



SOUTHSIDE VIRGINIA  
COMMUNITY COLLEGE

Associate of Applied Science Degree in Nursing Program  
Concept Based Curriculum  
Student Handbook  
**2023-2024**



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<https://southside.edu/associate-applied-science-nursing-rn>

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The Nursing Student Handbook is reviewed at least annually and is subject to change.  
Updates to Policies and Procedures can be found on each course Learning  
Management System site and the college web page.

Reviewed: 1/20, 6/20, 8/20, 2/21, 5/21, 8/21, 5/22, 9/22, 7/23

## A Message from the Dean:

Congratulations on your decision to pursue your nursing education at Southside Virginia Community College! This is an exciting time to be in health care. We are proud of each of you who were selected for this opportunity. You are now officially a member of a distinct group of individuals who will travel through a program of study that will prepare you to meet your professional goals in nursing. Nurses are recognized as having responsibility for physical care, education and teaching, counseling and probably most important, advocacy for the patient. Contemporary nursing professionals play a vital role as leaders in responding to the ever-changing health care delivery system.

While you are enrolled at Southside, we want you to develop a passion for nursing practice. The faculty believes that developing this passion begins with your inquisitiveness and having a sense of wonder. Always ask questions, use critical thinking and seek out opportunities to learn. Our responsibility is to introduce you to an active learning environment that encourages you to wonder, question, grow in knowledge and develop clinical expertise.

We, the faculty, want each of you to be successful in our nursing programs. We also realize that as you are studying, you are preparing for entry into practice and are laying the foundation for your future. The Institute of Medicine's report on *The Future of Nursing* has recommended that we increase the proportion of nurses with a baccalaureate degree from 50% to 80% by the year 2020. Being part of this initiative is made seamless and cost-effective through numerous BSN articulation agreements available at Southside. Additionally, as part of a workforce of over 3 million nurses, you are going to find multiple opportunities in nursing that may include employment in acute care hospitals, outpatient settings, public health departments, home health or hospice agencies as well as positions in quality management and administration. There are many exciting avenues you may pursue after graduation.

Again, congratulations on your success and welcome to SVCC Nursing! If there is anything we can do to assist you throughout the program, please do not hesitate to let us know.

Best regards,

Melissa Arthur RN, MSN, NP-C, CNE  
Dean of Nursing, Allied Health, and Natural Science

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**Southside Virginia Community College – Nursing**  
**Statement of Understanding**

I understand the requirements of the SVCC Nursing Program as stated in this guide, the college catalog and the student handbook. I agree to follow the policies as stated in the policy book as well as the handbook and the college catalog. My signature on the form below verifies my understanding. When I begin a nursing course, it is my responsibility to clarify what I do not understand regarding the requirements of the course with the instructor.

Name: \_\_\_\_\_ (please print)

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

Student I.D.: \_\_\_\_\_

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

The Virginia Community College System (VCCS) launched a statewide Concept Based Curriculum (CBC) in the Fall of 2017.

Southside Virginia Community College (SVCC) adopted it in the Fall of 2018.

All students are required to adhere to the policies and guidelines of the SVCC Student Handbook. The purpose of this document is to provide additional guidance for the SVCC ADN Nursing Program, not to supersede the SVCC Student Handbook rules and regulations.

### **SVCC Mission Statement**

Southside Virginia Community College serves as a gateway to education, training, and employment opportunities by providing relevant and innovative programs responsive to the diverse communities we serve in a student-centered, inclusive learning environment.

**Local Board Approval: July 20, 2022**

### **Core Values and Vision Statement**

#### **Core Values**

Southside Virginia Community College is committed to providing and promoting excellence in the following areas:

- Student access to quality higher education.
- Services and programs that encourage success among all students, faculty, staff and the community.
- Supporting a culture of inclusivity and expanded equity.

#### **Vision Statement**

SVCC is dedicated to inspiring excellence and transforming lives while contributing to the economic vitality of the diverse communities it serves.

### **ADN Student Learning Outcomes and Competencies**

**Mission:** The mission of the VCCS Nursing Programs is to provide affordable, community access to quality nursing education. The VCCS nursing programs prepare qualified students to provide safe, competent, entry-level nursing care in 21<sup>st</sup> century healthcare environments. Students are prepared to meet the ever-increasing complexity of the healthcare needs of the citizens of Virginia.

**Philosophy:** VCCS nursing faculty ascribe to the core competencies for nursing and nursing education. While firmly based in science and the arts, the essence of nursing is caring and compassionate patient centered care. Ethical standards, respect for

individual dignity, and consideration of cultural context are implicit in the practice of patient centered care. The nurse advocates for patients and families in ways that promote self-determination, integrity, and ongoing growth as human beings. Nursing care is provided in collaboration with the patient, the family and members of the health care team. The nurse displays a spirit of inquiry by examining evidence to improve quality of care, promote safety and improve patient outcomes. Nursing judgment is integral to making competent decisions related to the provision of safe and effective nursing care. Information management essential to nursing care is communicated via a variety of technological and human means.

### **Student Learning Outcomes with Competencies:**

Students who complete the Associate Degree of Applied Science with a major in Nursing will be expected to:

#### End-of-Program Student Learning Outcomes

Client-Centered Care	Provide client centered care promoting therapeutic relationships, caring behaviors, and self-determination across the lifespan for diverse populations. a. Coordinate client centered care delivery with sensitivity and respect. b. Evaluate the effectiveness of teaching plans and outcomes and revise for achievement of desired outcomes. c. Promote client self-determination in making healthcare decisions as a level 4 student. d. Integrate therapeutic communication skills when interacting with clients and the client’s support network. e. Advocate independently for diverse individuals, families, and communities across the lifespan.
Safety	Practice safe nursing care that minimizes the risk of harm across systems and client populations. a. Evaluate human factors and safety principles. b. Participate in the analysis of errors and designing system improvements. c. Incorporate client safety initiatives into the plan of care. d. Practice safe client care as a level 4 student.
Clinical Judgment	Integrate clinical judgment when collaborating with the healthcare team in the management of care for complex clients. a. Evaluate an individualized plan of care based on client values, clinical expertise and reliable evidence. b. Independently prioritize changes in client status and intervene appropriately. c. Apply the nursing process to guide care. d. Prioritize client care using evidence-based practice independently. e. Evaluate existing practices and seek creative approaches to problem solving.
Professional Behaviors	Practice professional behaviors that encompass the legal/ethical framework while incorporating self-reflection, leadership, and a commitment to recognize the value of life-long learning. a. Incorporate ethical behaviors and confidentiality in the practice of nursing.

	<ul style="list-style-type: none"> <li>b. Assume responsibility and accountability for delivering safe client care.</li> <li>c. Deliver nursing care within the scope of nursing practice.</li> <li>d. Evaluate professional behaviors in interactions with clients, families and healthcare providers.</li> <li>e. Engage in reflective thinking for the purpose of improving nursing practice.</li> <li>f. Develop a plan for lifelong learning in the nursing profession.</li> </ul>
Quality Improvement	<p>Manage client care through quality improvement processes, information technology, and fiscal responsibility to meet client needs and support organizational outcomes.</p> <ul style="list-style-type: none"> <li>a. Evaluate the common quality measures encountered in clinical practice.</li> <li>b. Evaluate use of technology and information management to promote quality.</li> <li>c. Evaluate fiscally responsible client care.</li> </ul>
Collaboration	<p>Demonstrate principles of collaborative practice within the nursing and healthcare teams fostering mutual respect and shared decision-making to achieve stated outcomes of care.</p> <ul style="list-style-type: none"> <li>a. Compare and contrast the effectiveness of the members of the interdisciplinary team to promote optimal client outcomes.</li> <li>b. Participate in the interdisciplinary plan of care to promote optimal client outcomes.</li> <li>c. Evaluate communication strategies that are inclusive of various communication and cultural differences.</li> <li>d. Evaluate management skills and principles of delegation when working with other members of the healthcare team.</li> <li>e. Reflects at a professional level on individual and team performance.</li> </ul>
Pharmacology	<p>Manage the appropriateness, accuracy, and client response to pharmacology principles for clients with complex conditions.</p>

**Educational and Nursing Theory:**

The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research and current standards of practice. Faculty believe that teaching is a “sequential process of acquiring knowledge leading to measurable changes in behavior.” Students come to the program with preexisting knowledge and experiences which help to increase their depth of understanding. Knowles Theory of Adult Learning (1984) supports this premise. The nursing sequence is designed to progress from simple to complex. Students are initially introduced to basic nursing concepts with a wellness and health promotion focus. They then progress to care of the client with stable health alterations and then onto complex health alterations. This is the focus of both the theory and clinical components of the courses. In clinical, students will initially care for one or two clients and progress to a preceptorship in their last semester. In the preceptor model the student takes on the role of the RN under the supervision of their preceptor. At this stage students are expected to use clinical reasoning as they make clinical judgments regarding client care. The curriculum structure is supported by Benner’s (1984) “novice to expert” concept in which nurses’ transition from beginning to expert practitioners. Bloom’s

Revised Taxonomy of Learning Domains (Anderson et al, 2001) and Clinical Judgement Measurement Model (NSBN.org, 2021) is also used to assist faculty in structuring the curriculum and provides guidance in the selection of appropriate learning activities and evaluation methods. The leveling of content, SLOs and clinical experiences serve to build cognitive, affective and skill acquisition across the curriculum.

Theory	Applicable throughout all nursing courses
Maslow	X
Constructivism	X
Knowles Adult learner	X
Benner	X
Clinical Judgement Measurement Model	X
Erickson	X
Piaget	X
Kolb's Experiential Learner	X
Peer Assisted Learning	X

Interprofessional collaboration is identified in the end-of-program student learning outcomes, and is leveled across the curriculum. Students will be accountable for understanding and engaging in interprofessional collaboration in the classroom, simulation lab, and direct patient care experiences. One of the SLOs speaks directly to the collaborative role of the nurse in “fostering mutual respect and shared decision-making.” Students will work closely with physicians, nurse practitioners, dietitians, occupational and physical therapists in the clinical settings

Evidence-based practice is a consistent theme identified in each new nursing course. Student assignments will require use of available databases, as well as strategies to communicate information learned.

