

References

- Fewster-Thuente, L. (2015). Working together toward a common goal: A grounded theory of nurse-physician collaboration. *MEDSURG Nursing*, 24(5), 356-362.
- Park, J., Hawkins, M., Hamlin, E., Hawkins, W., & Bamdas, J. M. (2014). Developing positive attitudes toward interprofessional collaboration among students in the health care professions. *Educational Gerontology*, 40(12), 894-908.
doi:10.1080/03601277.2014.908619

What should the title page look like?

Check out this example and notes to see what a title page should look like:



LINKS

https://owl.purdue.edu/owl/purdue_owl.html

Department of Nursing Acknowledgement and Consent Form

A signed copy will be retained by Nursing Office by the first day of class

Please initial each line and sign at the bottom:

_____ I acknowledge receipt of the Aaniiih Nakoda College Student Handbook for Nursing. I understand that it's my responsibility to read and follow the policies of the Department of Nursing as outlined in the Nursing Student Handbook. The Nursing Faculty and Director are available to answer any questions that may arise.

_____ I have read through the ***physical, mental, sensory, communication, behavioral and cultural requirements*** section of this handbook and I am aware that it is my responsibility to seek out reasonable accommodations if I am unable to fully meet those functional expectations. I understand that admission, progression and graduation may not occur if I cannot meet the functional expectations of a nursing student at Aaniiih Nakoda College.

_____ **NURSING COURSES CONFIDENTIALITY AGREEMENT:** I agree to adhere to the professional standards of confidentiality while in the Nursing Program at Aaniiih Nakoda College. I understand the unique and personal nature of patient care that is involved in the education of nurses and fully intend to safeguard the privacy of all patients for whom I have care, as well as their families. I will not disclose information about my patients, their families, or information about fellow students that may be obtained during my studies in Nursing. I understand that this confidentiality is essential in the profession of nursing. Furthermore, I understand that any violation of confidentiality is unacceptable and may result in my dismissal from the Nursing Program.

_____ I authorize Aaniiih Nakoda College utilize my likeness in photographs for media and/or publications and websites for the purpose of information dissemination or publicity related to Aaniiih Nakoda College.

_____ Any equipment provided to me by the Nursing Program for utilization in the Nursing Program, including, but not limited to computers, textbooks, stethoscopes, BP cuffs, etc. will be returned upon request from the Nursing Program.

_____ I have read through and acknowledge understanding and awareness of the Covid-19 guidelines set forth the *Nursing Student Handbook* addendum.

Printed Name: _____

Signature: _____ Date: _____

Aaniiih Nakoda College Nursing Pledge

As I enter the nursing profession I pledge:

To the East to care for all children so that they flourish and bloom like flowers in the spring.

To the South for youth as they transition into adulthood, healthy in body and mind. To mentor and guide them so that they grow, learn and gain confidence.

To the West to care for new mothers and fathers as they have cared for us.

To the North for the Elders – to treat them as they would be in their community; to protect and carry the knowledge and culture of our ancestors while respecting all cultures in my care.

To build on my education to advance science, innovation, research, and policy

Hold in professional confidence all the personal information entrusted to me

I pledge to treat everyone as a whole – the person not the disease and to honor my own well-being while caring for all in the circle of life.

Aaniiih Nakoda College Nursing Class of 2022