

# 2022-2023 Nursing Department Student Handbook



**LPN – Bachelor of Science in Nursing**  
**Practical Nursing**  
**MA – Practical Nursing**  
**Nursing Assistant**  
**Phlebotomy**  
**Emergency Room/Patient Care Technician**

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Welcome to the Nursing Programs at Green River College!

This Nursing Student Handbook will help you familiarize yourself with the six programs offered by the Green River College Nursing Department: LPN-to-BSN, practical nursing, MA-to-LPN, nursing assistant, phlebotomy and emergency room/patient care technician. This handbook includes important policies and procedures, information on student resources, and information that you will need to be successful throughout the program.

We look forward to having you join our team!



Dr. KaraLynn LaValley, Ph.D., RN  
Associate Dean of Nursing

Roseanne Berg, DC  
Dean of Nursing and Technology

## Green River College Information

### College Mission, Vision, and Equity Statement

#### Mission:

Green River College welcomes our diverse local and global communities and is committed to meeting students where they are by providing inclusive, equitable access to innovative and comprehensive educational programs, and individualized support that empowers and prepares students to achieve their personal, educational, and career goals.

#### Vision:

Green River College will be an equity-centered leader in higher education committed to excellence in teaching and learning, to being an anti-racist college, and to advancing social and economic justice. All members of the college community will feel a strong sense of belonging and, together, build a culture of care. The racial and ethnic diversity of staff, faculty, and leadership will reflect the diversity of the communities we serve. Green River will be:

- The destination of choice for post-secondary education.
- First choice in partnership with our community, its business and industry.
- Ranked among the best nationally in student achievement, closing all opportunity gaps.
- Recognized for its preparation of students for the global workforce and for civic engagement in an increasingly diverse, interdependent world.

#### Equity Statement:

The Green River College Promise: We commit to be an anti-racist institution where all students, faculty, and staff receive the access, resources, and services needed to achieve their educational, career, and personal goals. Green River College makes social and economic justice, equity, and inclusion our highest priorities.

The Green River College definition of equity encompasses all identities, including but not limited to race, ethnicity, economic status, gender identity, sexual identity, disability, religion/spirituality, immigration status, age, and culture. We understand individual needs vary widely, and the effects of discrimination and historical oppression must be taken into account while aiming for equitable opportunities and outcomes for all.

Let this be a call to action to all members of the Green River College Community: everyone must contribute to this on-going effort to achieve equity for all.

## **Campus-Wide Learning Outcomes**

Green River College is committed to the continuous improvement of teaching and learning. To this end, the faculty generated and defined four Campus-wide Learning Outcomes. These are outcomes that should be addressed in a variety of classes within a student's degree or program of study, allowing the student repeated practice with each outcome as he or she moves through a degree or program of study.

All students completing a degree will be exposed to and are expected to demonstrate proficiency with the four campus-wide outcomes: Written Communication, Critical Thinking, Responsibility, and Quantitative and Symbolic Reasoning.

### Written Communication (WC)

Written Communication encompasses all the abilities necessary for effective expression of thoughts, feelings, and ideas in written form.

### Critical Thinking (CT)

Critical thinking finds expression in all disciplines and everyday life. It is characterized by an ability to reflect upon thinking patterns, including the role of emotions on thoughts, and to rigorously assess the quality of thought through its work products. Critical thinkers routinely evaluate thinking processes and alter them, as necessary, to facilitate an improvement in their thinking and potentially foster certain dispositions or intellectual traits over time.

### Responsibility (R)

Responsibility encompasses those behaviors and dispositions necessary for students to be effective members of a community. This outcome is designed to help students recognize the value of a commitment to those responsibilities which will enable them to work successfully individually and with others.

### Quantitative & Symbolic Reasoning (QSR)

Quantitative Reasoning encompasses abilities necessary for a student to become literate in today's technological world. Quantitative reasoning begins with basic skills and extends to problem solving.

### Diversity & Equity (DE)

In order to advance equity and social justice, students will be able to examine their own and others' identities, behaviors, and/or cultural perspectives as they connect to power, privilege, and/or resistance.

For more information see, [collegewide learning outcomes](#).



## **Green River College Student Code of Conduct**

Green River College Student Code of Conduct is administered by the college's Judicial Affairs. Student rights and responsibilities, rules of student conduct, academic rights/responsibilities, and disciplinary/grievance procedures are outlined in [Washington Administrative Code \(WAC\) 132J-126](#).

Visit the [GRC Student Judicial Programs website](#) for more detailed information.

**Academic Honesty:** As you pursue your education here at GRC, you will be exposed to the ideas, theories, and creative works of countless scholars, scientists, journalists, professionals and artists. Whether the project is an essay, a solution to a math problem, or a research paper, it becomes important to consider how to incorporate the ideas of others and how sources will be identified and cited. This means that academic honesty is foundational to all types of critical commentary, scholarly inquiry, and knowledge production expected by instructors at GRC.

For more information or resources on academic honesty, see the [Library's Academic Honesty Tutorial](#).

## **Nondiscrimination and Harassment**

Green River College recognizes its responsibility for investigation, resolution, implementation of corrective measures, and monitoring the educational environment and workplace to stop, remediate, and prevent discrimination on the basis of race, color, national origin, age, perceived or actual physical or mental disability, pregnancy, genetic information, gender, sexual orientation, gender identity, marital status, creed, religion, honorably discharged veteran or military status, or use of a trained guide dog or service animal, as required by [Title VI of the Civil Rights Act of 1964](#), [Title VII of the Civil Rights Act of 1964](#), [Title IX of the Educational Amendments of 1972](#), Sections [504](#) and [508 of the Rehabilitation Act of 1973](#), the [Americans with Disabilities Act](#) and [ADA Amendment Act](#), the [Age Discrimination Act of 1975](#), the [Violence Against Women Reauthorization Act](#) and [Washington State's Law Against Discrimination, Chapter 49.60 RCW](#) and their implementing regulations. To this end, Green River College has enacted policies prohibiting discrimination against and harassment of members of these protected classes. For more information, see Green River's [Policy HR-22 Nondiscrimination and Harassment](#).

**Sexual harassment** is illegal under Title VII of the Civil Rights Act and Title IX of the Educational Amendment and is against Green River College's policies. Sexual harassment will not be tolerated in any form. It shall be the policy of Green River College, consistent with its efforts to respect the dignity and integrity of employees, students and the general public, to provide an environment free of sexual harassment. For allegations of Sexual Harassment subject to Title IX jurisdiction pursuant to regulations promulgated by the United States Department of Education, 34 C.F.R. § 106, refer to the Title IX Grievance Procedure in policy GA-11. Any employee, student, applicant, or visitor who believes that they have been the subject of discrimination or harassment should report the incident or incidents to the College's appropriate Title IX Coordinator.

**Discrimination:** Unfavorable treatment of another person based on that person's race, color, national origin, age, disability, sex, sexual orientation, marital status, creed, religion, or status as a veteran that is sufficiently

severe or pervasive so as to substantially deny or limit that person's ability to benefit from or fully participate in educational programs or activities or employment opportunities.

**Discriminatory Harassment:** A form of discrimination consisting of physical, verbal, or written conduct that (1) denigrates or shows hostility toward an individual because of their race, creed, color, religion, national or ethnic origin; parental status or families with children; marital status; gender (sex); sexual orientation, gender identity or expression; age; genetic information; honorably discharged veteran or military status; or the presence of any sensory, mental, or physical disability; or the use of a trained dog guide or service animal by a person with a disability; or any other prohibited basis; and (2) is sufficiently severe or pervasive so as to substantially interfere with the individual's employment, education or access to college programs, activities and opportunities.

Examples of behaviors that may rise to the level of discriminatory harassment include but are not limited to the following:

- Racial epithets, "jokes," offensive or derogatory comments, or other verbal or physical conduct based on an individual's race/color.
- Ethnic slurs, workplace graffiti, or other offensive conduct directed towards an individual's birthplace, ethnicity, culture or foreign accent.
- Verbal or physical abuse, "jokes" or offensive comments based on an individual's age, gender, disability or sexual orientation.
- Creating, posting, emailing, or circulating demeaning or offensive pictures, cartoons or other materials in the workplace that relate to race, ethnic origin, gender or one of the other protected categories listed above.

Any employee, applicant, student or visitor of the College may file a complaint. Complaints may be submitted in writing or verbally. The College encourages the timely reporting of any incidents of discrimination or harassment. For complainants who wish to submit a written complaint, a formal complaint form is available online. Forms are also available at the following locations on campus: Human Resources, Campus Safety, Student Affairs, or any Dean's office. Any person submitting a discrimination complaint shall be provided with a written copy of the College's anti-discrimination policies and procedures. A complaint cannot be filed on behalf of another person. Any individual found to be in violation of these policies will be subject to disciplinary action up to, and including dismissal from the College

### **Sex Discrimination Grievance Procedure**

The College recognizes its responsibility to investigate, resolve, implement corrective measures, and monitor the educational environment and workplace to stop, remediate, and prevent discrimination on the basis of sex, as required by Title IX of the Educational Amendments of 1972, Title VII of the Civil Rights Act of 1964, the Violence Against Women Reauthorization Act, and Washington State's Law Against Discrimination, and their implementing regulations. To this end, The College has enacted and adopted the following Title IX Grievance Procedure for receiving and investigating Sexual Harassment allegations arising during education programs and activities. Any individual found responsible for violating The College's Title IX policy is subject to disciplinary action up to and including dismissal from The College educational programs and activities and/or termination of employment.

Application of this Title IX Grievance Procedure is restricted to allegations of “Sexual Harassment,” as that term is defined in 34 C.F.R. §106.30. Nothing in this procedure limits or otherwise restricts the College’s ability to investigate and pursue discipline based on alleged violations of other federal, state, and local laws, their implementing regulations, and other college policies prohibiting gender discrimination through processes set forth in the College’s code of student conduct, employment contracts, employee handbooks, and collective bargaining agreements. For more information, see Green River’s Policy [GA-11 Sex Discrimination Grievance Procedure](#).

### Reporting

Any employee, student, applicant, or visitor who believes that he, she or they has been the subject of discrimination or harassment should report the incident or incidents to the College’s appropriate Title IX Coordinator identified below. If the complaint is against that Coordinator, the complainant should report the matter to the President’s office for referral to an alternate designee.

#### For employees and public/visitors

Shirley Bean, Title IX/EEO Coordinator  
Administration Building (AD) 9  
Phone: (253) 288-3305 Email: [sbean@greenriver.edu](mailto:sbean@greenriver.edu)

#### For student issues:

Dr. Deb Casey, Title IX Coordinator  
Student Affairs and Success Center 206C  
Phone: (253) 288-3328 Email: [dcasey@greenriver.edu](mailto:dcasey@greenriver.edu)

The College encourages the timely reporting of any incidents of discrimination or harassment. Complaints may be submitted in writing or orally. For complainants who wish to submit a written complaint, complete the [Discrimination Complaint Processing Form](#) and submit the form to the appropriate Title IX Coordinator.

### **Reasonable Accommodations for Religion/Conscience**

Students who will be absent from course activities due to reasons of faith or conscience may seek reasonable accommodations so that grades are not impacted. Such requests must be made within the first two weeks of the course and should follow the procedures listed under the section Student Procedures outlined in Green River’s Policy [SA-91 College Holiday & Leave](#). Please note that requests must be made to the office of the Vice President of Student Affairs in addition to your instructor.

### **Accessibility (ADA) Services**

Green River College is committed to providing access to all who visit, work, and study on campus. This page provides you with a general overview of accessibility of our resources. To receive the following information in an alternative format, please contact Disability Support Services at: 253-931-6460; TTY 253-288-3359.

### Disclaimer

Green River College has made reasonable efforts to provide information that is accurate at the time of publication. However, the college reserves the right to make appropriate changes in procedures, policies,

calendars, requirements, program, courses and fees. When feasible, changes will be announced prior to their effective dates, but the college assumes no responsibility for giving any particular notice of such changes. Nothing herein shall be construed to create any offer to contract or contractual rights.

### Nondiscrimination Statement

Green River College does not discriminate on the basis of race, color, national origin, sex, sexual orientation, disability, marital status, religion, age or any other unlawful basis in its programs and activities. Please see College Policy [HR-22](#). The following person has been designated to handle inquiries regarding the nondiscrimination policies: Vice President for Business Administration and Human Resources, 12401 SE 320th Street, Auburn, WA 98092, 253-288-3320. To receive this information in an alternate format, please contact Disability Support Services at 253-931-6460; TTY 253-288-3359.

Green River College is committed to preventing and stopping discrimination, including harassment of any kind and any associated retaliatory behavior and will take steps to ensure that the lack of English language skills will not be a barrier to admission and participation in all educational and vocational education programs.

### Disability Support Services

Academic accommodations are coordinated through [Disability Support Services \(DSS\)](#). DSS works with qualified students with disabilities in a confidential, respectful, and safe environment to identify and develop reasonable classroom accommodations; to ensure equal opportunity and access of academic and professional goals; and to promote an accessible community where students with disabilities have equal opportunity to participate in college programs and activities. The accommodations authorized on your forms should be discussed with your instructor. All discussions will remain confidential. Accommodations are not provided retroactively, so it is essential to discuss your needs at the beginning of the quarter. Additionally, only accommodations approved by Disability Support Services will be provided.

Contact DDS:

TDD: 253-288-3359

Tacoma: 253-924-0180

Greater Eastside: 206-464-6133

Fax: 253-288-3471

Green River College

Attn: Disability Support Services

12401 SE 320th Street

Auburn, WA 98092-399

### **College Contacts and Resources**

Green River provides learning environments that promote student engagement for its diverse student population. Programs and services are developed and aligned with the institution's mission, vision, and core themes, which center on student learning and success. The college provides a variety of academic and student development services to students and faculty to support continuous improvement in teaching and learning by meeting student needs.

- [Holman Library](#) serves the students, faculty, and staff of Green River College by providing the resources and services necessary to ensure access to information and development of information literacy skills.

- [Career and Advising Center](#) provides academic and career exploration and planning for prospective and current students pursuing a variety of options, including transfer, career technical, high school completion, and BAS programs. Students can access services in person, over the phone, and via email. Key services for students include the new student advising and registration (NSAR) sessions, first quarter advising, onboarding, transfer resource library, course registration support, and advising triage. The center also provides faculty advisor training and support.
- [Progress and Completion Center](#) provides support to students who are near completion but have stopped out or are otherwise experiencing barriers to completion. Completion coaches offer students services to achieve their personal, academic, and career goals. These services include case-management, referral to community-based services, and direct support. Completion coaches help students in jeopardy of losing their financial aid and other funding to develop strategies that increase success. The center offers the following services:
  - The [Benefits Hub](#) provides wrap-around support to help students navigate and overcome non-academic barriers to completion. For example, the Benefits Hub
  - provides housing support, emergency aid, financial coaching, transportation assistance, tax preparation help, and support in accessing community benefits.
  - The [Gator Pledge](#) can assist students with financial emergencies that often become barriers to completion, such as food insecurity, housing insecurity, and incidental emergencies such as unpaid utility bills or car trouble. In addition, Gator Pledge helps to provide funding for books and online curriculum packages for classes. Faculty or staff members in any area of the college can initiate Gator Pledge help for a student in need.
  - The [Gator Pantry](#) provides free food assistance to students on a temporary basis and connects them to longer-term resources in the community.
- [Counseling Services](#) provides free, confidential short-term mental health counseling and self-care/wellness education to Green River students by licensed psychologists, social workers, and professional mental health therapists. By providing workshops, classroom visits, and online resources, counseling services supports staff, faculty, and students.
- [TRiO](#) offers eligible students individualized advising, tutoring, and transfer support services. TRiO focuses on professional development skills and soft skills, as well as resume building and professional etiquette. TRiO hosts an annual leadership summit where students improve interpersonal and communication skills, develop their leadership style, and explore their identity. TRiO is charged with intertwining cultural events with academic and non-cognitive development opportunities.
- [Disability Support Services](#) works with qualified students with disabilities in a confidential, respectful, and safe environment to identify and develop reasonable classroom accommodations; to ensure equal opportunity and access for academic and professional goals; and to promote an accessible community where students with disabilities have equal opportunity to participate in college programs and activities.

- The [Violence Prevention Center](#) works to prevent interpersonal violence, promote wellness, and provide support to students, faculty, and staff that have experienced stalking, harassment, sexual assault and relationship violence. The center provides on-campus and off-campus resources and referrals, as well as guidance for reporting crimes. The center provides a confidential meeting space to reduce barriers to accessing support. The center holds annual awareness events and provides bystander intervention training.
- [The Paper Tree Bookstore](#) is located at the Green River Main Campus, on the first floor of the Mel Lindbloom Student Union and provides the necessary books and supplies to meet students' academic needs. The bookstore also offers a variety of products and services, such as faxes, movie rentals, UPS delivery, special orders, educational software, ID cards, gift cards, balloon bouquets, and more.
- [Veteran Services](#) provides support and services for veterans or eligible dependents using veteran funding. The veteran services office helps students understand complicated regulations related to their VA education benefits and provides additional assistance in locating community resources to assist with employment and housing, as well as planning events and supporting service projects for veterans. In addition, the veterans lounge provides a safe, welcoming space for veteran students to visit for a quick coffee break.
- [Workforce Education](#) administers programs that provide free or reduced tuition, including assistance with books, fees, and educational supplies, to students who qualify. Workforce works with a wide range of students: dislocated workers, Temporary Assistance for Needy Families and food stamps recipients, veterans, and ex-offenders.
- The [Office of Diversity, Equity and Inclusion](#) (ODEI) is an inclusive, safe, welcoming and accessible space that serves all student in culturally relevant ways in order to empower them to succeed in their educational journeys. Students can receive commencement achievement program, which helps bridge the education gap for historically underserved and underrepresented students, and bilingual services to help navigate their college journey.
- [Reflection/Meditation Room](#) is a dedicated space for students, staff, and faculty who need space for quiet reflection or meditation.
- [IT/Computer Labs](#)—Students have access to approximately 2,500 instructional computers in 204 classrooms and computer labs on main campus and branch locations in Auburn, Enumclaw, and Kent. In addition to general-purpose productivity software, each instructional lab has specialized software selected by faculty. The college also has four open computer labs (two on main campus and one each at Kent and Enumclaw) that include more than 312 computers with access to most of the specialized programs. Each instructional lab is equipped with one or more ADA-compliant workstations, including adjustable furniture and assistive technologies. Three student information

technology service desks assist over 1,600 students a month at different locations across the college.

- [Canvas and eLearning](#): Canvas is a web-based learning management system that supports learning and teaching in online, hybrid, and in-person formats. It is maintained by eLearning at GRC, ensuring compliance with FERPA related to protected information (names, student ID numbers, etc) with secure encryption protocols. Any add-on services (Respondus with LockDown Browser) are compliant with FERPA guidelines as well. Only enrolled students and instructors associated with the course have access to the specific Canvas shell using their own specific log-on. Instructors use Canvas to provide documents, assignments, syllabi, grades, and electronic communication with the students. Students submit assignments, take online exams, and contribute to discussions on Canvas.
  
- [Tutoring](#)—The college provides a variety of free tutoring resources and locations to support all enrolled students with the tools they need to achieve their academic potential. Tutoring staff collaborate with faculty in multiple disciplines and programs to ensure students receive comprehensive support. In addition, tutors in all centers receive non-discrimination training, diversity training, and training for working with students with disabilities.
  - The [Tutoring and Resource Center](#) provides discipline-specific tutoring, supervised study tables, and basic skills support as well as conversation partners for English language learners. The main tutoring and resource center, located in the Holman Library, provides a computer lab with subject-specific software. Discipline-specific tutoring is also offered at the Kent Campus and at the Auburn Center, where subject-specific tutoring is available to students enrolled in BAS programs.
  - The [Writing and Reading Center](#) provides one-on-one tutoring services for students at all stages of the writing and reading process, in either five-minute or thirty-minute face-to-face sessions. The center also offers online tutoring to meet the needs of online and evening students. In all formats, students can expect to work with student, mentor, and/or faculty consultants on any issues related to writing and reading. In addition, the center offers student visitors access to computers, printers, online writer's resources and handouts, and access to writing textbooks and other reference books. The center provides support for composition and reading faculty and their classes through its embedded tutoring program, where teams of student tutors coordinate with participating faculty to work directly with students in their classrooms during regularly scheduled class times.
  - The [Math Learning Center](#) provides space where students can study individually or in small groups and receive help from peer tutors for all levels of math. Students also have access to all current math textbooks as well as supplemental and special interest math textbooks. Scientific and graphing calculators may be checked out daily at no cost, or alternatively, students may rent a graphing calculator for the entire quarter. The center also serves math instructors by making class materials available to their students and providing instructors with various math tools and manipulatives, textbooks, and classroom sets of calculators for their classes.

- The [Public Speaking Center](#) provides students a safe space to hone their public speaking and oral communication skills. Students receive one-on-one help to improve delivery technique and suggestions about the organization and development of ideas. Students can opt to have their speeches taped to further critique at home. Services are available to students, faculty, campus staff and alumni. In addition, the center supports students with preparation for job interviews as well as public speaking engagements in the community.
- [eLearning Support](#) offers 24x7 phone and chat support for students and faculty related to online classes and the college's learning management system, CANVAS.
- [Virtual Student Assistance](#) connects current and prospective students with student services departments and support services across campus via live ZOOM chat. These include the Welcome Desk, Assessment and Testing, Financial Aid, Career and Advising, Office of the Registrar, Cashiers Office, Veterans Services, and Workforce Education.

[Campus Safety](#) patrols and provides campus safety support for the campus during day and evening classes. Campus Safety also issue parking permits to students, faculty and staff. Campus Safety office is open 24 hours a day, 7 days a week. Visit the Campus Safety website for more information.

From a campus phone, dial ext. 2250 or 3350.

From an off-campus phone, dial (253) 833-9111 ext. 2250 or 3350.

- [Food Services](#): Green River Food services offers a variety of food options on campus for students, employees and visitors.
  - [The Gator Grille](#): Located in the Mel Lindbloom Student Union, serves made-to-order sandwiches and grilled items, hot entrees, grab-n-go salads, and wide selection of snacks, along with a wide variety of bottled beverages and fresh hot coffee throughout the day.
  - [The Gator Grind](#): Offers fresh baked snacks and coffees in two locations: the Mel Lindbloom Student Union or the Get Wired Cafe on the first floor of the Technology Center.
  - [Vending](#) machines are located throughout the Mel Lindbloom Student Union, outside of the PE Field House, and in the Technology Center.
- Student Organizations: Students wishing to participate in state or national nursing organizations should contact that organization.
  - [Washington State Nurses Association](#) (WSNA)
  - [National Student Nurses' Association](#) (NSNA)
  - [American Nurses Association](#) (ANA)
  - Green River College Nursing Organization

For further student services and activities, see the [Green River College Catalog](#) or the [Green River College Student Affairs website](#).



## **Financial Aid and Scholarships**

Green River's Federal School Code: 003780

Financial Aid is available in 3 forms:

- Gift Aid – grants and scholarships
- Employment – jobs on or off campus
- Loans – low interest with deferred repayment

[Financial aid](#) awards are processed throughout the year in the order that files are completed, so it is best to apply as early as possible to receive the funding that is still available. Late applications are less likely to have their award notices completed prior to the start of the quarter. The financial aid office is located in the Student Affairs and Success Building, SA-231.

[Foundation](#): Green River College Foundation is located in the Zgoliniski Center. Foundation Scholarships are awarded based on many different criteria that can be grouped into the following categories:

- Need Based Scholarships
- Program Based Scholarships
- Merit Based Scholarships
- General Scholarships
- Summer Completion Scholarships
- Transfer Scholarships

## **Nursing Department**

### **Mission**

The mission of the Green River College Nursing Program is to provide quality education to prepare students as safe, competent practitioners within our diverse healthcare community. Graduates of the Green River College Nursing Program will be qualified candidates for the successful completion of the NCLEX and prepared for advancement in continuing healthcare education.

### **Vision**

To meaningfully contribute to the advancement of healthcare in a diverse community.

### **Philosophy**

The nursing faculty values all members of the collaborative healthcare delivery team. The faculty believes in preparing all students to be safe, quality, and competent practitioners within each level of nursing practice and within their scope of practice.

Nursing education is a collaborative process which values the individuality of each student. Adult learning principles are more effectively applied when the student is actively engaged in his or her learning. The faculty promotes critical thinking regarding related concepts throughout the nursing process and the evaluation is based on the satisfactory performance of the individual course criteria.

### **Values**

Community Engagement: We strive to strengthen our community partnerships to improve the delivery of nursing education and the care that our students provide.

Diversity and Inclusion: We embrace the uniqueness and diversity of our community and respect the personal characteristics, ideas, values and practices of individuals.

Integrity: We value holistic care rooted in ethical and moral accountability that is without conditions or limitation.

Excellence: We commit to excellence and continuous growth, improvement, and understanding that is grounded in evidence-based research and best practices.

Innovation: We embrace an atmosphere of creativity and innovation for our faculty and students that enhances nursing education and improves health care delivery.

Caring: We nurture a commitment to patient-centered care that demonstrates an ability to understand the needs of others and advocates on their behalf.

Student Success: We promote the development of professional identity that instills a spirit of inquiry fostering lifelong learning practices. We promote evidence-based nursing judgement that allows individuals to flourish within their unique cultural and socioeconomic environments.

## **Nursing Student Rights and Responsibilities**

The materials in this handbook have been prepared to enhance the Nursing student's understanding of the principles, guidelines, and policies of the program in which they are enrolled. These materials outline both faculty and student responsibilities that promote educational growth and development for successful program completion.

The Nursing Faculty shall:

1. Promote an educational process that allows for individual differences and needs within the limitations of the program.
2. Provide a learning environment that links theory and practice concurrently as much as possible, thus strengthening the educational process.
3. Provide a curriculum that allows students to progressively build knowledge on previous concepts, as well as to link concepts together to provide holistic patient/client care.
4. Provide feedback and guidance throughout the program in the form of an assigned advisor, progress notes, and class evaluations, which enables students to become competent practitioners who are legally and ethically qualified to obtain and maintain a license to practice.

The Nursing Student shall:

1. Assume responsibility for motivation and self-direction necessary for successful course completion.
2. Progress in a predetermined or defined sequence of learning with the assistance of an instructor.
3. Achieve outcomes, as outlined in the course syllabi, through successful theory testing and clinical practice.
4. Set aside differences, appreciate varying perspectives, and work together for the mutual goal of patient safety.
5. Adhere to all policies and processes outlined in this Nursing Student Handbook.

## Student Nursing Organization

The Green River College Nursing Club was founded in 2012 and is an ever-evolving student organization. In 2018, the club was granted organization status by the college. Special events and projects are arranged by the students, for student benefit, during the nursing program. A Nursing faculty serves as the Nursing Organization Advisor for consultation and supervision. The leadership structure currently includes the following elected positions:

- President
- Vice-President
- Secretary
- Treasurer
- Historian
- Class Representative

The cohort will organize their membership and leadership team in the winter quarter in consultation with past leadership under the direction of the Nursing Organization Advisor.

*"It shall be the purpose of this organization to bring together the Green River College Nursing students with those Green River College students and other individuals who are interested in the field of nursing or the Green River College Nursing programs, for the purpose of providing service, outreach, and additional educational opportunities, through an atmosphere of friendly camaraderie and fellowship."*

*-Original Club Charter 2012*

## Nursing Simulation

The Nursing program at Green River College strives to ensure student success, prepare students as safe, competent practitioners within our diverse healthcare community. To enrich clinical experiences and enhance student learning, the program utilizes simulation activities. All students must follow the policies and procedures outlined in the Nursing department simulation handbook.

### Types of Simulation

- **High-Fidelity:** Computerized manikins equipped with realistic physiological functions that closely resemble humans, used to develop nursing skills
- **Virtual:** Computerized environments used to develop nursing skills
- **Human:** Actors play the role of patient, fosters realistic care interactions and skills practice
- **Anatomical models/Task Trainers:** Replicate a portion of the body and are used to practice skills

### Utilization

Simulation can be used to enrich students' educational experiences. Simulations allows students to become more confident in dealing with high-pressure situations, learn from mistakes in a safe and supportive environment, and gain experience with conditions that may not be encountered during clinicals. Simulation may be used for the following reasons:

- In lieu of or to enhance clinical experiences
- Skills remediation
- Re-entry or placement assessments

### Facilities

The program opened a new simulation lab in winter 2021. The simulation suite has three beds, each with the ability to relay and record audio/visual, patient monitor data using a cloud-based simulation management system. Within the simulation suite there is a medication room with a MetroMed medication distribution System, this system will be replaced by a [Pyxis](#) medication distribution system in summer of 2021. Adjacent to the simulation area is an observation room that room has three large 1-way window systems to observe the simulation area as well as the medication room. Across the hall from the simulation lab, there is a debrief room with a large screen that can broadcast simulations in real-time, or as a recording that allows students to observe simulation activities and engage in meaningful debrief with faculty.

### Equipment

The simulation lab has five high-fidelity simulation manikins: two adults ([Nursing Anne](#)), one pediatric ([SimJunior](#)), one obstetric ([Noelle](#)) and one neonate simulator ([Hal](#)). The program uses [SimCapture](#), a learning management system, that records and allows faculty to assess simulation activities. The system captures audio, video, annotations, patient monitors, and simulator data in a single web-based interface.

For more information regarding the use of simulation, please refer to the Green River College Nursing Simulation Handbook.

## **LPN-to-BSN Nursing Program**

### **Program Goals**

- 80% of Nursing program graduates will pass the NCLEX-RN on the first time.
- 80% of Nursing program student will graduate on-time.
- 80% of Nursing program graduates will be employed within the first 6-12 months after graduation.
- 80% of graduates will agree that the Nursing program effectively prepared them to function within their scope of practice and RN role of expectations.
- 80% of community stakeholders, employers, and clinical partners will be satisfied with Green River's LPN-to-BSN Nursing Program.

### **Program Learning Outcomes**

Upon successful completion of the LPN-to-BSN program at Green River College the student will be able to:

1. Integrate knowledge for the arts and sciences to manage the care of clients across the life span using evidence-based practice and clinical reasoning to inform decision making.
2. Provide holistic, person-centered, population health care to diverse populations including community and public health.
3. Utilize research information to improve health of diverse clients across the life span.
4. Minimize harm to clients through quality assurance and improvement.
5. Use systems-based practice to coordinate and manage care to provide safe, quality, and equitable care.
6. Integrate informatics and other healthcare technologies to inform decision making when managing and delivering safe, high-quality, and efficient health care in accordance with best practice and professional and regulatory standards.
7. Demonstrate accountability for personal and professional development, including the professional identity of a Bachelor of Science prepared registered nurse, and lifelong learning.
8. Apply leadership principles and quality improvement when intentionally collaborating with the interdisciplinary health care team to provide evidence-based, safe quality nursing care.

### **Student Core Competencies**

#### Nursing Judgement

Make judgments in practice, substantiated with evidence, that synthesize nursing science and knowledge from other disciplines in the provision of safe, quality care and promote the health of patient's families, and communities.

#### Human Flourishing

Incorporate the knowledge and skills learned in didactic and clinical courses to help patients, families, and communities.

### Professional Identity

Express one's identity as a nurse through actions that reflect integrity, a commitment to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients, families, and communities, and a willingness to provide leadership in improving care.

### Spirit of Inquiry

Act as an evolving scholar who contributes to the development of the science of nursing practice by identifying questions in need of study, critiquing published research, and using available evidence as a foundation to propose creative, innovative, or evidence-based solutions to clinical practice problems.

## **Student Essentials**

### Knowledge for Nursing Practice

Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.

### Person-Centered Care

Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.

### Population Health

Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes.

### Scholarship for Nursing Discipline

The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care.

### Quality and Safety

Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.

### Interprofessional Partnerships

Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.

### Systems-Based Practice

Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations.

#### Informatics and Healthcare Technologies

Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.

#### Professionalism

Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.

#### Personal, Professional, and Leadership Development

Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership.

### **Core Values for Nursing Practice**

#### Clinical Judgement

As one of the key attributes of professional nursing, clinical judgment refers to the process by which nurses make decisions based on nursing knowledge (evidence, theories, ways/patterns of knowing), other disciplinary knowledge, critical thinking, and clinical reasoning (Manetti, 2019). This process is used to understand and interpret information in the delivery of care. Clinical decision making based on clinical judgment is directly related to care outcomes.

#### Communication

Communication, informed by nursing and other theories, is a central component in all areas of nursing practice. Communication is defined as an exchange of information, thoughts, and feelings through a variety of mechanisms. The definition encompasses the various ways people interact with each other, including verbal, written, behavioral, body language, touch, and emotion. Communication also includes intentionality, mutuality, partnerships, trust, and presence. Effective communication between nurses and individuals and between nurses and other health professionals is necessary for the delivery of high quality, individualized nursing care. With increasing frequency, communication is delivered through technological modalities. Communication also is a core component of team-based, interprofessional care and closely interrelated with the concept Social Determinants of Health.

#### Compassionate Care

As an essential principle of person-centered care, compassionate care refers to the way nurses relate to others as human beings and involves "noticing another person's vulnerability, experiencing an emotional reaction to this, and acting in some way with them in a way that is meaningful for people" (Murray & Tuqiri, 2020). Compassionate care is interrelated with other concepts such as caring, empathy, and respect and is also closely associated with patient satisfaction.



### Diversity, Equity and Inclusion

Collectively, diversity, equity, and inclusion (DEI) refers to a broad range of individual, population, and social constructs and is adapted in the Essentials as one of the most visible concepts. Although these are collectively considered a concept, differentiation of each conceptual element leads to enhanced understanding.

Diversity references a broad range of individual, population, and social characteristics, including but not limited to age; sex; race; ethnicity; sexual orientation; gender identity; family structures; geographic locations; national origin; immigrants and refugees; language; any impairment that substantially limits a major life activity; religious beliefs; and socioeconomic status. Inclusion represents environmental and organizational cultures in which faculty, students, staff, and administrators with diverse characteristics thrive. Inclusive environments require intentionality and embrace differences, not merely tolerate them (AACN, 2017; Bloomberg, 2019). Everyone works to ensure the perspectives and experiences of others are invited, welcomed, acknowledged, and respected in inclusive environments. Equity is the ability to recognize the differences in the resources or knowledge needed to allow individuals to fully participate in society, including access to higher education, with the goal of overcoming obstacles to ensure fairness (Kranich, 2001). To have equitable systems, all people should be treated fairly, unhampered by artificial barriers, stereotypes, or prejudices (Cooper, 2016). Two related concepts that fit within DEI include structural racism and social justice.

### Ethics

Core to professional nursing practice, ethics refers to principles that guide a person's behavior. Ethics is closely tied to moral philosophy involving the study of or examination of morality through a variety of different approaches (Tubbs, 2009). There are commonly accepted principles in bioethics that include autonomy, beneficence, non-maleficence, and justice (ANA 2015; ACNM, 2015; AANA, 2018; ICN, 2012). The study of ethics as it relates to nursing practice has led to the exploration of other relevant concepts, including moral distress, moral hazard, moral community, and moral or critical resilience.