### Traditional Curriculum 5 Semesters:

Course	Course Credit hours	Didactic credits	Didactic contact hours	Clinical lab credits	Lab contact hours	Clinical contact hours	Simulation contact hours
<b>Prerequisites</b>							
BIO 141 Anatomy and Physiology I	4	3	45	1	45		
ENG 111 Composition I	3	3	45				
PSYCH 230 Developmental Psychology	3	3	45				
SDV 100	1	1	15				



ITE 119	3	3	45				
<b>Semester Total</b>	<b>14</b>	<b>14</b>	<b>195</b>	<b>1</b>	<b>45</b>	<b>0</b>	<b>0</b>
<b>Semester 1</b>							
BIO 142 Anatomy & Physiology II	4	3	45	1	45		
NSG 100 Intro to Nursing Concepts	4	3	45	1		37	8
NSG 106 Competencies for Nursing Practice	2	1	15	1	45		
NSG 130 Professional Concepts	1	1	15				
NSG 200 Health Promotion & Assessment	3	2	30	1	35	6 health (screening)	4
<b>Semester Total</b>	<b>14</b>	<b>10</b>	<b>150</b>	<b>4</b>	<b>125</b>	<b>43</b>	<b>12</b>
<b>Semester 2</b>							
BIO 150 Microbiology	4	3	45	1	45		
NSG 152 Health Care Participant	3	2	30	1		37	8
NSG 170 Health/Illness Concepts	6	4	60	2	10	64	16
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>55</b>	<b>101</b>	<b>24</b>
<b>Semester 3</b>							
Elective	3	3	45				
NSG 210 Health Care Concepts I	5	3	45	2		74	16
NSG 211 Health Care Concepts II	5	3	45	2		66	24
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>140</b>	<b>40</b>
<b>Semester 4</b>							
NSG 230 Advanced Professional Nursing Concepts	2	2	30				
NSG 252 Complex Health Care Concepts	4	4	60				
NSG 270 Nursing Capstone	4			4		164	16
Humanities Elective – 200 level	3	3	45				
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>164</b>	<b>16</b>
<b>Curriculum total</b>	<b>67</b>					<b>448</b>	<b>92</b>
							<b>Total: 540</b>

## Advanced Placement Option LPN to ADN: 3 Semesters

Advanced Placement Option LPN to ADN							
Course	Credits	Active credits	Didactic contact hours	Clinical lab credits	Lab contact hours	Clinical contact hours	Simulation contact hours
<b>Prerequisites</b>							
BIO 141: Anatomy and Physiology I	4	3	45	1	45		
ENG 111: Composition I	3	3	45				
PSY 230: Developmental Psychology	3	3	45				
SDV 100	1	1	15				
ITE 119	3	3	45				
<b>Semester Total</b>	<b>14</b>	<b>14</b>	<b>195</b>	<b>1</b>	<b>45</b>	<b>0</b>	<b>0</b>
<b>Semester 1</b>							
BIO 142: Anatomy & Physiology II	4	3	45	1	45		
BIO 150: Microbiology	4	3	45	1	45		
NSG 115: Healthcare Concepts for Transition	4	3	45	1	45		
NSG 200: Health Promotion & Assessment	3	2	30	1	35	6 (health screenings)	4
<b>Semester Total</b>	<b>16</b>	<b>11</b>	<b>165</b>	<b>9</b>	<b>170</b>	<b>6</b>	<b>4</b>
<b>Semester 2</b>							
ENG 112	3	3	45				
NSG 210: Health Care Concepts I	5	3	45	2		74	16
NSG 211: Health Care Concepts II	5	3	45	2		66	24
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>140</b>	<b>40</b>
<b>Semester 3</b>							
NSG 230: Advanced Professional Nursing Concepts	2	2	30				
NSG 252: Complex Health Care Concepts	4	4	60				
NSG 270: Nursing Capstone	4			4		164	16
Humanities Elective – 200 level	3	3	45				
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>164</b>	<b>16</b>
<b>Curriculum total</b>	<b>56</b>	<b>56</b>	<b>630</b>	<b>18</b>	<b>215</b>	<b>310</b>	<b>60</b>
<b>Total Clinical Hours: 370</b>							
<i>Curriculum credit 11 and 150 clinical hours for LPN Licensure for a total 67 credits and 520 clinical hours</i>							

## Weekend Option: 5 semesters:

Weekend Option ADN							
Course	Course Credit hours	Didactic credits	Didactic contact hours	Clinical lab credits	Lab contact hours	Clinical contact hours	Simulation contact hours
<b>Prerequisites</b>							
BIO 141: Anatomy and Physiology I	4	3	45	1	45		
ENG 111: Composition I	3	3	45				
PSY 230: Developmental Psychology	3	3	45				
SDV 100: College Success Skills	1	1	15				
ITE 119: Information Literacy	3	3	45				
<b>Semester Total</b>	<b>14</b>	<b>13</b>	<b>195</b>	<b>1</b>	<b>45</b>		
<b>Semester 1 Summer (10 weeks)</b>							
NSG 100: Introduction to Nursing Concepts	4	4.5	45	1		37	8
NSG 106: Competencies for Nursing Practice	2	1.5	15	1	45		
NSG 130: Professional Nursing Concepts (online)	1	1.5	15				
NSG 200: Health Promotion & Assessment	3	3	30	1	35	6 Health screenings	4
BIO 142: Anatomy & Physiology II	4	3	45	1	45		
<b>Semester Total</b>	<b>14</b>	<b>13.5</b>	<b>150</b>	<b>4</b>	<b>125</b>	<b>43</b>	<b>12</b>
<b>Semester 2 Fall</b>							
NSG 170: Health/Illness Concepts	6	4	60	2	10	64	16
NSG 152: Health Care Participant	3	2	30	1		37	8
BIO 150: Microbiology	4	3	45	1	45		
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>55</b>	<b>101</b>	<b>24</b>
<b>Semester 3 Spring</b>							
NSG 210: Health Care Concepts I	5	3	45	2		74	16
NSG 211: Health Care Concepts II	5	3	45	2		66	24

ENG 112: Composition II	3	3	45				
<b>Semester Total</b>	<b>13</b>	<b>9</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>140</b>	<b>40</b>
<b>Semester 4 Summer (10 weeks)</b>							
NSG 230: Advanced Professional Nursing Concepts	2	2	30				
NSG 252: Complex Health Care Concepts	4	6	60				
NSG 270: Nursing Capstone	4					164	16
Humanities Elective – 200 level	3	3	45				
<b>Semester Total</b>	<b>13</b>	<b>11</b>	<b>135</b>	<b>4</b>	<b>0</b>	<b>164</b>	<b>16</b>
<b>Curriculum total</b>	<b>67</b>	<b>55.5</b>	<b>750</b>	<b>17</b>	<b>225</b>	<b>448</b>	<b>92</b>
<b>Total Clinical Hours: 540</b>							

### Student Learning Outcomes by Level:

<b>Level 1</b>	
Client Centered Care	<b>Demonstrate the use of therapeutic communication, caring behaviors and client self-determination in the provision of basic nursing care.</b>
	<ol style="list-style-type: none"> <li>1. Perform client-centered care with sensitivity and respect.</li> <li>2. Identify the learning needs of clients.</li> <li>3. Discuss importance of client self-determination in making healthcare decisions.</li> <li>4. Identify therapeutic communication skills when interacting with clients and the client's support network.</li> <li>5. Identify the needs of diverse individuals across the lifespan.</li> </ol>
Safety	<b>Report client safety issues and risks.</b>
	<ol style="list-style-type: none"> <li>1. Recognize human factors and safety principles.</li> <li>2. Identify hazards, near misses and errors.</li> <li>3. Identify client safety initiatives.</li> <li>4. Practice safe client care as a level 1 student.</li> </ol>
Clinical Judgment	<b>Apply the components of the clinical judgment across the lifespan.</b>
	<ol style="list-style-type: none"> <li>1. Define a standardized plan of care based on client values, clinical expertise and reliable evidence.</li> <li>2. Recognize changes in client status and intervene appropriately.</li> <li>3. Identify the steps in the nursing process to guide care.</li> <li>4. Identify principles of prioritization in the provision of client care.</li> <li>5. Define evidence-based practice and problem solving.</li> </ol>
Professional Behaviors	<b>Demonstrate professionalism and professional behaviors.</b>
	<ol style="list-style-type: none"> <li>1. Identify ethical behaviors and the importance of confidentiality when caring for clients.</li> <li>2. Demonstrate responsibility and accountability for the delivery of safe client care with direct supervision.</li> <li>3. Identify the scope of nursing practice for a beginning level student.</li> <li>4. Identify professional behaviors in interactions with clients, families, and healthcare providers.</li> <li>5. Discuss the purpose of reflective thinking in improving nursing practice.</li> <li>6. Define the role of lifelong learning in the nursing profession.</li> </ol>

Quality Improvement	<b>Identify the role of quality improvement and informatics in client care.</b>
	<ol style="list-style-type: none"> <li>1. List common quality measures encountered in clinical practice.</li> <li>2. List technology and information management tools used to identify and prevent potential errors in client care.</li> <li>3. Define fiscal responsibility in the delivery of client care.</li> </ol>
Collaboration	<b>Define the roles of the health care team.</b>
	<ol style="list-style-type: none"> <li>1. Recognize the effect nursing and other interdisciplinary team members have upon care processes and outcomes for clients and families within any healthcare setting.</li> <li>2. Identify how members of the interdisciplinary team provide safe interventions to achieve positive outcomes.</li> <li>3. Recognize different communication styles and cultural differences within the interdisciplinary team.</li> <li>4. Identify management skills and principles of delegation when working with other members of the healthcare team.</li> <li>5. Recognize your own strengths and weaknesses to improve individual as well as team performance.</li> </ol>
Pharmacology	<b>Identify the safety practices necessary for medication preparation and administration.</b>

<b>Level 2</b>	
Client Centered Care	<b>Assess diverse client values, beliefs, and attitudes as well as community resources related to health in the provision of client-centered care.</b>
	<ol style="list-style-type: none"> <li>1. Deliver client-centered care with sensitivity and respect.</li> <li>2. Develop a teaching plan based on assessed learning needs.</li> <li>3. Discuss the nurse's role in client self-determination in making healthcare decisions.</li> <li>4. Demonstrate therapeutic communication skills when interacting with clients and the client's support network.</li> <li>5. Discuss the needs of individuals, families, and communities across the lifespan.</li> </ol>
Safety	<b>Use safety measures when caring for clients in the community and health care agencies.</b>
	<ol style="list-style-type: none"> <li>1. Examine human factors and safety principles.</li> <li>2. Report hazards, near misses and errors to members of the healthcare team.</li> <li>3. Summarize client safety initiatives.</li> <li>4. Practice safe client care as a level 2 student.</li> </ol>
Clinical Judgment	<b>Differentiate relevant cues in the care of clients with acute and chronic conditions across the lifespan.</b>
	<ol style="list-style-type: none"> <li>1. Individualize a standardized plan of care based on client values, clinical expertise and reliable evidence.</li> <li>2. Interpret changes in client status and intervene appropriately.</li> <li>3. Develop a plan of care that demonstrates the nursing process with guidance.</li> <li>4. Use prioritization in planning client care with supervision.</li> <li>5. Compare and contrast evidence-based practices and participate in problem solving.</li> </ol>
Professional Behaviors	<b>Recognize the impact of personal beliefs, values, and attitudes in developing professionalism and professional behaviors.</b>

	<ol style="list-style-type: none"> <li>1. Recognize ethical behaviors and breaches in confidentiality that occur in client care situations.</li> <li>2. Demonstrate responsibility and accountability for the delivery of safe client care with guided supervision.</li> <li>3. Provide nursing care within the scope of nursing practice with supervision.</li> <li>4. Compare appropriate and inappropriate professional behaviors demonstrated in interactions with clients, families, and healthcare providers.</li> <li>5. Demonstrate reflective thinking for the purpose of improving nursing practice at the beginning level.</li> <li>6. Discuss the importance of lifelong learning in the nursing profession.</li> </ol>
Quality Improvement	<b>Use technology and information management tools in providing quality client care.</b>
	<ol style="list-style-type: none"> <li>1. Describe common quality measures encountered in clinical practice.</li> <li>2. Discuss technology and information management processes used to identify and prevent potential errors in client care.</li> <li>3. Summarize fiscal responsibility in the delivery of client care.</li> </ol>
Collaboration	<b>Examine the roles of the nurse and the health care team in community and acute care settings.</b>
	<ol style="list-style-type: none"> <li>1. Explain how nursing and other interdisciplinary team members influence care processes and outcomes for clients and families within various healthcare settings.</li> <li>2. Discuss how members of the interdisciplinary team work together to provide safe and effective care.</li> <li>3. Discuss the relevance of various communication styles and cultural differences when collaborating with members of the healthcare team.</li> <li>4. Compare and contrast skills and principles of delegation when working with other members of the health care team.</li> <li>5. Respond to constructive feedback to improve individual as well as team performance.</li> </ol>
Pharmacology	<b>Demonstrate preparation and administration of pharmacological therapies to include parenteral.</b>

