Dear Nursing Student:

The faculty and I are very excited that you have chosen nursing as your profession. Nursing is an honorable, fulfilling career and we welcome you into our profession. We look forward to working with you as you make your journey from student nurse to professional nurse, ready to meet today's health care challenges.

Nursing education is challenging and the schedule is demanding but the faculty and I will be with you to guide you along your way. By the time you graduate, you will possess a vast and complex knowledge base, have the ability to think critically, model professional behavior, and provide professional nursing care for individuals, families, and groups of patients in a culturally diverse health care system. You will become a critically important member of the health care team. Currently, there is a tremendous demand for registered nurses in a variety of health care settings within our community, region, and nation. What an exciting time to join the nursing profession.

The faculty and I are committed to helping you accomplish your educational and professional goals by creating an effective learning environment. We strive to be responsive to your learning needs, provide effective teaching methods, and access to effective learning tools and resources to help you achieve success through learning.

The Student Nurse Handbook is a valuable resource. Please read it carefully. You will be required to sign a statement acknowledging that you have read and understand the information contained within the Student Nurse Handbook, agree to follow all policies within the handbook, and understand the consequences of policy violation. Please bring any questions to your faculty advisor.

The faculty and I are looking forward to your Nursing Pinning Ceremony and to watching you graduate from NMJC with an Associate of Applied Science Degree in Nursing!

Respectfully,

*Delores Thompson,  MSN, RN, CNE, FNP-C*

Director of Nursing

“Not Self but Others”
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NMJC Nursing Program and New Mexico Junior College Accreditation

Accreditation Commission for Education in Nursing (ACEN)
Formerly: National League for Nursing Accrediting Commission (NLNAC)

The NMJC Nursing Program is accredited by and responsible to the ACEN. For more information regarding NMJC Nursing Program accreditation status, please contact:

Accreditation Commission for Education in Nursing (ACEN)
3343 Peachtree Road NE, Suite 850
Atlanta, GA 30326
ACEN website: www.acenursing.org
(404) 975-5000

New Mexico Board of Nursing

The NMJC Nursing Program is accredited by and responsible to the New Mexico Board of Nurse Examiners. For more information regarding NMJC Nursing Program accreditation status, please contact:

New Mexico Board of Nursing
6301 Indian School Road NE
Suite 710
Albuquerque, NM 87110
(505) 841-8340

The Higher Learning Commission, North Central Association

New Mexico Junior College is accredited by and responsible to the Higher Learning Commission, North Central Association. For more information regarding New Mexico Junior College accreditation status, please contact:

The Higher Learning Commission
North Central Association
30 North LaSalle Street, Suite 2400
Chicago, Illinois 60602-2504
(312) 263-0456
NMJC Nursing Program
Contact Information

- Delores Thompson, MSN, RN, CNE, FNP, Director of Nursing, McLean Hall Room 115, 575-492-2519, dthompson@nmjc.edu

- Debra Hart, Administrative Secretary for Nursing, McLean Hall Room 116, 575-492-2517, dhart@nmjc.edu

- Debbie Cates, MSN, RN, ACNS, Level I Coordinator and Faculty Member, McLean Hall Room 124, 575-492-2520, dcates@nmjc.edu

- Kim Webb, MSN, RN, CNE, Level II Curriculum Coordinator and Faculty Member, McLean Hall Room 130, 575-492-2515, kwebb@nmjc.edu

- Marlena Bushway, MSNed, RN, CNE, Nursing Informatics Coordinator and Faculty Member, McLean Hall Room 133, 575-492-2513, mbushway@nmjc.edu

- Donnie Hayes, MSN, RN, Faculty Member, McLean Hall Room 132, 575-492-2523, dhayes@nmjc.edu

- Cheryl Lang, MSNed, RN, CNE, Faculty Member; McLean Hall Room 122C, 575-492-2524, clang@nmjc.edu

- Misty Stine, MSN, RN, Faculty Member; McLean Hall Room 131, 575-492-2514, mstine@nmjc.edu

- Lorraine Hannah, MSN, RN, Faculty Member; McLean Hall Room 122B, 575-492-2521, lhannah@nmjc.edu

Faculty Office Hours

Office hours for each course coordinator are posted on the office door and NMJC online system.

Office hours for each faculty member are posted on the faculty member’s office door.
NMJC Nursing Program
Student Nurse Handbook

The Student Nurse Handbook has been designed to guide the student nurse and communicate information of vital importance regarding the New Mexico Junior College (NMJC) Nursing Program’s curricula and program policies. The student should read and be familiar with the information and policies contained in the Nursing Program Student Nurse Handbook and the course syllabi. It is the student’s obligation to review the contents of this handbook and be accountable for the information and polices throughout the year(s) of nursing education. Each student must sign the “Student Acknowledgement” form in the back of the handbook during the first week of each academic year. The student’s signature acknowledges the student has read, understands, and agrees to abide by the policies contained within the handbook. Failure to comply with the policies may result in dismissal of a student from the nursing program. The completed form is placed in the student’s record. The student nurse should also read and be familiar with the policies contained within the NMJC Student Handbook and the NMJC College Catalog.

Demographic Information

New Mexico Junior College

NMJC opened in the fall of 1966 and was the first community college built in the state of New Mexico. The college is governed by the 1985 Community College Act and is fully accredited by the Higher Learning Commission, North Central Association. NMJC offers Associate of Arts, Science, and Applied Science degrees, and certificates in business and industry trades. The college is comprised of four instructional divisions: Arts and Humanities; Business, Math and Sciences; Public Safety and Industry; and Training and Outreach. NMJC also offers a wide variety of vocational-technical, college transfer, general education, and community service classes to serve the educational needs of Lea County and surrounding communities. Thirty-three percent of the NMJC’s full-time students demonstrate financial need according to federal guidelines.

Nursing Program

Students in the NMJC Nursing Program come from diverse socioeconomic, cultural, and educational backgrounds. The student population profiles include students who are single, married, divorced, parents with children living at home, students who communicate using English as a second language, students with college degrees in other fields of study, first-generation college students, students who are starting a new career, or attending college for the first time.

NMJC Nursing Program is an integral part of NMJC and is under the direct supervision of the Vice President for Instruction. The Registered Nursing Program began in 1969 and has been accredited by the National League for Nursing Accrediting Commission since 1975.
NMJC Nursing Program

Organizational Chart

Board of Directors

President

Vice President for Instruction

Director of Nursing

Administrative Secretary for Nursing

Professors of Nursing

Student Nurses
NMJC Nursing Program
Degree and Certificate Offerings

NMJC Nursing Program offers a two-year registered nursing education program with a practical nurse option.

**Associate of Applied Science (AAS) Degree in Nursing (RN)**
Students who successfully complete course requirements for Level I, Semesters I and II and Level II, Semesters III and IV receive an Associate of Applied Science Degree (AAS) in Nursing and are eligible to write the National Council Licensing Examination-Registered Nurse® (NCLEX-RN) for licensure as a registered nurse (RN).

**Certificate of Completion for Practical Nursing (LPN)**
Students who successfully complete course requirements for Level I, Semesters I and II and Level II, Semester III receive a Certificate of Completion in Practical Nursing and are eligible to write the National Council Licensing Examination-Practical Nursing® (NCLEX-PN) for licensure as a practical nurse (LPN).
Associate of Applied Science (AAS) in Nursing
Degree Plan

A total of 73 credit hours and a minimum GPA of 2.0 are required for each course.

<table>
<thead>
<tr>
<th>Prerequisites – General Education / Supporting Courses – 29 Credit Hours</th>
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<tr>
<td>PS110</td>
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<tr>
<td>BI224A</td>
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<td>EN113</td>
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<td>SE113</td>
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<td>MC121</td>
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<tr>
<td>BI224</td>
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<tr>
<td>HE113</td>
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<tr>
<td>PS223B</td>
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* course must be taken within the three years prior to end of the spring semester before fall admission to nursing program.

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<tr>
<th>Nursing Core Course Requirement – 44 Credit Hours</th>
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<td>NU222</td>
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Total Credit Hours – 73 Credit Hours
### NMJC Nursing Program - Associate of Applied Science (AAS) in Nursing

#### Credit/Clock Hour Summary

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<tr>
<th>Course Prefix and Number</th>
<th>Course Title</th>
<th>Credit Hours/Semester</th>
<th>Theory Clock Hour/Week</th>
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</table>

*Semester = 15 weeks

Lecture Courses: 1 theory credit hour = 1 clock hour per week
Courses with a Lab Component: *1 lab credit hour = 3 lab clock hours per week*
NMJC Nursing Program
Overview of Hierarchy and Interrelationships of Outcomes

New Mexico Junior College Mission

NMJC Nursing Program Mission and Philosophy

Program Outcomes

Conceptual Framework

Level I Student Learning Outcomes

Level II Student Learning Outcomes

Course Syllabi

Course Outcomes

Unit Outcomes

Course Assignments Outcomes

Unit Examinations

Skills Demonstrations Outcomes

Clinical Practice Outcomes
NMJC Nursing Program
Mission and Philosophy

The mission of NMJC as a comprehensive community college is to promote success through learning. The mission of the NMJC Nursing Program is to promote success through learning by facilitating the acquisition of knowledge, skills, and attitudes required by entry level nurses to provide legal, ethical, safe, and effective nursing care for individuals, families, and groups within our community. Through the provision of quality nursing education, the NMJC Nursing Program is assisting the students to successfully complete their career goals and helping to meet the nursing care needs of the community.

The philosophy of the nursing program is a blending of personal beliefs and values held by the nursing faculty and based on the nursing meta-paradigm of Person, Environment, Health, and Nursing. The nursing faculty subscribes to the following descriptions of the concepts of the nursing meta-paradigm.

**Person:** encompasses individuals, families, groups and communities. The person has intrinsic value, dignity, and is worthy of respect. These characteristics contribute to a shared and unique physical, emotional, intellectual, social, cultural, and spiritual person.

**Environment:** encompasses internal and external factors that are dynamic in nature and influence the health of the person. The person exists within environments and is never isolated from environmental factors. Environmental factors are classified as physical, psychological, cultural, chemical, biological, spiritual and social. Environmental factors can positively or negatively affect the lives, health, and illnesses of the person; therefore, nurses in nursing practice situations seek nursing-relevant information about both the person and their environmental situations.

**Health:** a continuum based on a person’s perception of well-being. Health is affected throughout the life cycle by genetic and environmental factors, culture, physiological mechanisms, emotional reactions, attitudes, spiritual influences, and perceptions. Health promotion, restoration and maintenance are dynamic processes unique to each person.

**Nursing:** both an art and a science, founded on a professional body of knowledge that integrates concepts from the liberal arts and the biological, physical, psychological and social sciences. It is a learned profession based on an understanding of the human condition across the life span and the relationships of an individual with others and within the environment. Nursing is a dynamic, continually evolving discipline that employs critical thinking to integrate increasingly complex knowledge, skills, technologies, and patient care activities into evidence-based nursing practice. The goal of nursing for patient care in any setting is preventing illness; alleviating suffering; protecting, promoting and restoring health; and promoting dignity in dying (NCSBN, 2007).

NMJC Nursing Program faculty do not perform nursing research; however, the scholarships of discovery and integration in nursing are incorporated in the teaching and learning processes of the student nurse through application of evidence-based practices in nursing care. Nursing students learn how to find nursing research articles, interpret the results, and apply the nursing research findings to direct patient care.
The concept of Nursing includes the nurse, nursing education, caring, and the practice of nursing as described below:

**Nurse:** a person who is educationally prepared to provide care. The nurse may function in a multiplicity of health care settings. The nurse provides holistic care, promotes dignity and respects privacy. The nurse considers a person’s identity as an individual, a member of a family, a community and a culturally diverse society when planning nursing care. Through therapeutic, purposeful, and effective communication, the nurse implements the nursing process in a variety of roles and settings in collaboration with other health professionals.

**Nursing Education:**
Nursing education is a formal program of study occurring within the mainstream of collegiate education and based on accepted educational philosophy and theory. The educational philosophy most closely related to the beliefs of the nursing faculty is **pragmatism**, the blending of idealism (truth is universal) with realism (reality is found in the physical world and truth is an observable fact). Pragmatism is the belief that through the testing of ideas and scientific methods, truth is what is proven. The educational theory that most closely correlates with the beliefs of the NMJC Nursing Program faculty is the **Progressive Educational Theory**. Progressive educational theory emphasizes problem-solving and skills development needed in today's world. Students learn how to apply what they know or have learned to management of patient care. In a progressivism curriculum the faculty presents content to students in context to real-life situations. Faculty present nursing concepts in relationship to one another and link the concepts to the live context of clinical practice. Nursing education prepares nurses to perform...
at the entry-level of practice within the three major roles of nursing practice: provider of care, manager of care, and member of the nursing profession (NLN, 2000).

The role of the faculty in a progressive environment is to guide the students in the development of critical thinking skills and application of knowledge by creating practical learning activities relevant to clinical nursing practice. Progressive teaching methods include guided discovery and hands-on learning. Students discuss what they are learning and experience the learning through role-play. The student learning environment includes group work and discussions. Students are prepared in the classroom and clinical laboratory to analyze and solve the types of problems they will encounter in clinical practice. The students receive continuous feedback regarding performance. The optimal result of a progressive curriculum is creation of entry-level nurses who are prepared to take the knowledge, skills, and attitudes they have learned during nursing education and apply them to nursing practice.

Nursing education prepares students to practice within established professional guidelines and standards. Nursing students continuously engage in the development, comprehension, application, analysis and synthesis of knowledge. Nursing education produces changes in the behavior that evolve from organized learning experiences designed to develop effective communication skills, critical thinking and problem-solving abilities, and self and community awareness. Nursing education is a sequential process through which students acquire nursing knowledge, skills, and attitudes, and are socialized into the profession of nursing.

Nursing education progresses from simple to complex principles and concepts. Nurse educators base curriculum decisions on realistic conceptions of nursing roles and practice. The curriculum is flexible; reflects current societal and health care trends and issues; and promotes evidence-based practice. Nursing education produces entry-level nurses who are able to pass the NCLEX-RN Examination® on the first attempt and possess the knowledge, skills, and attitudes required to provide legal, ethical, safe, and effective nursing care for individuals, families and groups within the community (The Scope of Practice for Academic Nurse Educators, National League for Nursing, 2005). Nursing education also enables the students to successfully complete their career goals and assists in meeting the nursing care needs of the community.

**Teaching and Learning in Nursing Education:**

**Teaching** is the facilitation of learning and requires valuing the student as a person and understanding the student’s learning needs. Learning is facilitated by timely feedback which is understandable to the learner. A clearly understood plan collaboratively developed by the learner and the instructor is essential to the student’s ability to translate constructive feedback into changes in behavior. The plan includes objectives, timelines, and evaluation.

The teaching process also communicates a progression from simple to complex concepts and fosters intellectual and personal growth by stimulating intellectual inquiry, creativity, and originality. The teaching process develops and utilizes critical thinking skills and clinical judgment skills in the cognitive, affective and psychomotor domains. The cognitive domain pertains to mental skills (knowledge) and contains three practical instructional levels including fact, understanding, and application. The
affective domain is growth in feelings or emotional areas (attitude) that is based upon behavioral aspects and beliefs. The three levels in the affective domain are awareness, distinction, and integration. The psychomotor domain pertains to manual or physical skills and incorporates the three practical instructional levels including imitation, practice, and habit. (Bloom, 1956 and Anderson, 2001)

The scholarship of teaching is the primary focus of nursing scholarship for NMJC Nursing Program faculty. The scholarship of teaching is defined as the process occurring when the teacher creatively builds bridges between his or her own understanding and the students' learning.

Learning is the independent, self-motivated process of seeking, acquiring, synthesizing and evaluating new knowledge. Learning is acquired through the repetition and reinforcement of successful behaviors that contribute to desired behavior patterns. To enhance the learning process, the nursing faculty provides a stimulating learning environment inclusive of student involvement, problem-solving, and discovery of new ideas, skills, attitudes and knowledge of nursing. The student is responsible for his/her learning and faculty is responsible for structuring the learning setting to facilitate learning for the adult student.

The adult learner is capable of self-direction, builds on previous experiences, prefers problem-centered vs. subject-centered learning, needs active involvement in learning and requires motivation and confidence to learn. The adult learner needs to connect the content to their own meaning structures and focus on learning. Learning is enhanced when the subject matter is perceived by the adult learner as having meaning for one’s own purpose (Knowles, 1973).

Communication is an important component of the teaching and learning processes involving the exchange of information between people by means of speaking, writing, or using a common system of signs or behavior. The faculty and student must be able to communicate information in an accurate, correct, and understandable manner.

The nursing faculty believes the associate degree nursing education is a foundation for life-long learning and advancement to higher levels of nursing education.