### Evidence-Based Practice

The delivery of optimal health care requires the integration of current evidence and clinical expertise with individual and family preferences. Evidence-based practice is a problem-solving approach to the delivery of health care that integrates best evidence from studies and patient care data with clinician expertise and patient preferences and values (Melnyk, Fineout-Overhold, Stillwell, & Williamson, 2010). In addition, there is a need to consider those scientific studies that ask: whose perspectives are solicited, who creates the evidence, how is that evidence created, what questions remain unanswered, and what harm may be created? Answers to these questions are paramount to incorporating meaningful, culturally safe, evidence-based practice (Nursing Mutual Aid, 2020).

### Health Policy

Health policy involves goal directed decision-making about health that is the result of an authorized public decision-making process (Keller & Ridenour, 2021). Nurses play critical roles in advocating for policy that impacts patients and the profession, especially when speaking with a united voice on issues that affect

nursing practice and health outcomes. Nurses can have a profound influence on health policy by becoming engaged in the policy process on many levels, which includes interpreting, evaluating, and leading policy change.

### Social Determinants of Health

Determinants of health, a broader term, include personal, social, economic, and environmental factors that impact health. Social determinants of health, a primary component of determinants of health “are the conditions in the environment where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks.”

The social determinants of health contribute to wide health disparities and inequities in areas such as economic stability, education quality and access, healthcare quality and access, neighborhood and built environment, and social and community context (Healthy People, 2030). Nursing practices such as assessment, health promotion, access to care, and patient teaching support improvements in health outcomes. The social determinants of health are closely interrelated with the concepts of diversity, equity, and inclusion, health policy, and communication.

### **Quality and Safety Education for Nurses (QSEN)**

#### Patient-centered care

Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.

#### Teamwork and collaboration

Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

#### Evidence-based practice

Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

#### Quality improvement

Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

#### Safety

Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

#### Informatics

Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

## **Commission for Nursing Education Accreditation (NLN CNEA)**

The Green River College LPN-to-BSN Nursing program will pursue accreditation from the National League for Nursing Commission for Nursing Education Accreditation, located at 2600 Virginia Avenue, NW, Washington, DC, 20037. Pursuing accreditation does not guarantee that initial accreditation by NLN CNEA will be received.

For more information on accreditation, visit the [NLN CNEA website](#).

The NLN CNEA has five standards with accompanying quality indicators that all nursing programs must achieve. The standards are:

- **Standard I: Culture of Excellence – Program Outcomes**  
The nursing program engages in ongoing and systematic assessment and evaluation based on data collection processes relative to expected institutional and program outcomes. These data collection processes are used to inform data-based program decisions regarding program integrity and educational achievements. The decisions made by the program demonstrate a commitment to continuous quality improvement in achieving program outcomes. The program's commitment to continuous quality improvement is evident through the achievement of the following associated quality indicators.
- **Standard II: Culture of Integrity and Accountability – Mission, Governance, and Resources**  
A culture of organizational integrity and accountability exists within the institution and program with regard to mission, governance, and resources as reflected in their core values. The missions of the institution and nursing program are aligned, creating an environment in which the program can effectively establish program goals and achieve expected program outcomes. Institutional and program governance support the attainment of the program's expected outcomes, and reflect faculty and student participation. Communities of interest are engaged in providing input into program planning. There is demonstrated institutional and program commitment and accountability to providing resources critical to maintaining the operational integrity of the nursing academic unit and supporting continuous quality improvement efforts designed to meet the program's expected outcomes. This shared institutional and program perspective related to mission, governance, and resource allocation is evidenced through the achievement of the following associated quality indicators.
- **Standard III: Culture of Excellence and Caring – Faculty**  
The expertise, creativity, and innovation demonstrated by the collective faculty within a culture of excellence and caring enables the nursing program to achieve expected program outcomes aligned with the program's mission and goals. The faculty complement consists of educationally and experientially qualified persons of diverse backgrounds who have expertise as educators, clinicians, scholars, and researchers, as relevant to the program's mission and use their expertise to co-create a student-centered learning environment and achieve expected program outcomes. The organizational environment and program core values support inclusivity and empower faculty to achieve the professional outcomes expected of them in the faculty role, and seek the recruitment

and retention of a diverse faculty. This commitment to creating a culture of excellence and caring supportive of faculty outcomes is evidenced through the achievement of the following associated quality indicators.

- **Standard IV: Culture of Excellence and Caring – Students**

The parent institution and nursing program are committed to providing student-centered services sufficient to create a learning environment focused on promoting student success. The learning environment is supportive of students, enabling them to achieve academic success. The nursing program has established student policies which conform with institutional student policies. Student policies include, but are not limited to, those related to recruitment, admission, retention, progression, and graduation processes. Students enrolled in distance learning programs have access to student services to support their success. The program's commitment to acting in the best interest of its students and creating a caring environment that fosters student success is exhibited through the achievement of the following associated quality indicators.

- **Standard V: Culture of Learning and Diversity – Curriculum and Evaluation Processes**

Faculty design program curricula to create a culture of learning that fosters the human flourishing of diverse learners through professional and personal growth, and supports the achievement of expected student learning outcomes. Professional nursing standards and other professional standards appropriate to the program type are foundational curricular elements and are clearly integrated throughout the curriculum. Teaching, learning and evaluation processes take into consideration the diverse learning needs of students and are designed to support student achievement of learning outcomes. Distance learning programs are held to the same curricular, teaching/learning, and evaluation standards as campus-based programs. The program's culture of learning and diversity related to the implementation of curriculum and teaching/learning/evaluation processes is evident through the creation of a positive learning environment and achievement of the following associated quality indicators.

## LPN-to-BSN Nursing Program Courses

The Bachelors of Science in Nursing (BSN) is a LPN-to-BSN program is a 90-credit program in which students must have current, unencumbered licensure as a Licensed Practical Nurse in the state of Washington. A minimum grade of 2.5 or higher is required in each nursing and supporting course. Exceptions for basic curriculum requirement courses with grades less than 2.5 will be made on a case-by-case basis by the Associate Dean of Nursing. Anatomy and Physiology 1 & 2 courses are not eligible for consideration or any course with less than a 2.0 GPA. Evidence of academic proficiency is established by completion of each of the following prerequisite requirements with a 2.5 grade or higher. Courses without an “&” may not be transferable.

### Pre-Requisite Coursework

Dept./Course Number	Course Title	Credits
<b>Practical Nursing Program</b>		
BIOL& 160	General Biology	5
BIOL& 241	Anatomy & Physiology I	5
BIOL& 242	Anatomy & Physiology II	5
ENGL& 101	English Composition	5
MATH& 146 <b>OR</b> MATH 256	Introduction to Statistics <b>OR</b> Statistics for Business and Social Science	5
PSYC& 100	Introduction to Psychology	5
PSYC& 200	Lifespan Psychology	5
NUTR& 101	Nutrition	5
Communications Studies Elective: CMST& 101 <b>OR</b> CMST& 210 CMST& 220 CMST& 230 CMST 238	Introduction to Communication <b>OR</b> Interpersonal Communication Public Speaking Small Group Communication Intercultural Communication	5
Completion of a Practical Nursing Program (AAS or Certificate) and LPN licensure		45
<b>Bachelor of Science in Nursing</b>		
<b>Pre-Requisites</b>		
CHEM& 121	Introduction to Chemistry	5
BIOL& 260	Microbiology	5
<b>Related Instruction Requirements*</b>		
Communications Elective: CMST 330 <b>OR</b> CMST 339	Organizational Communication <b>OR</b> Intercultural Communication in Global Contexts	5
Social Science Elective: PSYCH 335 <b>OR</b> ANTH 335	Psychology of Aging <b>OR</b> Advanced Cross-Cultural Medicine	5
ENGL 335	Advanced Technical Writing	5

\*May be taken prior to or during the program.

## Program Course Sequencing

Dept./Course Number	Course Title	Credits
<b>First Quarter</b>		
CMST 330 <b>OR</b> CMST 339	Organizational Communication <b>OR</b> Intercultural Communication in Global Contexts	5
PSYCH 335 <b>OR</b> ANTH 335	Psychology of Aging <b>OR</b> Advanced Cross-Cultural Medicine	5
ENGL 335	Advanced Technical Writing	5
<b>Second Quarter</b>		
BNURSE 312	Registered Nurse's Role in Holistic Health Assessment & Care	3
BNURSE 313	Registered Nurse's Role in Holistic Health Assessment & Care Skills Lab	2
BNURSE 317	Registered Nurse's Role in Holistic Health Assessment & Care Simulation	1
BNURSE 314	Pathophysiology, Pharmacology & Physical Assessment for LPN to RN	3
BNURSE 412	Nursing Ethics	3
<b>Third Quarter</b>		
BNURSE 422	Inquiry & Academic Writing in Nursing Science	5
BNURSE 424	Evidence-Based Practice in Nursing	3
BNURSE 426	Reflective Practice/Portfolio 1	1
BNURSE 428	Patient Safety and Quality Improvement	3
<b>Fourth Quarter</b>		
BNURSE 332	Applied Critical Thinking in Maternal/Child Nursing	5
BNURSE 335	Maternal/Child Nursing Clinical	2
BNURSE 333	Maternal/Child Nursing Skills Lab	1
BNURSE 337	Maternal/Child Nursing Simulation	1
<b>Fifth Quarter</b>		
BNURSE 342	Applied Critical Thinking in Advanced Med/Surg Nursing	5
BNURSE 343	Advanced Med/Surg Nursing Skills Lab	1
BNURSE 345	Advanced Med/Surg Nursing Clinical	2
BNURSE 347	Advanced Med/Surg Nursing Simulation	1
<b>Sixth Quarter</b>		
BNURSE 452	Population Health Nursing Practice	5
BNURSE 455	Population Health Nursing Clinical	2
BNURSE 454	Nursing Leadership and Healthcare Policy	5
<b>Seventh Quarter</b>		
BNURSE 362	Applied Critical Thinking in Mental Health Nursing	4
BNURSE 365	Mental Health Nursing Clinical	1
BNURSE 367	Mental Health Nursing Simulation	1
BNURSE 462	Nursing Informatics & Telehealth	3
BNURSE 464	Nursing Care Coordination & Interprofessional Collaboration	3
<b>Eighth Quarter</b>		
BNURSE 475	Nursing Capstone Clinical	4
BNURSE 472	Transition to Nursing Practice / NCLEX Prep	4
BNURSE 476	Reflective Practice/Portfolio	1

## Fees and Additional Expenses

These fees and expenses do not include transportation costs, campus parking, meals, lodging for students, or tuition and other college fees. Please refer to the college's website for current [tuition and fees](#). These amounts are subject to change.

<b>Table 1. LPN-to-BSN Program Fees and Expenses</b>	
<b>Required Items</b>	<b>Approx. Amount</b>
Books	\$1200.00
Lab Fees	\$2400.00
Required Immunizations, tests, and drug screening	Variable
American Heart Association BCLS Healthcare Provider Certificate	Variable
Professional Liability Insurance	\$20.50
Accident/Injury Insurance	Variable
Health/Illness Insurance - Green River College encourages each student participating in the clinical education program to acquire comprehensive health and accident insurance that will provide continuous coverage of the student during his or her participation in the education program. The student is responsible for their own health needs, healthcare costs, and health insurance coverage.	Variable
Vehicle Insurance	Variable
Uniform Top (Charcoal Gray)	\$15.00-\$18.00
Uniform Pants (Charcoal Gray)	\$17.00-\$25.00
GRC Nursing Program Badge	\$5.00
Shoes (not fabric)	\$35.00 and up
Name Tag	\$8.00
Gait Belt (plastic not webbed)	\$12.00-\$30.00
Bandage Scissors	\$10.00
Stethoscope	\$45.00 and up
Watch with Second Hand	\$30.00 and up
Smart Phone	Variable
Laptop (preferably not a Chromebook) <sup>(1)</sup>	Variable
Approximate Total	\$3800.00 and up
Washington State application & National State Exam (NCLEX) License <sup>(2)</sup>	\$250.00-\$300.00

<sup>(1)</sup>In the event that a student cannot use their own laptop, students may sign out a Surface Pro, charger, and stylus using the form identified as Appendix K - Practical Nursing Equipment Release.

<sup>(2)</sup>Licensing info can be found through the [Washington Department of Health](#)

The following items may be required:

**Lost Mailbox Key Fee:** Students will be issued a mailbox and key for assignments. If the key is lost during the year, students will pay a fee of \$5 for replacement.

**Lost Lab Bag Fee:** Students will be issued a lab bag at the beginning of the nursing program containing necessary supplies for specific skills. Students are expected to bring their lab bag to lab. If students lose the lab bag during the year, students will pay a fee of \$100 for replacement.

## Registered Nursing Scope of Practice

The RN practices nursing care independently using the nursing process. The RN functions interdependently when carrying out a medical regimen under the general direction of an authorized health care practitioner: Licensed physician and surgeon (MD), dentist (DDS), osteopathic physician and surgeon (DO), naturopathic physician (ND), optometrist (OD), podiatric physician and surgeon (DPM), physician assistant, osteopathic physician assistant (PA), advanced registered nurse practitioner (ARNP), or midwife. These activities include administering medications, treatments, tests, and inoculations whether or not the severing or penetrating of tissues is involved and whether or not a degree of independent judgment and skill is required. Such direction must be for acts which are within the scope of practice of the nurse. ([RCW 18.79.260](#)). [RCW 18.79.240 Construction](#) allows the RN to perform minor surgery.

### Supervision

The definition of supervision in [WAC 246-840-010](#) states that, "supervision" of licensed or unlicensed nursing personnel means the provision of guidance and evaluation for the accomplishment of a nursing task or activity with the initial direction of the task or activity; periodic inspection of the actual act of accomplishing the task or activity; and the authority to require corrective action.

The RN practices nursing independently and does not require supervision by another RN or other health care practitioner. The RN or LPN may perform nursing care without an authorized health care practitioner physically present. The RN does not need to be physically present when the LPN provides nursing care or carries out a medical regimen. Other state or federal laws and rules may have exceptions.

The nursing laws and rules do not address these exceptions. It would be prudent and reasonable for the RN or LPN to follow the physician law and rule when direction to perform LLRP or nonsurgical medical cosmetic procedures under the ARNP.

### Critical Thinking

Critical thinking is used throughout all components of the nursing process. Critical thinking is purposeful and reflective judgment in response to events, observations, experiences, and verbal or written expressions. It involves determining the meaning and significance of what is observed or expressed to determine need for action. The RN or LPN uses critical thinking in clinical problem-solving and decision-making processes relative to scope of practice, knowledge, competency, and experience.

### Nursing Delegation

Several state laws and rules define delegation to assistive personnel (AP). The RN and LPN may delegate some nursing tasks in specific settings and circumstances to unlicensed assistive personnel AP including credentialed or registered AP (such as nursing assistants, medical assistances, home care aides, and surgical technologists).

- Only the RN may delegate to a surgical technologist;
- Only the RN may delegate to a medical assistant;



- Only the RN may delegate to nursing assistants and home care aides in community-based settings (adult family homes, assisted living facilities, and community residential programs for people with developmental disabilities) and in-home care settings;
- Only the RN may delegate to non-credentialed or credentialed UAP in a school setting;
- The RN or LPN may delegate to nursing assistants in other settings (hospitals, nursing homes, clinics, ambulatory surgical facilities).

For clarification, The RN or other authorized health care practitioner does not delegate to the LPN, but “directs” the LPN to perform nursing care or perform a medical regimen.

## **Nursing Process**

### Nursing Assessment

Nursing assessment consists of two parts:

1. Data collection; and
2. Analysis, synthesis, and evaluation of the data to create the nursing care plan.

### Comprehensive Nursing Assessment

A comprehensive nursing assessment means collection, analysis, and synthesis of data performed by the RN used to establish a health status baseline, plan care and address changes in a patient’s condition as defined in the [National Council State Boards of Nursing \(NCSBN\) Model Act \(2012\)](#). It is not within the scope of practice of the LPN to perform a comprehensive nursing assessment.

### Focused Nursing Assessment

Focused nursing assessment means recognizing patient characteristics that may affect the patient’s health status, gathering and recording nursing assessment data and demonstrating attentiveness by observing, monitoring and reporting signs, symptoms, and changes in patient conditions in an ongoing manner to an authorized health care practitioner as defined in the NCSBN Model Act (2012).

The RN may perform a focused nursing assessment and re-assessment based on the patient’s needs. The LPN may perform a focused nursing assessment and re-assessment at the direction of the RN or other authorized health care practitioner. The LPN may perform a physical assessment. The LPN may obtain health care history information. The LPN may perform specific assessments or screening activities, such as mental health status, suicidal risk, cognitive screening, substance use screening, oral health screening, growth and developmental screening, or nutritional assessments. The LPN may not analyze, synthesize, or evaluate the data or develop the nursing care plan. As a team member, the LPN should contribute to the development of the nursing care plan. The RN retains the overall responsibility for verifying data collected, interpreting and analyzing data, and formulating nursing diagnoses.

### Initial, Admission, or Event-Focused Assessment

Different types of assessments, such as “initial”, “admission”, or “event-focused” assessment, are not defined in the nursing law and rules. These terms are often used by health care agencies to describe different types of assessment. Examples include post patient fall, pre-transfer assessments or others defined

by agency policy based on laws and regulations, standards of care, accreditation standards, and reimbursement requirements applicable to specific practice settings. For example, if the Centers for Medicare and Medicaid Services (CMS) require that an RN perform the initial assessment, then an LPN cannot perform this assessment by proxy for the RN. The LPN may participate in collecting information and data as in any assessment process.

### **Nursing Diagnosis**

A nursing diagnosis is used to determine the appropriate plan of care for the patient. The nursing diagnosis drives interventions and patient outcomes, enabling the nurse to develop the patient care plan. [WAC 246-840-700 Standards of Nursing Conduct or Practice](#) clarifies that only the RN is permitted to make a nursing diagnosis. The LPN may provide data to assist in the development of a nursing diagnosis. The LPN may document symptoms or other findings and may document using a nursing diagnosis already made by the RN. The LPN uses and applies nursing diagnosis (formulated by the RN) as a foundation for implementing interventions.

### **Implementation**

The RN is responsible to initiate data collection and perform analysis of the data to create the nursing care plan. The LPN may perform the following activities related to implementation of the care plan:

- Procuring resources needed;
- Implementing nursing interventions and medical orders consistent with nursing rules and within an environment conducive to patient safety;
- Prioritizing performance of nursing interventions within the assignment;
- Recognizing responses to nursing interventions;
- Modifying immediate nursing interventions based on changes in the patient’s status; and
- Delegating specific nursing tasks as outlined in the plan of care and consistent with nursing delegation laws and rules.

### Evaluation

The RN is responsible to evaluate the responses of the nursing interventions, analysis and modification of the nursing care plan consistent with intended outcomes. The LPN, in collaboration with the RN, assists in making adjustments in the care plan and reporting outcomes of care to the RN or other authorized health care practitioner.

### Documentation

The nursing laws and rules do not require a RN to co-sign LPN medical records or other documentation. The LPN is individually accountable and responsible for the care the LPN provides. A RN or LPN never functions “under the license” of another nurse or other authorized health care practitioner. In general, the NCQAC does not recommend a nurse co-sign anything unless he or she has directly witnessed an act (such as narcotic wastage) or has gone behind another nurse and personally performed the same assessment with the same findings.

[WAC 246-840-700 Standards of Nursing Conduct or Practice](#) requires a nurse to communicate significant changes in the patient's status to appropriate members of the health care team in a time period consistent with the patient's needs. Communication may occur using written or verbal processes. The rule requires a nurse to document, on essential patient records, the nursing care given and the patient's response to care.

#### Accepting Patient Assignments and Patient Abandonment

The RN or LPN is always responsible for providing safe, competent nursing care. The RN or LPN must have the necessary training, knowledge, judgment, skills and ability to provide the required care. It is the nurse's responsibility to determine whether he or she is clinically competent to perform the nursing care required. The nurse should not accept the patient care assignment if the nurse is not clinically competent. The nurse may accept a limited assignment of nursing care duties that utilizes his or her currently existing clinical competence. Patient abandonment occurs when a nurse, who has established a nurse-patient relationship, leaves the patient assignment without transferring or discharging nursing care in a timely manner. Refer to the NCQAC's [Patient Abandonment Interpretive Statement](#) for more information.

#### Scope of Practice Decision Tree

The nurse should know and understand the nursing practice laws and rules, other State or Federal laws, accreditation standards that apply to the facility or setting in which the nurse provides care. Nurses should use the [Interactive Scope of Practice Decision Tree](#) to determine if an activity is within their scope of practice.

Figure 1 NCQAC Advisory Opinion 13.02 Registered Nurse and Licensed Practical Nurse Scope of Practice

### Scope of Practice Decision Tree

Identify, describe, or clarify the activity, intervention, or role under consideration.



<b>Table 2. Nursing Scope of Practice Decision Tree</b>	
<b>Step</b>	<b>Considerations</b>
<b>Define the Activity</b>	<ul style="list-style-type: none"> <li>• Problem or care need</li> <li>• Clinical environment in which the task will be performed</li> <li>• Stability and complexity of the patient care needs</li> <li>• Equipment or supplies needed to safely complete the activity</li> <li>• Requirement for directions or orders from an authorized health care practitioner<sup>1</sup></li> <li>• Independent or interdependent action based on nursing licensure</li> </ul>
<b>Legality</b>	<ul style="list-style-type: none"> <li>• Explicitly permitted or prohibited by Washington State nursing law or rule</li> <li>• Other state laws or rules apply (facility licensing, health care professionals, etc.)</li> <li>• Federal regulations</li> <li>• Supervision or professional licensure requirements</li> </ul>
<b>Practice Standards</b>	<ul style="list-style-type: none"> <li>• Evidence to support the activity within current standards of safe nursing care (National nursing organizations, associations, evidence-based literature and research, position statements, or community standards)</li> <li>• NCQAC advisory opinions, interpretive statements, policy statements, declaratory statements, or other guidance about the activity</li> </ul>
<b>Institutional Policy</b>	<ul style="list-style-type: none"> <li>• Prohibited or permitted by institutional policies and procedures</li> <li>• Reimbursement requirements</li> </ul>
<b>Safety &amp; Competency</b>	<ul style="list-style-type: none"> <li>• Consistent with training in a pre-licensure program, post-basic program, continuing education program, certification program, or self-structured study</li> <li>• Documentation of appropriate education and competency assessment specific to the activity</li> <li>• Safe to perform the activity for the specific patient, in a specific setting, and at a specific time</li> <li>• Specific environment or special equipment or personnel is needed in case of unexpected responses to assure patient safety and quality of care</li> <li>• Potential outcome for the patient if the procedure is not performed</li> </ul>
<b>Accountability</b>	<ul style="list-style-type: none"> <li>• Reasonable and prudent nurse would complete the activity for this patient in this circumstance</li> <li>• Willingness to be accountable and responsible, and accept consequences</li> </ul>

<sup>1</sup> Licensed physician and surgeon, dentist, osteopathic physician and surgeon, naturopathic physician, optometrist, podiatric physician and surgeon, physician assistant, osteopathic physician assistant, advanced registered nurse practitioner, or midwife acting under the scope of their licensure. ([RCW 18.79.260](#) and [RCW 18.79.270](#)).

**Table 3. Registered Nurse and Licensed Practical Nurse Components of Care Scope of Practice Comparison Chart**

Function		Registered Nurse	Licensed Practical Nurse
Roles		<ul style="list-style-type: none"> <li>• Initiates the nursing process, establishing the nursing care plan</li> <li>• Provides nursing care independently without supervision or assignment</li> <li>• Collaborates in an interdependent role as a health care team member</li> <li>• Provides medical care and therapies in an interdependent role</li> <li>• Acts as patient advocate in health maintenance and clinical care</li> <li>• Accepts patient assignment(s)</li> </ul>	<ul style="list-style-type: none"> <li>• Provides nursing care using the nursing process interdependently under the direction and supervision of the RN</li> <li>• Collaborates in an interdependent role as a health care team member</li> <li>• Provides medical care and therapies in a dependent role</li> <li>• Acts as patient advocate in health maintenance and clinical care</li> <li>• Accepts patient assignment(s)</li> </ul>
	Nursing Assessment	<ul style="list-style-type: none"> <li>• Performs comprehensive nursing assessment                             <ul style="list-style-type: none"> <li>– Initiates the data collection process</li> <li>– Collects data and information relative to the health care consumer's health or the situation</li> <li>– Assimilates data gathered from LPNs and other health care team members</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Assists in performing nursing assessment:                             <ul style="list-style-type: none"> <li>– Performs focused screening/assessments/ observational assessments</li> <li>– Initial, admission or event-focused assessments</li> <li>– Collects data and information</li> <li>– Recognizes relation to diagnosis</li> </ul> </li> <li>• Communicates outcomes of the data collection process in a timely manner</li> <li>• Determines immediate need for intervention</li> </ul>
Nursing Process	Diagnosis	<ul style="list-style-type: none"> <li>• Analyzes the assessment data to determine actual or potential diagnosis, problems, and issues</li> <li>• Uses scientific principles to develop nursing diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>• Provides data to assist in development of nursing diagnosis</li> </ul>
	Outcomes Development	<ul style="list-style-type: none"> <li>• Identifies expected outcomes for an individualized plan to the patient or situation</li> </ul>	<ul style="list-style-type: none"> <li>• Assists in developing expected outcomes</li> </ul>
	Planning	<ul style="list-style-type: none"> <li>• Develops a plan that prescribes strategies to attain expected, measurable outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Contributes to the development of the nursing care plan</li> </ul>
	Implementation	<ul style="list-style-type: none"> <li>• Implements the identified plan</li> <li>• Delegates and supervises certain nursing tasks to UAP in specific situations and settings</li> <li>• Coordinates care with other team members</li> <li>• Employs strategies to promote health and a safe environment</li> </ul>	<ul style="list-style-type: none"> <li>• Implements the identified nursing care plan under RN supervision</li> <li>• Delegates, and supervises certain nursing tasks to UAP in specific situations and settings</li> <li>• Assists in coordinating care with other team members</li> <li>• Assists in patient teaching</li> </ul>
	Evaluation	<ul style="list-style-type: none"> <li>• Evaluates progress toward attainment of goals and outcomes</li> <li>• Modifies care plan as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Contributes in evaluation by reporting patient outcomes and assists with making adjustments</li> </ul>

Reporting and Recording	<ul style="list-style-type: none"> <li>Documents in the medical record</li> <li>Communicates (verbally or in writing) with LPN and other health care practitioners/healthcare team as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Documents in the medical record</li> <li>Communicates (verbally or in writing) with RN and other health care practitioners/health care team as appropriate</li> </ul>
Case Management	<ul style="list-style-type: none"> <li>Identifies case management needs</li> <li>Refers patients to appropriate resources</li> </ul>	<ul style="list-style-type: none"> <li>Assists the RN in identifying case management needs</li> <li>Refers patients to appropriate resources based on nursing care plan</li> </ul>
Delegation	<ul style="list-style-type: none"> <li>Delegates nursing care plan activities to UAP</li> <li>Delegates medical regimens to UAP</li> </ul>	<ul style="list-style-type: none"> <li>Delegates nursing care plan activities to UAP</li> <li>Delegates medical regimens to UAP</li> </ul>
Supervision	<ul style="list-style-type: none"> <li>Performs nursing care independently</li> <li>Carries out medical regimens under the direction of an authorized health care practitioner</li> <li>Supervises care given by LPNs, and UAP</li> <li>Authorized health care practitioner is not required to be on the premises when RNs carryout medical regimens</li> </ul>	<ul style="list-style-type: none"> <li>Carries out medical regimens under the directionand supervision of an RN or other authorized health care practitioner</li> <li>Performs nursing care under the direction and supervision of an RN</li> <li>Supervises delegated care given by UAP</li> <li>RN or other authorized health care practitioner isnot required to be on the premises when carrying out medical regimens or nursing activities</li> </ul>
Complexity	<ul style="list-style-type: none"> <li>Performs nursing care and carries out medicalregimens in complex situations</li> <li>Clinically and behaviorally stable and unstablepatients</li> </ul>	<ul style="list-style-type: none"> <li>Performs basic nursing care in routine situations</li> <li>Clinically and behaviorally stable patients</li> <li>Assists in giving nursing care and carries out medical regimens in complex nursing situations</li> </ul>
Health Education, Promotion and Prevention	<ul style="list-style-type: none"> <li>Provides health education, health promotionand preventive activities to patients, familiesand groups</li> <li>Identifies learning needs</li> <li>Develops and evaluates education plans</li> </ul>	<ul style="list-style-type: none"> <li>Participates in developing, providing, and evaluating health education, health promotion and preventive activities to patients, families, and groups under the direction and supervision of an RN or other authorized health care practitioner</li> </ul>
Prescribing Medication and Therapies	<ul style="list-style-type: none"> <li>Under direction of an authorized health care practitioner may give medications, treatments,tests, injections, vaccines (whether or not piercing or puncturing of tissues is involved and whether or not a degree of independent judgment and skill is required)</li> </ul>	<ul style="list-style-type: none"> <li>Under direction of an authorized health care practitioner may give medications, treatments, tests, injections, vaccines (whether or not piercing or puncturing of tissues is involved and whether or not a degree of independent judgmentand skill is required)</li> </ul>
Responsibility	<ul style="list-style-type: none"> <li>Responsible and accountable for the quality ofnursing care given</li> <li>Responsible and accountable for delegatedactivities</li> <li>Responsible and accountable for following thestandards of nursing conduct or practice</li> <li>Accountable for delegation and supervisionwhen delegating tasks to others</li> <li>May only perform activities within the RN'sindividual scope of practice - Use Scope of Practice Decision Tree</li> </ul>	<ul style="list-style-type: none"> <li>Responsible and accountable for the quality of nursing care given</li> <li>Responsible and accountable for delegated activities</li> <li>Responsible and accountable for following the standards of nursing conduct or practice</li> <li>Accountable for delegation and supervision when delegating tasks to others</li> <li>May only perform activities within the LPN's individual scope of practice - Use Scope of Practice Decision Tree</li> </ul>

## References and Resources

Nursing Care Quality Assurance Commission Website:

<http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission>

NCSBN (October 2009). Changes in Health Care Professions' Scope of Practice:

[https://www.ncsbn.org/ScopeofPractice\\_09.pdf](https://www.ncsbn.org/ScopeofPractice_09.pdf)

NCSBN Model Act (2012): [https://www.ncsbn.org/14\\_Model\\_Act\\_0914.pdf](https://www.ncsbn.org/14_Model_Act_0914.pdf)

Registered Nurse and Licensed Practical Nurse Scope of Practice (wa.gov)

<https://www.doh.wa.gov/Portals/1/Documents/6000/NCAO13.pdf>



## LPN-to-BSN Program Admissions Policy

Purpose: Identify requirements for admission into the LPN-to-BSN program

Scope: Applies to prospective students of the LPN-to-BSN program

Overview: The LPN-to-BSN Nursing program has a competitive admissions process. To ensure equitable access, the program has identified a set of requirements and criteria that will be used by the associate dean and nursing faculty to determine admission.

Policy/Procedure: In order to be considered for admission to Green River College's LPN-to-BSN program, prospective students must meet all of the following requirements prior to beginning their nursing studies:

- Complete the required pre-requisite courses with a 2.5 GPA or higher from a regionally accredited college or university. Exceptions for required pre-requisite courses with grades less than 2.5 will be made on a case by case basis by the associate dean of nursing. Anatomy and Physiology 1 & 2 courses are not eligible for consideration or any course with less than a 2.0 GPA.
- Active-unencumbered LPN License in Washington State
- Complete required immunizations and tests:
  - Two-step TB or Quantiferon
  - Influenza
  - Hepatitis B
  - Measles, Mumps, Rubella (MMR)
  - Varicella
  - Tetanus, Diphtheria, Pertussis (Tdap)
  - COVID (entire series and booster)
  - Additional testing or immunizations may be required
- Successfully pass a criminal state and national background check. Immediate disqualifiers to the program can be found at: [DSHS Secretary's List of Crimes and Negative Actions](#).
- Obtain the American Heart Association Basic Life Support Healthcare provider card (Only AHA BLS certifications are accepted for clinical placements in the Nursing program).

### Application Requirements

- Submit a completed LPN-to-BSN Nursing application to include:
  - Complete a personal statement responding to a prompt related to Nursing. (Please refer to the current year's practical nursing application prompt.)
  - One-page resume describing the specific activities and responsibilities of your experiences.
  - Copies of all required immunizations, certifications and tests.
  - Color-copy of a valid photo ID.
  - Official sealed transcripts from every college or university.
  - Copies of any relevant health care certifications or licenses.
  - LPN Work Experience Verification.

### Selection of Students

Students will be scored for application based on prerequisite coursework GPA, personal statement, resume, proof of license, and work experience. Bonus points may be awarded for the following:

- Students underrepresented in nursing
- Military/Veteran
- Multilingual
- First Generation Student
- Graduate of Green River's Practical Nursing Program

The top 24 ranked students using the criteria above will be invited to participate in panel interviews. with the nursing faculty. Based on the scoring from the required admissions criteria and the panel interviews, the top 16 students will be offered admission to the program, the remaining students will be offered placement on the waitlist based on ranking.

### Transfer Students

Students may be accepted from another approved nursing program on a case by case basis pending review of documents to prove equivalency of content. Students must be transferring from a Nationally accredited or NCQAC approved nursing education program.

### Notification of Admission

Applications are processed and reviewed for completion by the Health Sciences Program Specialist in the Office of the Registrar. Admission decisions are made by the associate dean of nursing and the Nursing faculty. The notification will be distributed by the applicant's Green River student email.

### Wait List

Each year, the LPN-to-BSN Nursing program may waitlist up to 10 students. Students on this list are notified if and when seats become available in the entering cohort. Final notifications for wait list applicants are sent as soon as space becomes available. The majority of applicants are generally notified at least one month prior to the start of the program. Rankings within the wait list for each program are not disclosed, and there is no guarantee that candidates will be offered a seat in the entering cohort. Wait list candidacies are not held over for the following year, nor is special consideration given to those students if they choose to reapply in a future year.

### Consequences:

- Students who do not meet the admissions requirements of the program are ineligible for admission.

## LPN-to-BSN Retention/Progression Policy

**Purpose:** Identify established academic standards of the LPN-to-BSN program for successful progression through the program

**Scope:** Applies to current students enrolled in the LPN-to-BSN program

**Overview:** Progression and retention in the LPN-to-BSN courses is dependent upon the student's ability to meet established academic standards and to comply with student health, security, and clinical requirements.