<b>Level 3</b>	
Client Centered Care	<b>Apply principles of client-centered care to clients across the lifespan.</b>
	<ol style="list-style-type: none"> <li>1. Organize client-centered care with sensitivity and respect.</li> <li>2. Implement a teaching plan based on assessed learning needs.</li> <li>3. Promote client self-determination in making healthcare decisions as a level 3 student.</li> <li>4. Examine communication skills when interacting with clients and the client's support network.</li> <li>5. Advocate for diverse individuals, families, and communities across the lifespan with guidance.</li> </ol>
Safety	<b>Incorporate factors for improvement of client safety for clients across the lifespan</b>
	<ol style="list-style-type: none"> <li>1. Analyze human factors and implement safety principles.</li> <li>2. Examine hazards, near misses and errors to members of the healthcare team.</li> <li>3. Analyze client safety initiatives.</li> <li>4. Practice safe client care as a level 3 student.</li> </ol>
Clinical Judgment	<b>Apply clinical judgment when prioritizing the delivery of client-centered care across the lifespan</b>
	<ol style="list-style-type: none"> <li>1. Develop an individualized plan of care based on client values, clinical expertise and reliable evidence.</li> <li>2. Prioritize changes in client status with guidance and intervene appropriately.</li> <li>3. Independently develop a plan of care that demonstrates the nursing process.</li> <li>4. Prioritize client care using evidence-based practice with guidance.</li> </ol>

	5. Incorporate evidence-based practice into clinical problem solving.
Professional Behaviors	<b>Incorporate legal\ethical principles and professional nursing standards in the care of clients.</b>
	<ol style="list-style-type: none"> <li>1. Demonstrate ethical behaviors and confidentiality when caring for clients.</li> <li>2. Demonstrate increased responsibility and accountability for the delivery of safe client care with guidance.</li> <li>3. Organize nursing care to encompass the scope of nursing practice.</li> <li>4. Demonstrate professional behaviors in interactions with clients, families, and healthcare providers.</li> <li>5. Engage in reflective thinking for the purpose of improving your own nursing practice.</li> <li>6. Identify resources for creation of a lifelong learning plan.</li> </ol>
Quality Improvement	<b>Examine the impact of quality improvement processes, information technology and fiscal resources in the provision of nursing care.</b>
	<ol style="list-style-type: none"> <li>1. Apply common quality measures encountered in clinical practice.</li> <li>2. Utilize technology and information management to identify and prevent potential errors in client care.</li> <li>3. Performs fiscally responsible client care.</li> </ol>
Collaboration	<b>Participate as a member of the health care team in the delivery of nursing care to clients across the lifespan.</b>
	<ol style="list-style-type: none"> <li>1. Differentiate how interdisciplinary team members influence care processes and outcomes for clients and families within various healthcare settings.</li> <li>2. Collaborate with members of the healthcare team to provide safe and effective care with guidance.</li> <li>3. Demonstrate the ability to collaborate with members of the interdisciplinary team with various communication styles and cultural differences.</li> <li>4. Apply management skills and principles of delegation when working with other members of the healthcare team.</li> <li>5. Implement a self-appraisal process as a member of the interdisciplinary team.</li> </ol>
Pharmacology	<b>Integrate pathophysiology and principles of pharmacology in the delivery of client care in a variety of populations.</b>

<b>Level 4</b>	
Client Centered Care	<b>Provide client centered care promoting therapeutic relationships, caring behaviors, and self-determination across the lifespan for diverse populations.</b>
	<ol style="list-style-type: none"> <li>1. Coordinate client-centered care delivery with sensitivity and respect.</li> <li>2. Evaluate the effectiveness of teaching plans and outcomes and revise for achievement of desired outcomes.</li> <li>3. Promote client self-determination in making healthcare decisions as a level 4 student.</li> <li>4. Integrate therapeutic communication skills when interacting with clients and the client's support network.</li> <li>5. Advocate independently for diverse individuals, families, and communities across the lifespan.</li> </ol>
Safety	<b>Practice safe nursing care that minimizes risk of harm across systems and client populations.</b>
	<ol style="list-style-type: none"> <li>1. Evaluate human factors and safety principles.</li> <li>2. Participate in the analysis of errors and designing system improvements.</li> <li>3. Incorporate client safety initiatives into the plan of care.</li> <li>4. Practice safe client care as a level 4 student.</li> </ol>

Clinical Judgment	<b>Demonstrate nursing judgment through the use of clinical reasoning, the nursing process, and evidence-based practice in the provision of safe, quality care.</b>
	<ol style="list-style-type: none"> <li>1. Evaluate an individualized plan of care based on client values, clinical expertise and reliable evidence.</li> <li>2. Independently prioritize changes in client status and intervene appropriately.</li> <li>3. Apply the nursing process to guide care.</li> <li>4. Prioritize client care using evidence-based practice independently.</li> <li>5. Evaluate existing practices and seek creative approaches to problem solving.</li> </ol>
Professional Behaviors	<b>Practice professional behaviors that encompass the legal/ethical framework while incorporating self-reflection, leadership and a commitment to recognize the value of life-long learning.</b>
	<ol style="list-style-type: none"> <li>1. Incorporate ethical behaviors and confidentiality in the practice of nursing.</li> <li>2. Assume responsibility and accountability for delivering safe client care.</li> <li>3. Deliver nursing care within the scope of nursing practice.</li> <li>4. Evaluate professional behaviors in interactions with clients, families and healthcare providers.</li> <li>5. Engage in reflective thinking for the purpose of improving nursing practice.</li> <li>6. Develop a plan for lifelong learning in the nursing profession.</li> </ol>
Quality Improvement	<b>Manage client care through quality improvement processes, information technology, and fiscal responsibility to meet client needs and support organizational outcomes.</b>
	<ol style="list-style-type: none"> <li>1. Evaluate the common quality measures encountered in clinical practice.</li> <li>2. Evaluate use of technology and information management to promote quality.</li> <li>3. Evaluate fiscally responsible client care.</li> </ol>
Collaboration	<b>Demonstrate principles of collaborative practice within the nursing and healthcare teams fostering mutual respect and shared decision-making to achieve stated outcomes of care.</b>
	<ol style="list-style-type: none"> <li>1. Compare and contrast the effectiveness of the members of the interdisciplinary team to promote optimal client outcomes.</li> <li>2. Participate in the interdisciplinary plan of care to promote optimal client outcomes.</li> <li>3. Evaluate communication strategies that are inclusive of various communication and cultural differences.</li> <li>4. Evaluate management skills and principles of delegation when working with other members of the healthcare team.</li> <li>5. Reflects at a professional level on individual and team performance.</li> </ol>
Pharmacology	<b>Manage the appropriateness, accuracy, and client response to pharmacology principles for clients with complex conditions.</b>



## Concepts and Exemplars by Course:

Concept	Level 1				Level 2		Level 3		Level 4	
	Introduction to Nursing Concepts: NSG 100	Competencies for Nursing Practice: NSG 106	Health Promotion and Assessment: NSG 200	Professional Nursing Concepts I: NSG 130	Health Care Participant: NSG 152	Health/ Illness Concepts: NSG 170	Health Care Concepts I: NSG 210	Health Care Concepts II: NSG 211	Complex Health Concepts: NSG 252	Advanced Professional Nursing Concepts: NSG 230
Health and Illness										
Acid-base balance									Metabolic acidosis and alkalosis Respiratory acidosis and alkalosis	
Addiction							Alcoholism Substance abuse Prenatal substance abuse			
Anxiety								Generalized anxiety disorder Phobias Obsessive Compulsive Disorder Panic Disorders Post-traumatic stress disorder		
Cellular Regulation						Breast cancer Colon cancer Leukemia (child)				
Clotting							Deep vein thrombosis Disseminated			

							intravascular coagulation HELL P Syndrome Postp artum hemorrhage/ placenta previa/ placental abruption			
Cognition			Assessme nt of mental status					Develop mental delay: Spectrum disorders Attentio n-Deficit/ Hyperactive disorder Delirium Alzheim er's disease/ dementia		
Comfort/ Rest	Osteoa rthritic pain (chronic) Post-s urgical pain (acute) Insom nia Sleep apnea									
Elimination	Incont inence: bladder & bowel Benign prostatic hypertrophy Urinar y retention Consti pation Diarrh ea	<u>Urinary:</u> insertion and maintenance of urinary catheter; bladder irrigation; use of bed pan, urinal, and commode; intake and output; specimen collection <u>Bowel:</u> enemas; rectal tubes; colostomy appliances; specimen collection	Assessment of the gastrointestinal and urinary systems							
Fluid and Electrolyte						Specifi c electrolyte imbalances Dehyd ration			Acu te kidney injury Chr onic renal failure	

						Fluid volume overload				
Gas Exchange	Post-surgical atelectasis Viral/bacterial bronchitis	Coughing and deep breathing Incentive spirometry use Oxygen delivery equipment Artificial airways Suctioning: oral, tracheal, naso-tracheal Specimen collection	Assessment of the respiratory system Respiratory monitoring and pulse oximetry measurement			a-child adult as Asthma COPD- Anemia	Tuberculosis Cystic fibrosis (pediatric)		Acute respiratory distress syndrome Pneumothorax	
Grief & Loss					Loss of a child at birth Sudden infant death syndrome (SIDS) Children's response to loss End-of-life care Amputation					
Immunity								Human immunodeficiency virus (HIV) infection and acquired immune deficiency syndrome (AIDS) Anaphylaxis Systemic lupus erythematosus Organ transplant		
Infection	Methicillin Resistant Staphylococcus aureus (MRSA) infection Clostridium difficile (C. diff) infection Urinary tract infection	Hand hygiene Personal protective equipment Sterile gloving and sterile fields			Pneumonia Otitis media (child) Meningitis (adolescent) Respiratory Syncytial Virus (infant)				Sepsis across the lifespan	

Inflammation								Acute inflammation Inflammatory bowel disease Gastro-esophageal reflux disease Rheumatoid arthritis	Hepatitis Cirrhosis Pancreatitis Cholecystitis	
Intracranial Regulation			Assessment of the neurological system						Cerebral vascular accident Seizures (child and adult) Traumatic brain injury	
Metabolism						Diabetes mellitus type 1 and 2 (across the lifespan) Gestational diabetes	Thyroid dysfunction Adrenocortical dysfunction Pituitary dysfunction			
Mobility	Chronic low back pain Immobile client on bedrest	Proper body mechanics Client transfers Client positioning Use of assistive mobility devices Range of motion	Assessment of the musculoskeletal system				Fractures Osteoporosis Hip and knee replacement Hip dysplasia (infant) Multiple sclerosis Unintentional injury across the lifespan		Spinal cord injury (adult) Spina bifida (pediatric) Parkinson's disease	
Mood and Affect								Depression Postpartum depression Bipolar disorder Suicide		
Nutrition	Obesity: children and adults Malnutrition (older adult)	Feeding clients Aspiration precautions Nasogastric tube care, insertion, irrigation, and					Eating disorders			

		connecting to suction Enteral feedings via NG or PEG Blood glucose monitoring								
Perfusion			Assessment of the cardiovascular system Blood pressure and pulse measurement Assessment of the lymphatic system			Hypertension Peripheral vascular disease Pre-eclampsia	Coronary artery disease Congestive heart failure		Shock Multiple organ dysfunction syndrome Arrhythmias Congenital defects (infant/ child)	
Pharmacology Principles	Pharmaco-therapeutics Pharmacodynamics	Medication administration: oral, topical, and parenteral Drug dosage calculations: conversions; oral and parenteral dosage Needle safety								
Psychosis								Schizophrenia		
Reproduction			Assessment of the genitalia Breast assessment Assessment of the pregnant female			Antepartum	Intrapartum Postpartum Newborn assessment			
Sensory Perception			Assessment of the head, neck, nose, mouth, and throat Assessment of the eyes and ears					Cataracts Glaucoma Hearing loss Peripheral neuropathy		
Sexuality						Family planning Sexually transmitted infections				