Caring: caring is a valuable component of clinical nursing practice. The faculty believe the core attributes of caring are relationship, action, attitude, acceptance and variability.

Relationship: interaction between the nurse and the patient. Relationship is a foundation of nursing practice. Important characteristics of a professional caring relationship are trust, intimacy and responsibility.

Action: doing for the patient or being with the patient. Important caring actions include nursing care, touch, presence and competence.

Attitude: a way of acting. A caring nurse approaches patients with a positive attitude.

Acceptance: validates a person’s dignity and confirms his/her value as a person.
Variability: caring is fluid and changing in response to circumstances, environment and the people involved.

The outcomes of caring in nursing include an increased ability to heal for patients and an increased sense of personal and professional satisfaction for nurses (Brilowsky, 2005).

Practice of Nursing: assisting individuals, families or communities in maintaining or attaining optimal health, assessing and implementing a plan of care to accomplish defined goals and evaluating responses to care and treatment. This practice is based on specialized knowledge, judgment and nursing skills acquired through educational preparation in nursing and in the biological, physical, social and behavioral sciences (New Mexico Nurse Practice Act). There are three major roles of nursing practice: provider of care, manager of care and member of the nursing profession. During the practice of nursing, the nurse should demonstrate legal, ethical, safe, and effective nursing care.

The scholarship of practice in nursing is defined by NMJC Nursing Program as self-development to improve competence beyond the basic practice of professional nursing. NMJC Nursing Program faculty members engage in the scholarship of practice in nursing through the process of professional development. In order to improve competence in content-specific areas of instruction, faculty members participate in content-specific continuing education.

NMJC Nursing Program - Program Outcomes

The program outcomes for the NMJC Nursing Program are:

1. To prepare the graduate with the communication skills, critical thinking/problem-solving skills, and awareness of self and community necessary to provide legal, ethical, safe, and effective nursing care in a variety of healthcare settings.

2. To prepare the graduate with the knowledge, skills, and attitudes necessary to perform at the entry-level of practice as a registered nurse within the three major roles of nursing practice: provider of care, manager of care, and member of the nursing profession.

3. To prepare the graduate to demonstrate entry-level competence of a registered nurse through successful completion of the NCLEX-RN Examination® on the first attempt.

4. To prepare the graduate with a foundation for lifelong learning and advancement to higher levels of nursing education.
The conceptual framework for NMJC Nursing Program is best described as an outcome-focused, competency-based, eclectic framework. The nursing faculty has identified concepts they believe are core to nursing practice and have integrated these concepts throughout the curriculum. Three major concepts serve as the foundation for the nursing program’s conceptual framework: (1) the ability to communicate effectively; (2) the ability to solve problems through critical thinking; and (3) demonstration of self and community awareness. These concepts are the student learning outcomes identified by New Mexico Junior College for students graduating with an associate degree.

These major concepts provide a framework for progressive acquisition of knowledge, skills, and attitudes throughout the program. The nursing curriculum assimilates the knowledge attained in general education courses with nursing principles and concepts while utilizing a simple to complex progression. The main concepts are supported by sub-concepts that strengthen the conceptual framework. The National League for Nursing, Educational Competencies for Graduates of Associate Degree Nursing Programs, Core Components of Nursing Practice provide eight of the sub-concepts.

### Major Concepts and Sub-concepts

1. **Communication**
   - Communication in Nursing
   - Teaching and Learning

2. **Critical Thinking and Problem-solving**
   - Assessment
   - Clinical Decision Making
   - Collaboration
   - Managing Care
   - Nursing Process

3. **Self and Community Awareness**
   - Professional Behaviors
   - Caring Interventions
   - Cultural Competence

The framework formed by these concepts establishes the priorities for curriculum development and implementation. The nursing curriculum reflects the implementation of these concepts as related to the practice of nursing. Collectively, these concepts define the roles (provider of care, manager of care, and member within the discipline of nursing) and functions of the associate degree nurse.
1. **Communication**: an interactive process where there is an exchange of information occurring verbally, non-verbally, in writing, or through the use of information systems, media, and information technology. Communication includes comprehension of information to summarize, analyze, evaluate, and apply to a specific situation. Communication must be accurate, correct, and understandable. Communication involves utilizing appropriate channels to relay information and ensure accuracy of information.

   **Sub-concepts of Communication:**

   - **Communication in Nursing** - an interactive process through which there is an exchange of information that may occur verbally, non-verbally, in writing, or through information technology. Those who may be included in this process are the nurse, patient, significant support person(s), other members of the health care team, and community agencies. Effective communication demonstrates caring, compassion, and cultural awareness, and is directed toward promoting positive outcomes and establishing a trusting relationship. Therapeutic communication is an interactive verbal and non-verbal process between the nurse and patient that assists the patient to cope with change, develop more satisfying interpersonal relationships, and integrate new knowledge and skills (NLN, 2000).
   
   - **Teaching and Learning** – processes used to promote and maintain health and reduce risks, and are implemented in collaboration with the patient, significant support person(s), and other members of the healthcare team. Teaching encompasses the provision of health education to promote and facilitate informed decision making, achieve positive outcomes, and support self-care activities. Integral components of the teaching process include the transmission of information, evaluation of the response to teaching, and modification of teaching based on identified responses. Learning involves the assimilation of information to expand knowledge and change behavior (NLN, 2000).

2. **Critical Thinking and Problem-solving**: the ability to define a problem and arrive at a logical solution by using appropriate technology and information systems to collect, analyze, and organize information; then applying a problem-solving approach to analyze and evaluate the data resulting in a solution. Nurses apply a scientific problem-solving approach to patient care known as the nursing process. The nursing process includes assessment, diagnosis, planning, implementation, documentation, and evaluation.

   Problem-solving in patient care integrates an understanding of the multiple dimensions of patient-centered care with consideration for culture, ethnicity, social backgrounds, natural and behavioral sciences, and evidence-based practice to deliver optimal health care. Evidence-based practice discriminates between the valid and invalid reasons for modifying clinical practice based on expertise or the patient/persons preferences in developing an individualized plan of care. Nurses are members of an interdisciplinary team working together to solve problems and promote positive patient outcomes.

   **Sub-concepts of Critical Thinking and Problem-solving:**

   - **Assessment** – the collection, analysis, and synthesis of relevant data for the purpose of appraising the patient’s health status. Comprehensive assessment provides a holistic view of the patient which includes dimensions of physical, developmental, emotional, psychosocial,
cultural, spiritual, and functional status. Assessment involves the orderly collection of information from multiple sources to establish a foundation for provision of nursing care, and includes identification of available resources to meet patient needs. Initial assessment provides a baseline for future comparisons that can be made in order to individualize patient care. Ongoing assessment and reassessment are required to meet the patient’s needs (NLN, 2000).

- **Clinical Decision Making** – encompasses the performance of accurate assessments, the use of multiple methods to access information, and the analysis and integration of knowledge and information to formulate clinical judgments. Effective clinical decision making results in finding solutions, individualizing care, and assuring the delivery of accurate, safe care that moves the patient and support person(s) toward positive outcomes. Evidence-based practice and the use of critical thinking provide the foundation for appropriate clinical decision making (NLN, 2000).

- **Collaboration** – the shared planning, decision making, problem-solving, goal setting, and assumption of responsibilities by those who work together cooperatively, with open professional communication. Collaboration occurs with the patient, significant support person(s), peers, other members of the healthcare team, and community agencies. The nurse participates in the team approach to holistic, patient-centered care across healthcare settings. The nurse functions as advocate, liaison, coordinator, and colleague as participants work together to meet patient needs and move the patient toward positive outcomes. Collaboration requires consideration of patient needs, priorities and preferences, available resources and services, shared accountability, and mutual respect (NLN, 2000).

- **Managing Care** – the efficient, effective, use of human, physical, financial, and technological resources to meet patient needs and support organizational outcomes. Effective management is accomplished through the processes of planning, organizing, directing, and controlling. The nurse, in collaboration with the healthcare team, uses these processes to assist the patient to move toward positive outcomes in a cost effective manner, to transition within and across healthcare settings, and to access resources (NLN, 2000).

- **Nursing Process** – the basis for nursing practice and problem-solving. Nurses utilize a systematic problem-solving process known as the “nursing process”. The nursing process is the method for the collection, organization and analysis of data; formulation of nursing diagnoses; development of plans of care; implementation of planned care; documentation of care; and evaluation of outcomes of the plan of care.

3. **Self and Community Awareness**: the contribution to a diverse, global community, practicing ethical behavior(s) in dealing with people, problems and situations, and demonstrating behaviors appropriate for working in teams. The nurse is responsive to changing needs of society and culture and to the expanding knowledge of nursing by remaining involved in professional growth and lifelong learning.

Self (the nurse) is responsible for assessing individual competence and the regulation of knowledge, skills, and attitudes. The nurse is committed to practice within the parameters of professional standards, personal knowledge and experience. Within nursing practice the nurse demonstrates competence along a continuum from novice to expert. The nurse practices professional behaviors within nursing practice; these behaviors are characterized by a commitment to the profession and the recognition and consideration for the individual, family, group and/or community needs.

As a patient representative, the nurse advocates for patient rights and protects the patient. The nurse focuses on promotion and maintenance of health; prevention or resolution of disease, illness or disability for the person, family, group and/or community (ANA, 2004). The nurse adheres to the
standards of professional practice and is held accountable for his/her own actions, behaviors and practices of nursing within the legal, ethical and regulatory frameworks of nursing practice. The nurse is bound by a professional code of ethics and is responsible for adhering to the code.

The nurse delivers legal, ethical, safe, and effective care by providing, directing, and supervising the care provided to the patient(s) as a part of team leadership and collaboration with others in a plan of care that promotes positive patient outcomes. When delegating responsibility for nursing care to others, the nurse ensures trained and qualified personnel are delivering the care. As a patient advocate the nurse protects the patient by reporting unsafe practices of other healthcare providers by using appropriate channels of communication.

The nurse participates and enhances the quality and effectiveness of nursing practice by being innovative in nursing practice. The nurse participates in safety, effectiveness, and quality improvement activities by developing, implementing and evaluating policies, procedures, and/or guidelines to improve the quality of practice.

Sub-concepts of Self and Community Awareness:

- **Professional Behaviors** – behaviors characterized by a commitment to the profession of nursing. The graduate of an associate degree nursing program adheres to standards of professional practice, is accountable for his/her own actions and behaviors, and practices nursing within legal, ethical, and regulatory frameworks. Professional behaviors also include a concern for others, as demonstrated by caring, valuing the profession of nursing, and participating in ongoing professional development (NLN, 2000).

- **Caring Interventions** – nursing behaviors and actions that assist patients in meeting their needs. These interventions are based on a knowledge and understanding of natural sciences, behavioral sciences, nursing theory, nursing research, and past nursing experiences. Caring is the “being with” and “doing for” that assist patients to achieve desired results. Caring behaviors are nurturing, protective, compassionate, and person-centered (NLN, 2000).

- **Cultural Competence** - an ability to interact effectively with people of different cultures. Cultural competence is comprised of four components: awareness of one's own cultural worldview, attitude towards cultural differences, knowledge of different cultural practices and worldviews, and utilization of cross-cultural skills. Cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures. Nurses must be aware of the cultural differences of others, including customs, thoughts, behaviors, communication styles, values, traditions, and institutions. Nurses should be aware of these differences, respect them, and work within the parameters set by the patient's values when planning and delivering patient care. Nurses must also recognize their own cultural values and draw parallels when possible and identify any prejudices and stereotypes that prevent them from communicating effectively with patients from different cultures. Culturally competent nurses view all patients as unique individuals and realize that the patient’s experiences, beliefs, values, and language greatly influence the patient’s perceptions of nursing care and how the patient perceives his/her health and the health care services received.
The NMJC Nursing Program curriculum consists of two levels of education:
Level I: Semesters I and II
Level II: Semesters III and IV

Sequence of Nursing Core Courses (Nursing + Pharmacology)

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<tr>
<th>Level I, Semester I</th>
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<td>NU119</td>
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<td>PC213</td>
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<td>Nursing IV</td>
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<td>NU222</td>
<td>Preparation for the NCLEX-RN ®</td>
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**Level I, Semester I** - The student is introduced to the major concepts and sub-concepts as they relate to foundations of nursing practice; nursing process; promotion and maintenance of patient health across the lifespan, comprehensive health assessment, diagnostic testing, review of mathematic principles; and basic pharmacological concepts.

**Level I, Semester II** - The student is assisted to apply the major concepts, sub-concepts, foundational principles, nursing process, comprehensive health assessment, diagnostic testing, and body system-specific pharmacologic concepts including medication administration to patients across the lifespan who are coping with common alterations in the health continuum of a specific body system of lower complexity including demonstration of specific nursing skills.

**Level II, Semester III** - The student is assisted to apply the major concepts, sub-concepts, foundational principles, nursing process, comprehensive health assessment, diagnostic testing, and body system-specific pharmacologic concepts to patients across the lifespan who are coping with common alterations in the health continuum of a specific body system of higher complexity with demonstration of specific nursing skills.

**Level II, Semester IV** - The student is assisted to apply the major concepts, sub-concepts, foundational principles, the nursing process, comprehensive health assessment, diagnostic testing, and body system-specific pharmacologic concepts to patients across the lifespan who are coping with complex alterations of the health continuum involving specific body systems and related multi-system effects. The concepts of leadership, management, community-based nursing, and emergency/disaster nursing are expanded. A capstone review course designed to facilitate successful completion of the NCLEX-RN® Examination completes the curriculum.
The NMJC Student Learning Outcomes for Students Graduating with an Associate Degree are:

(1) Communication; (2) Critical Thinking and Problem-solving; and (3) Self and Community Awareness.

These outcomes form the major concepts of the conceptual framework and also serve as the organizational structure for the NMJC Nursing Program Student Learning Outcomes. The nursing faculty categorized the NLN, Educational Competencies for Graduates of Associate Degree Nursing Programs progressively by educational level under the NLN Core Components of Nursing Practice.
Level I - Student Learning Outcomes
Competency Statements

Communication

Upon completion of Level I, it is anticipated the student will be able to

Communication in Nursing
1. utilize therapeutic communication skills when interacting with patients and significant support person(s).
2. communicate relevant, accurate, and complete information in a concise and clear manner.
3. report and document assessments, interventions, and progress toward patient outcomes.
4. protect confidential information.
5. utilize information technology to support and communicate the planning and provision of patient care.
6. utilize appropriate channels of communication to achieve positive patient outcomes.

Teaching and Learning
7. develop an individualized teaching plan based on assessed needs.
8. teach the patient and significant support person(s) the information and skills needed to achieve desired learning outcomes.

Critical Thinking and Problem-solving

Upon completion of Level I, it is anticipated the student will be able to

Assessment
1. assess the interaction patterns of the individual patient or significant support person(s).
2. assess the impact of developmental, emotional, cultural, religious, and spiritual influences on the patient’s health status.
3. assess the patient’s health status by completing a health history and performing a physical, cognitive, psychosocial, and functional assessment.
4. assess patient and significant support person(s) for learning strengths, capabilities, barriers, and educational needs.
5. assess the patient’s response to actual or potential health problems.
6. assess the patient’s response to interventions.
7. assess the patient for changes in health status and identified needs.

Clinical Decision Making
8. use evidence-based information, collected electronically or through other means, to support clinical decision-making.

Managing Care
9. prioritize patient care.
10. assist the patient and significant support person(s) to access available resources and services.
11. implement nursing strategies to provide cost effective care.
12. demonstrate competence with current technologies.
Collaboration
13. work cooperatively with others to achieve patient and organizational outcomes.
14. interact creatively and openly with others to solve problems to achieve patient goals and outcomes.

Self and Community Awareness

Upon completion of Level I, it is anticipated the student will be able to

Professional Behaviors
1. practice within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice.
2. report unsafe practices of healthcare providers using appropriate channels of communication.
3. demonstrate accountability for nursing care given by self and/or delegated to others.
4. use standards of nursing practice to perform and evaluate patient care.
5. advocate for patient rights.
6. maintain organizational and patient confidentiality.
7. practice within the parameters of individual knowledge and experience.
8. serve as a positive role model within healthcare settings and the community at large.
9. recognize the impact of economic, political, social, and demographic forces on the delivery of healthcare.
10. participate in lifelong learning.
11. develop and implement a plan to meet self learning needs.
12. delineate and maintain appropriate professional boundaries in the nurse-patient relationship.