**Policy/Procedure:** The following requirements are necessary for students to progress through the LPN-to-BSN program:

- Students must successfully complete all nursing courses with a GPA of 2.5 or higher.
- Students must pass a dosage calculation exam prior to attending clinical rotations in each lab course (See [Nursing Program Specific Exam](#) section for more information).
- Students must demonstrate safe practice in the care of patients and exercise appropriate judgment. Students who demonstrate unsafe behaviors in the clinical setting may be removed by faculty at any time. Students removed from a clinical setting for patient safety reasons will be dismissed from the program and are not eligible for program re-entry.
- Students not abiding by the program's [professional behaviors policy](#) are subject to dismissal and may be eligible for program re-entry. Certain violations such as gross negligence or HIPAA violations are not eligible for re-admission.
- Students not meeting expected course learning outcomes or program learning outcomes will be notified in writing and required to do remediation through a [collaborative performance plan](#) or probation.  
Failure to meet the requirements identified in the remediation plan will be dismissal from the program and are subject to the re-entry policy.
- A student who withdraws from the LPN-to-BSN program, for any reason, may request re-admission and must follow the steps outlined in the re-entry policy. The student must request re-admission within one academic year of the withdrawal and admission is reliant on space availability.

## LPN-to-BSN Program Dismissal & Re-Entry Policy

Purpose: Establish dismissal and re-entry guidelines and processes

Scope: Applies to all current students enrolled in the LPN-to-BSN program

Overview: Students may withdraw from the program for personal reasons or be dismissed due to academic or behavioral concerns. Students may be allowed one opportunity to re-enter the program if space permits.

Policy/Procedure: A student who withdrew or was dismissed from the LPN-to-BSN program has one opportunity to re-enter the program within one year from the date of withdrawal or dismissal from the program, unless otherwise agreed upon by the associate dean of nursing. Some concerns make students ineligible for re-entry to the program and may include but are not limited to violation of program policies, academic dishonesty, HIPPA violation, or engaging in unsafe practice. When a student is dismissed for concerns related to the student code of conduct, the student is referred to Judicial Programs. Please see section on [student rights and responsibilities](#).

For any LPN-to-BSN program dismissal, the student will receive a letter from the Nursing department outlining the reason for dismissal and if the student is eligible for re-entry to the program or not. If the student is eligible for re-entry, the letter will detail the process and steps for re-entry. If the students are not eligible for re-entry, the student has the right to petition their case through the college's judicial affairs process.

### LPN-to-BSN Program Re-Entry Process (if student is eligible for re-entry)

- Student must meet with the associate dean of nursing to discuss options for re-entry upon withdrawal or dismissal.
- The student must submit a written request to associate dean of nursing requesting re-entry to the program in the first two weeks of the quarter PRIOR to the re-entry request point. The student must explain the reasons he/she was not successful previously in the program and provide a detailed plan for success if re-entry is granted.
- The associate dean of nursing will review and discuss the students' plan with the faculty. Nursing faculty must approve the student's plan and will participate in the creation of a [collaborative performance plan](#) that identifies the expectations to facilitate student success once enrolled in program.
- A student who re-enters the program must comply with the collaborative performance plan and all program policies. If the student does not accept the conditions of the collaborative performance plan, he/she will not be approved for re-entry.
- Students will be allowed re-entry only if space is available. Students will be required to take an independent study to demonstrate competency for each quarter prior to determining admission placement. This includes all theory coursework and laboratory skills. Students will be expected to pass

a dosage calculation exam, an exam covering all theory content from the previously completed courses and demonstrate proficiency in all skills from the previously completed courses. If a student places into a course for which they have already completed and received a passing grade, they will be required to take that course again at their own expense.

- Student must retake previously failed or incomplete courses.
- Students, who withdrew for academic reasons, must complete a remediation contract if one was implemented at time of withdrawal. The request letter for re-entry must document completion of such contract.
- No revisions to the collaborative performance plan or probationary period will be given.
- Students who are offered re-entry and decline will not be offered re-entry again.

If the student is granted acceptance for re-entry, they must submit a signed collaborative performance plan and set-up a conference with the associate dean of nursing prior to the re-entry date. Failure to meet with the associate dean of nursing as required will automatically cancel re-entry agreement.

Consequences:

- Students not meeting the requirements of the re-entry process are ineligible for re-entry.

## Medication Administration by LPN-to-BSN Nursing Students Policy

Purpose: Ensure safe medication administration

Scope: Applies to all current students enrolled in the LPN-to-BSN Nursing program

Overview: The proper dispensing and administration of medication performed by nursing students is vital to the delivery of safe and effective patient care.

Policy/Procedure: To ensure safe medication administration, Nursing students must adhere to the following procedures while using the Skilled Nursing Facility medication carts (SNF) or Automated Drug Distribution Devices (ADDD).

### Orientation and Practice Experience

In accordance with [WAC 246-945-450](#), students within the LPN-to-BSN Nursing program will be provided with both orientation and simulated experiences related to the safe medication administration and use of SNF carts and ADDDs. Students will be required to participate in both a SNF cart and ADDD tutorial with subsequent competency assessment. Documentation of successfully passing the competency assessment will be provided to the instructor prior to use of any medication distribution system. Nursing students will also be required to participate and demonstrate clinical competency in simulated clinical scenario using both a SNF cart and an ADDD system.

Student orientation to the safe distribution and use of Medication Distribution Systems includes, but is not limited to, the following simulated learning experiences:

- Accurately read and interpret medication orders
- Correctly login into ADDD or access the SNF cart
- Identify correct patient using processes specific to the facility
- Accurately select medication to be given
- Secure ADDD/SNF cart when complete
- Follow Rights of Medication Administration
- Accurate dosage calculation
- Correct documentation of medication administration
- Perform inventory control measure (wasting of medications) specific the facility

Student competency will be evaluated and satisfactorily completed prior the administration of medications within the clinical environment. Students administering medications within the clinical environment will always be under the supervision of a licensed nurse.

### Evaluation of Medication Administration Within the Healthcare Facility

Students, during their clinical time, will be provided with ADDD/SNF cart access in accordance with each healthcare facility's policies and procedures. Students will always be under the supervision of a licensed

nurse while accessing and administering medications. The clinical facility, in collaboration with the Nursing program, shall provide the nursing students with orientation and practice experiences that include the demonstration of competency of skills prior to using the dispensing technology.

During lab, simulation and clinical quarters, students will be given an exam that determines knowledge of safe medication dosage. The exams are graded as a pass (100%) or fail (less than 100%). Students are given three opportunities to pass each dosage calculation exam. Remediation will be given to students who fail the second exam with one final opportunity to pass a third attempt at the dosage calculation exam. Students who do not pass the third dosage calculation exam for any course will be dismissed from the LPN-to-BSN program and subject to the re-entry policy. Throughout each level, nursing students will be evaluated on pharmacology knowledge and safe medication administration in the form of exams and/or skill competency simulations.

#### LPN-to-BSN Nursing Students: Access and Administration of Medications

LPN-to-BSN Nursing students administer medications under the supervision of the clinical faculty or the supervising nurse. Access to automated drug dispensing devices or medication carts per institutional policy. Students are not permitted to perform any medication administrations skill in the clinical setting for which they have not been signed-off on by their clinical instructor in lab.

1. Communication and Order Transmission
  - a. Nursing students CANNOT take verbal or telephone orders from providers
  - b. Nursing students CANNOT transcribe provider orders
  - c. Nursing students CANNOT communicate medication orders to the pharmacy
2. Each dose of medication will be administered per the “Six Rights” of Medication Administration (Right Patient, Drug, Dose, Time, Route, and Documentation) and after an assessment of patient allergies.
3. Nursing student medication administration, including documentation, will be performed utilizing agency specific policies, procedures, and protocols.
4. A clinical instructor or supervising nurse MUST consult with the student before a student administers medication.
5. A nursing student may administer controlled substance medication with the following restriction:
  - a. All controlled substances require an RN signature. The documentation system for a clinical site requires a co-signature option, for student to administer controlled medications. If a co-sign option is not available, controlled substances will not be administered by a student.
  - b. Students are not permitted to administer controlled substances via IV bolus or IV push
6. Blood product administration by nursing students includes the following restrictions:
  - a. Blood products/medication requiring a witness for infusion/administration CANNOT be administered by the student. This includes blood typing. However, students can collect the blood products from the blood bank, prime the tubing with saline, and participate in blood administration monitoring policies (i.e. taking vital signs).
7. Nursing students CANNOT perform certain functions under any circumstances. These functions include the following:

- a. Confirm, release, or acknowledge medication orders in the electronic medication administration record
  - b. Administer medications that are not confirmed or acknowledged in the electronic medication administration record
  - c. Administer chemotherapy via any route
  - d. The administration of high-risk medications (any medications that require additional training), in emergency or critical care units
  - e. Administer conscious sedation or assume monitoring responsibility for patients undergoing procedural sedation
  - f. Administer or adjust medications that require advanced training (e.g. Medications that are restricted to critical care areas)
  - g. Administer medications via an epidural or spinal catheter
  - h. Discontinue a PCEA (Patient Controlled Epidural Analgesia) infusion
  - i. Cosign/witness-controlled medication shift count or dose wastage
  - j. Provide any licensed nurse-required peer check per facility policy
8. Administration of insulin (SQ only). Insulin administration requires co-signature as per facility policy.

#### Documentation of Medication Errors

As mandated by the Washington State Nursing Care Quality Assurance Commission (NCQAC), documentation of student medication errors and diversion of medications will be completed and reported to the NCQAC as required. All medication errors and medication diversions will be documented using the NCBON “Just Culture” Student Practice Event Evaluation Tool (SPEET) form. The “Just Culture” form will be submitted to the associate dean of nursing for tracking and a copy of this completed form will also be placed in the student’s academic file.

Contracted clinical facility restrictions or limitations, which are more restrictive than these guidelines, will supersede any aspect of this policy.

#### Consequences:

- Nursing students not adhering to this policy is subject to the Unsafe Clinical Practices Policy.



## Use of an Automated Drug Dispensing Device Policy

Purpose: Identify usage and requirements for students using the Automated Drug Dispensing Device (ADDD)

Scope: Applies to students and faculty in the LPN-to-BSN Nursing program

Overview: Green River College has an active pharmacy license through the Department of Health that allows the program to use an Automatic Drug Dispensing Device to simulate medication administration in lab or simulation.

Policy/Procedure: In accordance with [WAC 246-945-450](#), for Nursing programs that use an Automated Drug Dispensing Device, the program and the students must adhere to the following procedures.

- Student entry: Students will be entered as users into the MetroMed Dispense Generation IV or Pyxis for use in all lab and simulation courses. Once added into the MetroMed Dispense Generation IV or Pyxis, students are responsible for keeping their login credentials. If the students misplace or do not remember their login credential, they must send an email to the nursing lab coordinator requesting access.
- Student use: Students will use the ADDD to simulate medication administration that includes obtaining medication, returning medication, and wasting medication. Students demonstrate competency when successfully completing the skills check-off for the ADDD machine. The ADDD is used in lab and clinical simulation activities of the program.
- Student removal: Students will be removed as a user from the MetroMed Dispense Generation IV or Pyxis after completion of the nursing program.

The ADDD is housed in the Nursing Sim Lab and managed by the nursing lab coordinator. The nursing lab coordinator is responsible for stocking the simulated medications and may delegate the task to the laboratory technical. No “patient-owned” medications are kept in the ADDD. There are no medications subject to override.

The nursing lab coordinator in coordination with the associate dean of nursing will review program policies related to the ADDD annually and make any required or necessary revisions.

The nursing lab coordinator sets ADDD user privileges which are:

- Faculty: Instructor / Faculty
- Student: Nursing Student

Consequences: None

## LPN-to-BSN Nursing Kaplan Policy

**Purpose:** Identify usage and requirements for Kaplan Exams

**Scope:** Applies to students in the LPN-to-BSN Nursing program

**Overview:** Kaplan is required as part of the curriculum. Kaplan provides a comprehensive review and realistic practice that facilitate student learning and guarantees NCLEX success. The purpose of Kaplan is to assess students' knowledge relating to a specific topic in nursing and application of theory to clinical practice. The Green River Nursing Department has an agreement with Kaplan Nursing and pays \$500 per student to provide the student with the resources necessary to be successful on the NCLEX-RN examination.

**Policy/Procedure:** LPN-to-BSN Nursing students are required to participate in all assigned Kaplan exams and activities including a two-day review session scheduled in the final quarter of the program. These review sessions go over the fundamental aspects of the NCLEX-RN and prepare the student for their examination.

Kaplan includes four components: (1) Kaplan Integrated Exams, (2) Kaplan Focused Reviews, (3) Two-day NCLEX Preparation Course, and (4) Kaplan Readiness Exam.

- **(1) Kaplan Integrated Exams:** There are several Kaplan Integrated Exams integrated throughout the program that correspond to the material learned that is learned up to the point in the program. Students are required to meet threshold scores determined by Kaplan and national scores. Students that do not achieve the threshold scores will be required to complete remediation material related to the exam.
  - Kaplan assigns a percentile ranking for each student based on the on a calculated threshold using the on national averages from the previous year.
  - The Nursing program takes the Kaplan percentile ranking for the student and posts a grade on Canvas based on the table below.

Percentile Ranking	Grade to be Posted to Canvas
90-99 <sup>th</sup>	100
80-89 <sup>th</sup>	97
70-79 <sup>th</sup>	93
60-69 <sup>th</sup>	90
50-59 <sup>th</sup>	80
40-49 <sup>th</sup>	75
30-39 <sup>th</sup>	70
20-29 <sup>th</sup>	65
10-19 <sup>th</sup>	60
1-9 <sup>th</sup>	55

- Students who earn a grade below an 80% must remediate their exam and will not receive a grade higher than an 80% upon successful completion of remediation.

- Remediation of Integrated Exams
  - Students will be required remediate the first exam and will be required to take another test on the topic.
  - Integrated tests will not have question, answer, and rationale available after the test because they are secure exams. Integrated Test remediation will provide the topic of the question and topical content information/remediation.
  - A minimum one minute per each question (correct or incorrect) is required on the exam during the remediation to obtain an 80%.
- (2) Kaplan Focused Review Exams: There are several Focused Review exams integrated throughout the program that correspond to material covered in theory courses. Students will get a maximum of two attempts for each Focused Review exam. In order, for the student to get a higher score on the second attempt, the student must remediate each missed question for a minimum of 2 minutes. If the remediation efforts are present, the highest score will be accepted.
- (3) Kaplan Two-day NCLEX Preparation Course: The Kaplan Review is a two-day course that help students prepare for the NCLEX. There are steps that must be done prior to the Kaplan Review course and include a ten-minute orientation video and two question trainers (quizzes). In addition, there is a “review essential nursing content” website that students must review. Students who do not complete the required steps prior to the Kaplan Review two-day course will not be able to participate in the Kaplan Review and will be required to pay back the \$500 fee.

After the Kaplan Two-day NCLEX Preparation Course, students must also complete Question Trainer #3 prior to the Kaplan Readiness Exam.

- (4) Kaplan Readiness Exam: There is one Kaplan Readiness Exam in the final quarter of the program. This exam is designed to test students’ knowledge and critical thinking relating to Registered Nursing. Further, this exam assesses the student’s probability of successfully passing the NCLEX-RN given the student’s current level of knowledge. Students are required to meet set benchmarks determined by Kaplan and national scores. Students that do not achieve set benchmark scores will be required to complete remediation material related to the exam. Students who do not complete the remediation prior to the end of summer quarter may receive an incomplete grade until remediation is successfully completed. At the time of successful completion, the student would be eligible for graduation and licensure.
  - The Kaplan Readiness Exam uses the same scoring calculation as the Kaplan Integrated Exams.
  - Due to the timing on the Readiness exam and its proximity to graduation, students who do not successfully remediate may be given an Incomplete for the course until successful remediation is complete.

Consequences:

- Students not participating in all four components of Kaplan will be held financially responsible for the entirety of the \$500 Kaplan fee. This fee will be applied to the student’s account at Green River College.

## **LPN-to-BSN Nursing Question Challenge Policy**

Purpose: To provide a system for LPN-to-BSN Nursing students to challenge a graded exam question

Scope: Applies to all students enrolled in the LPN-to-BSN Nursing program

Overview: The Nursing faculty believe everyone may make a mistake and want to offer the students an opportunity to identify potential errors in exam material and receive credit.

Policy/Procedure: Students may challenge an exam question by completing a Question Challenge Form and submitting it to the appropriate Nursing faculty in writing or by email. Students have up to one week (5 business days) to challenge an exam question after grades have been posted. Students will be allowed two challenges per quarter, per course. The faculty may or may not accept the challenge and will notify the student of the decision.

If the challenge is accepted, the faculty will change the grade. If the challenge is not accepted or if the student fails to provide evidence to support the challenge, the grade will remain as first issued.

If the student fails to successfully challenge the question, the challenge still counts toward the two challenges per quarter, per course rule.

Consequences: None

## **LPN-to-BSN Nursing Graduation Policy**

**Purpose:** Communicate LPN-to-BSN Nursing program requirements for graduation

**Scope:** Applies to students in the LPN-to-BSN Nursing program

**Overview:** The LPN-to-BSN Nursing program believes the knowledge skills and experiences gained in this program successfully prepares the student for graduation.

**Policy/Procedure:** To be eligible for graduation, LPN-to-BSN students must meet the following requirements:

- Complete all college and program admissions requirements
- Successfully complete all LPN-to-BSN program core courses and general education courses
- Earn a minimum grade point average of 2.5 or higher in all nursing courses

Student have six years to apply for graduation after completing all required coursework that were in effect during the first quarter of the program. After six years, the student must meet the LPN-to-BSN program requirement listed in the current catalog. Per college policy [SA-20 Degree Exception](#), the student may petition the degree exception committee with either a) proof of continuous enrollment or b) request for degree exception.

To apply for graduation, the student must submit an [Intent to Graduate](#) form to the office of the registrar at least one quarter prior to completing the program. Students are encouraged to utilize the [Degree Audit](#) tool to track progress towards program completion.

**Consequences:**

- Students who do not meet the graduation requirements of the LPN-to-BSN program are ineligible for graduation.

## **LPN-to-BSN Graduate Pinning Ceremony**

**Purpose:** The purpose of the Pinning Ceremony is to recognize nursing students' successful completion of LPN-to-BSN Nursing program and their qualifications as candidates to sit for the licensing exam as registered Nurses. This activity is meant to be a culminating experience for graduates, their families and friends, as well as, nursing faculty, staff, and college administration. This ceremony is in addition to the annual Green River College graduation which is optional for LPN-to-BSN Nursing graduates.

**Planning:** The LPN-to-BSN Nursing program's student class representative is responsible for organizing a Pinning Ceremony Committee to plan the event. The Pinning Ceremony committee should schedule an initial planning meeting with the associate dean of nursing and the faculty advisor for the nursing club no later than the third week of spring quarter. The associate dean of nursing and faculty advisor should be kept informed of all discussions and plans, either through formal meetings or written memos. Plans cannot proceed until the associate dean of nursing and faculty advisor have given written approval. The usual format for nursing pinning ceremonies includes the following:

- **Invitations:** Each nursing student will be responsible for inviting family and friends. The Nursing department will send invitations to local hospitals, nursing staff, administrators, faculty, and other key members of the community.
- **Printed Programs:** The Nursing department will print programs for the LPN-to-BSN pinning ceremony to be passed out to guest as they enter the ceremony. The program outlines the order of the ceremony, graduate names, and faculty/staff/administration names. Other content may be added by the class with the associate dean of nursing and faculty advisor's approval.
- **Decorations:** Graduates are responsible for putting up and taking down all decorations on the day of the pinning ceremony. Creativity and simplicity with decorations is encouraged and must be approved by the associate dean of nursing and faculty advisor.
- **Dress:** The LPN-to-BSN pinning ceremony is a semi-formal event. Consider that you will be on stage with your audience looking up towards the stage when choosing your attire.
- **Format** (Total program should not exceed one and one-half hours in length):
  - Welcome Message – Given by the college president or the associate dean of nursing
  - Student Speaker – One graduate elected by the class
  - Faculty speaker – One faculty elected by the class
  - History of the Nursing Pin – Nursing faculty or nursing student
  - Lighting of the lamp – One faculty elected by the class
  - Pinning – Nursing faculty selected by Pinning Ceremony Committee
  - Florence Nightingale Pledge – One faculty elected by the class
  - Closing Message – given by Nursing Faculty or associate dean of nursing

## Registered Nurse Application and NCLEX Testing Processes

The steps below outline the process for applying for registered nursing licensure with the Washington state Department of Health.

1. Visit the Washington State Department of Health website to review the [Nursing License Application](#) page. To get started you must register with Secure Access Washington (SAW) and sign into the Department of Health Online Application Portal. There is a \$2.50 convenience fee to use the Online Application Portal.
2. Create a [Secure Access Washington](#) account
  - a. Select "Create One." If you already have a SAW account, sign in with your user ID and password you previously created.
  - b. Follow the steps to register. You'll create your own user ID and password for SAW.
  - c. The system will send you an email confirming your registration.
  - d. Select the link in the email that follows this statement: "To activate your new account, select the following link." This step is required to complete the registration process.

If you experience problems with the SAW site, contact Consolidated Technology Services (24 hours) at 888-241-7597 or email [servicedesk@cts.wa.gov](mailto:servicedesk@cts.wa.gov).

3. Create a link to the Department of Health Online Application Portal
  - a. Login to your SAW account using your SAW user ID and password you previously created.
  - a. Select the "Add a New Service" link.
  - b. On the right column, select "Department of Health."
  - c. Scroll to "Online Application Portal". Select "Apply."
  - d. You'll be asked a series of questions based on your public record data (state of Washington doesn't gather or store this data). The questions will match the name and address you provide with the existing public record information. You'll want to ensure you've provided your full legal name and you may find you have to enter a former address, especially if your address has changed recently (within the past one to two years) to get the right questions that pertain to your identity.
  - e. Click on "My Services" and choose "Online Application Portal."
  - f. Complete the information on the User Lookup Page. Last name, date of birth, and social security number (SSN) are required fields. If you don't have an SSN, check the "I don't have a Social Security Number" box. Click "Search."
  - g. If you don't have a match, or have never had a state of Washington credential, select "No."
  - h. If you do have a partial match, you'll be asked additional questions. Select answer, then click "Validate."
  - i. If you have a full match, you'll be asked to update any information that is currently incorrect. You'll not be able to update any gray-out field. Once complete, click "Update."
  - j. You will now be able to choose the credential you would like to apply for. Select the credential from the list under "Complete a New Credential Application."

- k. Please note that you'll have 14 days from the start of the application to complete, pay for and retrieve a copy of the application and any supplemental forms needed for completion.
- l. Pay the application and \$2.50 convenience fee with a VISA or MasterCard or by ACH (electronic check). Payment must be made with U.S. funds drawn on a U.S. financial institution. Please make sure your address on the payment information screen matches the address your financial institution has on file for you.
- m. After the payment has been successfully submitted you can, attach additional documents to your application at the "Upload Attachments" screen. If you have nothing to upload, choose "Skip."
- n. The final screen will have a copy of any additional forms you may need to submit a copy of the application you just finished. You'll be able to retrieve these documents for 14 days after the original start of the application.

In your application, you also need to include copies your official Green River College transcripts. Steps for ordering your transcripts are outlined below:

1. Once you have completed the program and grades are posted, email the [Office of the Registrar](#) and request that your LPN-to-BSN nursing degree be posted to your transcript.
2. [Request your Official Green River Transcript](#) showing successful completion of the LPN-to-BSN nursing program. This must be completed after grades and certification are posted.

If you're having problems with the Online Application Portal, call the Health Systems Quality Assurance Call Center at 360-236-4700, press option "1" for "assistance with health profession or facility applications." Then, press "1" again for "technical assistance with our online application system." Normal business hours are Monday through Friday, 8 a.m. to 5 p.m. We're closed on all state holidays.

The Nursing Care Quality Assurance Commission regulates nursing practice via the Nurse Practice Act. Upon graduation from the LPN-to-BSN Nursing program, students are eligible to apply to take the National Council Licensing Examination for Registered Nurses (NCLEX-RN), Licensure. To register for your NCLEX-PN exam please review the instructions on the [NCSBN](#) or the [Pearson Vue](#) website.

For more information, please visit the websites listed below.

- NCSBN NCLEX Exam Candidate Bulletin - [https://www.ncsbn.org/NCLEX\\_Candidate\\_Bulletin\\_2021.pdf](https://www.ncsbn.org/NCLEX_Candidate_Bulletin_2021.pdf)
- Program Codes [https://www.ncsbn.org/Education\\_Program\\_Codes\\_January\\_2021.pdf](https://www.ncsbn.org/Education_Program_Codes_January_2021.pdf)
- If no Social Security Number <https://www.doh.wa.gov/Portals/1/Documents/6000/669316.pdf>
- WA DOH Nurse Licensing <https://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/NurseLicensing/ApplyforaLicense#NCLEXExam>



- Licensure requirements  
<https://www.doh.wa.gov/Portals/1/Documents/6000/669425.pdf>
- Written application instructions <https://www.doh.wa.gov/Portals/1/Documents/6000/669419.pdf>
- Application video  
<https://www.youtube.com/watch?v=Wp4-AS18RoU&feature=youtu.be>
- Information about fingerprint-based background check  
<https://www.doh.wa.gov/Portals/1/Documents/6000/669434.pdf>
- Taking the test with Pearson VUE  
<https://home.pearsonvue.com/Test-takers.aspx>
- NCLEX Item Types Tutorial <https://testdelivery-st-prd-1.pearsonvue.com/Minerva/startDelivery?sessionUUID=864057f2-0514-42bb-baef-ca1b6b6451b4>
- Workforce Data once licensed  
<https://fortress.wa.gov/doh/opinio/s?s=WorkforceData>

## Practical Nursing Program

### Program Goals

- 80% of Nursing program graduates will pass the NCLEX-PN on the first time.
- 80% of Nursing program student will graduate on-time.
- 80% of Nursing program graduates will be employed within the first 6-12 months after graduation.
- 80% of graduates will agree that the Nursing program effectively prepared them to function within their scope of practice and LPN role of expectations.
- 80% of community stakeholders, employers, and clinical partners will be satisfied with Green River's Practical Nursing Program.

### Program Learning Outcomes

Upon successful completion of the Practical Nursing program at Green River College the student will be able to:

1. Provide safe, quality, evidence-based, innovative client-centered nursing care to diverse clients across the life span.
2. Engage in clinical judgement that integrates evidence, nursing, physical and psychosocial science, to ensure healthcare quality and safety, and make client/relationship centered care decisions within the scope of practice of the practical nurse.
3. Participate in collaboration and teamwork with the inter-professional team, the client, and the client's support persons to provide and improve client care and communication.
4. Integrate quality improvement activities and advocacy skills to enhance client care.
5. Utilize information technology and supportive resources to improve client care processes within the healthcare system.
6. Incorporate legal and ethical guidelines with the scope of practice of a practical nurse to enhance client care and professional development.

### Student Core Competencies

- Nursing Judgement: Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care for diverse patients and their families in collaboration with the health care team.
- Human Flourishing: Promote the human dignity, integrity, self-determination and personal growth of patients, their families, and oneself to provide individualized, culturally appropriate, relationship centered nursing care.
- Professional Identity: Articulate a unique role as a member of the health care team, committed to evidence-based practice, caring, advocacy, and safe quality care, to provide optimal health care for diverse patients and their families
- Spirit of Inquiry: By collaborating with health care team members, utilize evidence, tradition, and patient preferences in predicable patient care situation to promote optimal health status.

## Practical Nursing Program Conceptual Framework

The Practical Nursing program's conceptual framework is aligned to the National League for Nursing (NLN) Practical Nursing Framework as well as reflective of industry standards and employer expectations of entry-level proficiency.

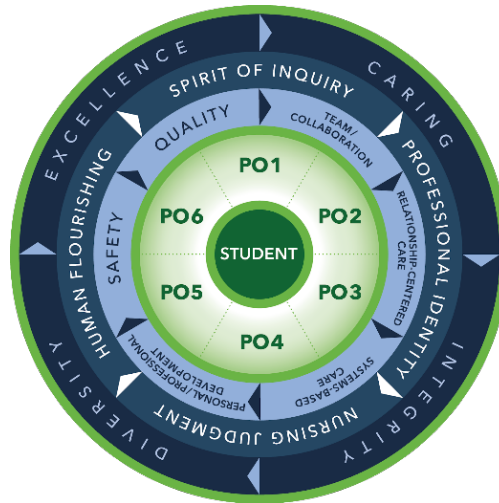


Figure 2 Green River Practical Nursing Program Framework

### NLN Six Integrated Concepts

- **Safety:** Safety is the foundation upon which all other aspects of quality care are built (NLN, 2010, p. 25). A nurse, who practices safely, minimizes risk of harm to patients and providers through both system effectiveness and individual performance (Cronenwett et al., 2007). Safe practice includes the individual's purposeful use of knowledge to provide safe care in a deliberate, skillful and informed way.
- **Quality:** The Institute of Medicine defines quality as the degree to which health services to individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge (IOM, 2001). Quality is operationalized from an individual, unit and systems perspective (NLN, 2010)
- **Team/Collaboration:** To function effectively within nursing and the interprofessional team is critical to effective and safe nursing practice. Team/collaboration refers to fostering open communication, mutual respect, and shared decision-making to achieve quality patient care (NLN, 2010).
- **Relationship-Centered Care:** Core to nursing practice, relationship-centered care includes caring; (therapeutic relationships with patients, families and communities; and professional relationships with members of the interprofessional team (NLN, 2010). It integrates and reflects respect for the dignity and uniqueness of others, valuing diversity, integrity, mutual trust, civility, self-determination, and regard for personal preferences and desires.
- **Systems-Based Care:** Nurses practice in systems of care to achieve health care goals. Nurses must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
- **Personal/Professional Development:** This refers to the individual's formation within a set of recognized responsibilities. It includes the notion of good practice, boundaries of practice, and

professional identity formation (NLN, 2010). It also includes knowledge and attitudes derived from self-understanding and empathy, ethical questions and choices that are gleaned from a situation, awareness of patient needs, and other contextual knowing.

### **NLN Program Outcomes**

- **Spirit of Inquiry**: By collaborating with health care team members, utilize evidence, tradition, and patient preferences in predictable patient care situation to promote optimal health status.
- **Professional Identity**: Articulate a unique role as a member of the health care team, committed to evidence-based practice, caring, advocacy, and safe quality care, to provide optimal health care for diverse patients and their families
- **Nursing Judgment**: Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care for diverse patients and their families in collaboration with the health care team.
- **Human Flourishing**: Promote the human dignity, integrity, self-determination and personal growth of patients, their families, and oneself to provide individualized, culturally appropriate, relationship centered nursing care.

### **NLN Core Values**

- **Caring**: promoting health, healing, and hope in response to the human condition. A culture of caring, as a fundamental part of the nursing profession, characterizes our concern and consideration for the whole person, our commitment to the common good, and our outreach to those who are vulnerable. All organizational activities are managed in a participative and person-centered way, demonstrating an ability to understand the needs of others and a commitment to act always in the best interests of all stakeholders.
- **Integrity**: respecting the dignity and moral wholeness of every person without conditions or limitation. A culture of integrity is evident when organizational principles of open communication, ethical decision-making, and humility are encouraged, expected, and demonstrated consistently. Not only is doing the right thing simply how we do business, but our actions reveal our commitment to truth telling and to how we always see ourselves from the perspective of others in a larger community.
- **Diversity**: affirming the uniqueness of and differences among persons, ideas, values, and ethnicities. A culture of inclusive excellence encompasses many identities, influenced by the intersections of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious and political beliefs, or other ideologies. It also addresses behaviors across academic and health enterprises. Differences affect innovation so we must work to understand both ourselves and one another. And by acknowledging the legitimacy of us all, we move beyond tolerance to celebrating the richness that differences bring forth.
- **Excellence**: co-creating and implementing transformative strategies with daring ingenuity. A culture of excellence reflects a commitment to continuous growth, improvement, and understanding. It is a culture where transformation is embraced, and the status quo and mediocrity are not tolerated.

## **Commission for Nursing Education Accreditation (NLN CNEA)**

The Green River College Practical Nursing Program is accredited by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA) located at 2600 Virginia Avenue, NW, Washington, DC 20037.

For more information on accreditation, visit the [NLN CNEA website](#).

The NLN CNEA has five standards with accompanying quality indicators that all nursing programs must achieve. The standards are:

- **Standard I: Culture of Excellence – Program Outcomes**  
The nursing program engages in ongoing and systematic assessment and evaluation based on data collection processes relative to expected institutional and program outcomes. These data collection processes are used to inform data-based program decisions regarding program integrity and educational achievements. The decisions made by the program demonstrate a commitment to continuous quality improvement in achieving program outcomes. The program's commitment to continuous quality improvement is evident through the achievement of the following associated quality indicators.
- **Standard II: Culture of Integrity and Accountability – Mission, Governance, and Resources**  
A culture of organizational integrity and accountability exists within the institution and program with regard to mission, governance, and resources as reflected in their core values. The missions of the institution and nursing program are aligned, creating an environment in which the program can effectively establish program goals and achieve expected program outcomes. Institutional and program governance support the attainment of the program's expected outcomes, and reflect faculty and student participation. Communities of interest are engaged in providing input into program planning. There is demonstrated institutional and program commitment and accountability to providing resources critical to maintaining the operational integrity of the nursing academic unit and supporting continuous quality improvement efforts designed to meet the program's expected outcomes. This shared institutional and program perspective related to mission, governance, and resource allocation is evidenced through the achievement of the following associated quality indicators.
- **Standard III: Culture of Excellence and Caring – Faculty**  
The expertise, creativity, and innovation demonstrated by the collective faculty within a culture of excellence and caring enables the nursing program to achieve expected program outcomes aligned with the program's mission and goals. The faculty complement consists of educationally and experientially qualified persons of diverse backgrounds who have expertise as educators, clinicians, scholars, and researchers, as relevant to the program's mission and use their expertise to co-create a student-centered learning environment and achieve expected program outcomes. The organizational environment and program core values support inclusivity and empower faculty to achieve the professional outcomes expected of them in the faculty role, and seek the recruitment and retention of a diverse faculty. This commitment to creating a culture of excellence and caring

supportive of faculty outcomes is evidenced through the achievement of the following associated quality indicators.

- **Standard IV: Culture of Excellence and Caring – Students**

The parent institution and nursing program are committed to providing student-centered services sufficient to create a learning environment focused on promoting student success. The learning environment is supportive of students, enabling them to achieve academic success. The nursing program has established student policies which conform with institutional student policies. Student policies include, but are not limited to, those related to recruitment, admission, retention, progression, and graduation processes. Students enrolled in distance learning programs have access to student services to support their success. The program's commitment to acting in the best interest of its students and creating a caring environment that fosters student success is exhibited through the achievement of the following associated quality indicators.