						Erectile dysfunction Menopause				
Stress and Coping						Physical response/disease Separation anxiety (child)				
Thermoregulation						Fever Environmental hypothermia and hyperthermia Premature/newborn hypothermia				
Tissue Integrity	Pressure injury Surgical wounds Cellulitis (pediatric)	Pressure care Surgical care Cellulitis (pediatric)	Wound care Removal of sutures and staples Heat & cold application	Assessment of the skin Temperature measurement					Burns	
Violence								Child abuse Elder abuse Intimate partner violence		
Health Care Recipient										
Culture						Sexual orientation Cultural preference in situations across the lifespan				
Development						Developmental delay in the child Developmentally challenged adults				
Functional Ability	Dehydration	Blindness Confusion	Hygiene care							
Family Dynamics						Ageing of family members				

					Expanding family Chronic illness of a family member					
Health Care Disparities					Homelessness Veterans Lower socio-economic status					
Health Promotion/ Adherence/ Motivation			Risk factor modification: smoking, exercise, diet, and vaccinations across the lifespan							
Patient Education					Diabetes education Pre-operative teaching					
Spirituality					Spiritual distress					
Professional Nursing and Healthcare										
Caring/ Advocacy					Patient Bill of Rights Compassion Fatigue					
Clinical Judgment/ Nursing Process	Plans Concept Maps	Care Concept								
Communication			Health history Electronic health record and documentation							Conflict resolution Lateral violence Civility in the workplace
Coordination of Care										Delegation Priority setting Emergency triage Bioterrorism

Ethics				Advanced directives Confidentiality					Peer review Virginia Peer Assistance program for nurses Ethical dilemmas
Evidence				Practice guidelines Nursing research Expert opinion					
Healthcare policy/ Health Care Economics									Regulatory agencies Financing access: Medicare, Medicaid, health insurance Accrediting bodies
Informatics				Electronic health record Consumer health informatics					Clinical decision support systems
Leadership									Styles of leadership Change management Team building
Legal Issues				Health information portability and accountability act (HIPAA) Informed consent Restrictions Licensure Mandatory reporting					
Professionalism				Social media practices Attributes of the profession					



Safety	Medication Errors Interprofessional communication	Fall Precautions Restraints								
Teamwork/ Collaboration				Interdisciplinary plan of care Hand-off reporting Chain of command Patient rounding						
Quality										Magnet designation Root cause analysis Hospital consumer assessment of healthcare providers and systems

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## **Nursing Program History:**

In 1982, Southside Virginia Community College offered the first year of an Associate Degree in Nursing Program in affiliation with J. Sargeant Reynolds Community College in Richmond, VA. This affiliation was successful for twenty years.

By the summer of 2000, several local health care agencies' representatives were quite concerned about the nursing shortage in the SVCC service area. They believed that traveling to Richmond for the second year of the program was a major hindrance to many potential nursing students, as well as to Licensed Practical Nurses who wanted to become Registered Nurses. Four service area hospitals offered to provide the funding for the second year of a Registered Nursing Program. Together, Community Memorial Hospital, Greensville Memorial Hospital, Halifax Regional Hospital, Southside Community Hospital, and SVCC organized a drive to obtain permission from the Virginia Board of Nursing to begin a local Associate Degree in Nursing Program.

In July 2001, permission was granted from the Virginia Board of Nursing for SVCC to hire a program director. The Board of Nursing gave provisional approval on March 20, 2002, allowing SVCC to admit students to the new nursing program for fall 2002. The fall 2001 Nursing Class was the last class to be admitted into the cooperative nursing program with JSRCC.

The four hospitals and SVCC organized and funded a "Live Here, Learn Here, Work Here" marketing campaign to advertise the new program. By May 6, there were 331 applicants for the Fall 2002 nursing class. Both Alberta and Keysville campuses opened programs. Subsequently, South Boston cohort started with admitting first year students that transferred and joined the Keysville cohort in their senior year. In 2008, South Boston had both first and second year instruction on site.

In 2010, the program started the Accreditation Commission for Education in Nursing (ACEN) candidacy process and submitted the presentation in March of 2013. The self-study was written in the fall of 2015 and the site visit followed in October 2015. SVCC received the formal notification of ACEN Board of Commissioner's grant of initial accreditation March 30, 2016.

In the Spring of 2017, The Virginia Community College System (VCCS) launched a statewide Concept Based Curriculum (CBC) with Virginia BON approval. Four pilot colleges were started in the Fall of 2017. In March of 2018, SVCC submitted a sub-change report to ACEN for the curriculum. SVCC adopted the Concept Based Curriculum for the ADN program in Fall of 2018. ACEN approved the sub-change report in November 2018.

Summer of 2021, the Advanced placement LPN to RN program resumed with the summer portion at the Estes Center in Chase City then transitioned to senior year at assigned sites. In the Summer of 2022, SVCC started a new weekend program option at the Estes Center in Chase city for 4 semesters.

## Nursing Program Policies

### **Essential Nursing Performance Standards:**

Students admitted to Southside Virginia Community College nursing programs can be expected to complete course requirements, which necessitate certain physical and mental abilities. Any student who thinks he/she does not possess one or more of the following skills should seek assistance from an academic counselor or nursing faculty advisor and special needs counselor concerning any flexibility in program requirements and possible accommodation through technical aids and assistance.

- **Speech:** Establish interpersonal rapport and communicate verbally and in writing with clients, physicians, peers, family members and the health care team from a variety of social, emotional, cultural and intellectual backgrounds.
- **Hearing:** Auditory acuity to note slight changes in the client's condition and to perceive and interpret various equipment signals, and to use the telephone.
- **Vision:** Possess the visual acuity to read and distinguish colors to read handwritten orders, and any other handwritten and printer data, i.e., medication records, and scales; chart content and provide for safety of clients' condition by clearly viewing monitors and scales in order to correctly interpret data.
- **Mobility:** Stand and/or walk six (6), eight (8), or twelve (12) hours/day. Walk for prolonged periods from one area to another over an eight-hour period. Bend, squat or kneel. Assist in lifting or moving clients of all age groups and weights. Perform CPR i.e., move above the patient to compress the chest and manually ventilate the patient. Work with arms fully extended overhead.
- **Manual Dexterity:** Demonstrate eye/hand coordination or manipulation of equipment and sufficient tactile ability to differentiate changes in sensation, e.g., syringes, infusion pumps, life-support systems.
- **Fine Motor:** Use hands for grasping, pushing, pulling, and fine manipulation and possess tactile ability sufficient for physical assessment.
- **Mentation:** Maintain reality orientation for at least an eight-hour period of time. Assimilate and apply knowledge acquired through lectures, discussions and readings. Comprehend and apply basic mathematical skills, e.g., ratio and proportion concepts, use of conversion tables, and calculation of drug dosages and solutions. Comprehend and apply abstract concepts from biological, sociological, and psychological sciences.
- **Smell:** Olfactory ability sufficient to monitor and assess health needs.

- **Writing:** Communicate and organize thoughts to prepare written documents that are correct in style, grammar and mechanics.

Despite the foregoing, a qualified person with a disability who can perform those essential functions with reasonable accommodation will be considered for admission along with other qualified applicants. SVCC is committed to serving persons with physical and learning disabilities. A goal of SVCC is to provide equal access to all students who desire to pursue a post-secondary education. Students who have a learning disability or a physical handicap are encouraged to contact the Student Services Office four to six weeks prior to their enrollment at SVCC.

Accommodations are based on the student's diagnosis. Therefore, documentation of the disability is required. Students without documentation may seek the services of their local Department of Rehabilitation Services for evaluation. Once documentation of the disability has been received, special services can be arranged. Accommodations may include tutoring, note taking, alternate forms of testing, interpreters, taped texts, scheduling considerations and/or counseling.

### **Advising:**

Nursing students will be assigned a Nursing Faculty Level Program Advisor upon admission to the Nursing program. The Program Advisor will be available to answer any questions you may have about your program up through graduation and beyond as you prepare for the next step in your educational journey.

### **Application for Graduation:**

- Application for graduation must be completed by the dates set by the college and announced each academic year. All nursing coursework must be completed and certified by Admissions and Records in order to participate in Pinning and Commencement exercises.
- SVCC's Commencement is one time per year at the end of the spring semester. Graduation applications are due to the program director by March 1<sup>st</sup> each year.
- Steps to register for the NCLEX are located at: <https://www.ncsbn.org/nclex.htm>

### **Academic Honesty:**

The nursing faculty of Southside Virginia Community College recognizes that academic honesty is an integral factor in developing and sharing knowledge. We support the concept of academic honesty, practice academic honesty in class, lab and clinical settings, and require academic honesty from our students. SVCC students are expected to maintain complete honesty and integrity in the completion and presentation of all academic assignments, examinations and clinical assignments. Students found guilty of cheating, plagiarism, or other dishonorable acts in academic or clinical work are subject to dismissal from the nursing program.

Academic dishonesty is cheating and stealing. Academic dishonesty includes, but is not limited to:

- Quizzes, tests, examinations, and any of the items thereon are the property of the faculty. Transmission or duplication of any of these items in any form shall be considered a violation of academic honesty.
- Intentionally using material from any source without giving credit. Copying verbatim from an internet source is plagiarism.
- Rewriting material from a source without giving credit.
- Any student who gives assistance or receives assistance to or from another student during any individually graded assignment shall be considered to have cheated and will be referred to the program coordinator. This can include but is not limited to:
  - Submitting the work of another person as your own work.
  - Using/copying work from another student's electronic storage device and submitting it for a grade.
  - Copying from another person's paper/test/homework including that time in designated proctored testing.
  - Allowing someone else to copy/use your work (paper, homework, quiz, test) and submitting it for a grade.
  - Using or copying previous work and attributing the findings and assessments to a current patient or assignment.
  - Having artificial intelligence write the assignment
- Violating VCCS Computer Ethics Guidelines in the pursuit of academic studies.
- Falsifying patient information in the completion of clinical and classwork assignments.
- Any student who post/sells or distributes any course material, graded assignments or testing materials to an outside source for example: Chegg, course hero, etsy and study.com will be considered as academic dishonesty and may be dismissed from the program. If this occurs after graduation could be subject to reporting to the Board of nursing and in violation of copyright laws.

## **Procedure for Academic Dishonesty:**

In a quiz/ test/ exam situation:

The faculty will:

- Stop the test/exam/quiz.
- Ask the student to leave the room, and wait to meet with the faculty at the conclusion of the testing time.
- Inform the student that a conference will be held with the program coordinator at which time the procedures for academic dishonesty as written in the SVCC catalog will be initiated.

## **Nursing Department Sanctions:**

Violation of the academic integrity policy will result in one or more of the following sanctions:

- Assignment of a failing grade (0 – 79.9% for the test/exam/quiz) chosen at the discretion of the instructor.
- Assignment of a grade reduction for the course.
- Assignment of a failing grade for the course.
- Dismissal from the nursing program.