Caring Interventions
13. protect and promote the patient’s dignity.
14. identify and honor the emotional, cultural, religious, and spiritual influences on the patient’s health.
15. demonstrate caring behavior towards the patient, significant support person(s), peers, and other members of the healthcare team.
16. provide accurate and safe nursing care in diverse settings.
17. implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.
18. perform nursing skills competently.
19. provide a safe physical and psychosocial environment for the patient.
20. assist the patient and significant support person(s) to cope with and adapt to stressful events and changes in health status.
21. assist the patient to achieve optimum comfort and functioning.
22. prepare the patient and significant support person(s) for intervention, treatment modalities, and self-care.
23. support the patient and significant support person(s) when making healthcare and end-of-life decisions.
24. adapt care in consideration of the patient’s values, customs, culture, and/or habits.

Evaluation of Achievement of Level I Student Learning Outcomes

Student learning outcomes are implemented and evaluated across the Level I curriculum through unit examinations, course assignments, nursing skills demonstrations, and clinical practice performance evaluations. The student is responsible for sustained competence of Level I Student Learning Outcomes during Level II of the nursing program.
Level II - Student Learning Outcomes

Competency Statements

Un-bolded objectives are Level I Student Learning Outcomes requiring sustained competence in Level II. Bolded objectives are new Student Learning Outcomes to be achieved during Level II.

Communication

Upon completion of Level II, it is anticipated the graduate will be able to

Communication in Nursing
1. utilize therapeutic communication skills when interacting with patients and significant support person(s).
2. communicate relevant, accurate, and complete information in a concise and clear manner.
3. report and document assessments, interventions, and progress toward patient outcomes.
4. protect confidential information.
5. utilize information technology to support and communicate the planning and provision of patient care.
6. utilize appropriate channels of communication to achieve positive patient outcomes.

Teaching and Learning
7. develop an individualized teaching plan based on assessed needs.
8. teach the patient and significant support person(s) the information and skills needed to achieve desired learning outcomes.
9. provide the patient and significant support person(s) with the information to make choices regarding health.
10. evaluate the progress of the patient and significant support person(s) toward achievement of identified learning outcomes.
11. modify the teaching plan based on evaluation of progress toward meeting identified learning outcomes.
12. provide assistive personnel with relevant instruction to support achievement of patient outcomes.

Critical Thinking and Problem Solving

Upon completion of Level II, it is anticipated the graduate will be able to

Assessment
1. assess the interaction patterns of the individual patient or significant support person(s).
2. assess the impact of developmental, emotional, cultural, religious, and spiritual influences on the patient’s health status.
3. assess the patient’s health status by completing a health history and performing a physical, cognitive, psychosocial, and functional assessment.
4. assess patient and significant support person(s) for learning strengths, capabilities, barriers, and educational needs.
5. assess the patient’s response to actual or potential health problems.
6. assess the patient’s response to interventions.
7. assess the patient for changes in health status and identified needs.
8. assess the patient's ability to access available community resources.
9. assess the environment for factors that may impact the patient's health status.
10. assess the strengths, resources, and needs of patients within the context of their community.

Clinical Decision Making
11. use evidence-based information, collected electronically or through other means, to support clinical decision-making.
12. make clinical judgments and management decisions to ensure accurate and safe care.
13. analyze and utilize assessment and reassessment data to plan care.
14. evaluate the effectiveness of care provided in meeting patient outcomes.
15. modify patient care as indicated by the evaluation of outcomes.
16. participate in problem identification and data collection for quality control or improvement processes to meet patient outcomes.

Managing Care
17. prioritize patient care.
18. assist the patient and significant support person(s) to access available resources and services.
19. implement nursing strategies to provide cost effective care.
20. demonstrate competence with current technologies.
21. coordinate the implementation of an individualized plan of care for patients and significant support person(s).
22. facilitate the continuity of care within and across healthcare settings.
23. delegate aspects of patient care to qualified assistive personnel.
24. supervise and evaluate the activities of assistive personnel.
25. adapt the provision of patient care to changing healthcare settings and management systems.

Collaboration
26. work cooperatively with others to achieve patient and organizational outcomes.
27. interact creatively and openly with others to solve problems to achieve patient goals and outcomes.
28. collaborate with the patient, significant support person(s), and other members of the healthcare team to evaluate progress toward achievement of outcomes.
29. coordinate the decision making process with the patient, significant support person(s), and other members of the healthcare team.
30. collaborate to bring about fair solutions that balance differing needs, values, and motivations for the purpose of achieving positive patient outcomes.
Self and Community Awareness

Upon completion of Level II, it is anticipated the graduate will be able to

Professional Behaviors
1. practice within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice.
2. report unsafe practices of healthcare providers using appropriate channels of communication.
3. demonstrate accountability for nursing care given by self and/or delegated to others.
4. use standards of nursing practice to perform and evaluate patient care.
5. advocate for patient rights.
6. maintain organizational and patient confidentiality.
7. practice within the parameters of individual knowledge and experience.
8. serve as a positive role model within healthcare settings and the community at large.
9. recognize the impact of economic, political, social, and demographic forces on the delivery of healthcare.
10. participate in lifelong learning.
11. develop and implement a plan to meet self-learning needs.
12. delineate and maintain appropriate professional boundaries in the nurse-patient relationship.
13. describe political processes as they affect agency specific healthcare.
14. participate as a member of professional organizations.

Caring Interventions

15. protect and promote the patient’s dignity.
16. identify and honor the emotional, cultural, religious and spiritual influences on the patient’s health.
17. demonstrate caring behavior towards the patient, significant support person(s), peers, and other members of the healthcare team.
18. provide accurate and safe nursing care in diverse settings.
19. implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.
20. perform nursing skills competently.
21. provide a safe physical and psychosocial environment for the patient.
22. assist the patient and significant support person(s) to cope with and adapt to stressful events and changes in health status.
23. assist the patient to achieve optimum comfort and functioning.
24. prepare the patient and significant support person(s) for intervention, treatment modalities, and self care.
25. support the patient and significant support person(s) when making healthcare and end-of-life decisions.
26. adapt care in consideration of the patient’s values, customs, culture, and/or habits.

Evaluation of Achievement of Level II Student Learning Outcomes

Student learning outcomes are implemented and evaluated across the Level II curriculum through unit examinations, course assignments, nursing skills demonstrations, and clinical practice performance evaluations. The student is responsible for sustained competence of Level I Student Learning Outcomes and achievement of Level II Student Learning Outcomes during Level II of the nursing program.
NMJC Nursing Program
Policies and Procedures

Student Records
The Registrar’s Office maintains official academic records. Please see the Academic Information section of the NMJC Student Catalog for information regarding college academic records policies.

An academic advising file is maintained in the Nursing Program Office. The Director of Nursing is the custodian of these files containing the student’s academic records and portfolio. The student’s file may be viewed upon the student’s request.

Maintaining current student contact information is essential. It is the student’s responsibility to notify the Administrative Secretary for Nursing of changes in student demographic information.

The Family Educational Rights and Privacy Act of 1974
Students at New Mexico Junior College and NMJC Nursing Program are protected under the Family Educational Rights and Privacy Act of 1974 (FERPA) that prohibits disclosure of student information or academic records without the student’s permission. For specific information regarding NMJC’s policy for maintaining compliance with FERPA, please refer to NMJC College Catalog, Academic Information section.

Patient Information Confidentiality/HIPAA
Confidentiality regarding patient information is mandatory in the nursing profession. Federal regulations dictate the patient’s right to information confidentiality. Thus, it is imperative for the student nurse to understand the professional concept of confidentiality and to agree to maintain patient information confidentiality throughout the nursing education process and nursing career. The Health Insurance Portability and Accountability Act of 1996 (HIPAA), Privacy Rule, standards address the use and disclosure of individuals’ health information. This health information is called “protected health information” which is subject to the Privacy Rule. It also addresses the standards for individuals’ privacy rights to understand and control how their information is used. A major goal of the Privacy Rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and well being.

During the process of nursing education, the student nurse enters into relationships with patients, families, groups and communities in many healthcare environments. Through the student nurse/patient relationship and entry into healthcare environments, the student nurse is exposed to personal and medical information about many patients, families and groups. Patient information is entrusted to the student nurse and must not be communicated to any unauthorized person. Patient information from any source and in form, including paper records, oral communication, audio recording, and electronic display, is strictly confidential. Unauthorized release of confidential information can also result in personal, civil and/or criminal liability and legal penalties. It is the policy of the Nursing Program that students of the school shall respect and preserve privacy and confidentiality of patient information, regardless of the agency to which the student is assigned.

Violations of this policy include, but are not limited to:

- Accessing information that is not within the scope of the student’s assignment;
- Misusing, disclosing without proper authorization, or altering patient or personnel information;
• Disclosing or using another person’s electronic or computer codes or passwords;
• Leaving a secured application (written or electronic) unattended during assignment
• Attempting to access a secured application without proper authorization.

The student will be disciplined according to the Action Plan and/or Learning Contract.

Advisement
The process of academic advisement is one of information exchange, communication, teaching, and guidance. Each nursing student is assigned a nursing faculty advisor at the beginning of the semester. The student is required to meet with the advisor at mid-term and end of the semester for academic counseling and evaluation. The student may request a conference with an advisor at other times during the semester. The student desiring a conference with his/her academic advisor should make an appointment during the advisor’s office hours.

Non-Discrimination Policy
NMJC and the NMJC Nursing Program faculty and staff are committed to a policy of non-discrimination on the basis of gender, race, color, national origin, ethnicity, religion, age, disability, sexual orientation, or marital status in any of its policies, practices, or procedures in accordance with applicable federal, state and local laws, nor will they condone any acts of illegal discrimination by its employees. This provision includes, but is not limited to, employment, admissions, financial aid, and educational services. The College prohibits and condemns retaliation of any kind against any employee or student engaging in the exercise of free speech or in other activities protected by federal, state, or local laws.

Any student who has questions or wishes to file a complaint about illegal discrimination, retaliation, or harassment should contact the Vice President for Student Services at 575.492.2670.

ADA Compliance
Reasonable accommodations will be made for students who have a verifiable need. Any student requiring accommodations must have his/her need verified by the Special Needs Services (SNS) Coordinator. A physician or appropriate agency working with the student must substantiate the need. The SNS coordinator will then notify the professor(s) of the type(s) of accommodation(s) needed by the student.
NMJC Nursing Program
Course Grading Policies

A final course average of 79% or higher is required for a passing course grade.

1. Calculation of Course Grade

   a. Unit Exams

      The student will be given one or more exams to assess mastery of the content for each course unit. The exams will be based on theoretical content and application of practical skills in a simulated practice setting.

   b. Final Exam

      The final course exam will be comprehensive, covering material for the entire semester. The final exam will not include questions from semester unit exams.

   c. Unit Exams and Final Exam Average

      The first calculation is an average of the unit exam scores and the final exam score. Each unit exam and the final exam score will be weighted equally. An average score of 79% or higher is required.

      If an average score of 79% or higher is NOT earned on the unit exam scores plus the final exam score, other course grades will not be eligible for computation into a final grade and the student will earn a letter grade of D or F.

      If an average score of 79% or higher is earned on the unit exam scores plus the final exam score, other course grades become eligible for computation into the final course average.

      **Course Grading Scale**

      90-100  =  A
      83-89.99 =  B
      79-82.99 =  C
      75-78.99 =  D
      0-74.99  =  F

      The student receives exactly the earned grade. GRADES ARE NOT ROUNDED.

      Please note: When the Unit Exams average, Final Exam grade, and the grades for the projects/assignments are computed for the final course grade, this score may result in a failing final course grade of less than the required 79% average.
If the student fails the clinical practice portion of any course, a grade of 'F' will be earned for the course, regardless of the theory grade.

d. Clinical Practice Requirements

Each student must satisfactorily complete the clinical practice portion of each course in order to pass the course. Clinical rotation(s) information will be distributed prior to the clinical rotation(s) detailing clinical requirements, student learning outcomes, instructions, schedules and clinical performance evaluations.

Clinical performance evaluations are completed by the nursing faculty to evaluate the student nurse’s clinical performance. The student learning outcomes assessed in the clinical performance evaluation are the clinical competencies associated with the eight core components of nursing practice as defined by the National League for Nursing. The student learning outcomes are organized under the nursing program’s major curriculum concepts of Communication, Critical Thinking and Problem-solving and Self and Community Awareness as well as the eight core components of nursing practice.

A formative evaluation will be performed during the clinical rotation to assess the student’s progress toward achievement of student learning outcomes. The nursing faculty will meet with the student and discuss the outcome of the formative clinical performance evaluation. The student will be informed of successful outcome(s) achievement and problem areas will be identified. The student and nursing faculty member will discuss strategies to assist the student in meeting the outcome(s). An action plan and/or learning contract will be initiated. The student must satisfactorily complete all requirements listed in the action plan and/or learning contract in order to pass the clinical portion of the course. If necessary, multiple formative evaluations may be completed by nursing faculty throughout the clinical rotations.

A summative evaluation will be performed at the end of the clinical rotations for the course. The student is required to meet 100% of the clinical learning outcomes by the end of the clinical rotations for the course. If all student learning outcome(s) are not met in the summative evaluation, the student will fail the clinical rotation and earn a grade of “F” for the entire course.

e. Pass/Fail Assignments

The student must satisfactorily complete all pass/fail assignments and achieve at least the minimum passing score designated for the assignment in order to pass the course.

f. Incomplete Grade

A grade of Incomplete or “I” will be earned only when the student has completed a substantial portion (80-85%) of the course work and an event occurs making it impossible for the student to complete the remaining 10-15% of the work prior to the end of the semester. It is the student’s responsibility to notify the instructor of the
event. The instructor and student may enter into a completion contract. The contract will list the objectives required for course completion. The student is responsible for completion of the contracted objectives. Upon satisfactory completion of the contracted objectives, the incomplete ‘I’ grade will be changed to a letter grade of A, B, C, D, or F. If the student does not satisfactorily complete the terms of the contract within the specified time period, the “I” grade will be changed to a letter grade of F.

g. Progression Through the Nursing Program

The student must achieve a final course grade of C (79%) or higher in all nursing and co-requisite courses to be eligible to progress to the next semester of the nursing program.

2. Course Assignments

An assignment is considered to be, but not limited to the following:

- Exams, care plans, journals, standardized exams (ATIs, etc.), pass/fail assignments, quizzes, posters, presentations, laboratory skills assessments and projects.
- All assignments should be completed and submitted by due date and time.
- If an assignment(s) is not completed by the due date, a failing grade may be earned and the grade may result in the student failing the course.
- Late assignments:
  - A late assignment is any assignment submitted after the scheduled due date and time. For example, if an assignment is due by 5:00 pm on a certain day but turned in after 5:00pm on that date, the assignment will be considered one day late.
  - Ten (10) points will be deducted from a late assignment grade for each day the assignment is late.
  - After 10 consecutive days, the student will receive a grade of “0” for the assignment; however, all late assignments must be completed and submitted.
  - All late assignments must be clocked-in using the time clock in the Nursing Program Office and the clock stamp must be performed in the presence of a nursing program employee.
  - All late assignments must be initialed by a nursing program employee when turned in.
  - Assignments must be turned in during Nursing Program Office business hours.

Assessment Technologies Institute (ATI) Assignments

ATI assignments are considered as a ‘pass/fail’ section of nursing courses and help to determine the student’s competency in specific content areas. Topic (Content) Assessment Exams will be assigned through the ATI Testing system. Required exam titles and due dates for completion of the exams will be distributed by the faculty during class.

- The student is required to complete ATI examinations by the due dates. Usually prior to first day of class for instruction of related content. This test is considered the "pre-test".
- Prior to the unit examination regarding the related content, the student is required to complete ATI Remediation Sentences.
ATI Remediation Sentence Process:
- The student must print a copy of the Assessment Exam Result Report and locate the “Topics for Review” section of the report.
- Using the student’s ATI Review Books as resources, the student must write three or more sentences about each topic listed in the “Topics for Review” section of the report.
- The remediation sentences must be submitted by the designated due date and time. Usually immediately prior to the unit exam regarding the related content.

ATI Post-tests
- Immediately following the unit exam regarding related content, the student will take a "second version" ATI examination covering the same content assessed by the pre-test. This test is considered a "post-test".
- The student must achieve a score of 90% or higher on all ATI post-tests.
- If the student does not achieve a 90% score, he/she must review the exam, then repeat the exam until a score of 90% or higher is achieved.
- Consequences for not completing the exams and/or remediation sentences by the due dates include an action plan and/or learning contract with specified corrective action(s).
- If a student does not satisfactorily complete all of the required remediation sentences and all ATI examinations with a score of 90% or higher, the student will receive a failing grade for the course.