- **Standard V: Culture of Learning and Diversity – Curriculum and Evaluation Processes**

Faculty design program curricula to create a culture of learning that fosters the human flourishing of diverse learners through professional and personal growth, and supports the achievement of expected student learning outcomes. Professional nursing standards and other professional standards appropriate to the program type are foundational curricular elements and are clearly integrated throughout the curriculum. Teaching, learning and evaluation processes take into consideration the diverse learning needs of students and are designed to support student achievement of learning outcomes. Distance learning programs are held to the same curricular, teaching/learning, and evaluation standards as campus-based programs. The program's culture of learning and diversity related to the implementation of curriculum and teaching/learning/evaluation processes is evident through the creation of a positive learning environment and achievement of the following associated quality indicators.

## Practical Nursing Program Courses

The Practical Nursing program is a 90-credit program in which students must demonstrate academic proficiency by completing basic curriculum requirements prior to entry into the core sequence of nursing classes. A minimum grade of 2.5 or higher is required in each nursing and supporting course. (Exceptions for basic curriculum requirement courses with grades less than 2.5 will be made on a case-by-case basis by the Associate Dean of Nursing. Anatomy and Physiology 1 & 2 courses are not eligible for consideration or any course with less than a 2.0 GPA.) Courses without an “&” may not be transferable.

### Pre-Requisite Coursework

Dept./Course Number	Course Title	Credits
<b>Practical Nursing Program</b>		
BIOL& 160	General Biology	5
BIOL& 241	Anatomy & Physiology I	5
BIOL& 242	Anatomy & Physiology II	5
ENGL& 101	English Composition	5
MATH& 146, <b>OR</b> MATH 256	Introduction to Statistics or Statistics for Business and Social Science	5
PSYC& 100	Introduction to Psychology	5
PSYC& 200	Lifespan Psychology	5
NUTR& 101	Nutrition	5
CMST& 101, 210, 220, 230 <b>OR</b> 238	Communications Studies Elective (select one)	5

### Program Course Sequencing

Dept./Course Number	Course Title	Credits
<b>First Quarter</b>		
PNURSE 102	Foundations of Nursing	6
PNURSE 103	Foundations of Nursing Lab	3
PNURSE 104	Mental Health in Nursing	3
PNURSE 105	Foundations of Nursing Clinical	2
PNURSE 107	Foundations of Nursing Simulation	1
<b>Second Quarter</b>		
PNURSE 112	Med-Surg Nursing I	5
PNURSE 113	Med-Surg Nursing I Lab	2
PNURSE 114	Pediatric Nursing and Reproductive Health	4
PNURSE 115	Med-Surg Nursing I Clinical	3
PNURSE 117	Med-Surg Nursing I Simulation	1
<b>Third Quarter</b>		
PNURSE 122	Med-Surg Nursing II	6
PNURSE 123	Med-Surg Nursing II Lab	2
PNURSE 125	Med-Surg Nursing II Clinical	4
PNURSE 126	Transition to Practice	2
PNURSE 127	Med-Surg Nursing II Simulation	1

## Fees and Additional Expenses

These fees and expenses do not include transportation costs, campus parking, meals, lodging for students, or tuition and other college fees. Please refer to the college's website for current [tuition and fees](#). These amounts are subject to change.

<b>Table 4. Practical Nursing Program Fees and Expenses</b>	
<b>Required Items</b>	<b>Approx. Amount</b>
Books	\$600.00
Lab Fees	\$1500.00
Required Immunizations, tests, and drug screening	Variable
American Heart Association BCLS Healthcare Provider Certificate	Variable
Professional Liability Insurance	\$20.50
Accident/Injury Insurance	Variable
Health/Illness Insurance - Green River College encourages each student participating in the clinical education program to acquire comprehensive health and accident insurance that will provide continuous coverage of the student during his or her participation in the education program. The student is responsible for their own health needs, healthcare costs, and health insurance coverage.	Variable
Vehicle Insurance	Variable
Uniform Top (Caribbean Blue)	\$15.00-\$18.00
Uniform Pants (Caribbean Blue)	\$17.00-\$25.00
GRC Nursing Program Badge	\$5.00
Shoes (not fabric)	\$35.00 and up
Name Tag	\$8.00
Gait Belt (plastic not webbed)	\$12.00-\$30.00
Bandage Scissors	\$10.00
Stethoscope	\$45.00 and up
Watch with Second Hand	\$30.00 and up
Smart Phone	Variable
Laptop (preferably not a Chromebook) <sup>(1)</sup>	Variable
Approximate Total	\$2300.00 and up
Washington State application & National State Exam (NCLEX) License <sup>(2)</sup>	\$250.00-\$300.00

<sup>(1)</sup>In the event that a student cannot use their own laptop, students may sign out a Surface Pro, charger, and stylus using the form identified as Appendix K - Practical Nursing Equipment Release.

<sup>(2)</sup>Licensing info can be found through the [Washington Department of Health](#)

The following items may be required:

**Lost Mailbox Key Fee:** Students will be issued a mailbox and key for assignments. If the key is lost during the year, students will pay a fee of \$5 for replacement.

**Lost Lab Bag Fee:** Students will be issued a lab bag at the beginning of the nursing program containing necessary supplies for specific skills. Students are expected to bring their lab bag to lab. If students lose the lab bag during the year, students will pay a fee of \$100 for replacement.



## Practical Nursing Scope of Practice

The LPN scope of practice in the nursing process is limited and focused. The LPN practices in an interdependent role when carrying out nursing care and a dependent role when carrying out medical regimens. The LPN may administer drugs, medications, treatments, tests, injections, and inoculations, whether or not the piercing of tissues is involved and whether or not a degree of independent judgment and skill is required under the direction of an authorized health care practitioner or under the direction and supervision of the RN. Such direction must be for acts within the scope of licensed practical nurse practice and the authorized health care practitioner. ([RCW 18.79.270](#)). The LPN implements nursing care plans developed by the RN or other authorized health care practitioner. The LPN may perform nursing education to nursing assistants under the direction and supervision of the RN.

The LPN performs care in routine nursing situations. [WAC 246-840-705 Functions of a RN and LPN](#) define a routine nursing situation as a relatively free of complexity, and the clinical and behavioral state of the client is relatively stable, requiring care based upon a comparatively fixed and limited body of knowledge. The LPN may assist the RN in complex nursing situations by carrying out selected aspects of the care.

### Supervision

The definition of supervision in [WAC 246-840-010](#) states that, "supervision" of licensed or unlicensed nursing personnel means the provision of guidance and evaluation for the accomplishment of a nursing task or activity with the initial direction of the task or activity; periodic inspection of the actual act of accomplishing the task or activity; and the authority to require corrective action.

The LPN practices interdependently when practicing nursing and dependently when carrying out a medical regimen. It is beyond the LPN's scope of practice to assign nursing responsibilities to the RN. The LPN may supervise the RN in aspects of human resources and administrative functions.

It is beyond the scope of the LPN to independently perform training, performance appraisals, or competency validation related to nursing practice of a LPN, RN, ARNP, nursing assistant (NA), home care aide (HCA), or other assistive personnel (AP). The LPN may assist in providing training, performing appraisals or competency validation related to nursing practice within the scope of the LPN and under the direction of the RN or ARNP. This restriction does not apply to employment within the organization related to organizational, administrative, and human resource functions.

The RN or LPN may perform nursing care without an authorized health care practitioner physically present. The RN does not need to be physically present when the LPN provides nursing care or carries out a medical regimen. Other state or federal laws and rules may have exceptions.

The nursing laws and rules do not address these exceptions. It would be prudent and reasonable for the RN or LPN to follow the physician law and rule when direction to perform LLRP or nonsurgical medical cosmetic procedures under the ARNP.

### Critical Thinking

Critical thinking is used throughout all components of the nursing process. Critical thinking is purposeful and reflective judgment in response to events, observations, experiences, and verbal or written expressions. It involves determining the meaning and significance of what is observed or expressed to determine need for action. The RN or LPN uses critical thinking in clinical problem-solving and decision-making processes relative to scope of practice, knowledge, competency, and experience.

### Nursing Delegation

Several state laws and rules define delegation to assistive personnel (AP). The RN and LPN may delegate some nursing tasks in specific settings and circumstances to unlicensed assistive personnel AP including credentialed or registered AP (such as nursing assistants, medical assistances, home care aides, and surgical technologists).

- Only the RN may delegate to a surgical technologist;
- Only the RN may delegate to a medical assistant;
- Only the RN may delegate to nursing assistants and home care aides in community-based settings (adult family homes, assisted living facilities, and community residential programs for people with developmental disabilities) and in-home care settings;
- Only the RN may delegate to non-credentialed or credentialed UAP in a school setting;
- The RN or LPN may delegate to nursing assistants in other settings (hospitals, nursing homes, clinics, ambulatory surgical facilities).

For clarification, The RN or other authorized health care practitioner does not delegate to the LPN, but “directs” the LPN to perform nursing care or perform a medical regimen.

### **Nursing Process**

#### Nursing Assessment

Nursing assessment consists of two parts:

3. Data collection; and
  4. Analysis, synthesis, and evaluation of the data to create the nursing care plan.
- Comprehensive Nursing Assessment  
A comprehensive nursing assessment means collection, analysis, and synthesis of data performed by the RN used to establish a health status baseline, plan care and address changes in a patient’s condition as defined in the [National Council State Boards of Nursing \(NCSBN\) Model Act \(2012\)](#). It is not within the scope of practice of the LPN to perform a comprehensive nursing assessment.
  - Focused Nursing Assessment  
Focused nursing assessment means recognizing patient characteristics that may affect the patient’s health status, gathering and recording nursing assessment data and demonstrating attentiveness by observing, monitoring and reporting signs, symptoms, and changes in patient conditions in an ongoing manner to an authorized health care practitioner as defined in the NCSBN Model Act (2012).

The RN may perform a focused nursing assessment and re-assessment based on the patient’s needs. The LPN may perform a focused nursing assessment and re-assessment at the direction of the RN or other authorized health care practitioner. The LPN may perform a physical assessment. The LPN may obtain health care history information. The LPN may perform specific assessments or screening activities, such as mental health status, suicidal risk, cognitive screening, substance use screening, oral health screening, growth and developmental screening, or nutritional assessments. The LPN may not analyze, synthesize, or evaluate the data or develop the nursing care plan. As a team member, the LPN should contribute to the development of the nursing care plan. The RN retains the overall responsibility for verifying data collected, interpreting and analyzing data, and formulating nursing diagnoses.

- **Initial, Admission, or Event-Focused Assessment**

Different types of assessments, such as “initial”, “admission”, or “event-focused” assessment, are not defined in the nursing law and rules. These terms are often used by health care agencies to describe different types of assessment. Examples include post patient fall, pre-transfer assessments or others defined by agency policy based on laws and regulations, standards of care, accreditation standards, and reimbursement requirements applicable to specific practice settings. For example, if the Centers for Medicare and Medicaid Services (CMS) require that an RN perform the initial assessment, then an LPN cannot perform this assessment by proxy for the RN. The LPN may participate in collecting information and data as in any assessment process.

## **Nursing Diagnosis**

A nursing diagnosis is used to determine the appropriate plan of care for the patient. The nursing diagnosis drives interventions and patient outcomes, enabling the nurse to develop the patient care plan. [WAC 246-840-700 Standards of Nursing Conduct or Practice](#) clarifies that only the RN is permitted to make a nursing diagnosis. The LPN may provide data to assist in the development of a nursing diagnosis. The LPN may document symptoms or other findings and may document using a nursing diagnosis already made by the RN. The LPN uses and applies nursing diagnosis (formulated by the RN) as a foundation for implementing interventions.

## **Implementation**

The RN is responsible to initiate data collection and perform analysis of the data to create the nursing care plan. The LPN may perform the following activities related to implementation of the care plan:

- Procuring resources needed;
- Implementing nursing interventions and medical orders consistent with nursing rules and within an environment conducive to patient safety;
- Prioritizing performance of nursing interventions within the assignment;
- Recognizing responses to nursing interventions;
- Modifying immediate nursing interventions based on changes in the patient’s status; and

- Delegating specific nursing tasks as outlined in the plan of care and consistent with nursing delegation laws and rules.
- Evaluation  
The RN is responsible to evaluate the responses of the nursing interventions, analysis and modification of the nursing care plan consistent with intended outcomes. The LPN, in collaboration with the RN, assists in making adjustments in the care plan and reporting outcomes of care to the RN or other authorized health care practitioner.
- Documentation  
The nursing laws and rules do not require a RN to co-sign LPN medical records or other documentation. The LPN is individually accountable and responsible for the care the LPN provides. A RN or LPN never functions “under the license” of another nurse or other authorized health care practitioner. In general, the NCQAC does not recommend a nurse co-sign anything unless he or she has directly witnessed an act (such as narcotic wastage) or has gone behind another nurse and personally performed the same assessment with the same findings.

[WAC 246-840-700 Standards of Nursing Conduct or Practice](#) requires a nurse to communicate significant changes in the patient’s status to appropriate members of the health care team in a time period consistent with the patient’s needs. Communication may occur using written or verbal processes. The rule requires a nurse to document, on essential patient records, the nursing care given and the patient’s response to care.

#### Accepting Patient Assignments and Patient Abandonment

The RN or LPN is always responsible for providing safe, competent nursing care. The RN or LPN must have the necessary training, knowledge, judgment, skills and ability to provide the required care. It is the nurse’s responsibility to determine whether he or she is clinically competent to perform the nursing care required. The nurse should not accept the patient care assignment if the nurse is not clinically competent. The nurse may accept a limited assignment of nursing care duties that utilizes his or her currently existing clinical competence. Patient abandonment occurs when a nurse, who has established a nurse-patient relationship, leaves the patient assignment without transferring or discharging nursing care in a timely manner. Refer to the NCQAC’s [Patient Abandonment Interpretive Statement](#) for more information.

#### Scope of Practice Decision Tree

The nurse should know and understand the nursing practice laws and rules, other State or Federal laws, accreditation standards that apply to the facility or setting in which the nurse provides care. Nurses should use the [Interactive Scope of Practice Decision Tree](#) to determine if an activity is within their scope of practice.

Figure 3 NCQAC Advisory Opinion 13.02 Registered Nurse and Licensed Practical Nurse Scope of Practice

### Scope of Practice Decision Tree

Identify, describe, or clarify the activity, intervention, or role under consideration.



<b>Table 5. Nursing Scope of Practice Decision Tree</b>	
<b>Step</b>	<b>Considerations</b>
<b>Define the Activity</b>	<ul style="list-style-type: none"> <li>• Problem or care need</li> <li>• Clinical environment in which the task will be performed</li> <li>• Stability and complexity of the patient care needs</li> <li>• Equipment or supplies needed to safely complete the activity</li> <li>• Requirement for directions or orders from an authorized health care practitioner<sup>1</sup></li> <li>• Independent or interdependent action based on nursing licensure</li> </ul>
<b>Legality</b>	<ul style="list-style-type: none"> <li>• Explicitly permitted or prohibited by Washington State nursing law or rule</li> <li>• Other state laws or rules apply (facility licensing, health care professionals, etc.)</li> <li>• Federal regulations</li> <li>• Supervision or professional licensure requirements</li> </ul>
<b>Practice Standards</b>	<ul style="list-style-type: none"> <li>• Evidence to support the activity within current standards of safe nursing care (National nursing organizations, associations, evidence-based literature and research, position statements, or community standards)</li> <li>• NCQAC advisory opinions, interpretive statements, policy statements, declaratory statements, or other guidance about the activity</li> </ul>
<b>Institutional Policy</b>	<ul style="list-style-type: none"> <li>• Prohibited or permitted by institutional policies and procedures</li> <li>• Reimbursement requirements</li> </ul>
<b>Safety &amp; Competency</b>	<ul style="list-style-type: none"> <li>• Consistent with training in a pre-licensure program, post-basic program, continuing education program, certification program, or self-structured study</li> <li>• Documentation of appropriate education and competency assessment specific to the activity</li> <li>• Safe to perform the activity for the specific patient, in a specific setting, and at a specific time</li> <li>• Specific environment or special equipment or personnel is needed in case of unexpected responses to assure patient safety and quality of care</li> <li>• Potential outcome for the patient if the procedure is not performed</li> </ul>
<b>Accountability</b>	<ul style="list-style-type: none"> <li>• Reasonable and prudent nurse would complete the activity for this patient in this circumstance</li> <li>• Willingness to be accountable and responsible, and accept consequences</li> </ul>

<sup>1</sup> Licensed physician and surgeon, dentist, osteopathic physician and surgeon, naturopathic physician, optometrist, podiatric physician and surgeon, physician assistant, osteopathic physician assistant, advanced registered nurse practitioner, or midwife acting under the scope of their licensure. ([RCW 18.79.260](#) and [RCW 18.79.270](#)).

**Table 6. Registered Nurse and Licensed Practical Nurse Components of Care Scope of Practice Comparison Chart**

Function	Registered Nurse	Licensed Practical Nurse	
Roles	<ul style="list-style-type: none"> <li>• Initiates the nursing process, establishing the nursing care plan</li> <li>• Provides nursing care independently without supervision or assignment</li> <li>• Collaborates in an interdependent role as a health care team member</li> <li>• Provides medical care and therapies in an interdependent role</li> <li>• Acts as patient advocate in health maintenance and clinical care</li> <li>• Accepts patient assignment(s)</li> </ul>	<ul style="list-style-type: none"> <li>• Provides nursing care using the nursing process interdependently under the direction and supervision of the RN</li> <li>• Collaborates in an interdependent role as a health care team member</li> <li>• Provides medical care and therapies in a dependent role</li> <li>• Acts as patient advocate in health maintenance and clinical care</li> <li>• Accepts patient assignment(s)</li> </ul>	
Nursing Process	Nursing Assessment	<ul style="list-style-type: none"> <li>• Performs comprehensive nursing assessment                             <ul style="list-style-type: none"> <li>– Initiates the data collection process</li> <li>– Collects data and information relative to the health care consumer's health or the situation</li> <li>– Assimilates data gathered from LPNs and other health care team members</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Assists in performing nursing assessment:                             <ul style="list-style-type: none"> <li>– Performs focused screening/assessments/ observational assessments</li> <li>– Initial, admission or event-focused assessments</li> <li>– Collects data and information</li> <li>– Recognizes relation to diagnosis</li> </ul> </li> <li>• Communicates outcomes of the data collection process in a timely manner</li> <li>• Determines immediate need for intervention</li> </ul>
	Diagnosis	<ul style="list-style-type: none"> <li>• Analyzes the assessment data to determine actual or potential diagnosis, problems, and issues</li> <li>• Uses scientific principles to develop nursing diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>• Provides data to assist in development of nursing diagnosis</li> </ul>
	Outcomes Development	<ul style="list-style-type: none"> <li>• Identifies expected outcomes for an individualized plan to the patient or situation</li> </ul>	<ul style="list-style-type: none"> <li>• Assists in developing expected outcomes</li> </ul>
	Planning	<ul style="list-style-type: none"> <li>• Develops a plan that prescribes strategies to attain expected, measurable outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Contributes to the development of the nursing care plan</li> </ul>
	Implementation	<ul style="list-style-type: none"> <li>• Implements the identified plan</li> <li>• Delegates and supervises certain nursing tasks to UAP in specific situations and settings</li> <li>• Coordinates care with other team members</li> <li>• Employs strategies to promote health and a safe environment</li> </ul>	<ul style="list-style-type: none"> <li>• Implements the identified nursing care plan under RN supervision</li> <li>• Delegates, and supervises certain nursing tasks to UAP in specific situations and settings</li> <li>• Assists in coordinating care with other team members</li> <li>• Assists in patient teaching</li> </ul>
	Evaluation	<ul style="list-style-type: none"> <li>• Evaluates progress toward attainment of goals and outcomes</li> <li>• Modifies care plan as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Contributes in evaluation by reporting patient outcomes and assists with making adjustments</li> </ul>

Reporting and Recording	<ul style="list-style-type: none"> <li>Documents in the medical record</li> <li>Communicates (verbally or in writing) with LPN and other health care practitioners/healthcare team as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Documents in the medical record</li> <li>Communicates (verbally or in writing) with RN and other health care practitioners/health care team as appropriate</li> </ul>
Case Management	<ul style="list-style-type: none"> <li>Identifies case management needs</li> <li>Refers patients to appropriate resources</li> </ul>	<ul style="list-style-type: none"> <li>Assists the RN in identifying case management needs</li> <li>Refers patients to appropriate resources based on nursing care plan</li> </ul>
Delegation	<ul style="list-style-type: none"> <li>Delegates nursing care plan activities to UAP</li> <li>Delegates medical regimens to UAP</li> </ul>	<ul style="list-style-type: none"> <li>Delegates nursing care plan activities to UAP</li> <li>Delegates medical regimens to UAP</li> </ul>
Supervision	<ul style="list-style-type: none"> <li>Performs nursing care independently</li> <li>Carries out medical regimens under the direction of an authorized health care practitioner</li> <li>Supervises care given by LPNs, and UAP</li> <li>Authorized health care practitioner is not required to be on the premises when RNs carry out medical regimens</li> </ul>	<ul style="list-style-type: none"> <li>Carries out medical regimens under the direction and supervision of an RN or other authorized health care practitioner</li> <li>Performs nursing care under the direction and supervision of an RN</li> <li>Supervises delegated care given by UAP</li> <li>RN or other authorized health care practitioner is not required to be on the premises when carrying out medical regimens or nursing activities</li> </ul>
Complexity	<ul style="list-style-type: none"> <li>Performs nursing care and carries out medical regimens in complex situations</li> <li>Clinically and behaviorally stable and unstable patients</li> </ul>	<ul style="list-style-type: none"> <li>Performs basic nursing care in routine situations</li> <li>Clinically and behaviorally stable patients</li> <li>Assists in giving nursing care and carries out medical regimens in complex nursing situations</li> </ul>
Health Education, Promotion and Prevention	<ul style="list-style-type: none"> <li>Provides health education, health promotion and preventive activities to patients, families and groups</li> <li>Identifies learning needs</li> <li>Develops and evaluates education plans</li> </ul>	<ul style="list-style-type: none"> <li>Participates in developing, providing, and evaluating health education, health promotion and preventive activities to patients, families, and groups under the direction and supervision of an RN or other authorized health care practitioner</li> </ul>
Prescribing Medication and Therapies	<ul style="list-style-type: none"> <li>Under direction of an authorized health care practitioner may give medications, treatments, tests, injections, vaccines (whether or not piercing or puncturing of tissues is involved and whether or not a degree of independent judgment and skill is required)</li> </ul>	<ul style="list-style-type: none"> <li>Under direction of an authorized health care practitioner may give medications, treatments, tests, injections, vaccines (whether or not piercing or puncturing of tissues is involved and whether or not a degree of independent judgment and skill is required)</li> </ul>
Responsibility	<ul style="list-style-type: none"> <li>Responsible and accountable for the quality of nursing care given</li> <li>Responsible and accountable for delegated activities</li> <li>Responsible and accountable for following the standards of nursing conduct or practice</li> <li>Accountable for delegation and supervision when delegating tasks to others</li> <li>May only perform activities within the RN's individual scope of practice - Use Scope of Practice Decision Tree</li> </ul>	<ul style="list-style-type: none"> <li>Responsible and accountable for the quality of nursing care given</li> <li>Responsible and accountable for delegated activities</li> <li>Responsible and accountable for following the standards of nursing conduct or practice</li> <li>Accountable for delegation and supervision when delegating tasks to others</li> <li>May only perform activities within the LPN's individual scope of practice - Use Scope of Practice Decision Tree</li> </ul>



## References and Resources

Nursing Care Quality Assurance Commission Website:  
<http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission>

NCSBN (October 2009). Changes in Health Care Professions' Scope of Practice: [https://www.ncsbn.org/ScopeofPractice\\_09.pdf](https://www.ncsbn.org/ScopeofPractice_09.pdf)

NCSBN Model Act (2012): [https://www.ncsbn.org/14\\_Model\\_Act\\_0914.pdf](https://www.ncsbn.org/14_Model_Act_0914.pdf)

Registered Nurse and Licensed Practical Nurse Scope of Practice (wa.gov)  
<https://www.doh.wa.gov/Portals/1/Documents/6000/NCAO13.pdf>

## Practical Nursing Program Admissions Policy

Purpose: Identify requirements for admission into the Practical Nursing program

Scope: Applies to prospective students of the Practical Nursing program

Overview: The Practical Nursing program has a competitive admissions process. To ensure equitable access, the program has identified a set of requirements and criteria that will be used by the associate dean and nursing faculty to determine admission.

Policy/Procedure: In order to be considered for admission to Green River College's Practical Nursing program, prospective students must meet all of the following requirements prior to beginning their nursing studies:

- Complete the required pre-requisite courses with a 2.5 GPA or higher from a regionally accredited college or university. Exceptions for required pre-requisite courses with grades less than 2.5 will be made on a case by case basis by the associate dean of nursing. Anatomy and Physiology 1 & 2 courses are not eligible for consideration or any course with less than a 2.0 GPA.
- Complete the KAPLAN Entrance Exam with an overall score of 67% or higher. Exceptions for the KAPLAN Entrance Exam requirements will be made on a case by case basis by the associate dean of nursing.
- Complete required immunizations and tests:
  - Two-step TB or Quantiferon
  - Influenza
  - Hepatitis B
  - Measles, Mumps, Rubella (MMR)
  - Varicella
  - Tetanus, Diphtheria, Pertussis (Tdap)
  - COVID (entire series and booster)
  - Additional testing or immunizations may be required
- Successfully pass a criminal state and national background check. Immediate disqualifiers to the program can be found at: [DSHS Secretary's List of Crimes and Negative Actions](#).
- Successfully pass drug screening
- Obtain the American Heart Association Basic Life Support Healthcare provider card (Only AHA BLS certifications are accepted for clinical placements in the Nursing program).

### Application Requirements

- Submit a completed Practical Nursing application to include:
  - Complete a two-page essay responding to a prompt related to Nursing. (Please refer to the current year's practical nursing application prompt.)
  - One-page resume describing the specific activities and responsibilities of your experiences.

- Copies of all required immunizations, certifications, and tests.
- Color-copy of a valid photo ID.
- Official sealed transcripts from every college or university.
- Copies of any relevant health care certifications or licenses.

### Selection of Students

Students will be scored for application based on prerequisite coursework GPA, Kaplan Admissions Test, essay, and resume. Bonus points may be awarded for having recent professional certification or license in NA-C, NA-R, MA, or HCA. Additional points will be given if the NA-C course was completed at GRC.

### Transfer Students

Students may be accepted from another approved nursing program on a case by case basis pending review of documents to prove equivalency of content. Students must be transferring from a Nationally accredited or NCQAC approved nursing education program.

### Notification of Admission

Applications are processed and reviewed for completion by the Health Sciences Program Specialist in the Office of the Registrar. Admission decisions are made by the associate dean of nursing and the Nursing faculty. The notification will be distributed by the applicant's Green River student email.

### Wait List

Each year, the Practical Nursing program may waitlist up to 10 students. Students on this list are notified if and when seats become available in the entering cohort. Final notifications for wait list applicants are sent as soon as space becomes available. The majority of applicants are generally notified at least one month prior to the start of the program. Rankings within the wait list for each program are not disclosed, and there is no guarantee that candidates will be offered a seat in the entering cohort. Wait list candidacies are not held over for the following year, nor is special consideration given to those students if they choose to reapply in a future year.

### I-BEST Support

Classroom success can be yours, even if you have trouble in a traditional classroom setting. The Practical Nursing program incorporates the I-Best program, where you can receive help from an additional instructor all quarter long. This second instructor assists your primary teacher helping you with: English as a second language, study skills development, math skills and dosage calculation assistance, test taking strategies and study sessions, and career options. All students are required to take the CASAS exam during the first week of class. This exam will help faculty determine course design and specific student needs to be addressed throughout the program. All students are required to participate in support class activities.

### Consequences:

- Students who do not meet the admissions requirements of the Practical Nursing program are ineligible for admission.

## **Practical Nursing Retention/Progression Policy**

**Purpose:** Identify established academic standards of the Practical Nursing program for successful progression through the program

**Scope:** Applies to current students enrolled in the Practical Nursing program

**Overview:** Progression and retention in the Practical Nursing courses is dependent upon the student's ability to meet established academic standards and to comply with student health, security, and clinical requirements.

**Policy/Procedure:** The following requirements are necessary for students to progress through the Practical Nursing program:

- Students must successfully complete all nursing courses with a GPA of 2.5 or higher.
- Students must pass a dosage calculation exam prior to attending clinical rotations in each lab course (See [Nursing Program Specific Exam](#) section for more information).
- Students must demonstrate safe practice in the care of patients and exercise appropriate judgment. Students who demonstrate unsafe behaviors in the clinical setting may be removed by faculty at any time. Students removed from a clinical setting for patient safety reasons will be dismissed from the program and are not eligible for program re-entry.
- Students not abiding by the program's [professional behaviors policy](#) are subject to dismissal and may be eligible for program re-entry. Certain violations such as gross negligence or HIPAA violations are not eligible for re-admission.
- Students not meeting expected course learning outcomes or program learning outcomes will be notified in writing and required to do remediation through a [collaborative performance plan](#) or probation.  
Failure to meet the requirements identified in the remediation plan will be dismissal from the program and are subject to the re-entry policy.
- A student who withdraws from the Practical Nursing program, for any reason, may request re-admission and must follow the steps outlined in the re-entry policy. The student must request re-admission within one academic year of the withdrawal and admission is reliant on space availability.

## **Practical Nursing Program Enrollment Option Change Policy**

Purpose: Establish enrollment option re-entry guidelines and processes

Scope: Applies to all current students enrolled in the Practical Nursing program who wish to switch from the full-time program to the part-time program or vice versa.

Overview: Students may request to switch their enrollment status in the Practical Nursing program for personal reasons. Students may be allowed one opportunity to switch the program enrollment status based on space and clinical availability.

Policy/Procedure: A student who wishes to switch from the full-time Practical Nursing program to the part-time program or vice versa has one opportunity to enroll in a different program option (full-time vs part-time) if the student has a gap in instruction that is less than two quarters. If two quarters or more, the student must follow the re-admission policy, unless otherwise agreed upon by the ADN.

### Practical Nursing Program Enrollment Change Process:

- Student must meet with the ADN to discuss options for enrollment change.
- The student must submit a written request to the ADN requesting an enrollment change prior to the quarter in which they wish to change their enrollment status.
- The ADN and the student will develop an academic plan for enrollment change and discuss the plan with the faculty.

If the student is granted acceptance for enrollment change, they must set-up a conference with the ADN prior to the quarter start to ensure all enrollment requirements have been satisfied. Failure to meet with the ADN as required will automatically cancel enrollment change request.

### Consequences:

- Students not meeting the requirements of Practical Nursing program enrollment change process will not be able to switch enrollment status.

## Practical Nursing Program Dismissal & Re-Entry Policy

Purpose: Establish dismissal and re-entry guidelines and processes

Scope: Applies to all current students enrolled in the Practical Nursing program

Overview: Students may withdraw from the Practical Nursing program for personal reasons or be dismissed due to academic or behavioral concerns. Students may be allowed one opportunity to re-enter the program if space permits.

Policy/Procedure: A student who withdrew or was dismissed from the Practical Nursing program has one opportunity to re-enter the program within one year from the date of withdrawal or dismissal from the program, unless otherwise agreed upon by the associate dean of nursing. Some concerns make students ineligible for re-entry to the program and may include but are not limited to violation of program policies, academic dishonesty, HIPPA violation, or engaging in unsafe practice. When a student is dismissed for concerns related to the student code of conduct, the student is referred to Judicial Programs. Please see section on [student rights and responsibilities](#).

For any program dismissal, the student will receive a letter from the Nursing department outlining the reason for dismissal and if the student is eligible for re-entry to the program or not. If the student is eligible for re-entry, the letter will detail the process and steps for re-entry. If the students are not eligible for re-entry, the student has the right to petition their case through the college's judicial affairs process.

### Practical Nursing Program Re-Entry Process (if student is eligible for re-entry)

- Student must meet with the associate dean of nursing to discuss options for re-entry upon withdrawal or dismissal.
- The student must submit a written request to associate dean of nursing requesting re-entry to the program within the first two weeks of the quarter PRIOR to the re-entry request point. The student must explain the reasons he/she was not successful previously in the program and provide a detailed plan for success if re-entry is granted.
- The associate dean of nursing will review and discuss the students' plan with the faculty. Nursing faculty must approve the student's plan and will participate in the creation of a [collaborative performance plan](#) that identifies the expectations to facilitate student success once enrolled in program.
- A student who re-enters the program must comply with the collaborative performance plan and all program policies. If the student does not accept the conditions of the collaborative performance plan, he/she will not be approved for re-entry.
- Students will be allowed re-entry only if space is available. Students will be required to take an independent study to demonstrate competency for each quarter prior to determining admission

placement. This includes all theory coursework and laboratory skills. Students will be expected to pass a dosage calculation exam, an exam covering all theory content from the previously completed courses and demonstrate proficiency in all skills from the previously completed courses. If a student places into a course for which they have already completed and received a passing grade, they will be required to take that course again at their own expense.

- Student must retake previously failed or incomplete courses.
- Students, who withdrew for academic reasons, must complete a remediation contract if one was implemented at time of withdrawal. The request letter for re-entry must document completion of such contract.
- No revisions to the collaborative performance plan or probationary period will be given.
- Students who are offered re-entry and decline will not be offered re-entry again.

If the student is granted acceptance for re-entry into the Practical Nursing program, they must submit a signed collaborative performance plan and set-up a conference with the associate dean of nursing prior to the re-entry date. Failure to meet with the associate dean of nursing as required will automatically cancel re-entry agreement.

Consequences:

- Students not meeting the requirements of the Practical Nursing re-entry process are ineligible for re-entry.

## **Medication Administration by Practical Nursing Students Policy**

**Purpose:** Ensure safe medication administration

**Scope:** Applies to all current students enrolled in the Practical Nursing program

**Overview:** The proper dispensing and administration of medication performed by nursing students is vital to the delivery of safe and effective patient care.

**Policy/Procedure:** To ensure safe medication administration, Practical Nursing students must adhere to the following procedures while using the Skilled Nursing Facility medication carts (SNF) or Automated Drug Distribution Devices (ADDD).

### **Orientation and Practice Experience**

In accordance with [WAC 246-945-450](#), students within the Practical Nursing program will be provided with both orientation and simulated experiences related to the safe medication administration and use of SNF carts and ADDDs. Students will be required to participate in both a SNF cart and ADDD tutorial with subsequent competency assessment. Documentation of successfully passing the competency assessment will be provided to the instructor prior to use of any medication distribution system. Nursing students will also be required to participate and demonstrate clinical competency in simulated clinical scenario using both a SNF cart and an ADDD system.