The Academic Honesty Policy for SVCC can be found in the student handbook located in the college catalog and the college website.

**Academic Hour:** *Academic Hour (Credit) Definition: 1 hour = 1 fifty-minute hour.*

**Content Credit Hour:** One (1) content credit equals 15 academic hours over the course of a semester (1 content credit = 15 contact hours). Example: 2 content credits = 2 fifty (50) minute hours of content per week in a fifteen-week semester for a total of 30 contract hours per semester. The student and faculty have contact for a total of 30 fifty (50) minute hours in the semester.

**Lab/Simulation/Clinical Credit Hour:** One (1) lab/clinical credit equals 45 academic hours over the course of a semester (1 lab/clinical credit = 45 contact hours.) Example: 4 lab/clinical credits = 12 fifty (50) minute hours of lab/clinical per week in a fifteen-week semester for a total of 180 (50 minute) hours of lab/clinical in the semester. In creating the lab/clinical schedule, fifty (50) minute contact hours are converted to sixty (60) minute contact clock hours.

## **Attendance Policy:**

Attendance is expected for all class, clinical, lab, and simulation environments.

## **Requirements:**

Class: This program has a mandatory attendance rate required in order to pass a course. This course requires weekly attendance. A student who misses two class meetings (12% of the class hours) (excused or unexcused) will be placed on probation. A student who missed three class meetings (excused or unexcused) will be dropped from the course with a grade of “W” or “F” depending on the date last attended and established college deadlines.

- Any make-up work for excused absences must be completed or scheduled for completion within one week of the absence as scheduled by the instructor or at the instructor’s convenience.

Clinical:

- All clinical/lab time must be **made up to complete** the required number of clinical hours for the course.
- For NSG 100, NSG 106, NSG 152, NSG 170 and NSG 200: Students that miss one clinical, simulation, or campus lab (12% of the clinical hours) will be placed on probation (excused or unexcused). If a student misses a second clinical, simulation, or campus lab they will be dismissed from the nursing program.
- For, NSG 210, NSG 211, and NSG 270, students that miss two clinical/simulation rotations (12% of the clinical hours) will be placed on probation (excused or unexcused). Students that miss three clinical/simulation rotations will be dismissed from the nursing program.

**Additional requirements:**

- The student must notify the instructor of the reason for any class/clinical/campus laboratory absence(s) **prior** to the missed session via email/phone/text except in cases where extenuating circumstances prevent this. Voice mail messages or communication with other students will not be accepted.
- Extenuating circumstances will be evaluated on an individual basis should a student not be able to notify the instructor **prior** to the beginning of the class, lab, clinical, or simulation session. The faculty member has the final decision to determine a situation as extenuating.
- **Tardiness:**  
The student, who is tardy for any reason to class without **prior** notification of the instructor, will be denied admission to the class session until next break. If the student is not admitted to the session, the absence will be documented as unexcused.

Tardiness to college lab, simulation or the clinical setting, without **prior** notification of the instructor, may be dismissed from the clinical or laboratory



setting. This will result in an unexcused clinical absence and will require make-up.

- Students may not leave a clinical, lab, or simulation setting unless dismissed by the clinical instructor or preceptor. If a student leaves the clinical, lab, or simulation environment **prior** to the completion of a clinical, lab, or simulation session, the instructor will determine whether or not the experience will be counted as an absence based upon factors such as number of hours attended and completion of objectives. Students are not allowed to leave any clinical facility without verbal permission from their clinical instructor or preceptor. Leaving a clinical setting without permission will be considered patient abandonment and will result in immediate dismissal from the nursing program.
- Students shall inform the instructor **prior** to starting the clinical day when taking any medication which may result in cognitive or physical impairment that could be interpreted as signs of drug or alcohol abuse.
- Attending clinical under the influence of drugs or alcohol will be grounds for dismissal from the nursing course program. Any student with suspected or acknowledged drug and or alcohol abuse shall be required at his/her expense to be evaluated by a healthcare provider. Re-admission to the nursing program is dependent upon the results of the evaluation and any recommendations.
- **Flu Exception.** Students may miss up to 2 consecutive clinical days with a documented note from their physician stating that the student has the Flu. The 2 consecutive days will count as 1 clinical absence. In accordance with CDC guidelines students will not be allowed to attend clinical until they have been 24 hours without fever reducing medication. Students will be required to make-up the clinical days missed at a later date during the semester. Failure to do so will result in an unsatisfactory grade for clinical.
- **COVID 19 Exception:** Students may miss clinical days with a documented note from their medical provider stating that the student has COVID 19. In accordance with CDC guidelines **Persons with COVID-19 who have symptoms** and were directed to care for themselves at home may discontinue isolation under the following conditions and are eligible to return to work/school:
  - At least 24 hours have passed since resolution of fever without the use of fever-reducing medications **and**
  - Other symptoms have improved.
  - Please notify the SVCC covid team and your instructor

Students will be required to make-up the clinical days missed at a later date during the semester or received an incomplete for the course until completed. Failure to do so will result in an unsatisfactory grade or an incomplete for clinical.

### Testing:

- Attendance is expected for all tests, exams, and quizzes.
- No quiz, test, exam, or ATI integrated test may be retaken.
- To receive full credit for a makeup test, a student must call the instructor **prior** to the beginning of the scheduled test or exam and arrange for a makeup test at that time. Make-up tests must be made up within **5 business days** unless other arrangements have been made with faculty. The instructor will decide whether to accept the given reason as an emergency to qualify as an excused absence. If absence is unexcused, **10 points** will be deducted from their test. Faculty reserves the right to give the test in an alternate format (i.e. short essay, fill-in-blank, matching, etc.).

**Online Testing:** When you are testing from a remote setting, please adhere to the following policy:

- You must be seated at a desk or table that is clear of all unauthorized material.
- The exam must be completed alone in a private location, with no distractions. Turn off your phone, t.v, and music. Your testing environment must remain secure throughout the exam. No other individual may remain or enter into the testing area for the duration of the exam. The environment must be well lit for the exam.
- You may not leave the webcam viewing area or move your webcam while testing. External cameras should be placed on the lid of the laptop or desktop where it will have a constant, uninterrupted view of the exam taker.
- You must keep your gaze centered on the webcam at all times.
- Your face and ears must be visible at all times. Clothing that obstructs the view of the face and ears such as hoods, hats, headbands, etc. are not permitted. No headphones or earbuds are allowed.
- There is to be no talking out loud or communicating with others during the exam (with the exception of the faculty member in an emergency). You may send a private zoom message to the instructor if there is a problem. Cell phones should be face down with all ringers, alarms, and notifications silenced. If you become disconnected from the internet, text or call the instructor to make them aware of the issue unless otherwise instructed.
- IF any testing issue occurs during the exam, you **MUST** notify the instructor via email immediately **BEFORE** continuing your test.

### **Testing Procedure- Onsite**

- Sit in every other seat OR separate from other students as much as possible.
- Faculty may assign seats for tests if needed.
- Close and secure all notebooks, papers, book bags away from the testing area.
- Keep your eyes focused on your computer screen; do not let your eyes wander in the direction of others' computer screens.
- No personal calculator or tape recorders allowed. Calculators will be provided by the instructor within the testing system. No cell phones or watches, or other

electronic devices allowed in the classroom. No water or drink bottles or food/snack/candy items. Ear plugs are allowed but only made of wax or foam.

- No writing on white boards until instructed by the instructor to start the exam.
- Once a student has completed the exam, the student must leave the room and not return until the assigned time stated by the proctor. Do not gather or congregate outside of the testing room.

### **Exam/Test Reviews**

- Following each unit exam/test, the faculty member will make a comprehensive analysis of exam results and make any necessary adjustments prior to official posting of the grades.
- All students have the right to review their exam/test at a scheduled time with the instructor. Students will have one week to review a test/quiz with their instructor. Exam/test reviews may be scheduled for exams/tests with the exception of final exams. The purpose of the review is to: Identify the rationale behind the questions and answers, Improve test-taking skills, and to provide students an opportunity to verify their exam score.
- Students will not be permitted to take any notes during test reviews. Pens, pencils, paper, cell phones or recorders are not permitted during any test review. The student may only discuss a test question with a faculty member during individual review sessions.
- Students who disagree with a test question, must submit the question in writing on the “Request to Review a Quiz/Exam Item” form along with their rationale to faculty no later than 2 pm on the day the test is administered unless otherwise noted by the instructor (i.e. the test is administered after 2 pm).
- No retests are permitted in courses. Please see the Test Attendance Policy for further information.
- Quizzes, tests, examinations, and any of the items thereon are the property of the faculty. Transmission of any of these items in any form shall be considered a violation of academic honesty. Any student who gives assistance or receives assistance to or from another student during any individually graded assignment shall be considered to have cheated and will be referred to the program head. Refer to the SVCC Nursing Program Student Policies.
- It is at the faculty’s discretion if a group review is conducted after a test.
- Final grades will be posted within 7 days from the date the test was administered.
- There will be no discussion of test questions between students and faculty on the day of the test.

## Grading:

- The student's knowledge and understanding will be evaluated by both oral and written assessments. A final grade of 80% (C or better) will be required in order to continue in the nursing sequence. Clinical laboratory performance must also be maintained at a satisfactory level, which is also 80%, in order to continue or to receive credit for the course.
- An 80% or better average in the unit of nursing usually correlates with success on the NCLEX exam.
- The grading scale for the nursing program is as follows:

A	=	92-100
B	=	84-91
C	=	80-83
D	=	70-79
F	=	Below 70

- No rounding of grades is permitted in the nursing program. For example, if a student earns a 79.9, that will be the score assigned. The grade will not be rounded to 80. Grades are not negotiable.

**Retention:** Faculty have several items in place to assist with retention of students within the program.

- Use of SVCC Navigate system to collaborate with college resources for students with academic issues. Used as needed and twice a semester.
- Clinical evaluations and discussions on academic progress.
- Midterm self and instructor evaluations on academic progress.
- Encourage test remediation if the score is below the required 80% one on one with faculty.
- SVCC student service, the learning commons for assistance, and any other resources available to assist with test taking and study skills.

## Clinical/Simulation Grading

### All clinical Courses except for NSG 270

- The clinical grades are either “pass” [satisfactory], “needs improvement” or “fail” [unsatisfactory]. “Satisfactory” (S) means the successful completion of all stated clinical objectives. “Needs improvement” means remediation is required. “Unsatisfactory” (U) means the unsuccessful completion of a specific clinical objective.
- Students are expected to complete all required learning activities before coming to the clinical, lab, or simulation setting. Students who are unprepared may be dismissed from that session, will receive a grade of "U" with a written warning in

the narrative section of the clinical evaluation tool, and will be required to make up that session at a time scheduled by the instructor. This also includes coming to the clinical session without the proper equipment and paperwork

- The student must achieve 80% grading in the clinical/simulation environment to pass all clinical courses.
- If a student is determined to be unsatisfactory in the clinical setting that results in dismissal from the course or the program, the student will earn either a D or F as the final grade for the course depending on what the classroom grade is.
  - Example: If a student receives a "D or "F" in the classroom and an "Unsatisfactory" in clinical, she/he will receive a final grade of "F."
  - If a student receives a "C" or above in the classroom and an "Unsatisfactory" in clinical, she/he will receive a final grade of "D."
  - If a student receives "D" or "F" in theory and a "Satisfactory" in clinical, she/he will receive the classroom letter grade as the final grade.
- NSG 270 Grading is clarified in the course syllabus

### **Clinical Remediation**

If clinical remediation is recommended by a faculty member, the student must complete the required time of remediation prior to re-entering the clinical setting. The number of remediation hours will be assigned by the clinical instructor. If a student does not complete the assigned remediation time, the student will not be permitted to re-enter the clinical setting resulting in an unsatisfactory for the clinical day and an unexcused clinical absence. Please refer to the attendance policy and the policy on satisfactory clinical scores.