Clinical Laboratory Assignments and Return Demonstration of Skills Sets
The student is required to participate in clinical simulation laboratory assignments. The clinical simulation assignments will allow the student to demonstrate legal, ethical, safe, and effective nursing care through demonstration of specific nursing skills sets. The student is required to demonstrate proficiency when performing required nursing skills sets. The student will be given three opportunities to demonstrate proficiency. If unable to demonstrate proficiency to faculty member(s) within the three opportunities, the student will receive a failing grade for the course.
3. **Course Absence and Tardy**

**Classroom or Clinical Laboratory Absence:**
- The nursing faculty believes attendance and punctuality are crucial to the success of the nursing student.
- Attendance is required at every session of each course for which the student is enrolled.
- The nursing student is expected to be on time for classroom and laboratory assignments.
- A point deduction system will be used for unexcused absences. Points will be deducted from the final course grade.

**Point deduction system for absences in classroom or clinical laboratory:**

<table>
<thead>
<tr>
<th>Percent of hours missed</th>
<th># of Points Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5% of total course hours</td>
<td>No points</td>
</tr>
<tr>
<td>6-10% of total course hours</td>
<td>5 points</td>
</tr>
<tr>
<td>11-15% of total course hours</td>
<td>10 points</td>
</tr>
<tr>
<td>≥ 16% of total course hours</td>
<td>20 points</td>
</tr>
</tbody>
</table>

*Regular rules of rounding apply

- When unavoidable circumstances make attendance impossible, the student must provide explanations, written and verbal regarding the absence(s) to the professor.
- Unavoidable circumstances are considered but not limited to:
  - Accidents, deaths, hospitalizations and court-ordered subpoenas.
  - College-sponsored activities are considered excused absences and the sponsor of the activity must notify the professor(s) about the student absence.
  - It is the responsibility of the student to make arrangements with the professor of the missed class to complete the missed work. Arrangements for make-up work should be made within a reasonable time-frame, usually within one week of the absence(s).

**Clinical Absence:**

Clinical experiences are a vital component of nursing education. If the student is absent, the nursing faculty must be person-to-person via telephone (not a voice or test message) at least one hour prior to each day of clinical absence.

If a student fails to notify the nursing faculty prior to a clinical absence, the nursing faculty will initiate a corrective action plan and/or learning contract addressing the student’s unprofessional behavior. The student must make an appointment with the nursing faculty to discuss whether the clinical assignment can be rescheduled. It may not be possible to reschedule clinical assignments during the current semester. In this circumstance, the student will receive an “I” incomplete grade for the semester grade which will be entered as the student’s official grade for the course. The student will be required to enter into a contract and perform the contracted work in order to complete the course and receive a letter grade. If the contract is not satisfactorily completed by the student within the assigned timeframe, the
student will receive a grade of F for the course. See the Grading System Policy in the Academic Information Section or the NMJC Student Handbook for more information.

All clinical rotation absence hours must be made up; therefore, clinical rotation absence hours do not count in the point deduction system.

Classroom, Clinical Laboratory, or Clinical Rotations Tardy:

- The student will be counted tardy if the student arrives late to the beginning of a class, lab, or clinical rotation or is late returning to class, lab, or clinical rotation following a designated break or mealtime.
- Each unexcused tardy will count as one hour of absence.
- Absence hours acquired from tardy attendance will be counted in the above point deduction system.
- Please Note: Points deductions for absence and tardy hours may cause a student to fail the course.

4. Examination Policies

- Exams are taken in the nursing department or the testing center during designated times.
- Exam grades are posted and released for student viewing through the computer system after test analysis is completed by the faculty.
- After the exam is taken by all students of the class and grades are posted. The student will be allowed to review the exam in class during a designated time.
- All books, personal items, and electronic devices must be placed in a designated area.
- One pencil may be taken to the computer during exam completion. The student may not bring any personal items, notes, recording, copying, or electronic devices to the test computer.
- During the exam review the student is not allowed to utilize any writing materials, recording, copying, electronic devices, or bring a jacket/coat/hat to the examination review.
- The student may enter only the currently assigned nursing test program during the test period or assigned review. The student may not duplicate, copy, or electronically transmit any portion of the testing package at anytime. Duplicating, copying, or electronically transmitting any portion of the testing package will be considered academic dishonesty.
- Photo ID is required in the testing center.
- The student is required to follow all testing center policies while in the testing center.
- When a student arrives late for a scheduled exam:
  Students are expected to exhibit professional behaviors while in nursing school. Arriving on-time for scheduled activities is an example of professional behavior. Students are expected to arrive on time for scheduled exams. If a student is late for an exam, he/she must make an appointment with his or her advisor to discuss tardy behavior.
- When a student is unable to take a scheduled exam:
  When a student is unable to take a scheduled exam he/she must personally inform a nursing professor prior to the exam. If a student does not take a scheduled exam, it is the student’s responsibility to make an appointment with the nursing professor to discuss the reason the exam was missed and the possibility of a makeup exam.
• **Dishonesty on Exams:**
  Each student is expected to maintain the highest standards of honesty and integrity in academic matters. Cheating or gaining illegal information for any exam is considered dishonest. A student found to be dishonest on an exam will receive a grade of zero for the exam. The Nursing Program reserves the right to take disciplinary action, up to and including dismissal from the nursing program, against any student who is found guilty of academic dishonesty or otherwise fails to meet these standards.

• **Exam Review:**
  Exam review will take place in the testing center or other area designated by professors.

5. **Student Advising**

   **Student and Faculty Advisor Conferences**
   • The student is required to meet with his/her advisor at mid-term and at the end of each semester for academic counseling and evaluation.
   • The student-faculty advisor conference date(s) and available appointment time(s) will be posted on the advisor’s office door.
   • The student is required to sign-up for an appointment with the advisor.
   • If the student does not schedule and attend both (mid-term and final) conference sessions, he/she will receive an Incomplete ‘I’ grade for the course and will not be eligible to progress in the program until the conference(s) have been scheduled and attended.

6. **Student Portfolio**

   • A student portfolio is a collection of the student’s work completed throughout the length of the program.
   • The portfolio documents the student’s abilities to progress from simple to complex concepts in nursing knowledge, skills, and attitudes, effectively communicate, think critically and problem-solve, and demonstrate awareness of self and community.
   • The faculty advisor maintains all graded papers in a folder (portfolio) throughout the semester.
   • The portfolio should include all written assignments the student has completed during the semester, e.g. care plans, journals, assignments, projects, etc.
   • The portfolio folder becomes a part of the student’s personal file and evidence of the student’s progress in the nursing program.
New Mexico Junior College
Expectations of Student Conduct

Nursing students are accountable for following the New Mexico Junior College’s Code of Conduct. The following principles are part of the collective expectation of students in the NMJC learning community:

- **Civility:** Members of a learning community interact with others in a courteous and polite manner. Members of the community have a right to respect the values, opinions, and/or feelings of others.

- **Ethical behavior:** The pursuit of a higher education is a privilege. Associated with that privilege is an obligation to aspire to a set of principles and values that demonstrate a commitment to fairness, honesty, empathy, and achievement.

- **Morality:** Members of a learning community commit to ideals of appropriate human conduct. This is a lifestyle that seeks to harm no one and attempts to be a positive contributor in every interaction.

- **Respect:** Every member of this community should seek to both gain and demonstrate respect. Members should hold one another in high regard. Each individual should conduct him or herself in a manner worthy of that regard. That regard is gained by decent and appropriate behavior.

For more detailed information regarding NMJC student conduct expectations, please refer the NMJC Student Handbook.

**NMJC Nursing Program**
**Behavioral Requirements**

In preparing to assume the professional nursing role, students are expected to assume the responsibility for their learning, to support the ethics and goals of the nursing profession, and value honesty in the fulfillment of academic and professional endeavors. The faculty recognizes its responsibilities to the public and nursing profession in the matters of integrity, honesty, clinical competence, and professional conduct. We reserve the right to retain only those students, who, in the judgment of the faculty and Director, satisfy requirements of integrity, honesty, clinical competence, and professional conduct.

**Integrity**

Integrity is the ability to make wise choices in dilemmas and demonstrated by actions over time that consistently reflects a commitment to personal and societal moral standards. “True Integrity is doing something right, even when no one is looking”. Integrity is a steadfast adherence to the strict moral and ethical codes of professionalism and conduct of the nurse. The student must be of sound moral and ethical character. The student nurse must build the foundation of professional nursing practice on personal and professional values. Integrity applies to behaviors in classroom and clinical settings, evaluation and non-evaluation situations, and in all endeavors. It promotes a spirit of community conducive to mutual trust and responsibility among students, faculty, and staff. Students and faculty share the responsibility for development, implementation, and evaluation of the profession of nursing. The nursing faculty recognizes integrity as the cornerstone for clinical practice, leadership, and learning. Integrity encompasses a commitment to people (staff, student, families, groups, and community), consistency in word and action, adherence to the professional nursing code of ethics, and professional nursing standards of practice.
Honesty
Each student is expected to maintain the highest standards of honesty in academic and professional matters. The college reserves the right to take disciplinary action, up to and including dismissal against any student who is found to have engaged in academic dishonesty or otherwise fails to meet these standards. Any infraction of academic dishonesty in any class may result in an automatic failure of the course. Academic dishonesty includes, but is not limited to: cheating on quizzes, tests, or assignments; claiming credit for work not done or done by others; unauthorized constructing, copying, pasting, accessing, electronically transmitting, or reviewing of exams; asking questions of other students or reviewing other students’ work during or after an exam; nondisclosure or misrepresentation in filling out application or other college records; written or verbal reproduction of content from computer program or clinical information; and unprofessional behaviors in the classroom, clinical lab or clinical rotation setting. Strict honesty in the nursing profession is crucial. The faculty expects the student nurse to practice honesty in academic and clinical experiences.

Classroom Conduct
The professor is responsible for evaluating student behavior in the class. Through enrollment in the nursing program, the student is assumed to have entered into an agreement with NMJC and the professor(s) to attend class regularly and to behave in an appropriate manner at all times.

The student nurse is expected to behave appropriately during classroom, clinical laboratory and clinical rotation settings. Misconduct will not be tolerated. A nursing student engaging in disruptive behavior and/or an act of misconduct will be immediately dismissed from the classroom, clinical lab, or clinical rotation setting and will be counted absent for that session. The student must make an appointment with the involved professor(s) and the Director of Nursing to discuss the behavior. At the discretion of the professor(s) and the Director of Nursing, the student may return to the next session or may be required to meet with the Vice President for Instruction for further discussion of the behavior. It is the student’s responsibility to follow the policies and demonstrate appropriate, professional behavior.

The student is expected to be attentive in the classroom, clinical laboratory, and clinical rotation setting. Inattentive behavior is defined as, but not limited to, excessive talking, sleeping, the appearance of sleeping and any other behavior that disrupts class activities. Inattentive behavior may result in disciplinary action.

Offensive or inappropriate language, such as cursing, is not allowed in the classroom or building. Any student using inappropriate language will be removed from the classroom, clinical laboratory, or clinical rotation setting and counseled by the Director of Nursing and disciplinary action may result.

Professional Conduct Expectations of the Student Nurse

The student nurse must demonstrate professional conduct in nursing practice. The following behaviors demonstrate professionalism in nursing:

1. Place the patient’s welfare first:
   - Be accessible and prompt in answering patient’s request.
   - Prioritize activities to reflect patients’ needs.
   - Keep patients well-informed.
   - Be responsive and reliable when needs are identified by patients, staff, or faculty.
2. Make a commitment to nursing and to the nursing program policies:
- Be present and willing to learn; comply voluntarily with rules and policies of the nursing program.
- Demonstrate enthusiasm for clinical.
- Be neat and clean in appearance.
- Be pleasant to staff, peers, and faculty.
- Give appropriate information to other nurses.
- Complete charts and records.

3. Be cooperative:
   - Resolve conflict in a respectful manner.
   - Take constructive criticism graciously and utilize criticism to make positive changes.
   - Accept the roles of others.
   - Handle stress and frustration in a respectful manner.
   - Exhibit intellectual and personal integrity.
   - Readily admit mistakes and oversights.
   - Be honest in communications with peers, staff, and faculty.
   - Observe legal, ethical, and safe techniques even when not being supervised.
   - Accept responsibility for errors and take appropriate corrective actions.
   - Make statements based on fact.
   - Do your own work.
   - Do not represent anyone else’s work as your own.
   - Be respectful of faculty, staff, peers, families and patients.

(Adapted from: *A Nuts-and-Bolts Approach to Teaching Nursing*, V. Schoolcraft)

**Professional Standards and Accountability**

The dimensions of professionalism include: how you look, how you speak, and how you treat others. The student nurse must follow the policies for dress and present a clean, neatly dressed professional appearance in the classroom, clinical laboratory, and clinical rotation setting. The student nurse must be aware of the language he/she is using to communicate with others and treat others with respect.

The NMJC Nursing Program faculty considers professional behavior to be an essential standard for the student nurse. The student nurse must adhere to and uphold the standards of nursing practice as written in the following guidelines:

*American Nurses’ Association Code of Ethics for Nurses*
*Core Components and Competencies for Graduates of Associate Degree Nursing Programs*
*Health Insurance Portability and Accountability Act of 1996 (HIPAA)*

All nursing students share the responsibility of observing a code of ethics, adhering to professional behaviors, and maintaining patient confidentiality. The nursing code of ethics requires truthfulness, honesty, and integrity in all human activities including immediate reporting of any and all suspected or actual patient abuse, dishonesty, unprofessional, or unethical behaviors.
Professional Conduct

The student nurse must demonstrate professional conduct. The student nurse is expected to be accountable for his/her own actions and aware of the guidelines that relate to professional conduct. The student nurse must adhere to the following guidelines for professional conduct:

1) The student is legally responsible for his/her personal and professional behaviors within course related experiences (classroom, clinical lab, and clinical rotations) including verbal, non-verbal, and written communication, as well as any injuries or illness sustained by the student as a result of the experiences.

2) Students will assume responsibility for individual judgments and actions. It is expected that the student will seek consultation and clarification regarding professional actions in which there is uncertainty. It is expected that the student will continue to maintain competency in practice by assuming responsibility and accountability for individual nursing judgments and actions at his/her level of knowledge and expertise and exercising informed judgment and use of individual competence and qualifications as criteria in seeking consultation, accepting responsibilities, and delegating nursing activities to others.

3) The student will respect and uphold the rights of the patient by providing services with respect for human dignity and the uniqueness of the patient unrestricted by consideration of social or economic status, personal attributes, or the nature of health problems.

4) The student will protect the patient against incompetent, unethical, or illegal practice; participate in the profession’s efforts to establish and maintain conditions of practice that are conducive to the highest quality of nursing care, and collaborate with members of the health profession and others promoting community and national efforts to meet the health care needs of the public.

5) Students will respect and uphold the rights of faculty as professionals; treat faculty members as a persons of worth and dignity; and respect the faculty member’s professional judgment.
Unprofessional Conduct as Defined by the New Mexico Nurse Practice Act

The following definition of unprofessional conduct applies to licensed nurses in New Mexico according to the NM Nurse Practice Act (NMNPA). The definition includes, but is not limited to, the following:

1. Dissemination of a patient/patient’s health information and/or treatment plan acquired during the course of employment to individuals not entitled to such information and where such information is protected by law and/or hospital/agency policy from disclosure.
2. Falsifying or altering patient records or personal records for the purpose of reflecting incorrect or incomplete information.
3. Misappropriation of money, drugs or property.
4. Obtaining or attempting to obtain any fee for patient services for one’s self or for another through fraud, misrepresentation, or deceit.
5. Aiding, abetting, assisting or hiring an individual to violate the nursing practice act or duly promulgated rules of the board of nursing.
6. Obtaining and/or attempting to obtain, possessing, administering or furnishing prescription drugs to any person, including but not limited to one’s self, except as directed by a person authorized by law to prescribe.
7. Failure to follow established procedure and documentation regarding controlled substances.
8. Failure to make or keep accurate, intelligible entries in records as required by law, policy and standards for the practice of nursing.
9. Obtaining or attempting to obtain a license to practice nursing for one’s self or for another through fraud, deceit, misrepresentation or any other act of dishonesty in any phase of the licensure by examination or endorsement process, or re-licensure process.
10. Practicing nursing in New Mexico without a valid, current NM licensure or permit, or aiding, abetting or assisting another to practice nursing without a valid, current NM license.
11. Failure to report a nurse(s) who is suspected of violating the NM Nursing Practice Act and/or rules.
12. Intentionally engaging in sexual contact with and/or toward a patient in a manner that is commonly recognized as outside the scope of the individual nurse’s practice.
13. Abandoning a patient(s) when the abandonment results or may result in potential or actual harm or danger to the patient(s).
14. Engaging in the practice of nursing when judgment or physical ability is impaired by alcohol or drugs or controlled substances.
15. Committing acts which constitutes grounds for disciplinary action where the convictions arises from employment as a nurse, where the intemperance, addiction, incompetence or unfitness has manifested itself during the course of employment as a nurse in a fashion which is contrary to the provision of good health care.
16. Mental incompetence manifested during the course of employment as a nurse in a fashion which is contrary to the provision of good health care.
17. Failure to follow state and federal laws, policies and procedures for the prescription and distribution of dangerous drugs including controlled substances.
18. Practice which is above the scope of licensure.
19. Delegation of medication administration, evaluation and nursing judgment to non-licensed persons.
20. Verbally and/or physically abusing a patient(s).
21. Failure to maintain appropriate professional boundaries which may cause harm to the patient.