Student orientation to the safe distribution and use of Medication Distribution Systems includes, but is not limited to, the following simulated learning experiences:

- Accurately read and interpret medication orders
- Correctly login into ADDD or access the SNF cart
- Identify correct patient using processes specific to the facility
- Accurately select medication to be given
- Secure ADDD/SNF cart when complete
- Follow Rights of Medication Administration
- Accurate dosage calculation
- Correct documentation of medication administration
- Perform inventory control measure (wasting of medications) specific the facility

Student competency will be evaluated and satisfactorily completed prior the administration of medications within the clinical environment. Students administering medications within the clinical environment will always be under the supervision of a licensed nurse.



### Evaluation of Medication Administration Within the Healthcare Facility

Students, during their clinical time, will be provided with ADDD/SNF cart access in accordance with each healthcare facility's policies and procedures. Students will always be under the supervision of a licensed nurse while accessing and administering medications. The clinical facility, in collaboration with the Nursing program, shall provide the nursing students with orientation and practice experiences that include the demonstration of competency of skills prior to using the dispensing technology.

Once a quarter, students will be given an exam that determines knowledge of safe medication dosage. The exams are graded as a pass (100%) or fail (less than 100%). Students are given three opportunities to pass each dosage calculation exam. Remediation will be given to students who fail the second exam with one final opportunity to pass a third attempt at the dosage calculation exam. Students who do not pass the third dosage calculation exam for any course will be dismissed from the Practical Nursing program and subject to the re-entry policy. Throughout each level, nursing students will be evaluated on pharmacology knowledge and safe medication administration in the form of exams and/or skill competency simulations.

### Practical Nursing Students: Access and Administration of Medications

Practical Nursing students administer medications under the supervision of the clinical faculty or the supervising nurse. Access to automated drug dispensing devices or medication carts per institutional policy. Students are not permitted to perform any medication administrations skill in the clinical setting for which they have not been signed-off on by their clinical instructor in lab.

9. Communication and Order Transmission
  - d. Nursing students CANNOT take verbal or telephone orders from providers
  - e. Nursing students CANNOT transcribe provider orders
  - f. Nursing students CANNOT communicate medication orders to the pharmacy
10. Each dose of medication will be administered per the "Six Rights" of Medication Administration (Right Patient, Drug, Dose, Time, Route, and Documentation) and after an assessment of patient allergies.
11. Nursing student medication administration, including documentation, will be performed utilizing agency specific policies, procedures, and protocols.
12. A clinical instructor or supervising nurse MUST consult with the student before a student administers medication.
13. A nursing student may administer controlled substance medication with the following restriction:
  - c. All controlled substances require a RN or LPN signature. The documentation system for a clinical site requires a co-signature option, for student to administer controlled medications. If a co-sign option is not available, controlled substances will not be administered by a student.
  - d. Students are not permitted to administer controlled substances via IV bolus or IV push
14. Blood product administration by nursing students includes the following restrictions:

- b. Blood products/medication requiring a witness for infusion/administration CANNOT be administered by the student. This includes blood typing. However, students can collect the blood products from the blood bank, prime the tubing with saline, and participate in blood administration monitoring policies (i.e. taking vital signs).
15. Practical Nursing students CANNOT perform certain functions under any circumstances. These functions include the following:
- k. Confirm, release, or acknowledge medication orders in the electronic medication administration record
  - l. Administer medications that are not confirmed or acknowledged in the electronic medication administration record
  - m. Administer chemotherapy via any route
  - n. The administration of high-risk medications (any medications that require additional training), in emergency or critical care units
  - o. Administer conscious sedation or assume monitoring responsibility for patients undergoing procedural sedation
  - p. Administer or adjust medications that require advanced training (e.g. Medications that are restricted to critical care areas)
  - q. Administer medications via an epidural or spinal catheter
  - r. Discontinue a PCEA (Patient Controlled Epidural Analgesia) infusion
  - s. Cosign/witness-controlled medication shift count or dose wastage
  - t. Provide any licensed nurse-required peer check per facility policy
16. Administration of insulin (SQ only). Insulin administration requires co-signature as per facility policy.

#### Documentation of Medication Errors

As mandated by the Washington State Nursing Care Quality Assurance Commission (NCQAC), documentation of student medication errors and diversion of medications will be completed and reported to the NCQAC as required. All medication errors and medication diversions will be documented using the NCBON “Just Culture” Student Practice Event Evaluation Tool (SPEET) form. The “Just Culture” form will be submitted to the associate dean of nursing for tracking and a copy of this completed form will also be placed in the student’s academic file.

Contracted clinical facility restrictions or limitations, which are more restrictive than these guidelines, will supersede any aspect of this policy.

#### Consequences:

- Practical Nursing students not adhering to this policy is subject to the Unsafe Clinical Practices Policy.

## Use of an Automated Drug Dispensing Device Policy

Purpose: Identify usage and requirements for students using the Automated Drug Dispensing Device (ADDD)

Scope: Applies to students and faculty in the Practical Nursing program

Overview: Green River College has an active pharmacy license through the Department of Health that allows the program to use an Automatic Drug Dispensing Device to simulate medication administration in lab or simulation.

Policy/Procedure: In accordance with [WAC 246-945-450](#), for Nursing programs that use an Automated Drug Dispensing Device, the Practical Nursing program and the students must adhere to the following procedures.

- Student entry: Students will be entered as users into the MetroMed Dispense Generation IV or Pyxis for use in all lab and simulation courses. Once added into the MetroMed Dispense Generation IV or Pyxis, students are responsible for keeping their login credentials. If the students misplace or do not remember their login credential, they must send an email to the nursing lab coordinator requesting access.
- Student use: Students will use the ADDD to simulate medication administration that includes obtaining medication, returning medication, and wasting medication. Students demonstrate competency when successfully completing the skills check-off for the ADDD machine. The ADDD is used in lab and clinical simulation activities of the program.
- Student removal: Students will be removed as a user from the MetroMed Dispense Generation IV or Pyxis after completion of the nursing program.

The ADDD is housed in the Nursing Sim Lab and managed by the nursing lab coordinator. The nursing lab coordinator is responsible for stocking the simulated medications and may delegate the task to the laboratory technical. No “patient-owned” medications are kept in the ADDD. There are no medications subject to override.

The nursing lab coordinator in coordination with the associate dean of nursing will review program policies related to the ADDD annually and make any required or necessary revisions.

The nursing lab coordinator sets ADDD user privileges which are:

- Faculty: Instructor / Faculty
- Student: Nursing Student

Consequences: None

## Practical Nursing Kaplan Policy

Purpose: Identify usage and requirements for Kaplan Exams

Scope: Applies to students in the Practical Nursing program

Overview: Kaplan is required as part of the curriculum. Kaplan provides a comprehensive review and realistic practice that facilitate student learning and guarantees NCLEX success. The purpose of Kaplan is to assess students' knowledge relating to a specific topic in nursing and application of theory to clinical practice. The Green River Nursing Department has an agreement with Kaplan Nursing and pays \$500 per student to provide the student with the resources necessary to be successful on the NCLEX-PN examination.

Policy/Procedure: Practical Nursing students are required to participate in all assigned Kaplan exams and activities including a two-day review session scheduled in the final quarter of the program. These review sessions go over the fundamental aspects of the NCLEX-PN and prepare the student for their examination.

Kaplan includes four components: (1) Kaplan Integrated Exams, (2) Kaplan Focused Reviews, (3) Two-day NCLEX Preparation Course, and (4) Kaplan Readiness Exam.

- (1) Kaplan Integrated Exams: There are several Kaplan Integrated Exams integrated throughout the program that correspond to the material learned that is learned up to the point in the program. Students are required to meet threshold scores determined by Kaplan and national scores. Students that do not achieve the threshold scores will be required to complete remediation material related to the exam.
  - Kaplan assigns a percentile ranking for each student based on the on a calculated threshold using the on national averages from the previous year.
  - The Nursing program takes the Kaplan percentile ranking for the student and posts a grade on Canvas based on the table below.

Percentile Ranking	Grade to be Posted to Canvas
90-99 <sup>th</sup>	100
80-89 <sup>th</sup>	97
70-79 <sup>th</sup>	93
60-69 <sup>th</sup>	90
50-59 <sup>th</sup>	80
40-49 <sup>th</sup>	75
30-39 <sup>th</sup>	70
20-29 <sup>th</sup>	65
10-19 <sup>th</sup>	60
1-9 <sup>th</sup>	55

- Students who earn a grade below an 80% must remediate their exam and will not receive a grade higher than an 80% upon successful completion of remediation.
- Remediation of Integrated Exams
  - Students will be required remediate the first exam and will be required to take another test on the topic.
  - Integrated tests will not have question, answer, and rationale available after the test because they are secure exams. Integrated Test remediation will provide the topic of the question and topical content information/remediation.
  - A minimum one minute per each question (correct or incorrect) is required on the exam during the remediation to obtain an 80%.
- (2) Kaplan Focused Review Exams: There are several Focused Review exams integrated throughout the program that correspond to material covered in theory courses. Students will get a maximum of two attempts for each Focused Review exam. In order, for the student to get a higher score on the second attempt, the student must remediate each missed question for a minimum of 2 minutes. If the remediation efforts are present, the highest score will be accepted.
- (3) Kaplan Two-day NCLEX Preparation Course: The Kaplan Review is a two-day course that help students prepare for the NCLEX. There are steps that must be done prior to the Kaplan Review course and include a ten-minute orientation video and two question trainers (quizzes). In addition, there is a “review essential nursing content” website that students must review. Students who do not complete the required steps prior to the Kaplan Review two-day course will not be able to participate in the Kaplan Review and will be required to pay back the \$500 fee.

After the Kaplan Two-day NCLEX Preparation Course, students must also complete Question Trainer #3 prior to the Kaplan Readiness Exam.

- (4) Kaplan Readiness Exam: There is one Kaplan Readiness Exam in the final quarter of the program. This exam is designed to test students’ knowledge and critical thinking relating to Practical Nursing. Further, this exam assesses the student’s probability of successfully passing the NCLEX-PN given the student’s current level of knowledge. Students are required to meet set benchmarks determined by Kaplan and national scores. Students that do not achieve set benchmark scores will be required to complete remediation material related to the exam. Students who do not complete the remediation prior to the end of summer quarter may receive an incomplete grade until remediation is successfully completed. At the time of successful completion, the student would be eligible for graduation and licensure.
  - The Kaplan Readiness Exam uses the same scoring calculation as the Kaplan Integrated Exams.
  - Due to the timing on the Readiness exam and its proximity to graduation, students who do not successfully remediate may be given an Incomplete for the course until successful remediation is complete.

Consequences:

- Practical Nursing Students not participating in all four components of Kaplan will be held financially responsible for the entirety of the \$500 Kaplan fee. This fee will be applied to the student's account at Green River College.

## **Practical Nursing Question Challenge Policy**

Purpose: To provide a system for Practical Nursing students to challenge a graded exam question

Scope: Applies to all students enrolled in a Nursing program

Overview: The Nursing faculty believe everyone may make a mistake and want to offer the students an opportunity to identify potential errors in exam material and receive credit.

Policy/Procedure: Practical Nursing students may challenge an exam question by completing a Question Challenge Form and submitting it to the appropriate Nursing faculty in writing or by email. Students have up to one week (5 business days) to challenge an exam question after grades have been posted. Students will be allowed two challenges per quarter, per course. The faculty may or may not accept the challenge and will notify the student of the decision.

If the challenge is accepted, the faculty will change the grade. If the challenge is not accepted or if the student fails to provide evidence to support the challenge, the grade will remain as first issued.

If the student fails to successfully challenge the question, the challenge still counts toward the two challenges per quarter, per course rule.

Consequences: None

## **Practical Nursing Graduation Policy**

Purpose: Communicate Practical Nursing program requirements for graduation

Scope: Applies to students in the Practical Nursing program

Overview: The Nursing program believes the knowledge skills and experiences gained in this program successfully prepares the student for graduation.

Policy/Procedure: To be eligible for graduation, Practical Nursing students must meet the following requirements:

- Complete all college and Practical Nursing program admissions requirements
- Successfully complete all Practical Nursing program core courses and general education courses
- Earn a minimum grade point average of 2.5 or higher in all Practical Nursing courses

Practical Nursing student have six years to apply for graduation after completing all required coursework that were in effect during the first quarter of the program. After six years, the student must meet the Practical Nursing program requirement listed in the current catalog. Per college policy [SA-20 Degree Exception](#), the student may petition the degree exception committee with either a) proof of continuous enrollment or b) request for degree exception.

To apply for graduation, the student must submit an [Intent to Graduate](#) form to the office of the registrar at least one quarter prior to completing the Practical Nursing program. Students are encouraged to utilize the [Degree Audit](#) tool to track progress towards program completion.

Consequences:

- Students who do not meet the graduation requirements of the Practical Nursing program are ineligible for graduation.



## **Practical Nursing Graduate Pinning Ceremony**

**Purpose:** The purpose of the Pinning Ceremony is to recognize students' successful completion of Practical Nursing program and their qualifications as candidates to sit for the licensing exam as Practical Nurses. This activity is meant to be a culminating experience for graduates, their families and friends, as well as, nursing faculty, staff, and college administration. This ceremony is in addition to the annual Green River College graduation which is optional for Practical Nursing graduates.

**Planning:** The Practical Nursing program's student class representative is responsible for organizing a Pinning Ceremony Committee to plan the event. The Pinning Ceremony committee should schedule an initial planning meeting with the associate dean of nursing and the faculty advisor for the nursing club no later than the third week of spring quarter. The associate dean of nursing and faculty advisor should be kept informed of all discussions and plans, either through formal meetings or written memos. Plans cannot proceed until the associate dean of nursing and faculty advisor have given written approval. The usual format for nursing pinning ceremonies includes the following:

- **Invitations:** Each Practical Nursing student will be responsible for inviting family and friends. The Nursing department will send invitations to local hospitals, nursing staff, administrators, faculty, and other key members of the community.
- **Printed Programs:** The Nursing department will print programs for the pinning ceremony to be passed out to guest as they enter the ceremony. The program outlines the order of the ceremony, graduate names, and faculty/staff/administration names. Other content may be added by the class with the associate dean of nursing and faculty advisor's approval.
- **Decorations:** Graduates are responsible for putting up and taking down all decorations on the day of the pinning ceremony. Creativity and simplicity with decorations is encouraged and must be approved by the associate dean of nursing and faculty advisor.
- **Dress:** The Practical Nursing pinning ceremony is a semi-formal event. Consider that you will be on stage with your audience looking up towards the stage when choosing your attire.
- **Format** (Total program should not exceed one and one-half hours in length):
  - Welcome Message – Given by the college president or the associate dean of nursing
  - Student Speaker – One graduate elected by the class
  - Faculty speaker – One faculty elected by the class
  - History of the Nursing Pin – Nursing faculty or nursing student
  - Lighting of the lamp – One faculty elected by the class
  - Pinning – Nursing faculty selected by Pinning Ceremony Committee
  - Florence Nightingale Pledge – One faculty elected by the class
  - Closing Message – given by Nursing Faculty or associate dean of nursing

## Practical Nursing License Application and NCLEX Testing Processes

The steps below outline the process for applying for Practical Nursing licensure with the Washington state Department of Health.

4. Visit the Washington State Department of Health website to review the [Nursing License Application](#) page. To get started you must register with Secure Access Washington (SAW) and sign into the Department of Health Online Application Portal. There is a \$2.50 convenience fee to use the Online Application Portal.
5. Create a [Secure Access Washington](#) account
  - e. Select "Create One." If you already have a SAW account, sign in with your user ID and password you previously created.
  - f. Follow the steps to register. You'll create your own user ID and password for SAW.
  - g. The system will send you an email confirming your registration.
  - h. Select the link in the email that follows this statement: "To activate your new account, select the following link." This step is required to complete the registration process.

If you experience problems with the SAW site, contact Consolidated Technology Services (24 hours) at 888-241-7597 or email [servicedesk@cts.wa.gov](mailto:servicedesk@cts.wa.gov).

6. Create a link to the Department of Health Online Application Portal
  - b. Login to your SAW account using your SAW user ID and password you previously created.
  - o. Select the "Add a New Service" link.
  - p. On the right column, select "Department of Health."
  - q. Scroll to "Online Application Portal". Select "Apply."
  - r. You'll be asked a series of questions based on your public record data (state of Washington doesn't gather or store this data). The questions will match the name and address you provide with the existing public record information. You'll want to ensure you've provided your full legal name and you may find you have to enter a former address, especially if your address has changed recently (within the past one to two years) to get the right questions that pertain to your identity.
  - s. Click on "My Services" and choose "Online Application Portal."
  - t. Complete the information on the User Lookup Page. Last name, date of birth, and social security number (SSN) are required fields. If you don't have an SSN, check the "I don't have a Social Security Number" box. Click "Search."
  - u. If you don't have a match, or have never had a state of Washington credential, select "No."
  - v. If you do have a partial match, you'll be asked additional questions. Select answer, then click "Validate."

- w. If you have a full match, you'll be asked to update any information that is currently incorrect. You'll not be able to update any gray-out field. Once complete, click "Update."
- x. You will now be able to choose the credential you would like to apply for. Select the credential from the list under "Complete a New Credential Application."
- y. Please note that you'll have 14 days from the start of the application to complete, pay for and retrieve a copy of the application and any supplemental forms needed for completion.
- z. Pay the application and \$2.50 convenience fee with a VISA or MasterCard or by ACH (electronic check). Payment must be made with U.S. funds drawn on a U.S. financial institution. Please make sure your address on the payment information screen matches the address your financial institution has on file for you.
- aa. After the payment has been successfully submitted you can, attach additional documents to your application at the "Upload Attachments" screen. If you have nothing to upload, choose "Skip."
- bb. The final screen will have a copy of any additional forms you may need to submit a copy of the application you just finished. You'll be able to retrieve these documents for 14 days after the original start of the application.

In your application, you also need to include copies your official Green River College transcripts. Steps for ordering your transcripts are outlined below:

- 3. Once you have completed the Practical Nursing program and grades are posted, email the [Office of the Registrar](#) and request that your practical nursing degree be posted to your transcript.
- 4. [Request your Official Green River Transcript](#) showing successful completion of the Practical Nursing program. This must be completed after grades and certification are posted.

If you're having problems with the Online Application Portal, call the Health Systems Quality Assurance Call Center at 360-236-4700, press option "1" for "assistance with health profession or facility applications." Then, press "1" again for "technical assistance with our online application system." Normal business hours are Monday through Friday, 8 a.m. to 5 p.m. We're closed on all state holidays.

The Nursing Care Quality Assurance Commission regulates nursing practice via the Nurse Practice Act. Upon graduation from the Practical Nursing program, students are eligible to apply to take the National Council Licensing Examination for Practical Nurses (NCLEX-PN), Licensure. To register for your NCLEX-PN exam please review the instructions on the [NCSBN](#) or the [Pearson Vue](#) website.

For more information, please visit the websites listed below.

- NCSBN NCLEX Exam Candidate Bulletin - [https://www.ncsbn.org/NCLEX\\_Candidate\\_Bulletin\\_2021.pdf](https://www.ncsbn.org/NCLEX_Candidate_Bulletin_2021.pdf)
- Program Codes [https://www.ncsbn.org/Education\\_Program\\_Codes\\_January\\_2021.pdf](https://www.ncsbn.org/Education_Program_Codes_January_2021.pdf)

- If no Social Security Number <https://www.doh.wa.gov/Portals/1/Documents/6000/669316.pdf>
- WA DOH Nurse Licensing  
<https://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/NurseLicensing/ApplyforaLicense#NCLEXExam>
- Licensure requirements  
<https://www.doh.wa.gov/Portals/1/Documents/6000/669425.pdf>
- Written application instructions  
<https://www.doh.wa.gov/Portals/1/Documents/6000/669419.pdf>
- Application video  
<https://www.youtube.com/watch?v=Wp4-AS18RoU&feature=youtu.be>
- Information about fingerprint-based background check  
<https://www.doh.wa.gov/Portals/1/Documents/6000/669434.pdf>
- Taking the test with Pearson VUE  
<https://home.pearsonvue.com/Test-takers.aspx>
- NCLEX Item Types Tutorial <https://testdelivery-st-prd-1.pearsonvue.com/Minerva/startDelivery?sessionUUID=864057f2-0514-42bb-baef-ca1b6b6451b4>
- Workforce Data once licensed  
<https://fortress.wa.gov/doh/opinio/s?s=WorkforceData>

## Working as a Nurse Technician (NT)

After completion of the first quarter of the Practical Nursing program and successfully meeting all program requirements, students may meet the qualifications to work as a nurse technician in an hospitals, nursing homes, and clinicals under direct supervision of a registered nurse ([RCW 18.79.340](#)).

Working as a nurse technician provides a terrific opportunity to gain more experience in a clinical setting and apply skills learned in the program. Nurse techs can perform a wide variety of nursing tasks including:

- Gather information about patients
- Perform specific nursing functions
- Provide care to patients
- Work to their verified level of skill and education

The nursing technician is authorized only to perform specific nursing functions within the limits of their education, up to their skills and knowledge, as verified by their nursing program. The nursing technician must be under the direct supervision of a registered nurse who has agreed to act as supervisor and is immediately available. The nursing technicians may gather information about patients and administer care to patients, but may not: administer chemotherapy, blood or blood products, intravenous medications or scheduled drugs, or carry out procedures on central lines; assume ongoing responsibility for assessments, planning, implementation, or evaluation of the care of patients; function independently, act as a supervisor, or delegate tasks to nurses, nursing assistants, or unlicensed personnel; or perform or attempt to perform nursing techniques or procedures for which the nursing technician lacks the appropriate knowledge, experience, and education ([WAC 246-840-870](#)).

In accordance with [WAC 246-840-860](#), to be eligible to work as a nurse technician, a student must meet the following criteria:

- Have successfully completed at least one academic term (quarter or semester) of a Nursing program approved by the Washington State Nursing Commission. The academic term must have included a clinical component.
- Be currently enrolled in a Nursing Commission approved program will be considered to include:
  - All periods of regularly planned educational programs and all school scheduled vacations and holidays;
  - Thirty days after graduation from an approved program; or
  - Sixty days after graduation if the student has received a determination from the secretary that there is good cause to continue the registration period.
  - Current enrollment does not include:
    - Leaves of absence or withdrawal, temporary or permanent, from the nursing educational program.
    - Students who are awaiting the opportunity to reenroll in nursing courses.

In accordance with [WAC 246-840-900](#), the Nursing department will provide documentation that verifies the student has demonstrated the ability and is safe to perform specific tasks and functions. If the nursing technician is requested to perform any task not verified by the nursing department, the nursing technician must inform their supervisor that the task or function is not within their scope and must not perform the task. The Nursing department will provide to the employer and the Washington State Nursing Commission written documentation when a nursing technician is no longer considered to be in good standing as defined in [WAC 246-840-010](#)(16). The Nursing department will notify the employer and the Commission immediately if the nursing technician is no longer in good standing.

To register as a nurse technician, the student must complete the following steps:

1. Complete an application found on the [Department of Health website](#). This application shall be submitted to P.O. Box 47864, Olympia, Washington 98504-7864.
2. Pay required application fee ([WAC 246-840-990](#)).
3. Obtain and submit a signed Education Verification Form from the applicant's nursing program verifying enrollment in, or graduation from, the nursing program. If the applicant has not yet graduated, this statement will include the anticipated graduation date. The form is located on the [Department of Health website](#).
4. Obtain and submit an Employment Verification Form from the applicant's employer or prospective employer certifying that the employer understands the role of the nursing technician and agrees to meet the requirements of [RCW 18.79.360](#)(4). The form is located on the [Department of Health website](#).

See appendix R for required [skills checklist](#) and appendix R for the Nursing department's [educational verification letter](#) from the associate dean of nursing.

## MA-to-LPN Program

This option is designed for students who are already Medical Assistant-Certified. The students enrolling in the MA-to-PN program will receive credit for prior learning. Upon completion of the program they will have completed the required 90 credits for the Practical Nursing AAS with 2 credits CPLA applied. MA-to-PN students must complete all the pre-requisite coursework and requirements of the application process for the Practical Nursing program.

Those applying to the MA-to-PN option, need to indicate that on the top of the Practical Nursing application. Those applying to the MA-to-PN option will be required to submit proof of licensure at the time of application. Those students that demonstrate licensure will be required to participate in quarterly lab skills validation to receive credit for prior learning.

Students completing this option are required to follow all guidelines, policies and practices as outlined in this handbook under the Practical Nursing Program.



## Nursing Assistant Program

The Nursing Assistant Program consists of three separate yet complementary parts. This is in addition to another course that provides education and training in infant, child, and adult cardiopulmonary resuscitation (CPR), automated external defibrillation (AED), and bag-mask valve techniques for individuals who are responsible for delivering emergency care.

The **theory** portion of the program is taught in the classroom utilizing a variety of teaching methods to facilitate the transmission of nursing assistant knowledge. Teaching occurs from simple to complex as each course builds from a foundation to a holistic product.

The **campus skill laboratory** simulates healthcare settings that will enhance nursing assistant skills utilized to deliver care to clients in actual healthcare facilities.

The **community laboratory** consists of those healthcare facilities where the student combines the knowledge learned in the theory courses and the campus laboratory and applies them in delivering care to clients.

These three components are taught congruently, and each must be successfully completed in order to complete the course.





**Mission**

The Mission of the Green River College Nursing Assistant Program is to provide quality education to prepare students as safe, competent practitioners within our diverse healthcare community. Graduates of the Green River College Nursing Assistant Program will be qualified candidates for the successful completion of the NNAAP Nursing Assistant Examination.

**Program Philosophy**

The nursing faculty values all members of the collaborative healthcare delivery team. The faculty believes in preparing all students to be safe, quality, and competent practitioners within each level of nursing assistant practice and within their scope of practice.

Nursing Assistant education is a collaborative process which values the individuality of each student. Adult learning principles are more effectively applied when the student is actively engaged in his or her learning. The faculty promotes critical thinking regarding related concepts throughout the nursing assistant process and the evaluation is based on the satisfactory performance of the individual course criteria.

**Program Values**

Professional Role: Professional role involves a commitment to the profession of nursing assistant, a commitment to abide by the rules and regulations set forth by the regulating and professional organizations and to demonstrate an appreciation for the values of the nursing assistant profession, to incorporate into the professional career a life-long learning concept and a commitment to maintaining a strong knowledge base in the ever-changing environment of the healthcare field. In addition, becoming a healthcare professional requires students to arrive on time to theory or community lab, be in appropriate attire and be respectful of classmates, faculty, and clients.

Communication: Communication is a dynamic process of information exchange utilizing both verbal and non-verbal modes. Therapeutic communication skills are utilized to transmit relevant, accurate, and complete information in a concise and clear manner. It demonstrates knowledge, caring, and cultural awareness and is directed toward the promotion of positive health outcomes and the establishment of therapeutic relationships.

Safety: Safety includes all behaviors that ensure the wellbeing of self and others. It begins with the assessment of one's own needs in order to attain maximum physical and emotional wellbeing and progresses to wellbeing of the environment and that of other individuals.

Teaching/Learning: Teaching and learning are processes by which information is shared between and among individuals. The goal of educating individuals is to facilitate informed decision making, to expand knowledge, and to change behaviors. Concepts should be introduced from simple to complex and should have the ability to be applied to specific situations.

Caring: Caring encompasses those behaviors that demonstrate a genuine concern for another individual, a demeanor that is sensitive to another's real and potential needs and performing nursing

assistant skills and care in a safe and effective manner that transmits a consistent caring presence while treating the individual with respect and dignity. It denotes a personal sense of commitment to and responsibility for the individual, the family, or the community that one serves.

**Cultural Awareness:** Cultural awareness is the act of recognizing and respecting the importance of cultural differences. Culturally competent nursing assistant care is defined as being sensitive to issues related to culture, race, sexual orientation, social class, and economic factors. The people of our college district can be seen as a tapestry woven of many. The faculty has a strong belief in cultural awareness and sensitivity strands. Our culturally competent care will be defined as being sensitive to issues related to culture, race, gender, sexual orientation, social class, and economic factors. Students and faculty will be asked to examine their own cultural values, beliefs, and cross-cultural communications styles. Students and faculty will be asked to study cultural diversity concepts and apply them both within the classroom and in their practice in the community lab setting.

### **Program Learning Outcomes**

Upon successful completion of the Nursing Assistant program at Green River College the student will be able to:

- Be safe practitioners and know their roles.
- Solve problems in varying degrees.
- Make decisions using critical thinking skills.
- Be responsible for their own behavior.
- Function on a team or within a group in a nurturing positive manner.
- Relate to people of all ages.
- Practice continuous learning.

### **Application & Admission Requirements**

The Nursing Assistant Program is a one-quarter program and admits 20 per quarter. It is strongly recommended that a prospective applicant meet with a health occupations advisor in the office of career and advising for more program information. More information about the application and admission process can be found on the [Nursing Assistant website](#).

Program runs quarterly. Applications will be accepted on a first come, first served bases. Students who submit the completed application, with all required documents will be admitted to the program after receipt.

#### **Must Be Fully Complete to Apply:**

1. Apply to Green River College: [Getting Started](#). Once an application is submitted, a ctcLink identification (ID) number will be issued through the email the applicant applied with.
2. Must be 18 Years of age or older prior to graduation date and licensure
3. Complete all required immunizations
4. Complete the Nursing Assistant Application available online

5. Email all application materials in PDF form to the Office of the Registrar, [RegistrarsOffice@greenriver.edu](mailto:RegistrarsOffice@greenriver.edu)

**I-BEST Program:** Classroom success can be yours, even if you have trouble in a traditional classroom setting. The Nursing Assistant, Phlebotomy and Emergency Room Tech programs incorporate the I-Best program, where you can receive help from an additional instructor all quarter long. This second instructor assists your primary teacher helping you with: English as a second language, study skills development, math skills, test taking strategies and study sessions, and career options.

All students are required to take the CASAS exam during the first week of class. This exam will help faculty determine course design and specific student needs to be addressed throughout the program. All students are required to participate in support class activities

**Background Check:** In compliance with the Child/Adult Abuse Information Act ([RCW 43.43.830-43.43.840](#)), each applicant to the Nursing Assistant program must complete and undergo a Washington State DSHS Background check. The background check will be done prior to acceptance into the program. Each student must also consent to the Washington State Patrol Background Check (WATCH), required prior to admission to the program. A criminal record may prohibit a student from participation in community lab courses in the program.

The student is aware that, when submitting such background checks, he/she automatically releases the results to the Nursing department and that the results will be shared with affiliating agencies that provide community lab experiences in the program. Appropriate agency personnel evaluate all positive background checks, and at their sole discretion, make the determination if the individual student can participate in community lab experiences in their agency. Should an agency refuse to place a student based on the outcome of the background check, the student may be unable complete the Nursing Assistant program. The school has no responsibility for arranging alternate community lab placements.

Students must complete the following:

- Two-step TB or Quantiferon
- Influenza
- Hepatitis B
- Measles, Mumps, Rubella (MMR)
- Varicella
- Tetanus, Diphtheria, Pertussis (Tdap)
- COVID (entire series and booster)
- Additional testing or immunizations may be required

**Possess medical and liability Insurance:** Students need to have proof of liability insurance which can be purchased at the college's cashier's office (approximate cost \$21.00) at the beginning of the quarter.

## Nursing Assistant Courses

<b>Table 7. Nursing Assistant Courses</b>	
<b>Name of Course</b>	<b>Description</b>
<b>NRSA 110</b> <b>Nurse Assistant Theory</b> <b>Cr: 6</b> <b>Hours: 66</b>	Students develop the concepts and knowledge necessary to provide entry level nurse assistant care.
<b>NRSA 111</b> <b>Nurse Assistant Community Lab</b> <b>Cr: 4</b> <b>Hours: 88</b>	Students apply knowledge and develop the physical skills necessary to provide entry level nurse assistant care.
<b>NRSA 127</b> <b>Safety, Basic Life Support and Infection Control</b> <b>Cr: 2</b> <b>Hours: 22</b>	Provides education and training in infant, child, and adult cardiopulmonary resuscitation (CPR), automated external defibrillation (AED), and bag-mask valve techniques for individuals who are responsible for delivering emergency care. Taught according to American Heart Association guidelines for Health Care Providers. An American Heart Association Health Care Provider card will be awarded upon successful completion of the course. Also provides education and training for health care providers on safety and infection control measures.

## Fees and Additional Expenses

These fees and expenses do not include transportation costs, campus parking, meals, lodging for students, or tuition and other college fees. Please refer to the college's website for current [tuition and fees](#). These amounts are subject to change.

<b>Nursing Assistant Program Fees and Expenses</b>	
<b>Required Items:</b>	<b>Approx. Amount</b>
Books (Textbook, Workbook and Dictionary)	\$159.00
Lab Fees	\$50.00
BLS Card (AHA adult, infant, child, AED)	Included
Liability Insurance	\$21.00
Accident/Injury Insurance	Student Arranged
Health/Illness Insurance	Student Arranged
Scantron Test Answer Sheets	\$ 5.00
Uniform Top	\$20.00
Uniform Pants	\$13.00
Name Tag	\$8.00
Shoes	\$20.00 and up
Gait Belt	\$12.00 - \$30.00
Stethoscope	\$45.00 and up
Blood Pressure Cuff	\$30.00 and up
Watch with Second Hand	\$20.00 and up
<b>Approximate Total</b>	<b>\$403.00 and up</b>

<b>Nursing Assistant Certification Costs</b>	
<b>Required</b>	<b>Approx. Amount</b>
National Certification Exam (each time taken)	\$110.00
Certification Application Fees with Department of Health	\$65.00
<b>Approximate Total</b>	<b>\$175.00</b>

## **Nursing Assistant Program Dismissal & Re-Entry Policy**

Purpose: Establish dismissal and re-entry guidelines and processes

Scope: Applies to all current students enrolled in the Nursing Assistant program

Overview: Students may withdraw from the Nursing Assistant program for personal reasons or may be dismissed due to academic or behavioral concerns. Students may be allowed one opportunity to re-enter the program if space permits.

Policy/Procedure: A student who withdrew or was dismissed from the Nursing Assistant program has one opportunity to re-enter the program within one year from the date of withdrawal or dismissal from the program. Some concerns make students ineligible for re-entry to the program and may include but are not limited to violation of program policies, academic dishonesty, HIPPA violation, or engaging in unsafe practice. When a student is dismissed for concerns related to the student code of conduct, the student is referred to Judicial Programs. Please see section on [student rights and responsibilities](#).

For any program dismissal, the student will receive a letter from the Nursing department outlining the reason for dismissal and if the student is eligible for re-entry to the Nursing Assistant program or not. If the student is eligible for re-entry, the letter will detail the process and steps for re-entry. If the students are not eligible for re-entry, the student has the right to petition their case through the college's judicial affairs process.