### **ATI and LWW E-book**

- The ATI testing package is required of students in each semester. It is a comprehensive package of skills videos, practice testing, diagnostic & predictor testing and an NCLEX review at the end of your program. The fee for the package will be paid at the bookstore and payment will be required each semester. Returning students do not need to pay this fee on their repeat semester.
- LWW E-book and Course point access is required of students to purchase annually. The fee for the package is paid at the bookstore. This will be included in new student's tuition.

### **Audio Taping**

Due to potential HIPAA violations and copyright issues, students will not be allowed to audiotape nursing lectures. If a student feels that he/she has a disability that may require a special exception to this policy, he/she will need to discuss this with the disability officer in student services and obtain an exception. This exception will need to be provided to the nursing faculty teaching the course and in turn, the faculty will have the student sign a waiver. This waiver will be maintained in the students file and violation of any portion of the waiver will result in immediate revocation of this privilege and could lead to further disciplinary action. Lecture capture is used at faculty discretion.

### **Dress Code:**

- Students will wear the school uniform in the clinical and simulation settings. Students will wear the official school uniform in its entirety (pants, top, or skirt). Some courses require adaptations of this policy.
- Students must also adhere to any additional dress codes required by the clinical agencies. If you have any questions about the rationales supporting the dress code, consult your instructor.
- Students in uniform must meet the following standards:
  - **Uniform:** The uniform must be well fitted without evidence of being tight: no creases, rolling or pulling. The length of the dress style uniform must be below the knee. Lab coats are not to be worn during the clinical hours. No sweat tops, turtlenecks, or knit cuffed pants are to be worn. Turtlenecks or a long sleeve white shirt may be worn under the uniform top. Undergarments should not be visible through the uniform. A facility ID badge is to be worn on the uniform top as required by facility policy. The uniform must be pressed, in good repair with no obvious stains.
  - **Foot and Leg Wear:** Women will wear long white hose with the dress-style uniform. White socks may be worn ONLY with the pants uniform. Men will wear white socks. Shoes must be clean, solid white and ALL LEATHER. No clogs, slides, sandals, or canvas shoes may be worn. No athletic shoes displaying color logos or letters may be worn.
  - **Hair:** Hairstyles must be clean, well kept, conservative and neatly arranged above the uniform collar. Beards, mustaches, and sideburns must be neatly trimmed. Caps or hair coverings may be worn but must be solid white or burgundy . All hair accessories must be white, black, brown, or tan. Ponytails must be off of the collar and not hanging down the back.

- o **Jewelry:** Jewelry will be minimal and limited. ONLY a wedding band, a watch that measures seconds and minutes, and – if desired – no more than one pair of SMALL STUD earrings will be worn in the earlobe only. Loop earrings and necklaces are prohibited since they may catch on equipment or may be pulled by patients and cause damage to the wearer.
- o **Nails:**
  - Absolutely NO nail polish is allowed;
  - Fingernails must be clean and no longer than the ends of the fingertips. Artificial nails or tips may not be worn as they pose an infection risk for the patients and the nurse.
- o **Miscellaneous:**
  - No perfume, cologne or after-shave is to be worn in the clinical setting. Make-up must be discreet and of limited quantity.
  - Tattoos or body art must be covered.
  - All students must be clean, neat, and odor free.
  - Equipment needed in the clinical setting includes: stethoscope, bandage scissors, ballpoint pen of the color required by the particular agency, pocket notebook, a watch with a second hand and a penlight.
- When representing themselves as SVCC nursing students or visiting in the clinical setting to receive patient assignments prior to the actual clinical laboratory, students will dress in a professional manner as follows:
  - Socks or hosiery must be worn at all times.
  - The uniform lab coat must be worn with the student's SVCC ID prominently displayed when in the clinical laboratory setting.
  - The students must also wear other identification as required by the clinical agencies.
  - Jeans or other denim clothing, short skirts or dresses, halter and tank tops, shorts, tee shirts, sweatshirts, or sweatpants are not appropriate business attire and may not be worn at any time.
  - Sandals, thongs, tennis shoes, and flip-flops are not permitted.

## **Nursing Laboratory**

The nursing lab will be utilized by nursing students to enhance student's confidence and competence regarding various nursing skills. The following general guidelines will be utilized in the laboratory setting:

## **Nursing Lab Appearance**

As a courtesy to all who use the lab, this academic learning center will need to be maintained and returned to an orderly fashion when not in use. When the day or practice time is complete, please ensure that the lab is left in the following manner:

- Beds in the lowest position and wheels locked
- A fitted/flat sheet and spread with a pillow on each of the beds
- Privacy curtains drawn back against the walls
- Overhead tables placed at the foot of each bed
- Chairs pushed underneath the table/computer desk
- Supplies and equipment returned to the appropriate cabinet/equipment room.
- Food and Drinks: No food or drinks are allowed in the Nursing Labs.

## **Nursing Lab Equipment**

- No equipment (i.e. manikins, blood pressure cuffs, etc.) shall be removed from the campus nursing lab settings without the pre-approval of the nursing faculty
- Nursing lab storage room/cabinets are off limits to nursing students, unless indicated by the nursing faculty.
- The linen in the nursing lab will be used for practice purposes. Please do not remove the linen from the lab setting for personal use.

## **Remediation Lab**

Open lab opportunities are provided to all nursing students throughout the semester to allow students to:

- Practice skills.
- Receive needed assistance on skills.
- Review or make up previously learned content. The open lab instructor will not re-teach content.
- Complete remediation as assigned by the instructor.

Open lab availability times will be offered on each campus. The Nursing Faculty will notify students of the designated times for open lab every semester.



## **Student Responsibilities for Remediation Lab**

- Sign up for open lab time with your nursing instructor at least 24 hours in advance.
- When signing up for a remediation lab, specify what specific assistance is needed. (i.e., “Practice BP.” or “Watch Restraint Video,” not “Missed lab on 9/22.”)
- Prior to coming to Remediation Lab, complete preparatory work as assigned.
- If a student signs up for Remediation Lab and is unable to attend, the student should notify the instructor as soon as possible

## **Nursing Lab Policies, including Use of Syringes/Needles Policy**

Syringes/needles will be given to students for use in the lab only. Students are to practice parenteral/injectable routes of medication administration in the College’s nursing laboratory **ONLY** under the supervision of nursing faculty on designated instructional models. **Under no circumstance** are students injecting each other at any time. After practicing the parenteral/injectable route of medication administration and demonstrating skill competency to the nursing faculty in the college’s nursing laboratory, ALL syringes/needles are to be disposed in designated red “sharps” containers in the nursing laboratory. When “sharp” containers are full, the College will dispose of the containers according to the college’s hazardous materials procedure. This includes IV catheters.

## **Simulation Lab Policies**

### **Mission**

The SVCC Nursing Simulation Lab is committed to the success of the nursing students by providing an educational foundation, through the use of simulation technology, that will enable them to care for individuals, families, and communities.

### **Vision**

The SVCC Nursing Simulation Lab will provide a hands-on, learning experience in a safe, realistic environment in an effort to produce healthcare professionals with enhanced critical thinking skills, technical ability, communication skills, and collaboration experience for the benefit of our community.

### **Preparation**

The Simulation Lab is a learning environment. All scenarios should be treated in a professional manner. Students are to prepare for simulation experiences just as they

would for hospital clinical. Preparation information and pre-lab work will be provided by your lead instructor. Incomplete pre-assessment assignments will result in an unsatisfactory grade for the day.

### **Evaluation**

Students will be evaluated by the SimLab instructor based on their performance in the simulation, using the guidelines identified in the Clinical Evaluation Tool. Students receiving an unsatisfactory in any category will be debriefed by the SimLab instructor and receive an Unsatisfactory for the Simulation experience. The student will have to remediate the skill (if appropriate) as assigned by the instructor(s). The student must complete the remediation before being allowed to return to the clinical setting. If the student fails to complete the required remediation, the student will receive an Unsatisfactory for the additional clinical days that are missed. Refer to the attendance policy for requirements for clinical.

### **Attendance**

Clinical simulation experiences are arranged by the faculty and the SimLab instructor. Scheduled simulation experiences are considered a clinical day. Students will be assigned specific times for clinical simulation. Students are expected to be on time. Absenteeism and tardiness will be handled in accordance with the attendance policy. Refer to the attendance policy for clinical.

### **Dress Code Simulation**

SVCC uniform dress code rules apply for SimLab clinical.

### **Required Equipment**

Stethoscope, penlight, bandage scissors, a watch with a second hand, a drug handbook, and black pens are required. If students have purchased a Supply Tote, it should be brought with them to the lab. SVCC is not responsible for any lost or stolen personal items.

### **Equipment Care**

The simulation mannequins are to be used with respect and treated as if they were live patients. This includes hand washing and use of gloves when performing patient care. No betadine or pens are to be used near the mannequins.

## **Student Standards of Conduct**

- The working student must assume full responsibility for academic and clinical performance. The nursing program schedule, including course/lab schedules, assignments, exams, clinical rotations and other activities will not be changed or adapted to the schedules of working students. Attending clinical after

working a night shift the day before is considered a form of impairment and students will be sent home and given an unsatisfactory in the Professionalism category for the day.

- Incivility by the student may result in dismissal from the nursing program. Incivility is understood as a set of discourteous and rude behaviors which violate the mutual respect between each person, which may be considered intentional acts of aggression, or unintended passive acts. Characteristics of incivility include: interactions between students and faculty that are challenging, abrasive, discourteous, aggressive, uncomfortable, distressing, or include threats; misconduct that can include verbal or physical abuse; and disruptive behaviors that interfere with the teaching and learning process. Often these characteristics manifest themselves in the cruel comments directed at faculty by students in face to face interactions within the classroom and clinical setting. Incivility can range on a continuum of student behaviors from annoying acts to criminal conduct and, if left unchecked, can manifest itself as horizontal hostility, or lateral violence to include incivility between and among students, faculty, and nurses. (Symbiosis Online Publishing, 2021)
- Students are **not** allowed to administer any medication to any client unless supervised by a faculty member or faculty approved licensed RN present. Failure to comply with this policy will result in dismissal from the nursing program.
- Responsible action is required when health care and safety are affected. This action may include but is not limited to confronting and reporting to appropriate persons any individuals observed:
  - Pilfering unauthorized clinical or academic materials (hospital or college supplies, exams, etc.).
  - Performing in a dishonest/unethical manner in the class or clinical area. Falsification of documentation related to patient care.
  - Altering graded materials.
- Nursing students are to perform their assigned duties free of the influence of drugs or alcohol. There is a zero-tolerance policy for this.
- No smoking in uniform shall be permitted. This includes travel to and from a clinical facility (including Simulation). If a student smells of smoke while in uniform, the student will be asked to leave the clinical setting and receive an unsatisfactory for the clinical rotation. This will be counted as an unexcused clinical absence (refer to attendance policy). The student will be placed on

probation and can be dismissed from the nursing program for any further violation expectations.