A student nurse engaging in any student-applicable unprofessional conduct as defined by the New Mexico Nurse Practice Act will be counseled by the Director of Nursing and disciplinary action may be taken.
Dishonesty
Dishonesty involves acts of deception and illustrates a lack of commitment to truth-telling. Dishonesty occurs when a student attempts to show possession of a level of knowledge or skill that he or she does not possess. The two most common types of dishonesty are cheating and plagiarism. Cheating is the act of obtaining or attempting to obtain credit for academic work through the use of dishonest, deceptive, or fraudulent means. Clinical dishonesty is the fabrication of data or information that has no factual basis. Examples can be incomplete assessment data, falsifying records, making clinical decisions based on inaccurate data or observation which can cause harm to the patient. These actions do not promote patient safety. Plagiarism is representing the work of someone else as your own and submitting it to fulfill academic requirements. It is the student’s responsibility to know what constitutes academic dishonesty. If a student is unclear about a specific situation discuss it with a nursing faculty member.

Through the practice of academic dishonesty, the future success of a nurse and the safety of future patients may be threatened by a substandard knowledge base. Professional behavior is required of the student nurse and the graduate nurse. Academic dishonesty will result in disciplinary action. Dishonesty in the clinical rotation setting will result in failure for the course and expulsion from the nursing program. A student who is dismissed for dishonesty cannot reapply for admission to the program.

Cheating
Acts of cheating create questions of fairness in which non-cheating students may be put at a disadvantage when competing for grades, scholarships and awards. Students that engage in dishonesty will be disciplined according to the college policy. The following are examples of cheating (this is not an inclusive list):

1. Copying, in part or in whole, from someone else’s work.
2. Submitting work presented previously in another course, or by another person (if contrary to the rules of either course).
3. Altering or interfering with grading.
4. Using or consulting, during an examination, any sources of materials not authorized by the nursing faculty.
5. Doing class assignments for someone else.
6. Collaborating with other students on assignments when collaboration is not allowed or permitted by the rules.
7. Fabricating data.
8. Committing acts which defraud or misrepresent an assignment.

Acts of cheating will result disciplinary action and may include dismissal from the nursing program.

Plagiarism
Plagiarism represents a lack of commitment to honesty. Plagiarism is defined in the Merriam-Webster Dictionary as: “to steal and pass off the idea or words of another, as one’s own; use another’s production without crediting the source; present as new and original an idea or product derived from an existing source”. Submitting the work of another as one’s own without proper acknowledgment is plagiarism. Any student, who fails to give credit for quotations or essentially identical expression of material taken from books, encyclopedias, magazines, computer programs, and other referenced works, or from the themes, reports, or the writings of a fellow student, is guilty of plagiarism. In nursing, copying of another’s care plans, drug references, case studies, or other required program documents without proper citation is an act of plagiarism. All copied works or direct quotations must be given proper citation. Documentation in a patient record
utilizing the assessment and/or evaluation of another nurse or student is considered plagiarism. Student assignments containing plagiarized work will earn a zero grade for the assignment and be held accountable for unprofessional behavior and result in disciplinary action.

The following acts represent acts of plagiarism (but not inclusive):

1. Incorporating the ideas, words, sentences, paragraphs, or part of another person’s writings, without giving appropriate credit, and representing the product as your own work.
2. Representing another person’s artistic/scholarly works (such as drawings, computer programs, papers, writings) as your own.
3. Submitting a paper purchased, borrowed, or copied from research or a paper service or another person.
NMJC Nursing Program

Disciplinary Action

A student will be disciplined and possibly dismissed from the nursing program if a serious infraction of policy, procedure, standard of practice, professional standard, confidentiality, or dishonest behavior occurs. A committee of nursing faculty members and the Director of Nursing will review any immediate (critical) infractions to determine the student’s status in the nursing program. The committee will recommend:

1. Compliance with the Action Plan or Learning Contract; or
2. Immediate disciplinary action resulting in immediate withdrawal from the program and associated co-requisite nursing program courses with the option to re-apply to the nursing program within one year; or
3. A written decision to permanently dismiss from the nursing program without an option for re-entry.

The student will be notified of the committee decision then it is the student’s responsibility to abide by the committee decision.

Action Plan/Learning Contract
When an Action Plan and/or a Learning Contract is initiated, the student is accountable to complete or abide by the recommendations and/or stipulations of the Action Plan or Learning Contract. Lack of compliance with recommendations and/or stipulations of the Action Plan or Learning Contract may result in the student being dismissed from the nursing program.

NMJC Nursing Program

Issue, Concern, and Complaint Process
A nursing student with an issue, concern, or complaint is required to first discuss the issue, concern, or complaint with the involved professor or the student’s nursing advisor. If not resolved at this level, the student must next discuss the issue, concern, or complaint with the Curriculum Coordinator for the appropriate level. If not resolved by the Curriculum Coordinator, the student should bring the matter to the Director of Nursing. If the issue, concern, or complaint is not resolved by the Director of Nursing, the student may follow the NMJC procedure to submit a formal written complaint.

NMJC Formal Complaint Process

NMJC Student Handbook contains the correct method for making a formal, written complaint. A student who wishes to make a formal written complaint is encouraged to complete the NMJC Student Complaint form. Complaint forms are available through the Nursing Program Office or the Vice President for Student Services Office.

The completed complaint form should be returned to the faculty/advisor/director assisting the student or the Vice President for Student Services. Once the completed complaint form has been submitted and forwarded to the appropriate college official, an investigation will be completed to determine the nature of the complaint and any corrective action that should be taken.
After a student is admitted to the nursing program, he/she must provide proof of compliance with the following requirements:

- Maintenance of current CPR certification throughout nursing program enrollment
  - accepted CPR certifications must include live, in-person, hands-on an actual manikin demonstration of CPR. CPR certifications using “virtual” CPR demonstration or any type of skills demonstration using a computer are not acceptable.
- Initial two-step negative tuberculosis (TB) screening and annual rescreening
- Rubella immunity (rubella titer) or measles, mumps and rubella (MMR) injection
- Physical examination completed upon admission to the nursing program by a health care provider utilizing the NMJC Physical Examination Form with full release for clinical participation (The faculty may request a physical exam be repeated if the student is having health issues)
- Maintenance of health insurance throughout nursing program enrollment (student insurance is available for purchase)
- Completion of Hepatitis B vaccination series, proof of immunity, or declination statement
- Clear criminal background check
- Maintenance of malpractice insurance throughout nursing program enrollment
- Compliance with the Substance Use/Abuse Screening and Testing Policy

The student is financially responsible for all expenses related to these requirements.

Student Health Requirements and Policies

Health screening and examinations are required to indicate the student’s ability to provide safe nursing care to the public. Proof of compliance with all requirements must be submitted to the Nursing Program Office by the designated date, prior to the first day of clinical rotations.

Tuberculosis Screening Process

Upon admission to the nursing program, the student must show documentation of a negative two-step positive protein derivative (PPD) tuberculin screening test. Thereafter, one-step testing will be required annually during enrollment in the nursing program.

If PPD testing is contraindicated for a student, he/she must submit written verification of the contraindication from a health care provider.

If a student has a positive PPD, a chest x-ray will be required and must be repeated annually at the student’s expense and/or will be referred to the NM Department of Public Health for follow-up care.

If a student has had a positive PPD in the past, documentation of a negative chest x-ray taken within the past one year must be submitted to the Nursing Program Office and the chest x-ray repeated annually.
If a student is undergoing treatment for tuberculosis, he/she must consult with the practitioner in the NMJC Student Health Clinic and be cleared for participation in classroom, laboratory and clinical learning activities.

All questions regarding tuberculosis testing should be directed to the practitioner in the NMJC Student Health Clinic.

Failure to submit required documentation of tuberculosis testing may result in dismissal from the nursing program.

**Measles, Mumps, Rubella (MMR) Immunization**

All students must show documentation of two doses of MMR, at least 28 days apart. If the student cannot show documentation of MMR injection(s), a blood test indicating immunity must be submitted. If the blood test indicates the student is not immune, he/she must receive the recommended MMR injection(s).

**Hepatitis B Immunization**

Students are advised to receive a complete series of three doses of Hepatitis B vaccine according to the following schedule: first dose at elected date; second dose, one month later; third dose, six months after the first dose. Students may decline vaccination but it is not advised. If a student chooses not to receive Hepatitis B vaccination, a declination form must be signed.

**Health Insurance**

Students are required to provide proof of health insurance coverage. Students may purchase individual policies or provide a copy of current group coverage. Medical costs are the responsibility of the student.

**Physical Examination**

A physical examination is required for admission or readmission to the nursing program. A student’s admission or readmission or progression status may be denied if a significant health or safety threat is noted. Reasonable accommodations will be made for students who have a verifiable need(s). A student requiring accommodations must have the need(s) verified by the Director of Special Needs Student Services. A physician or appropriate agency working with the student must substantiate the need. After the need(s) are verified, the Director of Nursing will notify the instructor of the type(s) of accommodation(s) needed by the student (see ADA Compliance Statement).

**Malpractice Liability Insurance**

Students are required to purchase liability (malpractice) insurance with minimum coverage of $2,000,000/4,000,000. Liability insurance may be purchased through the college business office. The student must purchase liability insurance prior to the first day of class. Failure to purchase the liability insurance prior to the first day of class may result in denial of student participation and access to the Simulation Lab and/or clinical rotations.
Health Care Cost

A student may become ill, injured, or exposed to infections or communicable diseases while engaged in clinical, classroom, and/or laboratory practice activities. Illness, injury or exposure to disease may require, but may not be limited to: counseling, prophylactic intervention, diagnostic procedures and/or follow-up treatment. New Mexico Junior College, Nursing Program and affiliated clinical agencies are not liable for health care costs associated with the student’s illness or injury resulting from clinical or laboratory practice. The student is financially responsible for all related expenses.

Change of Health Status

If a student experiences an injury or illness while enrolled in the nursing program, the student must submit a medical (health care provider) release. The release should state the student can continue to meet the requirements of the nursing program without restrictions. Examples of conditions/incidents that would require a medical release are, in the case of, but not limited to the following: trauma necessitating medical care, surgery, pre-existing health condition, exacerbation of a pre-existing condition and/or a new diagnosis of a chronic health condition. If a student’s health care provider will not write a medical release without restrictions, the student will not be allowed to participate in the classroom, clinical laboratory, or clinical rotations.

Accident, Injury, and/or Illness

Any accident, injury or illness occurring during nursing education activities must be reported immediately to the Director of Nursing and/or a nursing faculty member. New Mexico Junior College or any associated clinical practice site is not responsible for expenses related to accidents/injuries/illnesses occurring during clinical, class, or laboratory experiences. Any student that has an: accident; injury; illness; develops a physical or emotional problem; and/or takes medication(s) that could alter decision making, that could interfere with the safety to practice nursing has the responsibility to notify all appropriate nursing faculty so appropriate measures can be taken to protect the public, student and college.

A student presenting with a physical or emotional health issue, that does not respond to treatment and/or counseling within a reasonable time period can be withdrawn from the program. A student who demonstrates behavior(s) jeopardizing the safety of any person will be dismissed immediately from the designated activity, class, clinical laboratory, or clinical rotation. The student will receive written counseling from the involved nursing faculty and must meet with the Director of Nursing for evaluation of the behavior(s) to determine the student’s status in the nursing program. An “Action Plan/Learning Contract” will be completed with a description of the consequences of the action and/or immediate withdrawal for the nursing program.

Pregnancy Policy

If a student is pregnant or becomes pregnant while enrolled in the nursing program, the student must advise a faculty member as early as possible. The student must submit a written medical release, stating the student can perform the course (classroom, clinical laboratory, and clinical rotation) requirements without restrictions during pregnancy in order to continue in the nursing program. After the student is no longer pregnant, she must submit a written medical release, stating the student can perform the course requirements (classroom, clinical laboratory, and clinical rotation) without restrictions in order to continue in the nursing program.
Substance Use/Abuse by the Nursing Student

The nursing faculty requires the nursing student to provide safe, effective, and supportive patient care; therefore, the nursing student must be free of chemical impairment during participation in any part of the nursing program including classroom, laboratory, and clinical settings. Additionally, New Mexico Junior College and various clinical agencies enter into contractual agreements that enable nursing students to practice within the clinical agencies. The NMJC Director of Nursing or any clinical agency can request that student(s) submit to drug and/or alcohol testing prior to clinical practice experiences or at any time during clinical practice education.

If a student is suspected or found to be chemically impaired, the student will be removed from the classroom, laboratory, or clinical setting and the Nursing Program – Substance Use/Abuse Screening and Testing Policy will be followed. If a student refuses to submit to the requested drug and/or alcohol testing, the student will not be permitted to participate in classroom, laboratory, or clinical practice experiences. Refusing to undergo drug and/or alcohol testing will result in dismissal from the nursing program.

Nursing Program - Substance Use/Abuse Screening and Testing Policy

I. Preamble

Drug and alcohol use/abuse among students training to be health care professionals poses a serious threat to the health and welfare of both students and other persons and conflicts with the responsibility of New Mexico Junior College (the “College”), to foster a healthy atmosphere for the pursuit of education and service for the Junior College District. The objective of this policy is to ensure a safe, healthy, and effective learning environment for everyone at the College and the general public. It is the policy of the College to provide an educational environment free from the use, sale, possession, or distribution of prohibited substances, including Illegal Drugs and Controlled Substances or the improper or abusive use of alcohol and other legal drugs.

To meet the objectives of this policy, the College will provide students, faculty and staff with information about the effects of alcohol and other drugs through educational efforts and the availability of information about counseling services. The College also will educate and train students, faculty and staff to identify problems and symptoms of drug and alcohol abuse.

Additionally, this policy requires students to perform their educational duties free from the presence of Illegal Drugs, alcohol, or inappropriate legal drugs in their systems. The manufacture, use, possession, sale, purchase, or transfer of Illegal Drugs by anyone is prohibited. Arriving at any College Facility while under the influence of an illegal drug, controlled substance or alcohol is prohibited, as is use and consumption of such substances while at College Facilities. The College also prohibits the use or abuse of medications and prescribed drugs to the extent that performance, fitness for classroom or clinical study, and safety are adversely affected.
II. Definitions

College Facilities: “College Facilities” for purposes of this policy include but are not limited to: all property owned, used, leased or controlled by the College and any off-campus site (including all clinical sites) where students may be participating in any College sponsored program or activity.

Controlled Substances: “Controlled Substances” for purposes of this policy are those substances in Schedules I-V of Section 202 of the Controlled Substances Act (21 U.S.C. 812) and implementing regulations 21 CFR 1308.11-1308.15. Controlled Substances include, but are not limited to, marijuana, cocaine (including crack), amphetamines, heroin, PCP, hallucinogens and certain prescription drugs.

Illegal Drugs: “Illegal Drugs” for purposes of this policy, include not only Controlled Substances, but also illicit or unprescribed drugs, inhalants, narcotics, hallucinogens, depressants, stimulants, and other substances capable of creating or maintaining adverse effects on one’s physical, emotional, or mental state. Controlled medication not prescribed for current personal treatment by a licensed medical professional is also considered an illegal drug under this policy. Mood or mind altering substances such as synthetic derivatives or products that produce a marijuana-type high or other effect and any herbal products not intended for human consumption are also considered Illegal Drugs under this policy.

Medication or Prescribed Drugs: Medication or prescribed drugs, for purposes of this policy, are drugs that an individual may be taking under the direction of a licensed medical professional in a medical setting to address a specific physical, emotional, or mental condition.

III. Policy and Practices

Students subject to this Substance Abuse/Use Screening and Testing Policy shall be responsible for being familiar with the policy and shall be required to sign and return a Consent and Release form.

A. Prohibited Conduct. The unlawful manufacture, distribution, dispensation, possession or use of Illegal Drugs by a student of the College is strictly prohibited. Any student who is found to use, be under the influence of, sell, manufacture, possess, dispense or distribute any Illegal Drugs or alcohol while on school-related duties or activities, whether in a College Facility or elsewhere, will be subject to disciplinary action, up to and including immediate dismissal. Any Illegal Drugs confiscated will be subject to being turned over to the appropriate law enforcement agency for additional investigation and appropriate action upon proper request or authority. Being arrested or charged with illegal possession, use or distribution can subject a student to disciplinary action. Any student enrolled in the College nursing program is required to notify the Director of the Nursing Program if he/she is convicted of a criminal drug statute violation within five (5) days of such conviction. For these purposes, a plea of no contest or other similar plea shall qualify as a conviction. Failure to report any such conviction is grounds for disciplinary action, up to and including dismissal from the program and the College.