### Nursing Assistant Program Re-Entry Process (if student is eligible for re-entry)

- The student must submit a written request to the associate dean of nursing and the faculty requesting re-entry to the Nursing Assistant program. The student must explain the reasons he/she was not successful in previous program and provide a detailed plan for success if re-entry is granted.
- If the student is granted acceptance for re-entry they must accept and sign the [collaborative performance plan](#) agreement provided by the associate dean of nursing and faculty.
- Students who elect not to accept conditions of collaborative performance plan will not be approved for re-entry.
- Students who re-enter the program must comply with program policies.
- Students will be allowed re-entry only if space is available at the beginning of a new quarter and at their own financial expense.
- Student must retake previously failed or incomplete courses.
- Students, who withdrew for academic insufficiency, must complete remediation contract if one implemented at time of withdrawal. The request letter for re-entry must document completion of such contract.

- Students granted re-entry must pass all the objectives of the program academic requirements in order to continue in the program. No revisions to the collaborative performance plan or probationary period will be provided.
- Students who are offered re-entry and decline will not be offered re-entry again.

Consequences:

- Students not meeting the requirements of the Nursing Assistant re-entry process are ineligible for re-entry.

## Nursing Assistant License Application Process

The steps below outline the process for applying for nursing assistant licensure with the Washington state Department of Health.

1. Visit the Washington State Department of Health website to review the [Nursing Assistant Certified Application](#) page. To get started you must register with Secure Access Washington (SAW) and sign into the Department of Health Online Application Portal. There is a \$2.50 convenience fee to use the Online Application Portal.
2. Create a [Secure Access Washington](#) account
  - a. Select "Create One." If you already have a SAW account, sign in with your user ID and password you previously created.
  - b. Follow the steps to register. You'll create your own user ID and password for SAW.
  - c. The system will send you an email confirming your registration.
  - d. Select the link in the email that follows this statement: "To activate your new account, select the following link." This step is required to complete the registration process.

If you experience problems with the SAW site, contact Consolidated Technology Services (24 hours) at 888-241-7597 or email [servicedesk@cts.wa.gov](mailto:servicedesk@cts.wa.gov).

3. Create a link to the Department of Health Online Application Portal
  - a. Login to your SAW account using your SAW user ID and password you previously created.
  - b. Select the "Add a New Service" link.
  - c. On the right column, select "Department of Health."
  - d. Scroll to "Online Application Portal". Select "Apply."
  - e. You'll be asked a series of questions based on your public record data (state of Washington doesn't gather or store this data). The questions will match the name and address you provide with the existing public record information. You'll want to ensure you've provided your full legal name and you may find you have to enter a former address, especially if your address has changed recently (within the past one to two years) to get the right questions that pertain to your identity.
  - f. Click on "My Services" and choose "Online Application Portal."
  - g. Complete the information on the User Lookup Page. Last name, date of birth, and social security number (SSN) are required fields. If you don't have an SSN, check the "I don't have a Social Security Number" box. Click "Search."
  - h. If you don't have a match, or have never had a state of Washington credential, select "No."
  - i. If you do have a partial match, you'll be asked additional questions. Select answer, then click "Validate."



- j. If you have a full match, you'll be asked to update any information that is currently incorrect. You'll not be able to update any gray-out field. Once complete, click "Update."
- k. You will now be able to choose the credential you would like to apply for. Select the credential from the list under "Complete a New Credential Application."
- l. Please note that you'll have 14 days from the start of the application to complete, pay for and retrieve a copy of the application and any supplemental forms needed for completion.
- m. Pay the application and \$2.50 convenience fee with a VISA or MasterCard or by ACH (electronic check). Payment must be made with U.S. funds drawn on a U.S. financial institution. Please make sure your address on the payment information screen matches the address your financial institution has on file for you.
- n. After the payment has been successfully submitted you can, attach additional documents to your application at the "Upload Attachments" screen. If you have nothing to upload, choose "Skip."
- o. The final screen will have a copy of any additional forms you may need to submit and a copy of the application you just finished. You'll be able to retrieve these documents for 14 days after the original start of the application.

The application must include copies of official Green River College transcripts. Steps for ordering transcripts are outlined below:

1. Once you have completed the Nursing Assistant program and grades are posted, email the [Office of the Registrar](#) and request that your nursing assistant certificate be posted to your transcript.
2. [Request your Official Green River Transcript](#) showing successful completion of the Nursing Assistant program. This must be completed after grades and certification are posted.

If you're having problems with the Online Application Portal, call the Health Systems Quality Assurance Call Center at 360-236-4700, press option "1" for "assistance with health profession or facility applications." Then, press "1" again for "technical assistance with our online application system." Normal business hours are Monday through Friday, 8 a.m. to 5 p.m. The Health Systems Quality Assurance Call Center is closed on all state holidays.

## Nursing Assistant [Pearson Vue](#) Testing Process

The steps below outline the process for registering for the Pearson Vue written and skills test required for Nursing Assistant Licensing.

1. After successfully completing the program, the Nursing department will upload a roster of students who have successfully completed the Nursing Assistant program. This will be completed within one week of grades being posted.
2. The student will receive account activation instructions at the address provided the Nursing Assistant faculty. If you do not receive an email, please check your junk email. If the notification is not in your junk mail or you have not accessed your account within the allotted time, please review the "Account Recovery" process in the Step by [Step Candidate Guide](#).  
Note: The link provided in the activation email can only be clicked one. You must activate your account before the expiration date listed in the email.
3. Use the link in your activation email to set up your account. If you have already activated your account, [log in](#) to schedule a test or change your appointment time. You will need to schedule and complete both the written exam and the skills exam.
4. After you take the test, you can check your results in your account.

Helpful Resources:

- [Candidate Handbook](#)
- [Practice Written Exam Packet](#)

## Medical Assistant (MA) Phlebotomy Program

The MA-Phlebotomy Program consists of two separate yet complementary parts. This is in addition to another course that provides education and training in infant, child, and adult cardiopulmonary resuscitation (CPR), automated external defibrillation (AED), and bag-mask valve techniques for individuals who are responsible for delivering emergency care.

The **theory** portion of the program is taught in the classroom utilizing a variety of teaching methods to facilitate the transmission of phlebotomy knowledge. Teaching occurs from simple to complex as each course builds from a foundation to a holistic product.

The **campus skill laboratory** simulates healthcare settings that will enhance phlebotomy skills utilized to deliver care to clients in actual healthcare facilities.

These two components are taught congruently, and each must be successfully completed in order to complete the course.



## **Mission**

The Mission of the Green River College MA-Phlebotomy Program is to provide quality education to prepare students as safe, competent practitioners within our diverse healthcare community.

## **Program Philosophy**

The nursing faculty values all members of the collaborative healthcare delivery team. The faculty believes in preparing all students to be safe, quality, and competent practitioners within each level of MA-Phlebotomy practice and within their scope of practice.

MA-Phlebotomy education is a collaborative process which values the individuality of each student. Adult learning principles are more effectively applied when the student is actively engaged in his or her learning. The faculty promotes critical thinking regarding related concepts throughout the nursing assistant process and the evaluation is based on the satisfactory performance of the individual course criteria.

## **Program Values**

Professional Role: Professional role involves a commitment to the profession of phlebotomy, a commitment to abide by the rules and regulations set forth by the regulating and professional organizations and to demonstrate an appreciation for the values of the phlebotomy profession, to incorporate into the professional career a life-long learning concept and a commitment to maintaining a strong knowledge base in the ever-changing environment of the healthcare field. In addition becoming a healthcare professional requires students to arrive on time to theory or campus lab, be in appropriate attire and be respectful of classmates, faculty, and clients.

Communication: Communication is a dynamic process of information exchange utilizing both verbal and non-verbal modes. Therapeutic communication skills are utilized to transmit relevant, accurate, and complete information in a concise and clear manner. It demonstrates knowledge, caring, and cultural awareness and is directed toward the promotion of positive health outcomes and the establishment of therapeutic relationships.

Safety: Safety includes all behaviors that ensure the wellbeing of self and others. It begins with the assessment of one's own needs in order to attain maximum physical and emotional wellbeing and progresses to wellbeing of the environment and that of other individuals.

Teaching/Learning: Teaching and learning are processes by which information is shared between and among individuals. The goal of educating individuals is to facilitate informed decision making, to expand knowledge, and to change behaviors. Concepts should be introduced from simple to complex and should have the ability to be applied to specific situations.

Caring: Caring encompasses those behaviors that demonstrate a genuine concern for another individual, a demeanor that is sensitive to another's real and potential needs and performing phlebotomy skills and care in a safe and effective manner that transmits a consistent caring presence

while treating the individual with respect and dignity. It denotes a personal sense of commitment to and responsibility for the individual, the family, or the community that one serves.

**Cultural Awareness:** Cultural awareness is the act of recognizing and respecting the importance of cultural differences. Culturally competent phlebotomy care is defined as being sensitive to issues related to culture, race, sexual orientation, social class, and economic factors. The people of our college district can be seen as a tapestry woven of many. The faculty has a strong belief in cultural awareness and sensitivity strands. Our culturally competent care will be defined as being sensitive to issues related to culture, race, gender, sexual orientation, social class, and economic factors. Students and faculty will be asked to examine their own cultural values, beliefs, and cross-cultural communications styles. Students and faculty will be asked to study cultural diversity concepts and apply them both within the classroom and in their practice in the community lab setting.

### **Program Learning Outcomes**

Upon successful completion of the MA-Phlebotomy program at Green River College the student will:

- Define and describe phlebotomy, phlebotomy services, ethical, legal, and regulatory issues including HIPPA.
- Define and describe anatomic structures and function of body systems using correct medical terminology in relation to services performed by phlebotomists.
- Define and describe standard operating procedures to collect specimens including blood collection equipment, documentation, specimen handling, and transportation.
- Define and describe special collections in phlebotomy and effect on client safety.
- Perform infection control techniques and safety complying with federal, state, and locally mandated regulations regarding safety practices.
- Perform all steps of phlebotomy procedures including collection of equipment, reagents, supplies, interfering chemical substances, specimen requisitioning, collection, transport and processing.
- Perform appropriate professional communication and documentation of vital signs, EKGs, and phlebotomy procedures.

### **Application & Admission Requirements**

The MA-Phlebotomy Program is a one-quarter program and admits 24 students per quarter. It is strongly recommended that a prospective student meet with a health occupations advisor in the office of career and advising for more program information. More information about the application and admission process can be found on the [Phlebotomy website](#).

Program runs quarterly. Applications will be accepted on a first come, first served bases. Students who submit the completed application, with all required documents will be admitted to the program after receipt.

Must Be Fully Complete to Apply:

1. Apply to Green River College: [Getting Started](#). Once an application is submitted, a ctcLink identification (ID) number will be issued through the email the applicant applied with.
2. Must be 18 Years of age or older prior to graduation date and licensure
3. Complete the Phlebotomy Application available online
4. Email all application materials in PDF form to the Office of the Registrar, [RegistrarsOffice@greenriver.edu](mailto:RegistrarsOffice@greenriver.edu)

I-BEST Program: Classroom success can be yours, even if you have trouble in a traditional classroom setting. The Nursing Assistant, Phlebotomy and Emergency Room Tech programs incorporate the I-Best program, where you can receive help from an additional instructor all quarter long. This second instructor assists your primary teacher helping you with: English as a second language, study skills development, math skills, test taking strategies and study sessions, and career options.

All students are required to take the CASAS exam during the first week of class. This exam will help faculty determine course design and specific student needs to be addressed throughout the program. All students are required to participate in support class activities

Signed background check attestation: A criminal record may possibly prohibit a student from obtaining state licensure. The Washington State Department of Health will obtain background checks for licensure purposes through the Washington State Patrol and the Federal Bureau of Investigation. While Green River does not run a criminal background check on students, they are highly encouraged to visit [DSHS Disqualifying Crimes](#) for a list of certain criminal convictions, pending charges, and negative actions that automatically disqualify a person from having unsupervised access to vulnerable adults, juveniles and children.

Note: The Washington State Department of Health may require documentation of high school completion or its equivalency for licensure (after program completion)

## MA-Phlebotomy Courses

Name of Course	Description
<p><b>PHLEB 102</b></p> <p><b>Medical Assistant Phlebotomy Laboratory</b></p> <p><b>Cr: 3</b> <b>Hours: 66</b></p>	<p>Provides the skills and techniques for venipuncture and capillary blood collections, EKG, physical assessments and vital signs. Utilize veni-dot arms and peers to practice blood collections. Prepare and process samples for analysis. Learn to manage age specific needs, provide customer service, and obtain special collections. Meets the Medical Assistant Phlebotomy requirements to apply for credentialing through the State of Washington.</p>
<p><b>PHLEB 104</b></p> <p><b>Medical Assistant Phlebotomy</b></p> <p><b>Cr: 3</b> <b>Hours: 33</b></p>	<p>Meets the Washington State Department of Health Medical Assistant Phlebotomy requirements for applying for certification. Provides basic anatomy and physiology, medical terminology, ethical, legal and regulatory issues, safety and infection control. Learn collection and transferring of blood samples for current industry standards.</p>
<p><b>NRSA 127</b></p> <p><b>Safety, Basic Life Support and Infection Control</b></p> <p><b>Cr: 2</b> <b>Hours: 22</b></p>	<p>Provides education and training in infant, child, and adult cardiopulmonary resuscitation (CPR), automated external defibrillation (AED), and bag-mask valve techniques for individuals who are responsible for delivering emergency care. Taught according to American Heart Association guidelines for Health Care Providers. An American Heart Association Health Care Provider card will be awarded upon successful completion of the course. Also provides education and training for health care providers on safety and infection control measures.</p>

## Fees and Additional Expenses

These fees and expenses do not include transportation costs, campus parking, meals, lodging for students, or tuition and other college fees. Please refer to the college's website for current [tuition and fees](#). These amounts are subject to change.

<b>Table 8. MA-Phlebotomy Program Fees and Expenses</b>	
<b>Required Items:</b>	<b>Approx. Amount</b>
Books (Textbook, Workbook and Prep-U Package)	\$164.00
Lab Fees	\$150.00
BLS Card (AHA adult, infant, child, AED)	Included
Scantron Test Answer Sheets	\$5.00
Uniform Top	\$20.00
Uniform Pants	\$13.00
Shoes	\$20.00 and up
Stethoscope	\$45.00 and up
Blood Pressure Cuff	\$30.00 and up
Watch with Second Hand	\$20.00 and up
<b>Approximate Total</b>	<b>\$467.00 and up</b>

<b>Table 9. MA-Phlebotomy Certification Costs</b>	
<b>Required Items:</b>	<b>Approx. Amount</b>
Certification Application Fees with Department of Health	\$145.00
<b>Approximate Total</b>	<b>\$145.00</b>



## **MA-Phlebotomy Program Dismissal & Re-Entry Policy**

**Purpose:** Establish dismissal and re-entry guidelines and processes

**Scope:** Applies to all current students enrolled in the MA-Phlebotomy program

**Overview:** Students may withdraw from the MA-Phlebotomy program for personal reasons or may be dismissed due to academic or behavioral concerns. Students may be allowed one opportunity to re-enter the program if space permits.

**Policy/Procedure:** A student who withdrew or was dismissed from the MA-Phlebotomy program has one opportunity to re-enter the program within one year from the date of withdrawal or dismissal from the program. Some concerns make students ineligible for re-entry to the program and may include but are not limited to violation of program policies, academic dishonesty, HIPPA violation, or engaging in unsafe practice. When a student is dismissed for concerns related to the student code of conduct, the student is referred to Judicial Programs. Please see section on [student rights and responsibilities](#).

For any program dismissal, the student will receive a letter from the Nursing department outlining the reason for dismissal and if the student is eligible for re-entry to the MA-Phlebotomy program or not. If the student is eligible for re-entry, the letter will detail the process and steps for re-entry. If the students are not eligible for re-entry, the student has the right to petition their case through the college's judicial affairs process.

### **MA-Phlebotomy Program Re-Entry Process (if student is eligible for re-entry)**

- The student must submit a written request to the associate dean of nursing and the faculty requesting re-entry to the MA-Phlebotomy program. The student must explain the reasons he/she was not successful in previous program and provide a detailed plan for success if re-entry is granted.
- If the student is granted acceptance for re-entry they must accept and sign the [collaborative performance plan](#) agreement provided by the program faculty and associate dean of nursing.
- Students who elect not to accept conditions of collaborative performance plan will not be approved for re-entry.
- Students who re-enter the MA-Phlebotomy program must comply with program policies.
- Students will be allowed re-entry only if space is available at the beginning of a new quarter and at their own financial expense.
- Student must retake previously failed or incomplete courses.
- Students, who withdrew for academic insufficiency, must complete remediation contract if one implemented at time of withdrawal. The request letter for re-entry must document completion of such contract.

- Students granted re-entry must pass all the objectives of the program academic requirements in order to continue in the program. No revisions to the collaborative performance plan or probationary period will be provided.
- Students who are offered re-entry and decline will not be offered re-entry again.

Consequences:

- Students not meeting the requirements of the MA-Phlebotomy re-entry process are ineligible for re-entry.

## MA-Phlebotomy License Application Process

The steps below outline the process for applying for MA-Phlebotomy licensure with the Washington state Department of Health.

1. Visit the Washington State Department of Health website to review the [Medical Assistant-Phlebotomy Certification Requirements](#) page.
2. Complete the [Medical Assistant-Phlebotomist Certification Application Packet](#).
3. Once you have completed the program and grades are posted, email the [Office of the Registrar](#) and request that your phlebotomy certificate be posted to your transcript.
4. [Request your Official Green River Transcript](#) showing successful completion of the phlebotomy training program. This must be completed after grades and certification are posted.
5. Submit sealed official transcripts with your application packet and mail them to the following address:

Department of Health  
P.O. Box 1099  
Olympia, WA 98507-1099

## Emergency Room/Patient Care Technician Program

This program consists of two stackable certificates, both the Nursing Assistant and MA-Phlebotomy certificates. Graduates will be eligible for state examination and licensure for both MA-Phlebotomy and Nursing Assistant. Successful licensure will allow the graduate to work as a patient care or emergency room technician. The training provides basic anatomy and physiology, medical terminology, ethical, legal and regulatory issues, safety measures, infection control, special collections, and patient care.

This role is similar to the role of first responders in the field but occurs within the Emergency Room Setting. Skills and techniques acquired in this program are veni and capillary blood collections, basic patient care, EKG and vital signs. BLS certificate is acquired during the program. A minimum grade of 2.5 or higher is required in each course. This program prepares graduates to develop concepts and knowledge necessary to provide entry level patient care as an emergency room or patient care technician.

This program may be completed in one or two quarters. The one-quarter program is an intensive program consisting of 18 credits that will culminate in eligibility for both your Nursing Assistant and MA-Phlebotomy Licenses. The two-quarter program can be completed at a moderate pace by completing the Nursing Assistant and Phlebotomy programs one at a time. Those applying to the Emergency Room/Patient Care Technician option, need to complete both the Emergency Room/Patient Care Technician application available on the [website](#).

Students completing this option are required to follow all guidelines, policies and practices as outlined in this handbook under the Nursing Assistant and MA-Phlebotomy Programs.



## **Nursing Department Policies and Standards**

### **Nursing Department Recruitment Policy**

Purpose: Identify student recruitment strategies for all Nursing programs.

Scope: Applies to all Nursing programs at Green River College.

Overview: The Nursing department offers six programs: (1) LPN-to-BSN, (2) Practical Nursing, (3) MA-to-LPN, (4) Nursing Assistant, (5) Phlebotomy and (6) Emergency Room/Patient Care Technician to meet the needs of the community. These programs admit a total of 256 students per year. The LPN-to-BSN program admits up to 16 student each fall quarter. The Practical Nursing program admits up to 40 student each fall quarter and 24 in each spring quarter. The Nursing Assistant program admits up to 20 students per quarter. The Phlebotomy program admits up to 24 students per quarter. The Nursing department strives to recruit students that represent the diverse communities it serves. Diversity in Healthcare is essential because it provides the opportunity to administer high quality culturally competent care to patients that improves health outcomes.

Policy/Procedure: The Nursing department strives to recruit and retain diverse students to enrich the teaching and learning environment by doing the following:

- Foster a culture of equity, diversity, and inclusion
- Showcase opportunities for learning and engagement
- Work collaboratively with communities of interest to develop innovative pathways that support academic and career advancement for incumbent workers
- Regularly assess recruitment/retention efforts from under-represented populations, and continually strive to improve the program's appreciation and respect for diversity

The Nursing department will work collaborative with the following college departments to promote the program and recruit prospective students:

- Outreach and Recruitment
- Career and Advising
- College Relations
- Workforce Education
- Specialized departments such as Open Doors and I-BEST

Consequences: None

## Clinical Requirements Policy

Purpose: Identify and maintain requirements for participation in clinical placement

Scope: Applies to all students in a Nursing program at Green River

Overview: In order to participate in program clinical experiences, students must be fully protected and prepared to function safely in the healthcare environment.

Policy/Procedure: Students must comply with the requirements of the Clinical Placement Passport related to:

- Immunizations and titers
- Drug screening
- Criminal background checks
- Professional Liability Insurance
- CPR certificate requirements
- Vehicle insurance and other requirements as applicable

All completed clinical requirements will be completed by the deadline established in the application guidelines. Students will not be allowed to participate in lab/clinical programs without documentation of completed Clinical Placement Passport. Inability to participate in lab/clinical programs may result in dismissal from the program.

It is the student's responsibility to provide record of compliance with all Clinical Passport Requirements including additional requirements if applicable.

- Immunizations and Titers: Students must have updated immunizations at all times. If any immunization is due to expire in the middle of a quarter, the student must obtain the immunization prior to the term in which it expires. All documents must be dated and signed by a qualified health practitioner and include MM/DD/YYYY. Copies of original immunization records must be submitted to the program and the student is required to retain copies for their records. Random audits are regularly conducted by healthcare institutions.
- Drug Screening: In accordance with clinical placement requirements, all students are subject to routine drug testing prior to participating in lab experiences. Students are responsible for all costs associated with drug screening. Students must provide documentation of drug screen to the program or clinical site if required. If a drug screen comes back positive due to prescription medications or other medical reasons, a medical review must be conducted at the student's expense and provided to the testing laboratory. The lab will then provide a report that must be shared with the program or clinical site if required.

Additionally, students in all Nursing programs are subject to drug screening for cause if the student exhibits behavior or a pattern of behavior that may indicate the student may be using drugs. Such a student will be informed of the request for a drug screening test and will be given both written and verbal instructions including a deadline for the test at that time. A positive drug screen result or failure to comply with the instructions for the test may result in immediate dismissal from the program in which he or she is enrolled. Such students may not be eligible to reapply to the program.

- **Criminal Background Checks:** In accordance with the policies of the clinical facilities with which the program affiliates for student clinical experiences, as well as other state and federal regulations, all students will have completed a criminal background check ([RCW 43.43.830](#) and [RCW 43.43.842](#)). The Nursing department's Student Clinical Placement Policy is intended to ensure that any criminal convictions in the student's past are of such an age or nature that they will not interfere with the student's ability to participate at all clinical sites. See [DSHS Disqualifying Crimes](#) for a list of certain criminal convictions, pending charges, and negative actions that automatically disqualify a person from participating in clinical activities, licensure, or certification.

In the event that convictions that were not uncovered during the initial background check and those convictions are of such an age or nature that they preclude the student from participating in clinical activities, the student will be advised of such and will be unable to progress in the program.

- **Criminal Convictions:** A student convicted of a criminal offense while enrolled in a clinical activity must report the conviction to the department clinical coordinator and the associate dean of nursing within five days of the conviction. The term "conviction" in this case includes probated sentences and deferred adjudications. Such convictions are likely to render the student unable to participate at any clinical activity, in which case the student will be dismissed from the program.
- **Fingerprinting:** Fingerprinting may be required by facilities for clinical placements and may be at the expense of the student.
- **Insurance:** Students are required to carry liability insurance in the amount of \$1,000,000/3,000,000 in order to participate in lab/clinical programs. Insurance can be purchased through the college's cashier's office. Proof of policy purchase must be provided to the program.

**NOTE:** The Clinical Passport defines minimum requirement for clinical placement. Some facilities may have additional requirements the student is expected to meet. Alternative clinical placements will not be arranged. Your chosen program of study may have additional specific requirements. Please refer to your program coordinator for further information.

Consequences: Failure to comply with the policy as outlined above will result in the following:

- The first offense will result in the student possibly losing their clinical placement, and being reassigned to a new site, if one is available.
- The second offense will result in the student being dismissed from the program and subject to the re-entry policy.



## Clinical Placement Policy

Purpose: Establish and maintain guidelines for Clinical Placements

Scope: Applies to all students in a Nursing program at Green River

Overview: Clinical rotations are assigned to provide a quality learning experience for each student, so they have exposure to a variety of placement sites and units.

Policy/Procedure: Students will comply with all program policies regarding clinical placements.

### Placement Assignments

- Clinical sites are subject to availability. The Nursing department cannot guarantee clinical sites but will offer alternative clinical assignments to supplement clinical experiences, whenever possible. This includes high fidelity simulation, virtual simulation, human simulated patients, or other activities as assigned.
- Only the Nursing department's clinical coordinator will establish and secure student placement with health partners in the appropriate related fields.
- Assigned placement sites and/or rotation dates and times may change due to unexpected circumstances. Students will need to allow for flexibility in their schedules and be aware that they may need to make revisions in their personal planning.
- Student requests for specific clinical site locations may be considered. The Nursing department may not be able to guarantee placement at the suggested facility.
- Some clinical sites will require additional training and/or onboarding procedures outside of the normal educational schedule. Students must complete all site requirements for placement.
- All clinical health partners require a timeline to receive the mandatory requirements for placement (typically 4 to 8 weeks prior to the start of the rotation). The student will comply with all deadlines as outlined by the Nursing department.
- Students are not permitted to change or switch their scheduled shift with other students or their assigned clinical site. If alterations to scheduled shift are required, the students must contact the clinical coordinator or the associate dean of nursing.
- All student clinical questions and concerns MUST go through the clinical faculty, associate dean of nursing, and the clinical coordinator. The student will not contact the clinical site or staff unless authorized to do so by their Green River educational program.

Consequences: Failure to comply with the policy as outlined above will result in the following:

- The first offense will result in the student possibly losing their clinical placement, and being reassigned to a new site, if one is available.
- The second offense will result in the student being dismissed from the program and subject to the re-entry policy.

## Unsafe Clinical Practices Policy

**Purpose:** To recognize the Nursing department's responsibility to educate its students while providing safe client care

**Scope:** Applies to all students in a Nursing program at Green River

**Overview:** Unsafe practice includes any event in a clinical setting by a student or faculty member that result in patient harm, an unreasonable risk of patient harm, or is involved in the diversion of drugs or controlled substances. The Nursing department uses a "Just Culture" model developed by the North Carolina Board of Nursing that focuses on quality improvement and patient safety from a holistic viewpoint. It seeks to promote learning by fostering an environment which encourages reporting mistakes.

**Policy/Procedure:** If a student or faculty is involved in a clinical event that the program has reason to believe resulted in patient harm, an unreasonable risk of patient harm, or is involved in the diversion of drugs or controlled substances, the Nursing department is mandated by Washington law to report these events to the Washington State Nursing Commission within two business days. An important part of this reporting should show evidence of an in-depth assessment of the incident using root cause analysis. Root cause analysis uses a systematic process of identifying "root causes" of problems or events, approach to responding to them, and determining an improvement plan or disciplinary action. This policy is in compliance with [WAC 246-840-513](#), [WAC 246-945-450](#), and [RCW 70.56.010](#).

Criteria for reporting unsafe practice events include:

### Human Error

- Student inadvertently, unintentionally did something other than intended or other than what should have been done; a slip; a lapse; or an honest mistake. Isolated event, not a pattern of behavior.  
**Examples:** Single medication event/error (wrong dose, wrong route, wrong patient, or wrong time); Failure to implement a treatment order to oversight.

### At Risk Behavior

- Behavioral choice that increases risk where risk may not be recognized or is mistakenly believed to be justified; nurse does not appreciate risk; unintentional risk taking; and nurse's performance or conduct does not pose a continuing practice risk to clients or others.  
**Examples:** Exceeding scope of practice; pre-documentation; minor deviations from established procedure; nurse knowingly deviates from a standard due to a lack of understanding of risk to client, organization, self, or others

Reckless Behavior (Mandatory report to the Washington State Nursing Commission is required)

- Student consciously disregards a substantial and unjustifiable risk; student's action or inaction is intentional and purposeful; or student puts own self/personal interest above that of client, organization or others

**Examples:** Nurse abandons patients by leaving workplace before reporting to another appropriately licensed nurse. Nurse leaves workplace before completing all assigned patient/client care (including documentation) for a non-urgent reason; nurse does not intervene to protect a patient because nurse is not assigned to patient; nurse makes serious medication error, when realized tells no one, and when questioned denies any knowledge of reason for change in client condition; nurse falsifies documentation to conceal an error.

Near Miss: Any event or situation that could have had adverse consequences but did not and was indistinguishable from a full-fledged adverse event in all but outcome ("close call"). In a near miss, a patient is exposed to a hazardous situation, but does not experience harm through either luck or early detection.

Student Practice Event Evaluation Form (SPEET): A form used perform root cause analysis to categorize and score student behavior or actions that caused or could have caused harm to a patient. The score provides specific actions to take with the student that are appropriate to the seriousness of the error and may include consoling, remediation, counseling, coaching, or disciplinary action.

### Incident Reporting and Tracking

When a clinical event occurs, the following procedure must be completed within 24-48 hours:

1. The student shall immediately notify their clinical faculty and the preceptor or nurse under whom they are working during the event.
2. The clinical faculty will meet with the student to learn the details of the event and determine if they are emotionally able to continue the rest of their shift or should be sent home.

**Note:** if the event involved any of the following, the student will be sent home:

  - a medication error (even if no harm was caused),
  - event caused patient harm
  - involved drug diversion or substance abuse (If impaired they may not drive themselves home.)
3. Before the student leaves the clinical facility, the faculty will set up an appointment with the student for the next day to discuss the event. The student will be told they will receive an email from the faculty with two forms to complete and bring to the meeting. The forms include the "Clinical Incident Report Form" and the "Student Practice Event Evaluation Tool" (SPEET).

**Note:** If the student cannot meet the next day, an appointment for the following day must be made. The faculty will also complete these forms in preparation for meeting with the student. If the faculty did not receive enough information about the event on the day it occurred, the faculty can complete it when meeting with the student or may return to the clinical site as needed to ensure accurate information regarding the clinical event has been obtained.

4. The faculty shall immediately notify the associate dean of nursing to provide details of what occurred. This can be done by phone, text, or whatever method will give the faculty a quick acknowledgement that the message has been received by the associate dean of nursing.
5. During the follow-up meeting with the student, faculty and student will verbally review the event in detail. Using the SPEET and "Incident Reporting" forms completed by both student and faculty, the faculty and student will review and discuss all questions. When the root cause(s) have been clearly identified, the action plan for the student can be discussed and documented on the incident reporting form.

**Note:** The faculty is responsible for submitting the finalized forms as outlined in #6 below.

6. The faculty will send a copy of the finalized SPEET and incident reporting forms to the student and the associate dean of nursing within 48 business hours of the event. Copies must also be placed in the student's electronic file immediately after it has been completed.
7. The associate dean for nursing will notify the Washington State Nursing Commission no later than 48 hours after the event on the [Adverse Events Reporting Program website](#).

Logging and tracking of events involving a student or faculty that the nursing program has reason to believe resulted in patient harm, unreasonable risk of patient harm, or diversion of legend drugs will be maintained by the associate dean of nursing.

#### Consequences:

- If a student's behavior is deemed at risk according to the [SPEET tool](#), the student will be placed on academic probation, or dismissed from the program and subject to the re-entry policy.
- If a student's behavior is deemed at reckless according to the [SPEET tool](#), the student will be dismissed from the program and not subject to the re-entry policy.

## **Impaired Student Policy**

Purpose: Ensure safety through established standards relating to student impairment

Scope: Applies to all students enrolled in a Nursing program

Overview: Client safety is an overriding principle in the delivery of health care. For the healthcare professional to provide safe care, he/she must be able to make sound judgments. Thought processes and decision making can be adversely affected by excessive stress, sleep deprivation, poor mental and physical health, and the use of any drugs and/or alcohol. Impaired by the aforementioned factors, the healthcare professional can easily make unsafe decisions and, therefore, jeopardize client safety. The student will be subject to faculty review and possible dismissal from the program. The Nursing department must adhere to all state and local regulations, Joint Commission Policies, and required policies of clinical facilities.

Policy/Procedure: Behaviors that suggest impairment of an individual's ability to meet standards of performance, competency, and safety in the clinical setting include, but are not limited to, the following:

Physical Impairment such as:

- Motor incapacity
- Tremors
- Unstable gait
- Bumping into others or walls and furniture
- Excessive use of breath mints, mouthwash
- Smell of alcoholic breath

Impaired Judgment such as:

- Poor clinical or social judgment/actions
- Sloppy behavior
- Poor charting with poor handwriting
- An excessive number of mistakes

Mental or Emotional Impairment such as:

- Labile (unstable mood) with crying or yelling or louder voice than is normal for the situation
- Slurred speech
- Unusually quiet or irritable
- Diminished alertness (perhaps appearing dazed or preoccupied)
- Confusion or frequent memory lapse
- Defensiveness

Disruptive Social Reaction such as:

- Inappropriate verbal or emotional responses, i.e., anger or violence, threats, inappropriate laughing
- Isolating self from peers

Inconsistent Behavior Patterns such as:

- Repeating self
- Inconsistent or elaborate stories
- Explanations for absences or mistakes
- Frequent disappearances on unit

Absenteeism such as:

- Often late to report or clinical conference
- Long lunch breaks

Clinical instructors have the responsibility and authority to take immediate corrective action with regards to student conduct and performance in the clinical setting. If a clinical instructor observes that the clinical performance of a student poses danger to the safety and well-being of self or others, the clinical instructor will escort the student out of the clinical area. The clinical instructor will then notify a friend or family member, as provided by the student, or use the student's emergency contact number to secure transportation home for the student. If the student is suspected to be under the influence, the family member will escort the student for an immediate drug screen at the students' own expense.

#### Consequences:

- If the student has been found to be practicing under the influence, the student will be immediately dismissed from the program and will not be eligible for re-entry.

## **Professional Behaviors Policy**

Purpose: Establish and maintain standards of expected professional behavior from Green River Nursing students.

Scope: Applies to all students enrolled in a Nursing program

Overview: Students are expected to demonstrate professional behavior both in the classroom and in all clinical settings. Students are representatives of Green River College and are obligated to function within the framework of the professional standards identified by their field and the Green River College Student Code of Conduct.