- Drinking, purchasing or serving alcoholic beverages while in uniform is forbidden and are grounds for dismissal.
- Unprofessional language or actions while in uniform or in class is unacceptable. Sexual harassment or misbehavior of any kind will not be tolerated and are grounds for dismissal.
- Gum is not to be chewed during clinical experiences.
- Cellular phones are allowed in the classroom, laboratory and clinical setting for multi-factor authentication requirements only. If used by the student for other reasons not approved by faculty, it will result in disciplinary actions.
- Students are not permitted to use computers, cell phones or electronic watches for personal use in the classroom, clinical or laboratory setting.
- Children are not allowed in class, lab, clinical, or simulation areas. Students who bring children will not be allowed to remain in the area. There will be no exceptions to this policy.

In addition, the nursing faculty will utilize the following professional organizations to promote ethical conduct and professional behavior as students in the SVCC nursing programs: American Nurses Association Code of Ethics: [ANA Code of ethics website](#) and the SVCC Academic Honesty policy found in the current catalog on the SVCC website. [SVCC Academic Honesty](#).

### **Social Media**

Guidelines for the appropriate use of, and conduct on, social media sites are provided below. Examples of social media include but are not limited to blogs, micro blogs, wikis, virtual worlds, Facebook, YouTube, Twitter, Snapchat, Instagram and TikTok.

Due to potential HIPAA and FERPA violations, student use of any social media will be limited within the nursing program. No academic information regarding classes, labs, and clinical may be posted on students' personal social media sites. Finally, as faculty and students of SVCC, we are obligated to uphold the college name in the community setting. Therefore, we expect nursing students to adhere to the SVCC code of conduct at all times.

Think before you post! Do not post confidential or sensitive information about Southside Virginia Community College or its community affiliates including patients, other students, faculty or staff. Do not post comments that could reflect poorly on

you, the clinical facility or the College. Review ANA Nursing Code of Ethics social media policy at <https://www.nursingworld.org/social/>

### **Student Responsibilities:**

- Submit signed “Statement of Understanding” during the first day of the first NSG course.
- In accordance with §54.1-3001 of the Code of Virginia, a nursing student, while enrolled in an approved nursing program, may perform tasks that would constitute the practice of nursing. The student shall be responsible and accountable for the safe performance of those direct patient care tasks to which he has been assigned.
- Students are responsible for their own transportation. Travel to clinical sites may be up to 2 hours one way depending on where the student lives.
- Completed physical examination, vaccinations, blood titers, proof of Hepatitis series or signature refusing inoculation, current AHA CPR card, 2 step PPD (or CXR/Quatiferon if unable to have 2 step PPD) are required for admission into class/clinical as you were informed during the orientation session. These are to be uploaded into Castlebranch by the deadline. The "Risks Associated with Clinical Practice" forms on the first day of any nursing course with a clinical component are to be submitted to your faculty member. Students not adhering to this policy will not be allowed to continue in the nursing sequence. The clinical facilities are now accepting the Moderna Bivalent-1 injection.
- Stay up-to-date on any policy or handbook changes. Changes may be necessary during your time in the nursing program. Changes will be posted on Canvas, distributed in class or emailed to you.
- Be responsible for medical costs for any injury received while in a clinical setting, including injuries for which testing is required by clinical agencies. The program does not require students to have medical insurance, however it is highly suggested.
- Any student with a change in health status or new medications, requiring special considerations, will provide the clinical instructor and classroom instructor the following information prior to clinical: Current written permission from the health care provider (HCP) allowing the student to complete the activities of the given semester in which the student is currently enrolled; A written statement by the HCP indicating any limitation or restrictions of activity.
- Students may be required to complete a “for cause” drug screen or alcohol test, at their expense, if a faculty member observes signs and symptoms that lead them to suspect the student is under the influence of drugs or alcohol in the

clinical or classroom setting. Testing may also apply in cases where it has been reported that a student was using drugs or alcohol directly before clinical or classroom time. Students that do not comply with the testing, will be dismissed from the program. Any student that has a positive drug screen or a positive alcohol test, will be dismissed from the program. No repeat testing is allowed once a positive test has been confirmed by the appropriate testing authority.

- Students are not to provide any types of gifts to nursing faculty members. If the student has the desire to give a gift to a faculty member or thank a faculty member in some way, it is requested that the student write the faculty member a letter describing their thanks or thoughts.

## **Program Progression**

Successful completion of each semester of the program is a prerequisite for progressing to the next semester.

### **Semester 1**

- BIO 142, NSG 100, NSG 106, and NSG 200 are all co-requisites.
- You may complete BIO 142 prior to this semester, however if it is not completed successfully by the end of the first semester, you may not progress to semester 2.
- If a student chooses to withdraw from any of the following courses (NSG 100, NSG 106, or NSG 200) after established dates in the academic calendar for withdrawal without academic penalty, he /she must withdraw just from one. The student must withdraw from all 3 of these courses. The student may, however, remain enrolled in NSG 130.
- Students may not progress to the 2<sup>nd</sup> semester until every course in the 1<sup>st</sup> semester has been completed satisfactorily.

### **Semester 2**

- BIO 150 may be taken during this semester or in the summer prior to the 3<sup>rd</sup> semester. It must be successfully completed prior to the 3<sup>rd</sup> semester in order to progress in the program.
- NSG152 and NSG 170 are co-requisite in this semester and both courses must be successfully completed in order to progress to the 3<sup>rd</sup> semester.
- Advanced placement students- NSG 115 and NSG 200 are co-requisites in this semester and both courses must be successfully completed in order to progress to the 3<sup>rd</sup> semester.
- If a student withdraws from any NSG course in the 2<sup>nd</sup> semester, ALL NSG courses in the semester must be withdrawn as well. For example, you may not

withdraw from NSG 152 and stay enrolled in NSG 170. You must withdraw from both courses.

### **Semester 3**

- NSG 210 and NSG 211 are co-requisites in this semester and both courses must be successfully completed in order to progress to the 4<sup>th</sup> semester.
- ENG 112 may be completed prior to 3rd semester, however if it is not then it must be taken in the 3<sup>rd</sup> semester.
- If a student withdraws from any NSG course in the 3rd semester, ALL NSG courses in the semester must be withdrawn as well. For example, you may not withdraw from NSG 210 and stay enrolled in NSG 211. You must withdraw from both courses.

### **Semester 4**

- NSG 230, NSG 252, and NSG 270 are all co-requisites in this semester. All three courses must be completed successfully in order to graduate.
- The 200 level Humanities Elective may be taken prior to the 4<sup>th</sup> semester, however if it is not, then it must be taken in the 4<sup>th</sup> semester.
- If a student withdraws from any NSG course in the 4th semester, ALL NSG courses in the semester must be withdrawn as well. For example, you may not withdraw from NSG230 and stay enrolled in NSG 252 and NSG 270. You must withdraw from all 3 courses.
- If a student fails in the traditional or advanced placement track, they will not be considered for entry into the weekend option track.

Successful completion is defined as passing the course with a C or better.

In order to graduate a student must have a 2.5 curricular GPA or higher.

Students must complete the program within 3 academic years (six semesters or 150%) from starting the first NSG course. If a student is not successful, the student may apply for admission again to the program. A student may not enroll in any class for a third attempt without the approval from the Vice-President for Academic and Student Affairs.

### **Program Dismissal**

- Students dismissed from the program are not eligible to enroll in any NSG course.

### **Readmission to The Nursing Program**

Returning students who wish to reapply to the nursing program after failing to successfully complete a semester of the nursing program must fulfill the following requirements:

- Maintain a curricular GPA of 2.5
- Meet all current admission criteria (TEAS/Kaplan, and HESI, if applicable)
- The Exit Interview from the previous program attempt must have been completed in the semester the attempt occurred with the Department Chair or designee.
- Reapplication to the program will count as a second and final admission.
- Approval from the admission committee is required as space is available.
- A full criminal background check and drug screening will be needed and an updated health care record.
- Complete the admission application by the deadline and submit to the online portal as noted on the webpage.
- VCCS ADN Program transfer to NSG 252 summer course is permissible with the Program Coordinator letter of good standing (eligible for readmission into SVCC ADN program and not more than one NSG semester failure) and general application acceptance to VCCS program. Students who are successful in the course will take NCLEX under SVCC program codes.
- Transfer students from other VCCS ADN programs will only be considered based on a letter of good standing from the current program and SVCC availability of space.

### **Credentials Necessary for Clinical Clearance**

Students must have current documentation of the following in their CastleBranch profile prior to the beginning of each semesters' clinical rotations.

- Current American Heart CPR certification for Basic life support.
- An initial negative 2 step TB skin test or other appropriate diagnostic within the time frame specified during orientation. A yearly TB skin test or other appropriate diagnostic prior to the beginning of the third semester.
- Hepatitis (B) vaccine series, titer indicating immunity or waiver.
- MMR titer indicating immunity or two MMR vaccinations
- Varicella titer including immunity or 2 varicella vaccines.
- Documentation of a Tdap vaccine within the past 10 years.
- Negative Urine drug screen as required.
- Influenza vaccination yearly each fall or declination with clinical site approval



- COVID 19 Vaccination or series or declination with clinical site approval

### **Student Records**

- A file is maintained for each student while enrolled in the program. Contained in that file will be an application to the program, a current record of achievement, completed skills check-lists, clinical evaluation tools, mid-term and final evaluations, and any consents that have been signed by the student during the course of the program. These files are stored in locked filing cabinets to ensure student confidentiality and will be housed in the respective faculty member's office. Upon graduation, the files are transferred to the Program Directors office and are kept under lock and key for a period of 3 years.
- A separate file, which may be electronic or paper, is maintained for each student while enrolled in the program. Contained in that file will be a high school transcript, GED, or a homeschool transcript. These records will be maintained and stored by the admissions office.
- Health information is stored in CastleBranch and accessible by the program director or designee. These records may need to be provided to clinical agencies at their request.
- The program will follow Southside Virginia Community College policies for the protection of student and graduate records against loss, destruction, and unauthorized use. Likewise, the program will follow the Library of Virginia Record Retention and Disposition Schedule pertaining to colleges.
- Final transcripts for the program are maintained electronically in the student information system. In 2024, these will be maintained in the student files.

### **Criminal Background Check, Drug Screen, and Immunizations**

SVCC utilizes a third-party vendor to conduct criminal background checks, drug screenings, and to house student medical records.

The program requires clean background checks and drug screens on admission to the program. Since clinical facilities require submission of documentation on nursing students' criminal histories, (the agency may deny any student who has a criminal record access to its clinical units) applicants who present with a criminal record (including drug and alcohol offenses) may not be offered admission to the nursing program. A student in the program who is reported to be guilty of a misdemeanor/felony may be administratively withdrawn from the Nursing Program. If a student tests positive on a drug screen after appropriate review by a medical review officer, admission will be

revoked. The program and the clinical agencies have a zero tolerance for positive drug screens. No retakes of drug screens will be allowed.

If a student has been convicted of any crime that is listed as a barrier crime by the state of Virginia, then the student will be denied admission to the nursing program. This is in accordance with Section 32.1-126.01 and 32.1-162.9:1 of Title 32.1 and section 63.2-1719 and 63.2-1720 Title 63.2 of the Code of Virginia. This code stated that persons with certain criminal convictions are prohibited from employment in nursing facilities, home care organizations, hospice programs, or assisted living facilities, whether or not the person is licensed or certified by the Board of Nursing. These convictions are commonly known as barrier crimes.

Please note that the Virginia Board of Nursing considers each applicant to become a professional nurse on an individual basis and may deny licensure to anyone that they feel could be a threat to the safety of the public. Certain criminal convictions may prevent licensure as a nurse in Virginia. Please see the guidance document: 90-55 found on the Virginia Board of Nursing's website, located at [Virginia BON Guidance document 90-55](#) for further information regarding criminal convictions and licensure.