B. Use of Medication and Prescribed Drugs. Students shall notify their instructor when taking prescribed medication which could adversely affect their performance. If a student is taking a prescribed drug which may hinder the safe and efficient performance of the student’s duties or the safe participation in any activity, the student must obtain a release to return to such College programs and activities, including returning to any clinical sites. Such release must come from the prescribing health care professional. If a release cannot be obtained, the student may be suspended from the activity or program without any refund of tuition or fees. Students are advised to check with a health care provider when taking any over-the-counter medication to determine if the medication may cause, or give the appearance of causing, side effects which might hinder the safe and efficient performance of the student’s duties. It is the student’s
responsibility to exercise conscientious judgment when considering whether he or she can properly function in College programs and activities in which he or she is participating. A student should notify his or her instructor or immediate supervisor if he or she is feeling adverse effects from any medications which might adversely affect performance or the safety of the student or others.

C. **Drug/Alcohol Testing.** In order to effectively meet the objectives of this policy, the College recognizes the need to implement a Drug and Alcohol Testing Policy. Students in the nursing program will be subject to testing utilizing samples of blood, urine, breath, or hair in the following circumstances:

- Upon admittance to the program beginning with the fall 2011 semester;
- Prior to beginning any clinical work at any clinical site;
- At least annually while a student is participating in any clinical work or internship;
- At **RANDOM** intervals;
- Upon returning to a clinical site following an unplanned absence of greater than thirty (30) days in providing patient care at such clinical site;
- Upon returning to a clinical site following a rotation at a different clinical site;
- Upon returning to a clinical site following an absence due to the use of Illegal Drugs or alcohol in violation of this policy and the successful completion of a rehabilitation program;
- Following a student’s involvement in any incident which results in an injury to any person at a clinical site;
- Following any incident at a clinical site involving allegations of mishandled, stolen or misused medication, or other medication discrepancies that occur in an area in which a student was assigned or working;
- When a student appears to be unfit to participate in a program or activity as a result of the use of Illegal Drugs, or the abuse of Medication or Prescribed Drugs or alcohol;
- When there is reasonable cause or suspicion to believe that a student is under the influence of Illegal Drugs or alcohol; and
- When a student’s initial test sample appears to have been altered, diluted, tampered with or adulterated in some manner.

The Director of Nursing (or his or her delegate) shall approve in advance all tests based upon appearance or reasonable suspicion. No advance notice to the student is required for such testing.

With regard to post incident/injury/accident testing, a student shall be subject to a drug and alcohol screening test immediately after an accident or incident. One purpose of such testing may be to confirm or refute drug or alcohol use as a possible cause of the incident/injury/accident. Such testing may be conducted on both a student who is injured and/or any student involved in or affecting the accident or incident.
D. Costs of Testing. The College will use a portion of the fees paid by students participating in the nursing program to cover the cost of all drug screenings required under this policy, except for tests conducted in circumstances (i) in which a student appears to be unfit to participate in a program or activity as a result of the use of Illegal Drugs or alcohol, (ii) when there is reasonable cause or suspicion to believe that a student is under the influence of Illegal Drugs, alcohol or other prohibited substances, (iii) when a student is required to submit to a screening in order to re-enter the nursing program following the successful completion of a rehabilitation program and (iv) when an original sample submitted by a student appears to have been diluted, tampered with, or otherwise altered or adulterated. In such circumstances, the costs of such screening shall be the sole responsibility of the student.

E. Reporting; Confidentiality; Discipline.

Peer Reporting
Should a student suspect or observe suspicious behaviors in others, report this either to an instructor or the Director of Nursing. It is part of every nursing student’s professional obligation to report unsafe practice according. Every effort will be made to maintain confidentiality in peer reporting, however, in some circumstances confidentiality may not be assured.

Confidentiality
Subject to the limitations set forth elsewhere in this policy and except where such information is subject to being turned over to legal authorities or third parties pursuant to a legal obligation of the College, test results and information obtained during testing will be held in confidence and treated as medical information. If a student tests positive and corrective action is required, only those personnel with a need to know will be provided access to the test information. Provided, however, students must sign a release agreeing that test results may be provided to authorized persons associated with both the College and clinical sites who have a need to know.

Positive Results
If a student’s test result is confirmed to be positive, the student will be subject to immediate suspension or dismissal from the nursing program and the College’s disciplinary policy will be followed. A student who is denied participation in training at a clinical site based upon the outcome of a drug or alcohol screen shall be subject to dismissal from, or a failing grade in the program. The College shall have no responsibility for arranging alternate clinical placements. Neither shall a student who is dismissed from the program for violating this policy be entitled to any refund of fees paid.

Refusal to Test
A student is free to refuse to consent to a drug/alcohol screening test; however, refusal to consent to such a test will result in immediate dismissal from the nursing program and no refund of tuition, fees or other costs shall be made.
Relapse by Student

Any student who is rehabilitated must remain alcohol or drug free. Any relapse by a student will be considered a violation of this policy and the student will be subject to disciplinary action up to and including dismissal.

Disciplinary Action

The College reserves the right to subject any student found to be in violation of this policy to disciplinary action, up to and including immediate dismissal from the nursing program and the College and a permanent ban from participating in clinical work at clinical sites. Disciplinary action may include requiring a student to participate satisfactorily in an approved substance abuse treatment or rehabilitation program as a condition of continued enrollment or participation in an educational program.

Compliance with Law

The College intends that this policy comply with all applicable federal, state and local laws, including but not limited to the American with Disabilities Act as amended and the New Mexico Human Rights Act. The College reserves the right to change this policy at any time with or without notice to students. In the event any aspect of this policy is deemed to violate any applicable law, this policy shall be deemed to be amended to the extent necessary to bring the policy into compliance with all legal requirements.

Questions?

Questions concerning this policy should be directed to the Nursing Program Director.

Agencies Providing Assessment and/or Treatment of Substance Use/Abuse

Lea Regional Mental Health Services
5417 Lovington Highway
Hobbs, NM 88240
(575) 492-5488

Guidance Center of Lea County, Inc.
920 W. Broadway Street
Hobbs, NM 88240
(575) 393-3168
24 Hour Phone Number (575) 393-6633

Palmer Drug Abuse Program
200 E. Snyder
Hobbs, NM 88240
(575) 397-6333

Alcoholics Anonymous
(575) 397-7009
Time Commitment to Nursing

Nursing education must be the nursing student’s priority. The student will be required to complete many activities outside of the scheduled course hours. The student must plan time to study, take exams, practice in the lab, attend tutoring sessions and faculty conferences and complete course assignments. Employment is not recommended during nursing education.

Legal Issues Affecting Nursing Students

Criminal Background Checks for Nursing Education
The nursing program complies with the New Mexico Department of Health Regulations (section 29-17-2 to 29-17-5, NMSA 1978 [9/1/98], Caregivers Criminal History Screening Act. This act requires a nursing student to have a nationwide criminal history screening prior to providing care for patients. A nationwide criminal history record includes information concerning a person’s arrests, indictments or other formal criminal charges, and any dispositions arising there from including convictions, dismissals, acquittals, sentencing, and correctional supervision, collected by criminal justice agencies and stored in the computerized data bases of the FBI, the national law enforcement telecommunications systems, the DPS, or the repositories of criminal history information of other states.

The student is responsible for paying for and submitting the information to obtain a criminal background check. The results of the screening must be clear prior to the student being allowed to participate in the clinical portion of the nursing course(s). The criminal history screening results will be held in a confidential file. A student receiving a screening report that identifies a crime(s) as a “disqualifier(s)” will not be eligible for continued enrollment or completion in the nursing program.

Non-compliance with the State of New Mexico Parental Responsibility Act (Child Support Law)
The New Mexico Board of Nursing will deny the application for licensure from any graduate who is not in compliance with the State of New Mexico Parental Responsibility Act. A student who is not in compliance with this law or has questions pertaining to this process should contact the New Mexico Board of Nursing at 505.841.8340.
Course Withdrawal, Course Failure, and Readmission

**Course Withdrawal When Passing**

If a nursing student withdraws from a nursing course when passing and withdrawal is unrelated to disciplinary actions, the student may apply for readmission to the nursing program. This student seeking readmission to the nursing program must meet the NMJC Registered Nursing Program Admission Requirements in place at the time of application for readmission. The student will be ranked for admission consideration along with other nursing program applicants and in accordance with the ranking policy in place at the time of the application for readmission.

**Course Withdrawal When Failing and Course Failure**

If a nursing student withdraws from a nursing course and is failing the course at the time of the withdrawal or the student fails a nursing course, the student is dismissed from the NMJC Nursing Program. The student may apply for readmission to the nursing program but must meet the NMJC Registered Nursing Program Admission Requirements in place at the time of application for readmission. The student is eligible for only one readmission to the nursing program. Readmission is based on space availability.

**Readmission to Level I**

If a nursing student withdraws from a nursing course and is failing the course at the time of the withdrawal or the student fails a nursing course during Level I, Semester I or II, the student must apply for readmission to Level I, Semester I. The student is eligible for only one readmission to the nursing program. Readmission is based on space availability.

**Readmission to Level II**

If a nursing student withdraws from a nursing course and is failing the course at the time of the withdrawal or the student fails a nursing course during Level II, Semester III or IV, the student must apply for readmission to Level II, Semester III. The student must apply for readmission to the nursing program in fall semester immediately following dismissal. The student is eligible for only one readmission to the nursing program. Readmission is based on space availability.

If this Level II nursing student is readmitted in the fall semester immediately following dismissal and does not successfully complete both Semesters III and IV in succession, the student is dismissed from the nursing program and is ineligible for readmission.

If this Level II nursing student is not readmitted to Level II in the fall semester immediately following dismissal, the student is not eligible for readmission to Level II. The student may apply for readmission to Level I, Semester I and begin the nursing program again. This student is eligible for only one readmission to the nursing program. Readmission is based on space availability.

A student who is failing or wishes to discontinue the nursing program at any time should make an appointment with the Director of Nursing to discuss the student’s academic options and consequences related to failure or discontinuation of the nursing program.
Readmission for Reasons Other Than Course Failure

When a student withdraws from the nursing program for reasons other than course failure or chooses not to continue in the nursing program for reasons other than course failure, the student may apply for readmission one time in the one-year period following withdrawal. The student must meet the NMJC Registered Nursing Program Admission Requirements in place at the time of application for readmission. The student must again meet the NMJC Registered Nursing Program Admission Requirements prior to consideration for readmission and meet the application deadline. Readmission is based on space availability.

If the student is not readmitted within the one-year period following discontinuation of the nursing program and wishes to reapply later, the student must again meet the NMJC Registered Nursing Program Admission Requirements prior to consideration for readmission. Readmission is based on space availability. If readmitted, the student must begin at Level I, Semester I and complete all four semesters without interruption. If the student does not complete the nursing program with the second admission, the student is not eligible for readmission.
NMJC Nursing Program
Clinical Laboratory Policies and Procedures

The nursing simulation laboratory, McLean Hall, Room 137, has many resources for student learning, including: manikins, models, assessment equipment, supplies for practice of basic nursing procedures, instructional videos and a computer lab with medical-surgical simulation software, and computer assisted instructional software.

Safety Rules:

1. The lab will be open from 0800-1700, Monday - Friday. The lab will remain locked when unoccupied.
2. The College is not responsible for damage to or loss of personal property in any building or on the grounds of the college, do not leave valuables in the lab (see NMJC Student Handbook: Liability)
3. Food items and drinks may not be consumed in NMJC classrooms (the lab is a classroom).
4. Smoking or use of tobacco products is prohibited inside any NMJC building and within 50 feet of any building entrance doors. (see NMJC Student Handbook)
5. Student misconduct may subject a student to disciplinary action; there will be no loud or disruptive behavior in the lab area (see NMJC Student Handbook: Student Conduct Policy).
6. No unauthorized visitor in the lab (family members of any age, friends who are not currently enrolled in the nursing program, and any other person not an employee of the College staff or faculty).
7. Wash hands before and after procedures.
8. Sharps and potential sharp items (glass, scalpels, blades, syringes, needles, vials) must be disposed of in an approved puncture resistant container (sharps containers). Avoid use of containers that are more than 3/4 full.
9. Do not recap a used needle, dispose of needles in a sharps container.
10. A student receiving a needle stick or other injury in the lab must complete a NMJC Student Incident Report, available in the Nursing Program Office. NMJC is not responsible for incurred costs related to any incident in a learning setting.
11. Universal precautions must be followed during all procedures that hold a risk of contact with body fluids. Blood-borne pathogen kits are available in the Nursing Program Office and Nursing Simulation Laboratory.
12. Each student is responsible for keeping the practice area clean and equipment put away after use of the lab. This includes: disposal of sharps and trash, replace equipment to appropriate storage location, return the bed area to a clean working environment (bed in lowest position, call bell secured to side rail, over-bed table at the end of the bed, and bed linens clean & neat).
Demonstration of Nursing Skills

The faculty believes it is essential for the student nurse to understand the rationales for procedures and to perform return demonstrations accurately. The student nurse is required to successfully perform a return demonstration for each assigned skill. The nursing student is expected to attend simulated lab teaching sessions and practice procedures in the Nursing Simulation Lab prior to the required return demonstration process.

If the student is unsuccessful in performing the skill demonstration, the student should study and practice the return demonstration of the skill before repeating the skill for faculty evaluation. The student must successfully demonstrate the skill before the student will be allowed to perform the skill in the clinical setting. If the student is unsuccessful in performing the return demonstration of the same skill on three occasions, the student will earn a grade of 'F' for the course, regardless of the theory grade. The student will be considered clinically unsafe and not allowed to participate in the Nursing Simulation Lab or clinical setting.
NMJC Nursing Program
Nursing Student Dress Code

Classroom and Clinical Laboratory Dress Code

The required student dress code for classroom and laboratory learning activities on campus includes:

1. Scrub top and pants; or scrub dress:
   a. color or print with no see-through colors
   b. no low-cut tops or pants (tops to cover abdomen, no low-cut, mid-rise pants)
      i. t-shirt under top if abdomen, cleavage, chest hair or tattoos are visible
   c. closed toe shoes (no holes in tops of shoes, no sandals, no high-heeled shoes or boots)
2. NMJC student picture identification badge worn around neck on a lanyard.

Clinical Rotation Dress Code - Uniform Regulations

The NMJC student nurse uniform should be worn with pride and dignity. The uniform is a symbol of NMJC and the nursing profession to the public. Most patients consider the personal appearance of the nurse an indicator of the quality of care the student nurse provides. The student is responsible for complying with uniform regulations.

The nursing faculty will enforce the regulations and may dismiss the student from a clinical setting; assign an incomplete grade for the laboratory section of the course; and/or withdraw the student from the nursing program for an infraction of the uniform regulation. The first uniform infraction will result in a student receiving a written counseling with stipulations to correct the deficiency. If a student does not abide by the uniform regulations and/or future incidence of a uniform infraction occurs, the student will be dismissed from clinical and may receive an incomplete grade for the course and/or may be withdrawn from the nursing program.

The Student Nurse Uniform Regulations include, but are not limited to:

The NMJC student nurse uniform MUST be worn during clinical experiences.

<table>
<thead>
<tr>
<th>Level I (Freshman)</th>
<th>Level II (Sophomore)</th>
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</thead>
<tbody>
<tr>
<td>Approved NMJC:</td>
<td>Approved NMJC:</td>
</tr>
<tr>
<td>1. Red scrub shirt or scrub dress</td>
<td>1. Royal blue scrub shirt or scrub dress</td>
</tr>
<tr>
<td>2. Black scrub pant</td>
<td>2. Black scrub pant</td>
</tr>
<tr>
<td>3. Black T-shirt under scrub top; round-neck, no writing or design</td>
<td></td>
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<tr>
<td>4. NMJC patch sewn to left front of scrub shirt, one-inch below the clavicle and centered with the midclavicular line.</td>
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<tr>
<td>5. Closed-toe black shoes with black socks or flesh-tone hose</td>
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<td>6. NMJC student identification badge and badge holder worn on the upper right chest area of top</td>
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<td>7. Watch with a second-hand</td>
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<td>8. Stethoscope</td>
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<td>9. Penlight</td>
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</table>
10. Bandage scissors
11. Black ink pen and small notebook or notepad
12. May wear a white lab coat/jacket with the NMJC patch sewn to left front of coat/jacket, one-inch below the clavicle and centered with the mid-clavicular line.