Policy/Procedure: The student must abide by the codes of ethics of the profession, professional standards and the Uniform Disciplinary Act. Behaviors deemed unprofessional include but are not limited to:

- Dishonesty
- Disrespect of students, faculty and staff
- Concerns regarding attendance and time management
- Concerns about safety
- Lack of accountability
- Inability to work in a team setting
- Poor or ineffective communication skills

Unacceptable behaviors serious enough to result in dismissal from the Nursing program without possibility of return include:

- Gross negligence with potential to or/that result in harm to client or family
- Verbal threat of physical harm (assault)
- Physical violence (battery)
- Falsifying the medical record
- HIPAA violation (breach of confidentiality)
- Carrying a weapon or illicit drugs/drug paraphernalia
- Stealing from clinical site, college, or faculty
- Failure to satisfactorily complete any student collaborative performance plan, probationary requirements, or re-entry requirements
- Failure to comply or remediate any issues addressed by program specific policies

Consequences:

- Students who exhibit behaviors deemed unprofessional will meet with the associate dean of nursing and the nursing faculty and may receive a [Collaborative performance plan](#) or a probation letter.
- Student who exhibit behaviors deemed unacceptable will be dismissed from the program and not subject to the Nursing program's re-entry policy.



## **Electronic Device & Social Media Use Policy**

Purpose: Establish and maintain standards for student use of social media/internet and electronic devices within the Nursing programs

Scope: Applies to all students enrolled in a Nursing program

Overview: Use of electronic devices is always at the discretion of the individual instructor. Individual instructors retain the right to permit or restrict the use of electronic devices during specific classroom or clinical lab sessions as announced in the class, syllabus and/or online web-enhanced system. The use of electronic devices is acceptable during classroom, clinical skills lab sessions and within the healthcare facilities during clinical experiences when used according to standards that protect individual and client rights.

Nursing students who engage in internet conversations for school-related purposes or school-related activities such as interactions in or about clinical/lab and didactic course activities must adhere to this policy. Distribution of sensitive and confidential information is protected under HIPAA and FERPA whether discussed through traditional communication channels or through social media. Social media are defined as mechanisms for communication designed to be disseminated through social interaction, created using highly accessible and scalable publishing techniques. Examples include but are not limited to LinkedIn, Wikipedia, Second Life, Flickr, blogs, podcasts, RSS feeds, Twitter, Facebook, YouTube, MySpace, Instagram, Snapchat, and TikTok. As a Nursing student, you are expected to represent Green River College and your program in a fair, accurate, and legal manner.

### Policy/Procedure:

#### Classroom and lab requirements:

- Personal cellular phones must be placed on silent mode during classroom sessions. It is up to faculty preference if personal cell phones should be turned off during class. Text-messaging during classroom and clinical skills and community lab sessions are not permitted.
- Laptop computers may be permitted for the purpose of taking notes or completion of specific assignments during a classroom session only. (See course syllabi for individual specific class restrictions)
- Audio-Video recording devices used in classroom or clinical skills lab sessions must adhere to the following:
  - Must have approval of the instructor and all parties involved.
  - All recording devices must be on the desk/table surface in full visibility of the instructor.

- Recording devices must be turned off during classroom breaks.
- Recording devices must be turned off at the request of the instructor during class discussions when the instructor or a student shares a client-based or personal story that could be perceived as relating to HIPAA or FERPA issues.
- The instructor reserves the right to restrict the use of recording devices during specific classroom or clinical lab sessions.
- All recordings are for the personal use of the student. They may not be copied or downloaded to anyone that is not a member of the class.
- Recordings may not be posted on any online site – website, blog, social networking page, etc.
- All recordings must be deleted after the content testing.
- Recording devices are not permitted in the instructor’s offices or during office hours unless expressly permitted by the instructor for a specific purpose.

Healthcare Clinical Environment:

- The use of personal cellular phones or other wireless communication devices is not permitted in client care areas.
- In non-client care areas electronic communication must be used with discretion and a heightened awareness with regard to confidentiality and HIPAA protections.
- Personal cellular phones must be turned to vibrate or silent.
- Wireless communication devices, cell phones, or resource materials downloaded to a wireless device may only be used at facility approved designated areas (such as stations). Personal electronic devices may only be used on client care units with facility and instructor approval.
  - Electronic devices used for research purposes may only be used in non-client care areas.
  - Under no circumstances may a camera be operated within health care facilities without prior authorization of lab faculty and by appropriate healthcare facility personnel in accordance with facility policy.

Social Media:

- Protect confidential, sensitive, and proprietary information. Do not post confidential or proprietary information about staff, students, clinical facilities, clients/clients, or others with whom one has contact in the role of a student.
- Respect copyright and fair use. When posting, be mindful of the copyright and intellectual property rights of others and the college. Do not use Green River College marks, such as logos and graphics, on personal social media sites. Do not use the college’s name to promote a product, cause, or political party or candidate.
- Use of the college marks (logos and graphics) for school sanctioned events must be approved (posters, fliers, postings) by administration.
- HIPAA and FERPA guidelines must be followed at all times. Identifiable information concerning clients/clinical rotations must not be posted in any online forum or webpage.

- Students are legally liable for what they post on their own site and on the sites of others. Individual bloggers have been held liable for commentary deemed to be proprietary, copyrighted, defamatory, libelous or obscene (as defined by the courts).
- Employers are increasingly conducting web searches on job candidates before extending offers. What a student post may disqualify from employment in the future.
- Don't use ethnic slurs, personal insults, obscenity, pornographic images, or engage in any conduct that would not be acceptable in the professional workplace.

Consequences:

1. Violations of this policy that relate to HIPAA/FERPA are subject to the following consequences which may include:
  - Referral to Judicial Affairs
  - Probation or dismissal from the Nursing program
  - Each student is legally responsible for individual postings and may be subject to liability if individual postings are found defamatory, harassing, or in violation of any other applicable law. Students may also be liable if individual postings include confidential or copyrighted information (music, videos, text, etc.) *Adopted from Purdue University School of Nursing Handbook 2012.*
  
2. Violations of this policy not pertaining to HIPAA/FERPA are subject to the following consequences which may include:
  - Loss of use of device in classroom or lab
  - Dismissal from class and given an unexcused absence
  - May be placed on contract by the Nursing faculty

## **Academic Honesty, Plagiarism, and Cheating Policy**

Purpose: Establish and maintain guidelines for Academic Honesty, Plagiarism, and Cheating

Scope: Applies to all students enrolled in a Nursing program

Overview: In academically honest writing or speaking, students must document sources of information whenever another person's exact words are quoted; another person's idea, opinion, or theory is used through paraphrase; and when facts, statistics, or other illustrative materials are borrowed. In order to complete academically honest work, students need to acknowledge all sources according to the method of citation preferred by the instructor; and write as much as possible from their own understanding of the materials and in their own voice.

Policy/Procedure: The Nursing department has zero tolerance for academic dishonesty. When possible, student work may be screened for plagiarism through the college's anti-plagiarism software. If an instructor suspects that anyone has plagiarized, cheated, or been academically dishonest the student will be invited to a one-on-one conversation and may ask the student to show proof that the work in question is not plagiarized.

Plagiarism can occur intentionally and unintentionally.

Intentional plagiarism includes:

- Turning in someone else's work as your own
- Copying words or ideas from someone else without giving credit
- Failing to put a quotation in quotation marks
- Giving incorrect information about the source of a quotation
- Changing words but copying the sentence structure of a source without giving credit
- Copying so many words or ideas from a source that it makes up the majority of work, whether giving credit or not

Unintentional plagiarism includes:

- Trying in good faith to document your academic work, but failing to do so accurately and/or thoroughly
- Plagiarism and documentation have not been addressed in a student's academic coursework and the student is unprepared for college academic writing or speaking.

In order to complete academically honest work, students should: acknowledge all sources according to the method of citation preferred by the instructor. This also includes acts of self-plagiarism in which a student re-submits their own work for which they have already received prior credit.

Cheating is defined as intentional deception in producing or creating academic work. It denies students of the most important product of their education – the actual learning. Cheating includes, but is not limited to:

- Intentional plagiarism;
- Selling or giving your own completed work to others who intend to turn it in as their own;
- Purchasing or accepting the work of others with the intent of turning it in as your own;
- Acquiring and/or using teachers' editions of textbooks, without the permission of the specific instructor, in order to complete your course assignments or prepare for examinations;
- Obtaining or attempting to obtain an examination prior to its administration;
- Referring to devices, materials or sources not authorized by the instructor especially during examinations;
- Receiving assistance from another person (friends, family members) when not authorized by the instructor;
- Encourages or assists another person in the accomplishment of cheating;
- Providing assistance to another person when not authorized by the instructor;
- Taking an examination for another person;
- Obtaining or attempting to obtain another person to take one's own examination;
- Falsifying laboratory results or copying another person's laboratory results;
- Falsifying or attempting to falsify the record of one's grades or evaluation;
- Signaling answers to others or receiving signals from others when taking an examination;
- Unauthorized use of another person's computer log-in and password;
- Using approved devices for unauthorized purposes; and
- Documenting exam questions in any manner for others to obtain or cheat from in the future.

Consequences:

- The first offense will result in the student earning a zero on the assignment and being placed on probation. The student will be referred to the associate dean of nursing and the [GRC Judicial Office](#) for violation of [WAC 132J-126](#) which may result in disciplinary action.
- The second offense may result in dismissal from the Nursing program without the option of re-admission. The student will be referred to the associate dean of nursing and the GRC Judicial Office for violation of WAC 132J-126.

## **Problem Grievance - Resolution Policy**

**Purpose:** The purpose of this college policy and procedures is to provide a systematic way in which to express and resolve misunderstandings, complaints or grievances about dissatisfaction with academic issues or instructional personnel, services, or processes.

**Scope:** Applies to all students enrolled in a Nursing program

**Overview:** In order to create an atmosphere conducive to learning, there should be a mutual respect between faculty and students. If a problem should arise, it can often be resolved by direct communication between the student and faculty member. If the problem remains unresolved, there are further steps for the student to take.

**Policy/Procedure:** It is the policy of Green River College to provide clear and accurate information, provide accessible services, and offer excellent educational programs and quality service. Students have both the right to receive clear information and fair application of college grading policies, standards, rules, and requirements as well as the responsibility to comply with them in their relationships with faculty and instructional staff members.

The college recognizes that disputes may sometimes arise and encourages the parties involved to resolve the conflict informally whenever possible. If resolution cannot be reached, the complaint resolution process provides an impartial and equitable way to resolve those conflicts.

Students must file an instructional complaint within two consecutive quarters after the action that gives rise to the complaint. The appropriate dean or vice president may suspend this rule under exceptional circumstances such as extended illness, sabbatical leave, or absence of one or both parties to the complaint. When either party of the complaint is no longer in residence with the college and does not expect to return, the appropriate dean or vice president shall give reasonable opportunity to complete procedures before making a decision.

Resolving Student/Faculty Conflicts includes the following steps:

**Step 1:** Contact your instructor with your concerns. For best results, try to schedule something outside of class – don't try to resolve the issue in the transition period between classes.

**Step 2:** If you are unable to resolve the issue with the instructor, contact the instructor's division chair. Similarly, if the instructor does not respond to your attempts to make contact after a reasonable time (2 to 3 business days), you may contact the division chair. The division chair will, within 10 business days, call a meeting between the instructor and student to resolve the issue. If a meeting is not practical, the chair may seek other means of resolving the matter such as a phone call or email communication, but you should generally expect to attend a meeting that will include the division chair and your instructor. The division chair's responsibility is to help find a resolution, not determine who is right or wrong.

If the instructor involved in the complaint is the division chair, then the matter will be referred to another division chair, preferably one under the same dean. Contact the associate dean of nursing for a referral.

Step 3: If the complaint cannot be resolved by the previous 2 steps, or if 10 business days have passed from when the division chair was notified of the complaint, the complaint may be referred to the associate dean of nursing either by you or the division chair. The associate dean of nursing will meet with the faculty member, division chair and student to resolve the complaint within 10 business days of the complaint being referred to their office. The associate dean of nursing may choose to meet with all of you at once or separately.

Step 4: If the previous steps have not come to a resolution, the complaint shall be directed to the Vice President of Instruction for final resolution.

For more information, please see the college's Policy [IN-5 Student Complaint Process](#)

Consequences: None

## **Nursing Program Harassment Policy**

Purpose: Establish and maintain guidelines for respectful interpersonal communication

Scope: Applies to all students enrolled in a Nursing program

Overview: The Nursing department adheres to college policy [HR-22 Nondiscrimination and Harassment](#) on harassment including but is not limited to harassment based on race, national origin, marital status, sex, sexual orientation, gender identity, religion, or disability. In addition, the Nursing department includes bullying as a form of harassment. Bullying is a form of unwanted aggressive physical or verbal behavior directed at a specific person(s). Bullying may include:

- Hitting, kicking, pinching, pushing, or otherwise attacking others.
- Use of words to harm others with name-calling, insults, making sexual or bigoted comments, harsh teasing, taunting, mimicking, or verbal threats.
- Excluding someone from a peer group, usually through verbal threats, spreading rumors, and other forms of intimidation.
- Assault on a person's property, when the victim has his or her personal property taken or damaged
- Retaliation to seek revenge for a perceived wrong against another student is also bullying and/or harassment.

Policy/Procedure: Bystander(s) and the victim of bullying should assertively send the message that bullying is not acceptable. The student who believes they are being bullied, or the bystander(s) who witnessed the bullying should report the bullying behavior to the faculty and/or associate dean of nursing as it interferes with the learning environment for all students.

Any incidence of threat, assault or battery against individuals or the institution will be immediately reported to the appropriate authorities (both internal to the college and/or law enforcement agencies).

Consequences:

- The first offense will result in the student being placed on probation. The student will be referred to the associate dean of nursing and the [GRC Judicial Office](#) for violation of [WAC 132J-126](#) which may result in disciplinary action.
- The second offense may result in dismissal from the Nursing program without the option of re-admission. The student will be referred to the associate dean of nursing and the GRC Judicial Office for violation of WAC 132J-126.



## **Academic Probation Policy**

Purpose: Explain the Nursing department's process of Academic Probation

Scope: Applies to all students enrolled in a Nursing program

Overview: The Nursing faculty and staff are committed to student success and academic progress. Students may be placed on academic probation any time during the Nursing program for unsatisfactory academic performance or behavioral concerns not consistent with professional nursing standards.

Policy/Procedure: Students will be placed on academic probation when they are unable to meet the expected program requirements in any course due to academic or behavioral concerns outlined below. In addition, academic or behavioral concerns may warrant a referral to [GRC Judicial Affairs](#).

- Academic concerns that are deemed to be serious enough to warrant academic probation may include but are not limited to cheating, plagiarism, and unsatisfactory performance on exams.
- Behavioral concerns that are deemed to be serious enough to warrant academic probation may include but are not limited to verbal assault of another person, safety (negligence) issues with patient care, or repeated behaviors that are not consistent with professional nursing standards or the GRC Student Code of Conduct.

Probation will include measures to remediate the concerns for the probation. Probation is intended as a corrective measure and used as a red flag to let the students know they need to get back on track.

The student will receive a formal letter of probation that delineates the area of concern and sets forth required remediation with a timeline for completion. The student will be removed from probation when the student satisfactorily completes the remediation requirements or at the end of the Nursing program.

Consequences:

- If the probation is due to academic concerns and the student cannot complete the requirements for remediation before the end of the quarter, the student may be given an incomplete grade and may be subject to dismissal from the Nursing program. In that case, the student will be subject to the program's re-admission policy.
- If the probation is due to behavioral concerns and students cannot complete the remediation requirements in a satisfactory manner, the student will be subject to dismissal from the Nursing program. In that case, the student will be subject to the program's re-admission policy.

## **Collaborative Performance Plan Policy**

Purpose: To help the student recognize that they are not meeting course or program learning outcomes and identify strategies to improve upon areas of concern.

Scope: Applies to all students enrolled in a Nursing program

Overview: The Nursing faculty and staff are committed to student success, academic progression, and student attainment of the skills and attributes required for a nurse. The goal of a [collaborative performance plan](#) is to work with the student to address concerns preventing the student from progressing in the program.

Policy/Procedure: A students may receive a collaborative performance plan for academic or behavioral concerns identified by Nursing faculty or staff, clinical personnel, or the associate dean of nursing.

- A student will receive an academic collaborative performance plan when they receive an exam score below 76%.
- A student will receive a behavioral collaborative performance plan when the student's behavior is not consistent with professional standards.

When a concern has been identified, the student will be notified that they will be placed on a collaborative performance plan and need to meet with the Nursing faculty. The student will be asked to complete the program's collaborative performance plan form that includes identifying strategies and resources needed to address and mitigate area of concern and to identify goals for moving forward.

The student will meet with the Nursing faculty to discuss the collaborative performance plan. During this meeting, the faculty may offer strategies that have been beneficial to students with similar concerns in the past. Both the student and the faculty have to agree to the requirements of the collaborative performance plan. The associate dean of nursing may also sign the contract. The student is given a copy of the completed collaborative performance plan and a copy is placed in the student's confidential electronic file.

If the collaborative performance plan is for academic reasons, the process must be completed prior to the next exam or a similar assignment. If the collaborative performance plan is for behavioral concerns, the process must be completed prior to student's next lab or clinical session.

Consequences:

- Students who fail to remediate the concerns addressed in the collaborative performance plan may be placed on academic probation. Once a student has received three collaborative

performance plans for either academic or behavioral concerns in the same course, the student is dismissed from the Nursing program and subject to the re-entry policy.

## **Attendance/Participation Policy**

Purpose: To establish and maintain attendance and punctuality standards for Nursing students

Scope: Applies to all students enrolled in a Nursing program

Overview: All students are expected to attend and actively participate in all classes and lab activities. It is the Nursing faculty's belief that a student can only benefit from the program if they attend all classes/labs, actively participate in class/clinical learning activities, and are adequately prepared for learning experiences. Any lapses in attendance are detrimental to student success.

Policy/Procedure: The student is required to attend all Nursing classes/labs and clinicals. If the student is unable to attend a class/lab or anticipates being late, a voice message and email to the faculty is required prior to start time. Any absences anticipated by the student are to be discussed with the faculty ahead of time. Absences that are not communicated to faculty will be considered unexcused and are subject to disciplinary action.

- Tardiness: In theory and lab classes, a student will be considered tardy if the student arrives after the start of class. The student will need to wait until break to enter the class. Students who are tardy will not receive credit for participation and in-class assignments will receive late assignment point deduction.

In clinical, students who arrive late but within 10 minutes of the start time of clinical will be considered tardy. They will be allowed to stay and participate in clinical. On a second incident of tardiness and any tardiness thereafter, the student will be considered absent and will not be allowed to stay and participate.

- Absence: In theory and lab classes, a student will be considered absent when they do not come to class at all for the day or leave class prior to the scheduled end of class without prior approval of the faculty.

In clinical, a student will be considered absent when they do not come to clinical at all for the day; arrive more than 10 minutes after the stated start time of clinical; and leave clinical prior to the scheduled end of class without prior approval of the clinical faculty. Attendance for clinical groups (such as when and where to check in) will be determined by the faculty for each group and given to the students at the beginning of each rotation. Students are expected to notify faculty before leaving the assigned unit.

Absence Due to Illness or Injury: Any absence related to illness or injury must be followed up by a written release from the student's physician before returning to the Nursing program. In all cases, students must be able to fully participate in any course or lab to allow for adequate

evaluation of the student's achievement of the objectives; therefore, limited assignments are not provided. It may be necessary for a student to withdraw from the program and return (dependent on space available) when the physical restrictions or limitations are lifted. Students that have to return at a later date must do so within one year and are subject to the re-admission policy.

Doctor's Clearance/Return to Program after Absence: Students must have on file a note from their physician stating that they are physically able to participate fully without restrictions or limitations in class/lab courses following an illness, injury, surgical procedure or during pregnancy and the post-partum period. Students who are pregnant must submit a letter from their physician that includes specific limitations or restrictions as well as a statement defining clinical activities allowed.

Students concealing an illness or injury are jeopardizing client safety and their own safety. A student found to have concealed an illness or injury will be subject to probation and possible dismissal from the Nursing program.

Consequences:

- Students will be verbally advised and counseled when having absences totaling eight (8) hours from the Nursing program and may be placed on a [collaborative performance plan](#).
- Absences totaling twenty-four (24) hours from the Nursing program are cause for probation or dismissal from the program. Extenuating circumstances such as hospitalization, extended illness under the care of a physician, or a death in the immediate family will be considered by the associate dean of nursing and faculty.
- Absences or tardiness without notification to faculty prior to start of class or lab may result in a collaborative performance plan.
- Absences or tardiness without notification to faculty prior to start of clinical may result in probation or dismissal from the Nursing program.

## **Safety & Technical Standards Policy**

**Purpose:** To inform students of the Nursing programs' requirements for essential functions related to cognitive, affective and psychomotor abilities.

**Scope:** Applies to all current or potential students enrolled in a Nursing program

**Overview:** Many clinical settings in which nursing students gains experience such as hospital, nursing home, or community agencies or clinics which may be physically demanding. Students must meet the requirements identified in the description of work performance of practicing nursing professionals outlined below. Students that may requirement modifications or assistance with the criteria outlined in this policy, must contact [disability support services](#).

**Policy/Procedure:** Students shall possess the ability to perform essential functions so that they can provide care and treatment for their clients. Students must continually meet safety and technical standards throughout the Nursing program. Students who are no longer able to meet the standards must notify the associate dean of nursing immediately or face dismissal from the Nursing program.

### **Essential Physical/Neurological Functions**

- Standing and walking is required for 8-40 hours per week.
- Sitting may be required to receive or to give oral reports, breaks, conferences and classes.
- Lifting medical supplies, equipment, and other treatment items up to 40 pounds. The student must have, within reasonable limits, the ability to lift clients, transfer clients in and out of bed and on and off a commode, and to assist others with client lifts and transfers.
- Pushing and pulling equipment that includes monitors, wheelchairs, gurneys, client room furniture. The student may be expected to pull the client up in bed.
- Climbing a footstool, as well as climb stairs.
- Reaching above his/her head, i.e., to add irrigation solution or to add an additional IV solution.
- Squatting and kneeling to do foot assessment/care for the client.
- Operating controls on beds, gurneys, and other special equipment by hand or foot.
- Driving their own transportation to and from clinical rotations. Some clinical sites may not be within a convenient bus route.
- Wearing any facility required PPE (gowns, gloves, masks, respirators, etc.) for up to 12 hours.

### **Fine Motor Skills:**

- Having fine motor skills for tasks such as administering injections, sterile insertion of catheters, needles and eye drops and wound irrigations. The student must be able to assess the client through palpation with fingers and hand. The student must be able to distinguish

between hot and cold and able to feel vibrations. The repetitive motion of hands and fingers is required for typing and writing related to chart entry/documentation.

Sensory/Observation:

- Being able to hear in order to perform physical assessment with a stethoscope for bowel tones, heart and lungs sounds. The student must be able to hear a frail, weak voice of an elderly person calling out for help. The student must be able to communicate over the intercom and phone.
- Having visual acuity within normal accommodated limits for monitoring equipment, reading computer charts, preparing medications for injections, and detecting changes in the color of lips, and nail bed coloring.
- Having depth perception for administering injections, sterile insertion of needles, catheters.
- Having a normal sense of smell to detect odors indicating unsafe conditions or changing client status.
- Able and willing to touch or be touched by clients as it relates to the clients' medical treatment.

Communication:

- Be able to effectively communicate in English (oral and written) forms. The student must be able to process client information and communicate it effectively to other members of the healthcare team. The student must be able to communicate effectively in oral and written form with the client and their friends and families. The student's ability to communicate also includes the ability to recognize when to consult with their faculty member in a timely manner as it relates to the client safety and welfare.

Cognitive:

- Be able to measure, calculate, reason, analyze, integrate, and synthesize in the context of nursing. The student must be able to read quickly and to comprehend directions as they analyze, evaluate, and to apply information and to engage in class/lab or clinical setting.

Behavioral/Emotional:

- Having the emotional health required for the full utilization of his/her intellectual abilities, to exercise good judgment, and to promptly complete all responsibilities that accompany safe client care. The student must be able to work with all disciplines on the care team. The student must not pose harm to the clients or other healthcare team members. The student must abide by the professional standards as identified in the Nursing Student Handbook.

Consequences:

- Students who do not meet the Nursing program's requirements for essential functions related to cognitive, affective and psychomotor abilities may not be able to participate in the program.

## Remote Learning Modalities Policy

Purpose: Establish guidelines related to teaching and learning online.

Scope: Applies to all current or potential students enrolled in a Nursing program

Overview: To ensure online offerings by the Nursing program meet rigorous standards for academic quality and integrity and that the online curriculum is comparable to face-to-face curriculum.

Policy/Procedure: The Nursing department's remote learning policy aligns with Washington Administrative Code ([WAC 246-840-546](#)) that outlines the requirements for delivering curriculum in an online environment. Each Nursing program will:

- Deliver curriculum content that is comparable to face-to-face delivery using, CANVAS, Panopto, and Zoom
- Use virtual and high-fidelity simulation to provide students opportunities to practice patient care in a safe and supportive environment
- Utilize CANVAS, the learning management system, to deliver all course work and to facilitate student-to-faculty and student-to-student interactions
- Conduct student course evaluations for all courses offered online
- Safeguard student records in alignment with the college's records retention policy and will follow all HIPAA and FERPA guidelines
- Ensure students have access to virtual and on-campus support services including but not limited to:
  - eLearning
  - Information technology
  - Library resources
  - Tutoring
  - Advising and counseling

### Quality Assurance

The Nursing programs deliver instruction and curriculum content for remote learning students via platforms such as CANVAS, Panopto, Zoom, and Microsoft Teams. Students at GRC use Canvas, a web-based learning management system, to manage course content, maintain consistent interaction between students and faculty, deliver and score student assessments and maintain a gradebook. Experiential learning is delivered via virtual simulation to provide students opportunities to practice patient care in a safe and supportive environment similar to face-to-face instruction.

Distance learning courses are reviewed by Nursing faculty to assure there is alignment with face-to-face instruction as well as alignment with college policies, procedures, and processes and those of NLN CNEA and Washington NCQAC. This includes approved course outlines, class observations, student evaluations, student achievement of program outcomes, grade policy, academic standards and progress,



completion of assignments and exams, and opportunities for professional development for all faculty regardless of teaching modality.

### Security

Canvas is a closed and secure system maintained by eLearning at GRC. It complies with FERPA guidelines related to protected information (names, student ID numbers, etc) with secure encryption protocols. Any add-on services (such as Respondus with LockDown Browser) are also compliant with FERPA guidelines. Only enrolled students and instructors associated with an individual course have access to that specific Canvas shell requiring authentication upon logging in. Students log in using their Green River email address and a personalized password to verify identity. All GRC students are assigned a student identification number (SID) and an email address. Access credentials may not be shared or given to anyone other than the user to whom they were assigned to for any reason. Students are responsible for any and all uses of their account. Students are required to comply with the GRC student code of conduct.

### Maintenance

All Canvas user data is backed up redundantly, stored in highly stable and secure data centers. Canvas requires minimal maintenance to the College; security patches and system upgrade are automatically updated.

### Evaluation

All Nursing faculty (full-time and adjunct) teaching both face-to-face and online are evaluated consistent with the United Faculty Bargaining Agreement. All Nursing department courses administer student course evaluations quarterly. To ensure quality and consistency between online instruction and face-to-face instruction, the curriculum, student achievement of learning outcomes, and results of all evaluations will be analyzed and compared on a quarterly and annual basis.

### Support Services

Students and faculty have access to virtual and on-campus support services including but not limited to:

- [eLearning](#)
- Employee Help Desk for IT support (internal website)
- [Student Help Desk for IT support](#)
- [Library resources](#)
- [Tutoring](#)
- [Advising](#)
- [Virtual Assistance Lobby](#)

Consequences: None

## Records Retention and Security Policy

Purpose: Establish clear guidelines for retaining, maintain, and securing Nursing department records

Scope: Applies to all past, present, and future records applicable to the Nursing programs and students.

Overview: The Nursing department adheres to strict records retention and security to maintain the integrity of the program as well as protect the privacy of the students and patients cared for by program students.

Policy/Procedure: The Nursing department has adopted and adheres to policies and procedures regarding the secure retention of student records in accordance with the general retention schedule as approved by the SBCTC and per [RCW 40.14](#). Records not specified under the RCW are subject to the Washington State's [general retention schedule](#). All student records are maintained confidential and secure for seven years. The Nursing department complies with to Family Educational Rights and Privacy Act (FERPA) and the Health Information Privacy and Accountability Act (HIPAA).

- Student academic records: Student records are maintained in a secure, confidential manner. Student records such as academic records and behavioral contracts are stored on the Nursing department's network drive in individual folders specific to each student. Only the associate dean of nursing and the nursing faculty have access to the electronic student records maintained on the network drive and on CANVAS, the college's learning management system.
- Student health records: Student health records are maintained in a locked file cabinet located in the clinical coordinator's office to which only the clinical coordinator and the associate dean of nursing have access to. The Nursing department is contracting with a third-party software company, EXXAT to store and verify electronic copies of student health records that include student signed HIPAA and FERPA release forms. At the college, only the clinical coordinator and the associate dean of nursing have access to the electronic student records stored in EXXAT. Once the student has been placed with a clinical site, the site's clinical coordinator has access to that student's specific health records required for the clinical placement.

Consequences: None

## References and Letters of Recommendation Policy

Purpose: Establish clear guidelines for students to request faculty and staff letters of recommendations and references

Scope: Applies to all students enrolled in and graduates from a Nursing program

Overview: Nursing faculty are committed to student success through continuing education or employment opportunities.

Policy/Procedure: Nursing faculty will, at their discretion, provide a references or letters of recommendation for students who have received approval from the faculty prior to submitting them as a reference on applications.

- Students must formally request letters of recommendation or faculty references in writing at least three weeks prior to the due date or expected time for reference check. Electronic requests are acceptable. The request must include the following information:
  - Name of Student
  - Name and contact information of the facility where applying
  - Position the student is applying for
  - Current resume that details prior employment history, degrees and/or certificates earned, involvement in student leadership, clubs or activities and any volunteer or civic organization participation
  - Cover letter for the position/program the student is applying for
  - Any form that may be required for the recommendation or reference
- Letters will be submitted to the facility or employer directly, so the student should provide the appropriate contact information in the request.
- Letters will be based on student performances as observed by the Nursing faculty who have interacted with the student and may include issues such as: punctuality, dependability, integrity, potential and ability to function as a team as well as academic and lab competence.
- Students are encouraged to seek recommendations and references from Nursing faculty or staff that are well acquainted with the student's performance clinically and academically.
- Nursing faculty and staff reserve the right to not provide reference or recommendation.

### Consequences:

- Students or graduates do not adhere to the steps outlined in the policy may not receive a references and/or letter of recommendation.

## **Nursing Classroom Theory Standards**

Purpose: To inform students of the Nursing programs' expectations of classroom behavior

Scope: Applies to all students enrolled in a Nursing program

Overview: The philosophy of the Nursing department is that learning is a shared responsibility. Active participation in all theory activities is critical to the student's success in the course and in the program. It is the student's responsibility to commit adequate time to assigned learning activities, i.e., textbook and journal readings, video and film viewings, computer-assisted instructional programs, and clinical skills practice. Student is expected to actively participate in discussion, clarification, validation, critical thinking, role playing in an interactive atmosphere.

### Expectations

- Students need to arrange their daily schedule to receive adequate rest. Students found dozing off or sleeping in class will be required to leave and will not receive credits for that course's participation.
- If the student is unable to attend or anticipates being late, a voice message and email to the faculty is required prior to start time. It is the student's responsibility to obtain lecture notes, handouts, and assignments for the day(s) absent from class.
- Cell phones and other electronic devices are to be left on silent mode in the classroom. Cell phones should not be answered during class. If there is an emergency, the student will be required to leave the classroom and allowed to reenter at the conclusion of the next scheduled break.
- Effective communication will include (reading, writing, speaking) the ability to process and communicate information in a timely, succinct, yet comprehensive manner. Demonstration of responsive, empathetic listening to establish rapport. Recognition of the significance of nonverbal responses is required. Fluency in the English language will be necessary as it is used for the licensure exam.
- Children are not allowed in theory courses. Students are expected to arrange for appropriate child care.

### Canceled Classes

On occasion, the college may cancel all course due to weather conditions. In that case, the college will announce cancellations via Green River safety alerts and on the college website. To sign up for college alerts and notifications, see the [Green River emergency and safety alerts website](#) for instructions. If the Nursing faculty is notified of the cancellation, the cancellation will be announced via Canvas or email. In the event that the Nursing faculty need to cancel a class, the cancellation will be announced via CANVAS or email.

### Dress and Personal Hygiene

- Students are assuming new roles and responsibilities and therefore, are expected to be professional in appearance. Students' public presentation (i.e.: dress, make-up, hair style, facial expressions, verbal and non-verbal communication, demeanor) projects a professional image to clients and health care providers. As students in a Nursing program, they represent Green River College and the nursing profession, so faculty expect students to uphold a positive, professional image during program activities.
- Expectation of cleanliness includes adherence to oral and personal hygiene, freshly laundered and properly fitted clothing, and avoidance of strong odors and fragrances. Unacceptable clothing for either gender includes: shirts of underwear type, see-through clothing, sleeveless shirts or any clothing that exposes a bare midriff, back, chest or underwear.

### Evaluation and Grading

Evaluation and grading are based upon the students' theoretical knowledge and the application of knowledge and skills in the clinical setting. Since students will work in critical life situations, their clinical performance must reflect safe and competent nursing care of increasing complexity.

Students must maintain a decimal grade of 2.5 or higher in all theory courses.

All theory courses are graded using a numerical grade point. The numerical grade assigned for each course is based on percent score by dividing the total points achieved by the students by the total possible points for the course. For an example, if there are 20 questions on an exam and the student answers 16 out of 20 questions correctly, the percent score for the exam would 80%. The percent score would then be converted to a course grade using the Nursing department's GPA conversion table that can be found in each course syllabus.

<b>Grade Point</b>	<b>Percentage</b>	<b>Grade Point</b>	<b>Percentage</b>
4.0	98-100%	2.4	79%
3.9	97%	2.3	78%
3.8	95-96%	2.2	77%
3.7	94%	2.1	76%
3.6	93%	2.0	75%
3.5	91-92%	1.9	74%
3.4	90%	1.8	73%
3.3	89%	1.7	72%
3.2	88%	1.6	71%
3.1	86-87%	1.5	70%
3.0	85%	1.4	69%
2.9	84%	1.3	68%
2.8	83%	1.2	67%
2.7	82%	1.1	66%

<b>Grade Point</b>	<b>Percentage</b>	<b>Grade Point</b>	<b>Percentage</b>
2.6	81%	1.0	65%
2.5	80%	0.0	Below 65%

### Late assignments

Students will receive a 10% deduction for each day that assignments are late. The penalty is calculated based on the total points for the assignment. Assignments are late if they are not turned into the faculty by end of class day of the day that the assignment is due or as determined by the faculty. Late in-class assignments and discussion forum posts will not receive credit unless stated otherwise by the faculty. Assignments that are more than four (4) days late will not be accepted unless the faculty and student have mutually agreed upon an alternative submission date in advance.