Students are responsible for self-reporting changes in criminal backgrounds to the program director immediately.

### **Standard Precautions**

To minimize the transmission of blood-borne pathogens in the college & clinical settings. These guidelines have been adapted from current CDC (Centers for Disease Control) guidelines. Refer to Risks Associated with Clinical Practice Form. When students are in the clinical agency setting, they must also refer to and follow the specific clinical agencies' policies and procedures regarding standard precautions.

<https://www.cdc.gov/niosh/topics/bbp/universal.html>

### **PROCEDURE FOR TREATMENT OF CLASSROOM OR CLINICAL AGENCY BLOOD OR BODY FLUID EXPOSURE INCIDENT.**

Per the latest recommendations of the CDC, students & faculty who experience an exposure incident to blood or body fluids must receive a confidential medical assessment, evaluation, and treatment within the first 24 hours following the incident.

This consists of:

- Initial first aid treatment within 1-2 hours of the exposure incident.
- Possible testing of the source.
- Evaluation of Hepatitis & HIV status with baseline blood tests.

- Post exposure counseling and treatment which should include general information and education regarding necessary precautions and the need for follow up counseling/testing.

If an exposure occurs, the student must:

- Wash contaminated areas for at least one minute with liquid soap & running water.
- IMMEDIATELY go to an emergency department for evaluation and treatment. This will be at the student's own expense.
- Report the incident to the instructor or preceptor and the program head. If the incident occurs in the clinical agency, the instructor or preceptor will report it to the nurse in charge.
- Complete the Nursing Program Blood or Body Fluid Exposure Form (Page 46) and the clinical agency's occurrence report.
- Obtain follow-up treatment for exposure incidents through your personal health care provider or other health care facility.
- Submit documentation to the nursing program head verifying initial assessment and treatment regarding exposure incidents.
- Nursing program head will submit a copy of the Blood or Body Fluid Exposure Form to the Director of Building and Grounds and the Dean of Nursing.

## **HIPAA**

It is the student's responsibility to review and understand The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy, Security and Breach Notification Rules (<http://www.hhs.gov/ocr/privacy>).

- Confidentiality must be maintained at all times.
- Do not use patient names, date of birth, medical record number or social security numbers on any school of nursing documentation (assignments, SimChart/electronic database).
- Do not share PHI (Patient Health Information) with anyone not directly involved in the patient's care. This includes family members, peers or clinical staff not directly involved in care of the patient.
- Do not share any information discussed during class, pre- or post-conference outside of the conference room setting.
- PHI does not leave the clinical agency.

- Students are not allowed to share computer login or password information.
- Any violation of the HIPAA policy will result in immediate dismissal from the nursing program and can result in civil and criminal penalties (\$50,000 and up to ten years imprisonment). Students will no longer be eligible to enroll in any health science program offered by Southside Virginia Community College.

### **Pursuant to United States Department of Education (US DOE)**

**Regulation 34 CFR 668.43 (a) (5) (v)**, the Southside Virginia Community College Associate Degree in Nursing (ADN) program provides the following information for all prospective and current students:

The Southside Virginia Community College ADN program meets all Virginia Board of Nursing requirements for prelicensure nursing education programs in the Commonwealth of Virginia. In addition, the SVCC ADN program meets all requirements for nationally recognized accreditation by the Accrediting Commission for Education in Nursing.

The Commonwealth of Virginia participates with 32 other states in the National Council of State Boards of Nursing (NCSBN) National Licensing Compact (NLC) to allow nurses licensed in one state to provide nursing care across state lines in other compact states.

The Uniform Licensing Requirements (ULRs) are found at:  
[https://www.ncsbn.org/NLC\\_ULRs.pdf](https://www.ncsbn.org/NLC_ULRs.pdf).

States currently in the NLC are found at: <https://www.ncsbn.org/nlcmemberstates.pdf>.  
 Prospective and current students are strongly encouraged to evaluate all state requirements in jurisdictions where they intend to practice nursing.

A list of all state requirements is found at: <https://www.ncsbn.org/14730.htm>.

SVCC has not determined if the ADN program meets the requirements of any other states. This statement serves to meet the USDOE regulation until further notice.

### **Forms**

#### **Nursing Program Blood or Body Fluid Exposure Form**

Name/Title: \_\_\_\_\_

Location of the Incident: \_\_\_\_\_

Date/Time of the Incident: \_\_\_\_\_

#### **Description of the exposure incident:**

\_\_\_\_\_ Needle stick/sharp:

if needle stick/sharp, how deep? \_\_\_\_\_ Site \_\_\_\_\_  
What type of needle/sharp? \_\_\_\_\_  
Was bleeding evident? Yes \_\_\_\_\_ No \_\_\_\_\_  
Was personal protective equipment worn? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what item(s)? \_\_\_\_\_

\_\_\_\_\_ Non-intact skin:  
Was personal protective equipment worn? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what item(s)? \_\_\_\_\_

\_\_\_\_\_ Exposure to mucous membranes (fluid in eyes, nose, or mouth)  
Was personal protective equipment worn? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what item(s)? \_\_\_\_\_

\_\_\_\_\_ Human bite that breaks the skin  
Was personal protective equipment worn? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what items? \_\_\_\_\_

Body Fluid Exposure: Yes \_\_\_\_\_ Type \_\_\_\_\_ No \_\_\_\_\_  
Blood Exposure: Yes \_\_\_\_\_ No \_\_\_\_\_

Source:  
Blood/Body Fluid Source Known \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
History HIV \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
History Hepatitis \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Chronological Description of the incident: (facts)

(page 1 of 2)

Student/Faculty History:  
\_\_\_\_\_ Pregnancy Yes \_\_\_\_\_ No \_\_\_\_\_ Unsure \_\_\_\_\_  
Major Medical Problems: \_\_\_\_\_  
Hepatitis B Vaccine Series Completed: Yes \_\_\_\_\_ No \_\_\_\_\_  
Was a medical assessment and evaluation of the incident completed:  
Yes \_\_\_\_\_ No \_\_\_\_\_ Refused \_\_\_\_\_  
If yes, date & time: \_\_\_\_\_  
If no, reason: \_\_\_\_\_

Anti Retro Viral Therapy: Yes \_\_\_\_\_ No \_\_\_\_\_ Refused \_\_\_\_\_  
Gamma Globulin Therapy: Yes \_\_\_\_\_ No \_\_\_\_\_ Refused \_\_\_\_\_

By refusing treatment, medical assessment and/or evaluation, I affirm that I have read & understand the CDC recommendations of the Procedure for Treatment of Classroom or Clinical Agency Body Fluid Exposure contained in the Nursing Program Student Policy Handbook and understand that by refusing treatment, medical assessment and/or evaluation, I may be at risk of acquiring a blood borne disease.

Faculty Signature: \_\_\_\_\_  
Date

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

**Risks Associated with Clinical Practice  
Southside Virginia Community College Nursing Program**

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

I have been informed and advised of potential risks associated with clinical practice in the laboratory/clinical setting. I have been informed of the measures to be used to minimize these risks and measures to be taken in the event of injury or exposure to an infectious or hazardous substance. I have read the following publications and documents.

1. HIV/ARC/AIDS Policy for Southside Virginia Community College (in the Catalog).
2. Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>
3. Centers for Disease Control and Prevention. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post exposure Prophylaxis. MMWR, 2001; 40 (RR11); 1-42. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>).
4. Centers for Disease Control and Prevention. APPENDIX B. Management of Occupational Blood Exposures. MMWR, 2001; 50(RR11); 45-6. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a3.htm>).
5. Centers for Disease Control and Prevention. Vaccinia (Smallpox) Vaccine Recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR, 2001; 50(RR10); 1-25. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5010a1.htm>).
6. Centers for Disease Control and Prevention. Immunization of Healthcare Workers: Recommendations of the Advisory Committee on Immunization Practices and the Hospital Infection Control Practices Advisory Committee. MMWR, 1997; 46 (No. RR-18). (<https://www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm>).

7. Centers for Disease Control and Prevention. Prevention and Treatment of Tuberculosis among Patients Infected with Human Immunodeficiency Virus: Principles of Therapy and REVIEWED/REVISED Recommendations. MMWR, 1998; 47 (No. RR-20).  
(<https://www.cdc.gov/mmwr/preview/mmwrhtml/00055357.htm>)
8. Centers for Disease Control and Prevention. Guidelines for National Human Immunodeficiency Virus Case Surveillance, including Monitoring for Human Immunodeficiency Virus Infection and Acquired Immunodeficiency Syndrome. MMWR, 1999; 48 (No. RR-13).  
(<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr4813a1.htm>)
9. Guideline for Hand Hygiene in Health-Care Settings:  
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5116a1.htm>
10. Smallpox Vaccine: [www.smallpox.gov](http://www.smallpox.gov)
11. HIPAA's Privacy Regulation: [www.cms.gov](http://www.cms.gov)
12. Needlestick prevention: [www.needlestick.org](http://www.needlestick.org);  
[www.osha.gov/SLTC/needlestick/index.html](http://www.osha.gov/SLTC/needlestick/index.html)/[www.needlestick.org](http://www.needlestick.org)

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

**Southside Virginia Community College School of Nursing  
Waiver to Audiotape**

I \_\_\_\_\_, understand that I am being allowed to audio tape nursing lectures based upon a learning disability need as verified by the disability specialists on my campus. By signing this document, I agree that I will not so the following:

Restrictions on audio-taping are based on:

1. Legal issues related to use of copyright materials which may be used in class
2. Ethical issues related to confidentiality or personal and client information which may be shared in class
3. Potential impact of audio-taping on the quality of teaching and class discussion

The privilege of audiovisual taping is extended to me by the faculty and other students in the classroom with the understanding that I will fulfill the following responsibilities:

1. Seek permission from the lecturer to tape the session at the beginning of the course.
2. Carry out all taping in a manner that does not disrupt lecture or class discussion.
3. Keep all tapes under my direct control
4. Allow no additional copies to be made of tapes I make in this course.
5. Completely erase all tapes at the end of each course.
6. Stop taping at the following times:

- a. during any audio or video presentation containing copyrighted material
- b. during lectures or discussions directed by anyone other than the regular course faculty
- c. at any time any student in class requests no taping during discussion of personal experiences
- d. at any time the course faculty requests no taping

I understand and agree to the conditions and responsibilities stated here in this agreement. I understand that the privilege of taping can be rescinded at any time if I fail to comply with any of the conditions and responsibilities of this agreement.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Remediation Lab Referral Form**

Student \_\_\_\_\_

Referral Date \_\_\_\_\_

Instructor making referral \_\_\_\_\_

I am referring \_\_\_\_\_ to the Open Lab for additional assistance with \_\_\_\_\_ due to \_\_\_\_\_.

Student Signature \_\_\_\_\_

Instructor Signature \_\_\_\_\_

Open Lab Instructor Signature upon completion: \_\_\_\_\_

Additional comments:



### Request to Review a Quiz/Exam Item

**If you would like to challenge the answer to a question on an exam, please fill out this form and return it to the instructor by 2pm the day of the exam unless otherwise noted by the instructor.**

**You must find and submit supporting evidence for your argument in the textbook for consideration of rescoring an exam question.**

1. Student: \_\_\_\_\_

2. Unit Quiz/Exam: \_\_\_\_\_

3. Quiz/Exam date: \_\_\_\_\_

4. Question for consideration (summarize question, and possible answers):

5. Supporting evidence for your argument or stance on this question. You must cite textbook and page number.