- The student nurse uniform may be worn while going to and from the clinical area, attending nursing class or lab, and during participation in education related activities, and when the student uniform represents the nursing profession or the college.
- The student nurse uniform may not be worn while working as an employee for the hospital or any other health facility
- The student nurse must dress according to biological gender.
- The student nurse must wear the appropriate size uniform (not revealing or too tight) when practicing in the clinical area.
  - Uniform (top and/or bottom) must be loose for movement, not tight-fitting or body-hugging type uniform. Scrub shirt and pants or dress should fit generously enough to allow easy freedom or movement whether sitting, walking or doing activities with patients.
  - Uniform should be wrinkle-free and in good repair.
  - Shoes must be clean.
  - The uniform must be freshly laundered and free of stains and wrinkles.
  - Uniform must not be revealing. Uniform tops or shirts must not have deep scooped necks and must cover the midriff, no low-rise pants. Pants must rise to the waist and be securely fastened.
  - Uniforms tops or shirts must have sleeves not be low-cut or mid-rise.
- The student nurse must be clean and practice good personal hygiene. Cleanliness of body, teeth, fingernails, and hair is required.
  - The student must use a deodorant or antiperspirant
  - Perfume and cologne should be used sparingly, if used at all.
  - Fingernails (no artificial nails or dark polish) must be neatly groomed and visibly clean (according to the clinical site policy).
  - Hair must be clean, conservative style and color. Hair that is shoulder length or longer must be worn behind the student’s shoulders, pulled back, or banded securely. Large, brightly colored or excessively ornate hair accessories must not be worn.
  - A beard, mustache, and/or sideburns must be neatly trimmed, and well groomed.
- Jewelry worn in the clinical setting must be simple in design, kept to a minimum and professionally appropriate. Wedding bands, watches, and simple necklaces are allowed.
  - One pair of inconspicuous earrings attached to the earlobe is allowed. Earrings may not extend past the earlobe. For safety purposes, hoop and dangle earrings may not be worn in a clinical area.
  - No other jewelry may be affixed to the face, tongue or other visible body parts.
- Tattoos and body art must be covered while in the clinical area.
- Gum or tobacco chewing is not allowed while in uniform and clinical areas.
- Sunglasses may not be worn in the clinical area.
- Smoking is discouraged. A ten-minute break is allowed after four hours of clinical, students will not be allowed extra time on breaks for smoking. The student must follow smoking policies and smoke only in designated areas of the clinical facilities.
- The student is allowed one ten-minute break after four hours of clinical; the student must use this 10 minute time for all break needs, the student must inform the faculty and primary nurse before leaving the assigned area for a break. Extra breaks or extended break time will result in a student counseling. Three counseling forms can result in dismissal from the program.
In general, it is expected that students remain at the clinical agency/organization/facility for the entire time period assigned. Students should not expect to run personal errands or otherwise leave the clinical site during scheduled meal times or breaks. Emergency requests are granted at the discretion of the instructor and no student shall leave the clinical site without instructor notification and approval prior to leaving.

- No cell phones, pagers, or other electronic devices allowed in the clinical practice setting.
Employment Guidelines Related to Clinical Assignment

Students may not work within six hours prior to a clinical assignment. The student must be able to provide safe and competent patient care. The clinical instructor will determine if the student is alert to demonstrate safe and accurate decision making and determine the student’s ability to provide competent nursing care to perform the assignment. The clinical instructor will dismiss the student from the clinical assignment if it is determined the student is mentally or physically impaired to perform the assignment. The student will receive a clinical absence, a written counseling and must meet with the instructor to determine if a clinical make-up assignment is available.

Transportation to Clinical Sites

Transportation to and from clinical assignments is the responsibility of the student nurse. The student nurse must adhere to the parking regulations of the assigned clinical site. When possible, scheduling considerations will be made for nursing students participating in car pools. Students will be required to arrange transportation to out-of-state (Texas) and other distant clinical sites for assignments. The college does not have funding to assist students with their travel expenses, please plan ahead and prepare for the additional expenses to travel to distant clinical assignments.

Clinical Placement Policy

Students will not be assigned to a clinical area where they are currently employed. Exceptions to this policy will be addressed on a case-by-case basis. All attempts will be made to facilitate professional growth and learning in the education experience. The clinical assignments will be made in collaboration with faculty and clinical agencies.

Clinical Experiences

As an adult learner, it is the student nurse’s responsibility to take the initiative and action necessary for the learning process to be effective. The faculty functions as facilitator, teacher and role model to assist the student nurse in achieving his/her career goals. Experiences in clinical settings are an integral part of the nursing education process. Clinical experiences provide the student with the opportunity to apply theory and skills learned in class and the simulated laboratory. Also, the clinical laboratory provides the setting for the student nurse to demonstrate nursing skills with the goal of achieving competency in performance of nursing care. As the student nurse progresses through the nursing program, the level of proficiency of nursing interventions and skills are expected to develop to meet the course requirements.

Behavior in the Clinical Agency

Students are expected to conduct themselves in a professional manner when in the clinical area and all other public places when representing the NMJC Nursing Program. A student may be dismissed from the clinical
setting for not meeting the standards of professional behavior and ethics. Action taken at the time of the incident will be at the discretion of the clinical instructor.

Since each nursing student represents the college, nursing program and nursing profession, the faculty believes the following are the behaviors deemed to be critical for all nursing students in each learning environment throughout the program. Students are expected to observe the following guidelines for behavior in the clinical agency and exhibit professional nursing behaviors including, but not limited to the following:

1. Adhere to the guidelines outlined by the clinical agency during orientation.
2. Dress appropriately at all times when representing the college and nursing program; adhering to the dress code for classroom, laboratory and clinical assignments.
3. Communicate using appropriate language, terms, and demonstrate respect of others including addressing them by proper name and title.
4. Demonstrate ethical behavior including maintaining confidentiality.
5. Resolve conflicts appropriately and follow appropriate lines of communication/chain of command.
6. Deliver safe, effective nursing care including using appropriate judgment when making decisions; properly using and caring for equipment; and using correct techniques and cautions when delivering care.
7. Be in the clinical agency only when supervised by an instructor, preceptor or designee.
8. Subject to all policies regarding drugs, alcohol, criminal background checks of the clinical agency.
9. Adhere to the policies and protocols of NMJC, Nursing Program, affiliating agencies, the NM Nurse Practice Act and the legal mandates of society.

Student Clinical Objectives, Assignments and Evaluation

The student must be prepared for the clinical experience, each course will identify specific requirements for clinical. As the student nurse prepares for clinical assignments, both specific and general objectives must be met.

The student will receive clinical assignments and learning objectives prior to the clinical rotation. The student nurse is expected to meet assigned clinical objectives by preparing prior to the experience. The following will serve as a guideline to assist the student in preparation of clinical activities:

1. Identify personal learning needs and goals.
2. Prepare to implement the learning and/or clinical objectives.
3. Organize and plan assignments to facilitate completion of objectives.
4. Seek appropriate learning experiences with faculty guidance.
5. Seek guidance and ask for assistance when unsure in any situation.
7. Identify nursing diagnoses and develop care plans or case studies.
8. Implement nursing interventions appropriate for developmental stage, gender, culture, environment and patient’s health care needs.
9. Record nursing activities in a format consistent with the conceptual framework.
10. Analyze and evaluate patient goals and the student nurse’s ability to provide appropriate nursing care based on the student nurse’s stage of learning.
Student Clinical Performance Evaluations

Clinical performance evaluations are completed by the nursing faculty to evaluate the student nurse’s clinical performance. The student learning outcomes assessed in the clinical performance evaluation are the clinical competencies associated with the eight core components of nursing practice as defined by the National League for Nursing. The student learning outcomes are organized under the nursing program’s major curriculum concepts of Communication, Critical Thinking and Problem-solving and Self/Community Awareness and the eight core components of nursing practice.

During clinical rotation(s), the nursing faculty will observe the student’s performance to assess achievement of the required student learning outcomes. If the nursing faculty determines a student is not meeting specific clinical learning outcome(s), a formative evaluation will be performed and the observations discussed with the student. The student will be informed of the unmet outcome(s) and the student and nursing faculty member will discuss strategies to assist the student in meeting the outcome(s).

A summative evaluation will be performed at the end of the clinical rotations for the course. The student is required to meet 100% of the clinical learning outcomes by the end of the clinical rotations for the course. If all student learning outcome(s) are not met in the summative evaluation, the student will fail the clinical portion of the course and earn a grade of “F” for the entire course.

The student nurse is advised to carefully read the student learning outcomes listed in the clinical performance evaluation and ask for guidance from the faculty if he/she has questions or difficulty understanding the student learning outcomes.

Clinical Attendance, Absences and Tardiness

See absence and tardy policies in this Handbook.
Safe Clinical Nursing Practice

Safe nursing practice is an essential requirement in all courses. Safe nursing practice is defined as the application of scientific principles and nursing theory in performing nursing care. Care is provided in a reasonable and prudent manner providing for the welfare and protection of the well-being of the patient. Safe practice implies the student can demonstrate awareness of the potential effects of actions and decisions. Such actions and decisions shall not endanger the integrity of the patient. The student is required to demonstrate patterns of safe, professional clinical performance which follow the legal and ethical codes of nursing to promote the actual or potential well-being of self, peers, patients and others. The student must demonstrate accountability in preparation, documentation and continuity of care and show respect for the rights of individuals. Safe practice is an essential requirement for progression to the next course and or completion of a course. Safe practice will be judged by the nursing faculty.

Examples of safe clinical practice are:

(1) Practice within the legal limits of the state Nurse Practice Act.
(2) Practice within the framework of the ANA’s Code of Ethics.
(3) Accept responsibility and accountability for own decisions and actions.
   (a) Accept responsibility for maintaining and applying knowledge previously learned;
   (b) Adhere to standards of care when administering nursing care, medications, and treatments;
   (c) Acknowledge limitations and seek instructor assistance when having difficulty or unsure of an assigned task.
   (d) Accept and use constructive criticism to improve clinical practice.
(4) At all times, communicate truthfully verbally and in writing.

Unsafe Clinical Nursing Practice (Incompetent Nursing Practice)

The student nurse must provide legal, ethical, safe and effective nursing care in compliance with the policies of the nursing program and in accordance to the standards of nursing practice, course/clinical objectives, requirements, and student scope of practice. Nursing course syllabi direct the student in meeting specific course objectives and practice skills for safe practice. The student will be responsible for demonstrating safe and competent nursing care under the direction of the nursing faculty and/or supervising nurse (preceptor). The nursing faculty is responsible for determining the student’s application of safe and competent nursing care. Noncompliance with the established policies, procedures, course objectives, clinical objectives, faculty instruction, supervising nurse direction or standard of practice; as well as, the student scope of practice, may constitute an unsafe act or behavior on the part of the student. An unsafe act and/or a display of unsafe behavior are defined as: a threat or potential threat to the physical, emotional, mental or environmental safety of the patient, a faculty member, and substitute familial person, another student, and/or other health care provider. A student committing an unsafe act or behavior and/or engaging in ‘incompetent’ nursing care will be held accountable for their actions and disciplined according to the “Action Plan and/or Learning Contract” guidelines and/or dismissed from the nursing program following an investigation of the unsafe and/or incompetent incident.

The following are examples of unsafe, incompetent nursing practice, but is not limited to:

1. Unsatisfactory achievement of level or clinical objectives.
2. Placing self, patient, peers, families or others in physical or emotional jeopardy (hazard).
3. Failure to follow NMJC, facility (agency), or nursing program policies.
4. The student’s practice fails to meet the needs of the patient from a biological, psychological, sociological and/or cultural standpoint.
   - Failure to carry out psychomotor/technical skills in a safe manner.
   - Failure to carry out communicative skills in a safe manner.
   - Act of omission in the care of patient.
   - Act of commission in the care of a patient.
   - Displays mental, physical and/or emotional behavior(s) which negatively affect others.
   - Does not come to clinical prepared to provide safe care.
   - Errors related to medication, including but not limited to lack of knowledge on key concepts in medication administration or knowledge of individual drugs, errors in preparing or administering medications or errors in calculation of dosage.

5. The student’s practice lacks consistency in the responsible preparation, documentation, communication and promotion of continuity in the care of patients.
   - Attempts activities without adequate preparation or assistance.
   - Failure to demonstrate adequate preparation for the clinical experience as outlined in the syllabus or other course materials.
   - Performing a procedure without the required knowledge and skill competence, or without the guidance of qualified individual (i.e. instructor or designee).
   - Demonstrates inaccurate or incomplete verbal/written communication.
   - Failure to establish effective therapeutic relationships with patients, peers, faculty or other members of the health care team.
   - Willfully or unintentionally do physical and or mental harm (hazard).
   - Failure to establish effective therapeutic relationships with patients, peers, faculty or other members of the health care team.
   - Willfully or unintentionally do physical and or mental harm (hazard).
   - Exhibiting careless or negligent behavior in connection with the care or interaction with a patient or others.
   - Refusing to assume the assigned and necessary care of a patient and/or failing to inform the instructor or designee immediately so that an alternative measure for care can be made.
   - Inability to establish effective communication with a patient(s) or their families.
   - Displaying or engaging in non-therapeutic verbal or non-verbal communication.
   - Exhibiting careless or negligent behavior in connection with the care or interaction with a patient or others.
   - Inability to establish and maintain effective communication with a patient(s) or their families.
   - Displaying or engaging in non-therapeutic verbal or non-verbal communication.
   - Ineffective or inappropriate communication with health team members, including faculty, staff members, and/or peers.
   - Dishonesty in communication with faculty, administrators, or other members of the team.
   - Acts in such a way to create significant anxiety and/or stress to others.
   - Is verbally abusive and/or exhibits threatening, coercive, or violent behavior toward anyone.
   - Is unable to achieve therapeutic nurse-patient relationships characterized by rapport, empathy and respect.
   - Violates the boundaries of professional nurse-patient/family relationships, e.g., engages in romantic or sexual relationships.
   - Is unable to maintain satisfactory relationships with others in the clinical or college setting.
• Failure to demonstrate sound clinical, professional or ethical judgment.

6. Failure to establish effective working relationships with classmates, faculty and/or health team members in the provision of patient care.
   • Not reporting off to the nurse in charge of your patient.
   • Failure to notify health team of pertinent changes in the patient’s health.
   • Refusing to assume the assigned and necessary care of a patient and/or failing to inform the instructor or designee with immediacy so that an alternative measure for care can be made.

7. The student fails to practice according to the American Nurses Association *Code of Ethics* and accepted standards of practice.
   • Does not maintain confidentiality.
   • Demonstrates dishonesty.
   • Ignores unethical behavior of other health workers.
   • Does not demonstrate respect for the preferences of the patient.
   • Does not advocate for the rights of the patient.
   • Misrepresents or falsifies actions or information.
   • Using the name of a patient in written assignments.
   • Discussing confidential information in inappropriate areas (elevators or hallways).
   • Discussing confidential information about a patient with third parties present (who do not have a clear and/or legitimate need to know).
   • Seeking information on patients when it is not necessary for your role as a student.
   • Leaving the clinical setting with any records of documents related to a patient (including any paperwork with identifying information regarding patients).
   • Falsifying patient records or fabricating patient experiences or nursing actions.
   • Failing to report errors or acts of omission in treatments, assessments, medications, clinical judgment, or other components of nursing practice.

8. Failure to assume the responsibilities of a student in the nursing program.
   • Is habitually tardy/absent (see attendance).
   • Inappropriate personal appearance or inappropriate behavior in the clinical setting.
   • Unethical or immoral behaviors (sexual, personal, emotional, behavioral).
   • Exhibits criminal behavior.
   • Is suspected of being under the influence of drugs and/or alcohol in class or clinical.
   • Dresses inappropriately and/or exhibits nonprofessional appearance/behavior.
   • Exhibits behavior that is offensive to others (sexist, racist, threatening, demeaning).
   • Needs repeated reminders of responsibilities consistent with the policies of the Nursing Program and/or clinical agency.
   • Failure to submit assignments on schedule (repeated late submissions) and/or not adhering to course guidelines.
   • The student lacks effort directed toward self-improvement.
   • Is resistant or defensive regarding suggestions to improve.
   • Appears unaware of her/his deficiencies and the need to improve.
   • Does not accept constructive criticism or take responsibility for errors.
   • Is abusive or critical during times of stress.
   • Demonstrates arrogance.
The primary purpose of any course is to provide education for students. However, when direct patient care is involved in the learning activity, the safety and well-being of others are of paramount concern. Nursing clinical experiences are structured so that as a student progresses through the program, the student is expected to demonstrate increasing independence and competence in the provision of nursing care. Unsafe or potentially unsafe clinical nursing practices may occur when a faculty member and/or designee has reasonable cause to believe the student is incompetent, mentally incompetent, or incapable, unable to practice nursing with reasonable skill and safety. (Reference New Mexico Nurse Practice Act - incompetence) This may be a substantive incident, or repeated instances of questionable nursing practice which could jeopardize patient care. A faculty member will initiate an “Action Plan and/or Learning Contract”. If the incident is considered critically unsafe the student may be dismissed from the nursing program.

Unsatisfactory Performance Procedure

A student who fails to meet clinical, professional, or program requirements and whose performance endangers the safety of a peer, health care team member, faculty member, or patient or whose behavior is determined to be unprofessional, incompetent, or not in compliance with Standards of Professional Practice will be removed from the situation and an “Action Plan/Learning Contract” will be initiated and evaluated by a committee of faculty members and the Director. The student will receive a notice of the impending action and potential consequences. The student will be held accountable for their performance and every attempt will be made to guide the student to success. A student may be immediately dismissed from the nursing program if an unsafe or unprofessional behavior has the potential for harm or is life-threatening. A pattern of two or more unsafe, unsatisfactory clinical performance notices will result in the student failing the clinical portion of the course and as a result, receive a failing grade for the course.

The “Action Plan” is the first step of the disciplinary process. The clinical faculty member will determine a corrective action plan and will discuss concerns with student and course coordinator. The student will be given a designated time period to improve performance. The second performance notice will result in a “Contract” and counseling with the Director of Nursing. This notice can result in immediate dismissal from the nursing program. Discipline may include any reasonable action the faculty deems appropriate to correct the behavior, but if the violation is of a serious nature, it may necessitate immediate dismissal from the program.

The student who fails to practice within the boundaries of the New Mexico Nurse Practice Act, guidelines; or the objectives and directions contained in the course syllabus; or the policies of the Nursing Program (as contained in this Student Nurse Handbook or NMJC Student Handbook); and the rules and regulations of the health care agencies utilized as a clinical site for nursing courses may face immediate and/or permanent expulsion from the Nursing Program.
Physical and Emotional Hazards

The nursing faculty believes the student nurse must perform within the realm of safe practice during the extent of their nursing education. The realm of safe practice is necessary to protect the health and welfare of the patients, families, groups and/or communities by the student nurse.

A physical hazard is defined as any action or inaction on the part of the student nurse threatening another person’s physical well-being. Predetermined criteria for a physical hazard do not exist due to the vast number of possible scenarios. The critical elements vary with situations, as judged by the faculty.

An emotional hazard occurs when a student’s behavior creates emotional distress while interacting with a patient(s) and/or others.

Commitment of a physical and/or emotional hazard demonstrates student nurse performance outside the realm of safe, competent student practice and professionalism. The nursing faculty will utilize professional judgment when identifying a student engaging in a physical and/or emotional hazardous practice. The student is held accountable to deliver nursing care and interactions between other persons’ without causing an emotional and/or physical hazard. A student will be held responsible for practicing under the standards of professional, competent nursing. Any student who is determined to have engaged in an emotional and/ or physical hazardous situation will be disciplined and/or dismissed from the nursing program following an investigation of the hazardous incident.
NMJC Nursing Program
Activities Above the Student Nurse’s Scope of Practice
Effective in All Clinical Agencies

The student nurse may not:

1. retrieve any medications from automated medication accounting systems (PYXIS or ACCUDOSE).
2. accept or possess the narcotic keys, retrieve narcotics, or witness/document wastage of narcotics.
3. administer narcotics intramuscularly or intravenously without direct supervision by a registered nurse.
4. distribute samples of medications to patients.
5. administer any medications to infants in the nursery.
6. administer medication to a patient less than 2 years of age without direct supervision by a registered nurse.
7. give any IV push medications at Lea Regional Medical Center.
8. prepare or administer intravenous medications without direct supervision by a registered nurse.
9. prepare or administer IV infusions of Oxytocin (Pitocin), Magnesium Sulfate, Ritodrine (Yutopar), Terbutaline (Brethine), Xylocaine (Lidocaine), Dopamine (Intropin), Norepinephrine (Levophed), Nitroglycerin (Nitrostat Tridil). The student nurse may not monitor above medications without direct supervision by a registered nurse.
10. change an intravenous pump setting without direct supervision by a registered nurse.
11. initiate intravenous therapy for infants in the nursery.
12. initiate intravenous therapy in children less than 5 years of age without direct supervision by a registered nurse.
13. insert, operate, or remove hemodynamic monitoring equipment.
14. retrieve or administer blood or blood products. The student nurse may observe the process of blood retrieval and administration but may not sign or document on blood retrieval or administration related forms or records.
15. insert or remove any type of internal monitoring device such as internal fetal scalp monitors, central intravenous lines, arterial lines, etc.
16. perform examinations related to the progression of labor (vaginal, rectal, internal monitoring).
17. remove chest tubes.
18. monitor chest tubes without direct supervision by a registered nurse.
19. remove wound drains without direct supervision by a registered nurse.
20. remove subcutaneous sutures (may remove skin staples or skin stitches/sutures).
21. operate or remove pacemakers.
22. replace electrocardiographic (ECG/EKG) or telemetry leads without direct supervision by a registered nurse.
23. function as primary circulating nurse or scrub nurse in the operating room.
24. take charge of a nursing unit.
25. take verbal or telephone orders from a healthcare provider.
26. transcribe healthcare provider orders without direct supervision by a registered nurse.
27. take a report on a patient transferring from another area or unit without direct supervision by a registered nurse.
28. witness consent forms.
29. instruct patients in preparation for special testing without direct supervision by a registered nurse (i.e. x-rays, stress tests, sigmoidoscopies, etc).
30. report the results of medical tests to patients without direct supervision by a registered nurse.
31. give health advice to patients without direct supervision by a registered nurse.
32. assume responsibility for a patient’s valuables.
33. participate in a patient containment process.
Clinical Laboratory/Clinical Rotation Incidents Policies

The faculty understands a student will not intentionally make an error (or cause a clinical incident) when providing patient care. The faculty realizes the student nurse is human and may make mistakes. Clinical faculty members are always available to assist and supervise the activities of the nursing student. For protection of the patient, clinical institution, and student nurse, specific procedures will be implemented when a student nurse makes a clinical error (incident), it is the student nurse’s responsibility to report it immediately to the clinical faculty. Faculty will assist the student nurse with the completion and filing of the appropriate occurrence report for the specific clinical institution.

In case a student makes a medication error or sustains a needle stick or other injury, a NMJC Nursing Program Clinical Incident Report will be completed by the student and clinical faculty (See NMJC Nursing Clinical Incident Report). The clinical instructor will do a written counseling form for any clinical incident(s) and/or occurrence(s). The student is required to meet with the clinical instructor to discuss the occurrence(s) and determine the stipulations of corrective action applicable to the incident. The student will abide by the stated corrective actions. If a student has received an assignment and/or corrective action by the clinical faculty and does not complete the assignment/corrective action prior to the last day of the course, the student will receive an ‘F’ “failure” grade for the course.

Needle Stick Injury

Health care workers who use or may be exposed to needles are at increased risk of needle stick injury. Such injuries can lead to serious or fatal infections with blood-borne pathogens; such as hepatitis B virus, hepatitis C virus, or human immunodeficiency virus (HIV) (refer to: http://www.cdc.gov/niosh website for National Occupational Safety and Health). If a student receives a needle stick injury, in the Nursing Simulation Laboratory or a clinical site, a NMJC Nursing Program Clinical Incident Report should be completed within 24 hours of the needle stick injury. The report should be completed by the student and clinical/lab faculty and reported to the Director of Nursing. If the needle stick injury occurs at a clinical institution, some clinical institutions require the student nurse have HIV and Hepatitis B blood tests following a needle stick incident. The student nurse will be responsible for the cost of the laboratory tests. NMJC assumes no responsibility for costs incurred as a result of any student error or incident. The student should follow the current Center for Disease Control (CDC) recommendations for a needle stick injury and/or contact health care provider for further information.

Medication Administration Error

The faculty believes strongly in the need for accuracy in performing nursing tasks. The faculty believes accuracy is especially crucial in the area of medication administration. The following policy has been developed for use with medication errors.

I. Definitions
   a. Medication - any substance, including intravenous solutions and oxygen, administered by physician’s orders as treatment for a physical or emotional condition.
   b. Actual medication Administration Error-occurs when the student violates any step in the medication administration procedure
c. **Potential Medication Administration Error**—occurs when the student violates any step in the medication administration procedure and/or when the student is provided the opportunity to make a decision in the medication administration process, and the decision is wrong. An example of such a decision opportunity is when a clinical faculty member asks, “Are you ready to administer the medication(s) to the patient?” If the medication(s) were administered utilizing the student’s decision, an error would occur. The clinical faculty prevents the student from making the medication error. A potential medication administration error results in the same consequences for the student as an actual medication administration error.

Based on the clinical faculty evaluation of the error, both actual and potential medication errors may be categorized as Class I or II errors. Examples of each class are included below; however, the list is not exhaustive.

d. **Class I Medication Administration Error:**
Violations of one or more of the six rights of medication administration:
1. Right Patient
2. Right Medication
3. Right Dose
4. Right Route
5. Right Time
6. Right Documentation

e. **Class II Medication Administration Error:**
Administration of a medication before the physician’s order is noted
Failure to know, check or verify (if possible) the patient’s allergies
Failure to ascertain medication information prior to administration (action, compatibility, nursing implications, injection sites, etc.)
Accepting the narcotic key from institution personnel
Administration of medications with expired dates
Administration of a medication with an expired order date

A NMJC Nursing Program Clinical Incident Report must be completed by the clinical faculty and the student following the medication administration error. An ‘Action Plan/Learning Contract’ will identify the specifics of the error, the consequences of the medication error with a specific date for corrective action to be taken by the student. Other disciplinary action will be imposed on the student as a result of the incident (See below for Disciplinary Action associated with a medication administration error). The Clinical Incident Report and the associated Action Plan/Learning Contract will become a part of the student-advisor record, to be considered in the assessment of the student’s clinical performance and the Student Clinical Evaluation Tool.

After the incident report has been filed, the clinical faculty has the option of dismissing the student from the assignment or reassigning the student. The student nurse may not implement the procedure of error until the following criteria are met:

1. The student must review with a faculty member the correct method for performance of the procedure.
2. The student must submit a two page, legible handwritten or typed report to the clinical faculty. The report will explain the circumstances of the error, including how the medication error occurred, what patient damage occurred as the result of the error, or what potential damage could have occurred and how the student plans to prevent the error from recurring in the future.
3. If the student is placed on probation (see below: student probation), the student must perform the procedure of error only under the direct supervision of clinical faculty when in the clinical setting.

4. Failure to complete the assigned steps or meet the probation stipulations will result in the student being prohibited from attending clinical and requires a student-nursing faculty meeting. The student will receive an absence as a result of being withheld from clinical. The student must meet with the clinical faculty and the Director of Nursing to determine the student’s status in the nursing program; in regards to the student not meeting the expectations of the assignment in the agreement (counseling form).

The student may receive a nursing course grade of ‘F’, regardless of the theory grade. If the Director of Nursing and the clinical faculty determine the student did not meet the stipulation associated with the medication error. If the student disagrees with the decision, the student may file a formal written complaint according to the formal complaint procedures for NMJC (see: NMJC Student Handbook).

II. Disciplinary Action

Both potential and actual medication errors will be evaluated and appropriate action taken based on the severity and pattern of the error(s). Potential and actual medication error(s) are also considered physical hazard and incompetent, unsafe practice.

a. Class I or II medication error may result in any of the following:
   1. Withdrawal of medication administration privileges for a specified time, to be determined by the faculty member.
   2. Dismissal from the clinical practice area.
   3. Student Clinical Probation-Contract, to specify the stipulation associated with the disciplinary action.
   4. Assigning a grade ‘F’ for the nursing course, regardless of the theory grade.

b. Student Probation

If a student nurse is placed on probation due to a medication error, the involved faculty member will notify the student in writing. Probation requirements will be determined by the faculty and influenced by the nature, severity, and pattern of occurrence(s). A contract will be presented to the student identifying the specific requirements of probation.

Blood-borne Pathogens – Universal Precautions

Blood-borne pathogen means pathogen microorganisms that are present in human blood and can cause disease in humans. The student must be knowledgeable about universal precautions with blood and body fluids. In the practice of nursing, a student is at risk for an occupational exposure. The student will come in contact with and be exposed to blood, body fluids, contaminated articles and other potentially infectious materials. It is the student’s responsibility to be aware of safety precautions and utilize safe practice techniques. The following descriptions refer to contamination, exposure and potential infected materials:

**Contaminated:** the presence of the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

**Contaminated Laundry:** laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

**Contaminated Sharps:** any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubs, and exposed ends of dental wires.
Occupational Exposure: reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of any duties.

Parenteral means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, and abrasions.

Other Potentially Infectious Materials:
1. The following human body fluids: semen, vaginal secretion, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
2. Any unixed tissue or organ (other than intact skin) from a human (living or dead); and
3. HIV-containing cell or tissue cultures, organ cultures, and HIV-or animals infected with HIV or HBV

Exposure Incident: a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of duties.

Universal precautions is the concept that all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV (hepatitis B virus) and other blood-borne pathogens. Universal precautions shall be observed to prevent contact with blood and other potentially infectious materials.

Personal Protective Equipment is specialized clothing or equipment worn for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard is not considered to be protective equipment. Examples of appropriate personal protective equipment includes but is not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered “appropriate” only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee’s work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membrane under normal conditions of use and for the duration of time which the protective equipment will be used. When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. (reference OSHA web site at: http://www.osha-slc.gov/SLTC/bloodborneopathogens/index.html)
NMJC Nursing Program
Student Acknowledgement of Nursing Program Policies

Please initial after each statement and sign your name at bottom of form to indicate understanding of the nursing program policies for the semester/academic year ____________/___________.

1) I understand confidentiality regarding patient information is MANDATORY during my nursing education process. I understand all patients have the right to privacy and confidentiality of all information, medical or personal. I agree to maintain patient information confidentiality throughout the nursing education process. I will not purposely communicate patient information to any unauthorized person. ________

2) I have read and understand the information contained within this handbook and agree to abide by the nursing program policies and procedures throughout my enrollment in the nursing program. ________

3) I have read and understand the professional behavioral policies and expectations and agree to demonstrate professional behaviors in all nursing education related settings during all activities. ________

4) I understand I must comply with the Nursing Program - Substance Use/Abuse Screening and Testing Policy. ________

5) I understand that failure to comply with a nursing program policy, procedure, or requirement may result in dismissal from the nursing program. ________

6) I understand I must complete an exit interview with the Director of Nursing at the time of discontinuance of nursing program enrollment.

I agree to abide by all of the policies herein,

Student Signature: ___________________________________ Date: _______________________

Printed Student Name: ________________________________

*Please complete this acknowledgment and submit this page to the designated nursing faculty member.
NMJC Nursing Program
Release of Information for Publicity

I hereby grant permission to the NMJC Nursing Program to release my name or picture for publicity purposes. I understand my picture or name may appear in the newspaper or other materials, such as college presentations or advertisements.

Signature: ___________________________________ Date: _____________________________

Printed Student Name: __________________________

I hereby deny permission to the NMJC Nursing Program to release my name or picture for publicity purposes. I understand my picture or name will not appear in the newspaper or other materials, such as college presentations or advertisements.

Signature: ___________________________________ Date: _____________________________

Printed Student Name: __________________________

*Please complete this form and submit this page to the designated nursing faculty member.
**NMJC Nursing Program**  
**Release of Information to Potential Employers**

Potential employers often contact the NMJC Nursing Program for a list of graduates eligible for nursing employment opportunities. By law, the college or representative of the nursing program may not give student information without prior approval.

I hereby **grant** permission to the NMJC Nursing Program to release information about me to employment recruiters.

Signature: _________________________________ Date: _________________________________

Printed Student Name: _________________________________

I hereby **deny** permission to the NMJC Nursing Program to release information about me to employment recruiters.

Signature: _________________________________ Date: _________________________________

Printed Student Name: _________________________________

*Please complete this form and submit this page to the designated nursing faculty member.*
NMJC Nursing Program
Exit Interview

When a student exits the nursing program for any reason, he/she should make an appointment with a Director of Nursing for an exit interview.

Student Name: __________________________ Date:____________________

1. Reason for discontinuing nursing education:

2. Plans for the future:

3. I understand:
   
   ______ I am eligible for readmission according to the Nursing Program Policies.
   
   ______ I am not eligible for readmission to the Nursing Program.

Student Signature: _____________________________________ Date: __________________

Director of Nursing Signature: __________________________________ Date: __________________