### Incomplete

The student may receive an incomplete grade when course work cannot be completed in a given quarter as the result of a serious illness or other justifiable cause. When an incomplete grade is given, the student and the faculty must have a mutually agreed upon plan for completion.

### Written assignments

- Late written papers, assignments, or projects will receive a 10% deduction each day they are late up to four (4) days, unless prior arrangements have been made with the faculty. Written papers, assignments, or projects that are more than four (4) days late will not be accepted and given a zero grade.
- All written papers, assignments, and projects must use the American Psychological Association (APA) formatting, unless otherwise directed by faculty. For more information, see the [Holman Library APA citation guide](#).

### Exams

Theory courses provide the knowledge basis for safe practice in the lab. Students are expected to attend each scheduled theory course exam. Students unable to take an exam on the dates scheduled due to illness or other extenuating circumstances will receive a 10% deduction, unless prior arrangements have been made with the faculty. Students who are not able to take the final exam are unable to progress and be dismissed from the program and subject to the re-entry policy.

Students receiving less than 76% on an exam are given a [collaborative performance plan](#) that identifies strategies and resources to be successful on future exams. Students receiving less than 76% on three exams in any given course are unable to transfer theory to lab and clinical application and therefore not able to progress in the program. The students will be dismissed from the program and subject to the re-entry policy. There will be no additional make-up work or extra credit.

### On Exam Day

- Arrive 15 minutes before the exam is scheduled to begin. Be prepared, remain calm, and think positive.
- No personal or phone calculators, phrase books, dictionaries, CD's, tape recorders, or any type of earphone devices will be permitted during the exam, unless approved by the faculty prior to the exam.
- Phones must be turned off and put away.
- If the exam is on paper, desks are to be clear with exception of writing utensil, Scantron, and program provided calculator, if appropriate.
- If the exam is computerized, desks are to be clear and the computer must have the appropriate testing software installed i.e. lockdown browser or honor lock.
- No talking is allowed during the exam.
- Eyes must always be focused on the exam during the exam. Behaviors considered as cheating such as glancing at another student's exam will result in dismissal from the classroom and a zero-exam score.
- Do not leave the room after starting the exam unless completed. Students leaving the classroom for any reason will be required to turn in their exam and the session will be over.
- Once a paper or scantron exam is completed, the exam must be returned to faculty member when finished.
- After leaving the exam room, please be considerate of those still in the classroom and refrain from discussions in the vicinity of other classrooms to keep noise down as other classes will be in session. Once students have exited from classroom, they are not permitted to return to the classroom until the exam session is completed.

### Exam Review

- If the exam is completed on paper or on Scantrons, the exam will be graded, and any incorrect response will be indicated with the correct response next to it. The paper exam or Scantron will be returned to the students within one week of the exam and reviewed as a group during a regularly scheduled class time.
- If the exam is completed on the computer, using CANVAS or other services such as Kaplan, the exam results will show the correct response next to any incorrect responses. Student grades for CANVAS exams will be unavailable until the faculty has reviewed the exam with each student either in person or via ZOOM.
- During a review of an exam, students will not be permitted to write any information down or take photos of exam material. If the review is conducted via ZOOM, the students must have their camera on at all times during the review.
- During a review of an exam in class, faculty will go through the exam and explain the correct responses to all exam questions. Questions of general interest will be reviewed in the classroom. Individual student questions may be answered by a later appointment with the instructor.
- Students may also review their performance on an exam with the faculty by appointment. Students may challenge the scoring of one question on the exam by completing a Question

Challenge Form and submitting it to the appropriate faculty. Students have up to one week (5 business days) to challenge the question score after grades have been posted. Students will be allowed two exam question challenges per quarter, per course.

- Some faculty may allow for a small group exam after the individual exam is completed. Students may not challenge exam questions after group testing.

#### LPN-to-BSN and Practical Nursing Program Specific Exams

- Dosage Calculation Exams

Nurses are required to be proficient in mathematical computations to ensure safe administration of medications and intravenous fluids given to clients. Students in the LPN-to-BSN and the Practical Nursing programs are required to maintain math proficiency throughout the programs. Assessment of student proficiency in math is demonstrated with mathematical dosage calculation exams each quarter prior to attending clinical.

Students are required to pass a dosage calculation exam prior to attending clinical rotations in each lab/clinical quarter. The exams are graded as a pass (100%) or fail (less than 100%). Students are given three opportunities to pass each dosage calculation exam. Remediation will be given to students who fail the second exam with one final opportunity to pass a third attempt at the dosage calculation exam. Students who do not pass the third dosage calculation exam for any course will be dismissed from the program and subject to the Nursing program's re-entry policy.



## **Nursing Skills Laboratory Standards**

**Purpose:** To inform students of the program's expectations of skills lab behavior

**Scope:** Applies to all students enrolled in a Nursing program

**Overview:** The philosophy of the Nursing department is that learning is a shared responsibility. Active participation in all lab activities is critical to the student's success in the course and in the program. The lab activities provide students with opportunities to learn and practice basic skills in preparation for the administration of quality care to patients. The lab setting contains updated learning resources such as audiovisual equipment, scientific charts and models, and disposable and non-disposable supplies utilized in client care. The lab can provide a simulated hospital and clinical environment, with various equipment and life-size manikins to simulate client care situations.

### **Expectations**

- Students need to arrange their daily schedule to receive adequate rest. Students found dozing off or sleeping in class will be required to leave and will not receive credits for that course's participation.
- If the student is unable to attend or anticipates being late, a voice message and email to the faculty is required prior to start time. Any absences beyond 24 hours over the course of the entire program, requires a written assigned doctor's clearance and/or release to work.
- Cell phones and other electronic devices are to be left on silent mode in the skills lab or clinical setting. Cell phones should not be answered during skills lab or clinical setting.
- Effective communication will include (reading, writing, speaking) the ability to process and communicate information in a timely, succinct, yet comprehensive manner. Demonstration of responsive, empathetic listening to establish rapport. Recognition of the significance of nonverbal responses is required. Fluency in the English language will be necessary as it is used for the licensure exam.
- Children are not allowed in skills labs or clinical settings. Students are expected to arrange for appropriate child care.

### **Canceled Skills Lab**

On occasion, the college may cancel all course due to weather conditions. In that case, the college will announce cancellations via Green River safety alerts and on the college website. To sign up for college alerts and notifications, see the [Green River emergency and safety alerts website](#) for instructions. If the Nursing faculty is notified of the cancellation, the cancellation will be announced via Canvas or email. In the event that Nursing faculty need to cancel a skills lab, the cancellation will be announced via CANVAS or email.

### Dress and Personal Hygiene

Students are assuming new roles and responsibilities and therefore, are expected to be professional in appearance. Students' public presentation (i.e.: dress, make-up, hair style, facial expressions, verbal and non-verbal communication, demeanor) projects a professional image to clients and health care providers. As students in the nursing program, they represent Green River College and the nursing profession, so faculty expect students to uphold a positive, professional image during program activities.

Expectation of cleanliness includes adherence to oral and personal hygiene, and avoidance of strong odors and fragrances. Students must wear assigned uniform to the skills lab on campus, clinical, and simulation lab unless otherwise directed by the Nursing faculty.

### Uniform and Name Tag

Uniforms may be purchased at the Paper Tree Book Store or at another vendor.

- The **LPN-to-BSN Nursing uniform** consists of top and pants or skirt in "Black." The program patch should be attached in the upper left side of the top. The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Practical Nursing uniform** consists of top and pants or skirt in "Caribbean Blue." The program patch should be attached in the upper left side of the top. The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Nursing Assistant uniform** consists of top and pants or skirt in "Forest Green." The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Phlebotomy uniform** consists of top and pants or skirt in "Charcoal Gray."

Uniforms and other clothing worn to the clinical sites must be freshly laundered and unwrinkled. A white or black shirt may be worn under the uniform, but the sleeves of undershirt cannot extend past the wrist. When off-campus as a student of a Nursing program, the nametag and GRC student ID card must be visible at all times and worn on the chest.

Uniform fit must be consistent with a professional appearance. Uniforms must be sized adequately to allow for all movements necessary for client care without exposing any torso skin or chest cleavage. Uniforms cannot be so tight that movements are hampered or reveal unnecessary body forms or undergarment lines. Skirts must be below the knee or above the ankle bone. Uniform pants must be hemmed to the top of the shoe. If a student desires to wear a skirt, any leggings or hosiery must be the same solid color as the uniform or solid/white/black (no print). If a student desires to wear head scarf or wrap, it must be the same solid color as the uniform or solid/white/black (no print). The head scarf or wrap must be a well secured and tucked inside and under the uniform top (scrub) and must be clipped back in a manner so as to not drag across the client. The student's full face must be visible.

Shoes: Clean, white or black leather-like shoes acceptable. Backless, toeless, fabric shoes are unacceptable.

Hosiery: Hosiery or socks are required, and color must be solid white, black or neutral.

Jewelry: Jewelry, other than mentioned below, is not allowed. If the student has a religious reason for wear other jewelry, they need to discuss it with the faculty or the associate dean of nursing.

- Rings: Students may wear one ring as long as it does not pose a threat to client skin integrity. A wedding set constitutes one ring.
- Body Piercings: One pair of inconspicuous pierced earrings is acceptable. For the student's own safety, hoops or dangling-off-the-earlobe earrings are not allowed. No other body piercings can be visible, including tongue rings. Plastic plugs may be used in place of the piercing(s).
- Watch: The watch is considered necessary equipment and must be worn at all times during lab. A constant second digital readout or sweep second hand watch is acceptable. Students without a watch may be considered unprepared and sent home.

Any Nursing student who shows up in lab or clinical in violation of the uniform codes listed above will be sent home, and it will be counted as an unexcused absence.

#### Personal Appearance

- Cosmetics: Make-up, blusher, mascara, eyeliner, applied lightly is acceptable. Exotic stage make-up is unacceptable (heavy, dark). Clear, transparent nail polish on short, clean nails is acceptable. No artificial nails.
- Perfume/Scents: No use of artificial scents of any type (including lotions) is allowed without exception. Many people are allergic to the chemicals used in fragrances, and others find it offensive or it may cause nausea.
- Hairstyles: Natural hair coloring is acceptable. Exotic frosting/streaking is unacceptable. Long hair must be secured, neatly, off the shoulders. Facial hair should be kept clean, trimmed, and neat.
- Tattoos: Some facilities utilized for lab/clinical experience require visible tattoos to be covered either by clothing or a bandage. Visible tattoos are to be minimized when required by a facility.
- Gum: Gum and chewing tobacco are not acceptable in the nursing program.
- Smoking: Smoking creates an added scent to those who smoke and is unacceptable in lab settings as many clients find it offensive and causes nausea. Students who smell of smoke will be sent home. Many healthcare facilities are 'smoke free' environments, and therefore, there is no smoking on the premises. Green River College is a tobacco-free campus. The use tobacco products is not allowed on college property and smoking materials must be extinguished and disposed of prior to entering any college property. This includes cigarettes, e-cigarettes, and smokeless tobacco.

Any Nursing student who shows up in lab or clinical in violation of the personal appearance standards listed above will be sent home, and it will be counted as an unexcused absence. The student with repeated violations may be placed on probation or a [collaborative performance plan](#). If not remediated, the student will be dismissed from the program and subject to the re-entry policy.

#### Injury and/or Body Fluid Exposure in Lab Setting

- The student is expected to follow recommended treatment/steps for injury or body fluid exposure in the lab. Examples of incidents in the lab to report include: any break to skin integrity, needle sticks, body fluid splashes (urine, blood, vomit), neck and back strains, sprains, assaults by clients, or injuries from equipment.
- Injury in the lab must be reported immediately to the nursing faculty so that necessary medical care is provided, and the proper forms are completed. The student and faculty must notify the associate dean of nursing immediately. A Reportable Student/Client/Client Occurrence form is due to the associate dean of nursing within three days of incident.

#### Evaluation and Grading

Evaluation and grading are based upon the students' ability to demonstrate competent and safe practices in lab of increasing complexity. The skills lab allows the students to apply the theoretical knowledge learned in theory to practice.

Nursing students that fail to demonstrate competent care as evidence by commission of unsafe lab practices will receive a [collaborative performance plan](#) or placed on probation. Failure to remediate will result in dismissal from the Nursing program and subject to the re-entry policy.

- Return Demonstration: Assessment of student proficiency in skills lab is done through return demonstrations. Return demonstrations must be successfully completed on campus in skills lab prior to clinical practical experiences as measured by the skills check-off sheets. Each skill performed has a series of steps that must be completed; however, certain steps are clearly marked indicating that those steps are pass/fail steps. If a student fails to successfully demonstrate the pass/fail steps, the student may be allowed additional opportunities to demonstrate the procedure correctly.
- To facilitate success, the student should schedule and complete an adequate practice session before each subsequent return demonstration. Students are encouraged to participate in open skills labs throughout the program to maintain skills learned in previous quarters.

Students must maintain a decimal grade of 2.5 or higher in all skills lab courses. All skills lab courses are graded using a numerical grade point. The numerical grade assigned for each course is based on percent score by dividing the total points achieved by the students by the total possible points for the course. The percent score earned is converted to a course grade using the Nursing department's GPA conversion table that can be found in each course syllabus.

<b>Grade Point</b>	<b>Percentage</b>	<b>Grade Point</b>	<b>Percentage</b>
4.0	98-100%	2.4	79%
3.9	97%	2.3	78%
3.8	95-96%	2.2	77%
3.7	94%	2.1	76%
3.6	93%	2.0	75%
3.5	91-92%	1.9	74%
3.4	90%	1.8	73%
3.3	89%	1.7	72%
3.2	88%	1.6	71%
3.1	86-87%	1.5	70%
3.0	85%	1.4	69%
2.9	84%	1.3	68%
2.8	83%	1.2	67%
2.7	82%	1.1	66%
2.6	81%	1.0	65%
2.5	80%	0.0	Below 65%

#### Late assignments

Students will receive a 10% deduction for each day that assignments are late. The penalty is calculated based on the total points for the assignment. Assignments are late if they are not turned into the faculty by end of class day of the day that the assignment is due or as determined by the faculty. Late in-class assignments and discussion forum posts will not receive credit unless stated otherwise by the faculty. Assignments that are more than four (4) days late will not be accepted unless the faculty and student have mutually agreed upon an alternative submission date in advance.

#### Incomplete

The student may receive an incomplete grade when course work cannot be completed in a given quarter as the result of a serious illness or other justifiable cause. When an incomplete grade is given, the student and the faculty must have a mutually agreed upon plan for completion.

#### Written assignments

- Late written papers, assignments, or projects will receive a 10% deduction each day they are late up to four (4) days, unless prior arrangements have been made with the faculty. Written papers, assignments, or projects that are more than four (4) days late will not be accepted and given a zero grade.
- All written papers, assignments, and projects must use the American Psychological Association (APA) formatting, unless otherwise directed by faculty. For more information, see the [Holman Library APA citation guide](#).

## **Nursing Clinical Site Standards**

Purpose: To inform students of the Nursing program's expectations of student behavior at clinical sites

Scope: Applies to all students enrolled in a Nursing program

Overview: The Nursing department utilizes a variety of sites for learning experiences to enable the student to observe and practice safe nursing care of persons at each stage of the human life cycle. These experiences will include opportunities for the student to learn and provide nursing care to clients in the areas of acute and chronic illnesses, promotion and maintenance of wellness, prevention of illness, rehabilitation, and support in death. Clinical experiences will include opportunities to learn and provide care to clients from diverse ethnic and cultural backgrounds. The experiences may include, but need not be limited to, hospitals, clinics, offices of health professionals, health centers, nursery schools, elementary and secondary schools, rehabilitation centers, mental health clinics, public health departments, and extended care resources.

Clinical facilities will be selected to provide learning experience of sufficient number and kind for student achievement of the course/curriculum objectives. The number of hours of class and clinical practice opportunities and distribution of these shall be in direct ratio to the amount of time necessary for the student at the particular stage of development to accomplish the objectives.

### Clinical Site Preparation and Participation Standards

Students will review the clinical standards and complete, with benchmark competence, the required learning activities, assignments and skills check-offs prior to the assigned clinical experience. The student will update, and review previously learned skills as necessary to maintain a safe and acceptable level of performance.

### Orientation

- Students are required to complete clinical agency orientations. In addition to standards set by Green River College Nursing Programs, students will follow the procedures and policies of the clinical site when assigned to clinical experienced in that agency.

### Scope of Practice

- Students are only allowed practice those skills authorized by their clinical instructor upon return demonstration of the skill. Students are required to keep their quarterly skills sheets on them at all times during clinical rotations. Failure to practice within the students' approved scope is considered unsafe and may lead to dismissal from the program.

### Scheduling and Assignments

- Experiences are designed to help the student meet the objectives of the various levels in the program. The clinical facility size, availability, client census, student level, and theory content are considered. Schedules will be handed out at the beginning of each quarter so that students can make personal arrangements for transportation, job scheduling, and child care. In some quarters, day/evening assignments and non-class day special experiences and travel to include up to 60 miles one-way to the clinic site are required. On occasion, clinical rotation schedules may be changed by the clinical site with little notice. Clinical site assignments are determined by the Nursing department.
- Client/patient assignments for each clinical rotation will be made by the faculty or site preceptor. Only the faculty or site preceptor has the right to alter a student's assignment as needed to meet learning objectives. When selecting clients for rotations, students must follow the direction of the faculty or site preceptor. It is expected that the student will select a variety of clients with diagnoses consistent with the learning content of the theory classes, if possible, and those that will facilitate the most learning opportunities for the student. The faculty or site preceptor is to be notified immediately if the assignment is altered in any way, i.e., client discharge or transfer. Students are expected to be in assigned areas only.
- It is unacceptable to refuse a client assignment. This action will result in disciplinary measures which could include dismissal from the program. If the client assignment is a relative or friend of the student, the faculty or site preceptor must be notified immediately.
- Students are responsible for securing their own valuables in the clinical site. Most nursing units do not have lockers nor any other secured storage available to students for personal belongings.
- Students are not allowed to be in the clinical area outside of assigned times and assigned units without written permission from the faculty. Students are not permitted to leave their clinical site for any reason during a scheduled shift without permission from their faculty.
- Students must not engage in any personal relationships including nurse-to-student relationships or student-to-patient relationships at any time during the clinical rotation.

### Clinical Computer Access

- If a student is employed at an agency and has access to the agency's computer system, the student may not use their employee access during student clinical time.
- The agencies that allow nursing student access to their computer records will assign such access according to their agency policies and guidelines. Each student will be informed of the agency's computer policy/guidelines during orientation.
- Students are not permitted to bring a personal laptop or tablet to the clinical without the permission of the faculty or preceptor.
- Failure to abide by the computer policy/guidelines may result in dismissal from the Nursing program.

### Employment During Clinical Experiences

- Students are not permitted to work during the twelve hours prior to the clinical experience to ensure they can provide safe, quality care.

- It is recommended that the student not jeopardize their health or their standing in the Nursing program by maintaining full-time employment.

### Expectations

- Students need to arrange their daily schedule to receive adequate rest and be able to fully participate in clinical experiences.
- If the student is unable to attend or anticipates being late, a voice message and email to the faculty is required prior to start time. If a student is working with a preceptor, the preceptor must also be contacted prior to the start time of the rotation. Any absences beyond 24 hours over the course of the entire program, requires a written assigned doctor's clearance and/or release to work.
- Cell phones and other electronic devices are to be left on silent mode in the clinical setting. Cell phones should not be answered during the shift at the clinical setting.
- Effective communication will include (reading, writing, speaking) the ability to process and communicate information in a timely, succinct, yet comprehensive manner. Demonstration of responsive, empathetic listening to establish rapport. Recognition of the significance of nonverbal responses is required. Fluency in the English language will be necessary as it is used for the licensure exam.
- If a student is feeling ill, they are not permitted to participate in clinical and must contact their faculty or preceptor prior to start time. Student are not allowed to return to clinical until the symptoms resolve, or if medical attention was required, a doctor's clearance has been provided to the Nursing department.

### Canceled Clinical

On occasion, the clinical site or the college may cancel due to weather or other concerns. In the case that the college cancels, the cancellation will be announced via Green River safety alerts and on the college website. To sign up for college alerts and notifications, see the [Green River emergency and safety alerts website](#) for instructions. In the case that the clinical site cancels, Nursing faculty will notify the student.

### Dress and Personal Hygiene

Students are assuming new roles and responsibilities and therefore, are expected to be professional in appearance. Students' public presentation (i.e.: dress, make-up, hair style, facial expressions, verbal and non-verbal communication, demeanor) projects a professional image to clients and health care providers. As students in a Nursing program, they represent Green River College and the nursing profession, so faculty expect students to uphold a positive, professional image during program activities.

Expectation of cleanliness includes adherence to oral and personal hygiene, and avoidance of strong odors and fragrances. Students must wear assigned uniform to the skills lab on campus, clinical, and simulation lab unless otherwise directed by the Nursing faculty.



### Uniform and Name Tag

Uniforms may be purchased at the Paper Tree Book Store or at another vendor.

- The **LPN-to-BSN Nursing uniform** consists of top and pants or skirt in “Black.” The program patch should be attached in the upper left side of the top. The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Practical Nursing uniform** consists of top and pants or skirt in “Caribbean Blue.” The program patch should be attached in the upper left side of the top. The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Nursing Assistant uniform** consists of top and pants or skirt in “Forest Green.” The student is required to wear a name tag with their name and program that can be purchased in the bookstore as well as the GRC student id.
- The **Phlebotomy uniform** consists of top and pants or skirt in “Charcoal Gray.”

Uniforms and other clothing worn to the clinical sites must be freshly laundered and unwrinkled. A white or black shirt may be worn under the uniform, but the sleeves of undershirt cannot extend past the wrist. When off-campus as a student of a Nursing program, the nametag and GRC student ID card must be visible at all times and worn on the chest.

Uniform fit must be consistent with a professional appearance. Uniforms must be sized adequately to allow for all movements necessary for client care without exposing any torso skin or chest cleavage. Uniforms cannot be so tight that movements are hampered or reveal unnecessary body forms or undergarment lines. Skirts must be below the knee or above the ankle bone. Uniform pants must be hemmed to the top of the shoe. If a student desires to wear a skirt, any leggings or hosiery must be the same solid color as the uniform or solid/white/black (no print). If a student desires to wear head scarf or wrap, it must be the same solid color as the uniform or solid/white/black (no print). The head scarf or wrap must be a well secured and tucked inside and under the uniform top (scrub) and must be clipped back in a manner so as to not drag across the client. The student’s full face must be visible.

Shoes: Clean, white or black leather-like shoes acceptable. Backless, toeless, fabric shoes are unacceptable.

Hosiery: Hosiery or socks are required, and color must be solid white, black or neutral.

Jewelry: Jewelry, other than mentioned below, is not allowed. If the student has a religious reason for wear other jewelry, they need to discuss it with the faculty or the associate dean of nursing.

- Rings: Students may wear one ring as long as it does not pose a threat to client skin integrity. A wedding set constitutes one ring.

- **Body Piercings:** One pair of inconspicuous pierced earrings is acceptable. For the student's own safety, hoops or dangling-off-the-earlobe earrings are not allowed. No other body piercings can be visible, including tongue rings. Plastic plugs may be used in place of the piercing(s).
- **Watch:** The watch is considered necessary equipment and must be worn at all times during lab. A constant second digital readout or sweep second hand watch is acceptable. Students without a watch may be considered unprepared and sent home.

Any student who shows up in lab or clinical in violation of the uniform codes listed above will be sent home, and it will be counted as an unexcused absence.

### Personal Appearance

- **Cosmetics:** Make-up, blusher, mascara, eyeliner, applied lightly is acceptable. Exotic stage make-up is unacceptable (heavy, dark). Clear, transparent nail polish on short, clean nails is acceptable. No artificial nails.
- **Perfume/Scents:** No use of artificial scents of any type (including lotions) is allowed without exception. Many people are allergic to the chemicals used in fragrances, and others find it offensive or it may cause nausea.
- **Hairstyles:** Natural hair coloring is acceptable. Exotic frosting/streaking is unacceptable. Long hair must be secured, neatly, off the shoulders. Facial hair should be kept clean, trimmed, and neat.
- **Tattoos:** Some facilities utilized for lab/clinical experience require visible tattoos to be covered either by clothing or a bandage. Visible tattoos are to be minimized when required by a facility.
- **Gum:** Gum and chewing tobacco are not acceptable in the nursing program.
- **Smoking:** Smoking creates an added scent to those who smoke and is unacceptable in lab settings as many clients find it offensive and causes nausea. Students who smell of smoke will be sent home. Many healthcare facilities are 'smoke free' environments, and therefore, there is no smoking on the premises. Green River College is a tobacco-free campus. The use tobacco products is not allowed on college property and smoking materials must be extinguished and disposed of prior to entering any college property. This includes cigarettes, e-cigarettes, and smokeless tobacco.

Any Nursing student who shows up in lab or clinical in violation of the personal appearance standards listed above will be sent home, and it will be counted as an unexcused absence. The student with repeated violations may be placed on probation or a [collaborative performance plan](#). If not remediated, the student will be dismissed from the Nursing program and subject to the re-entry policy.

### HIPAA Guidelines for Clinicals

The student will consider all information obtained regarding the client's status as strictly confidential and will not discuss the client with anyone except the instructors, peers assigned to the same clinical facility/area, and appropriate hospital personnel. Students are expected to adhere to clinical facility policies around use of electronics in client care areas to avoid violations of HIPAA and legal ramifications for themselves, their faculty, the healthcare facility and the nursing program.

- Consider all information obtained as strictly confidential. Confidentiality of client information is a requirement and a major concern of the nursing program.
- Refer to staff or physician by title only (i.e. CNA, LPN, RN, or MD). No names of cities or hospitals should be used.
- All potentially identifying information should be destroyed (notes, rough drafts). Please be sure that material is screened ahead of time, if in doubt, discuss with the nursing faculty.
- Students will abide by the hospital policy and lab faculty directions regarding use of the hospital copy machine and client information.
- No portion of a client's chart or record may be photographed or copied.
- Any forms with client information (whether instructor or hospital provided) are to be destroyed prior to leaving the clinical area.
- Students must not disclose patient identifiers in any verbal or written work.

Any student who violates the HIPAA guidelines during their clinical rotation is subject to dismissal from the Nursing program and not eligible for re-entry.

### Personal Protective Equipment

The student is expected to wear appropriate protection to prevent body fluid exposure, including goggles or face shield, gloves, and plastic gown, if needed. Personnel are professionally and ethically obligated to provide client care with respect for human dignity. Student assignments may include clients who are at risk for contracting or have an infectious disease such as HIV, AIDS, HBV, and TB.

### Injury and/or Body Fluid Exposure in Clinical Setting

- The student is expected to follow recommended treatment/steps for injury or body fluid exposure of the clinical site. Examples of incidents in the clinical areas to report include: any break to skin integrity, needle sticks, body fluid splashes (urine, blood, vomit), neck and back strains, sprains, assaults by clients, or injuries from equipment.
- Injury in the clinical lab must be reported immediately to the Nursing faculty so that necessary medical care is provided, and the proper forms are completed. The student and their faculty must notify the associate dean of nursing within eight hours of such injury. A Reportable Student/Client/Client Occurrence form is due to the associate dean of nursing within three days of incident.
- In cases of injury or illness, the appropriate clinical facility personnel, such as the Risk Manager and/or Infection Control Practitioner, should be notified as soon as possible along with the unit nurse manager and/or the hospital director.

### Evaluation and Grading

Evaluation and grading are based upon the students' ability to demonstrate competent and safe practices in clinical setting of increasing complexity. The clinical setting allows the students to apply the theoretical knowledge learned in theory to practice.

Students that fail to demonstrate competent care as evidence by commission of unsafe clinical practices will be subject to the unsafe clinical practices policy.

Students must maintain a decimal grade of 2.5 or higher in all skills lab courses.

All skills lab courses are graded using a numerical grade point. The numerical grade assigned for each course is based on percent score by dividing the total points achieved by the students by the total possible points for the course. The percent score earned is converted to a course grade using the Nursing department's GPA conversion table that can be found in each course syllabus.

**Table 12. Nursing Department GPA Conversion Table**

<b>Grade Point</b>	<b>Percentage</b>	<b>Grade Point</b>	<b>Percentage</b>
4.0	98-100%	2.4	79%
3.9	97%	2.3	78%
3.8	95-96%	2.2	77%
3.7	94%	2.1	76%
3.6	93%	2.0	75%
3.5	91-92%	1.9	74%
3.4	90%	1.8	73%
3.3	89%	1.7	72%
3.2	88%	1.6	71%
3.1	86-87%	1.5	70%
3.0	85%	1.4	69%
2.9	84%	1.3	68%
2.8	83%	1.2	67%
2.7	82%	1.1	66%
2.6	81%	1.0	65%
2.5	80%	0.0	Below 65%

### Late assignments

Students will receive a 10% deduction for each day that assignments are late. The penalty is calculated based on the total points for the assignment. Assignments are late if they are not turned into the faculty by end of class day of the day that the assignment is due or as determined by the faculty. Late in-class assignments and discussion forum posts will not receive credit unless stated otherwise by the faculty. Assignments that are more than four (4) days late will not be accepted unless the faculty and student have mutually agreed upon an alternative submission date in advance.

### Incomplete

The student may receive an incomplete grade when course work cannot be completed in a given quarter as the result of a serious illness or other justifiable cause. When an incomplete grade is given, the student and the faculty must have a mutually agreed upon plan for completion.

### Written assignments

- Written assignments in clinical setting are subject to HIPAA rules.
- Late written papers, assignments, or projects will receive a 10% deduction each day they are late up to four (4) days, unless prior arrangements have been made with the faculty. Written papers, assignments, or projects that are more than four (4) days late will not be accepted and given a zero grade.
- All written papers, assignments, and projects must use the American Psychological Association (APA) formatting, unless otherwise directed by faculty. For more information, see the [Holman Library APA citation guide](#).

### Pre/Post conferences

Pre/Post conferences are scheduled for students to discuss their learning experiences, as well as to explore client nursing issues. Students are required to be on time and to be adequately prepared. A pre/post conference absence is considered a clinical absence unless otherwise directed by Nursing faculty.

## LPN-to-BSN Nursing Program Specific Clinical Evaluations

### Clinical Performance Evaluation

The LPN-to-BSN Nursing program uses a [clinical evaluation tool](#) in all clinical courses to assess student achievement of the program's core competencies. Each Nursing course builds on prior knowledge, skills, and behaviors. All clinical learning experiences will be evaluated at midpoint and upon completion of each quarter and/or as needed determined by the faculty. Students who are not meeting the clinical outcomes will meet with faculty to discuss progress and/or entered into remediation as needed.

- Each student will complete a self-evaluation twice during the quarter using the clinical evaluation tool, once at midterm and once as a final.
- The clinical Nursing faculty assigned to the clinical will evaluate the student twice during the quarter using the clinical evaluation tool, once at midterm and once as a final.
- The clinical faculty and student will meet in person or online to discuss the midpoint evaluation findings.
  - Each competency has a number of expected behaviors that will be scored using the scale 1 being “Does Not Meet Expectations” to 4 being “Above Expectations.”
  - Student evaluation: For each competency behavior, the student must assess their level of proficiency or performance using a scale between 1 to 4.
  - Clinical faculty evaluation: For each competency behavior, the faculty will assess the student's level of proficiency or performance using a scale between 1 to 4.
  - For the midterm clinical evaluation, the faculty will score student's overall level of proficiency or performance out of 100%. If the faculty scores the student below “meets expectation” in any competency behaviors, the faculty will initiate remediation for the student that may include a [collaborative performance plan](#) or probation.
  - For the final clinical evaluation, if the faculty score the student below “meets expectation” in **more than two** competency behaviors for the quarter, the student will be dismissed from the program and subject to the re-entry policy. If the faculty score the student below “meets expectation” for up to two competency behaviors, the faculty may put the student on probation to address the student's performance moving forward. If student is on probation and does not meet or exceed the expected proficiency or performance level by the end of the following quarter, the student is dismissed from the program and subject to the re-entry policy. If the student receives a final benchmark score of one (1) for any competency behavior, the student will be subject to the unsafe clinical practices policy.
- All students at midpoint will identify 3 areas of growth to achieve by final evaluation.
- A score of “4” requires the student to write an example demonstrating above expectations. Clinical Faculty and student will collaboratively meet to agree.

## Grading Guidelines

Clinical performance will be evaluated using the following scale:

### **A number "4" score:** Above Expectations

- Demonstrates all the attributes of "3" meets expectations.
- Functions consistently with **minimum** guidance in the clinical situation.
- Recognized by staff, peers, patients, families, or community as practicing above and beyond expectations for course objectives.
- A score of "4" requires the student to write an example demonstrating above expectations. Clinical Faculty and student will collaboratively meet to agree.
- Engages **consistently** in self-direction in approach to learning.

### **A number "3" score:** Meets Expectations

- Functions satisfactorily with **moderate to minimum** guidance in the clinical setting.
- Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes among interdisciplinary team members.
- **Occasional** prompting for engaging in self-direction in approach to learning.
- Provides evidence of preparation for all clinical learning experiences.
- Follows directions and performs evidence-based care safely.
- Identifies own learning needs and seeks appropriate assistance.
- Demonstrates continued improvement during the clinical experience.
- Demonstrates clinical judgment and effective decision making.

### **A number "2" score:** Below Expectations

- Functions safely with **moderate to extensive** amount of guidance in the clinical situation.
- Demonstrates adequate knowledge and requires **moderate** assistance in integrating knowledge with skills.
- Requires some direction in recognizing and utilizing learning opportunities.

### **A number "1" score:** Does Not Meet Expectations

- Requires **intense** guidance for the performance of activities at a safe level.
- Clinical performance reflects difficulty in the provision of nursing care.
- Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills.
- Requires **frequent and detailed** instructions regarding learning opportunities and is often unable to utilize them.
- Is often **unprepared** and has **limited insight** into own behavior.
- Is **unable** to identify own learning needs and neglects to seek appropriate assistance.
- Not dependable.
- Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality.

### **A N/A score:** Not in this clinical course

### Core Competencies

- **Human Flourishing:** Incorporate the knowledge and skills learned in didactic and clinical courses to help patients, families, and communities.
- **Nursing Judgement:** Make judgments in practice, substantiated with evidence, that synthesize nursing science and knowledge from other disciplines in the provision of safe, quality care and promote the health of patient's families, and communities.
- **Personal Identity:** Express one's identity as a nurse through actions that reflect integrity, a commitment to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients, families, and communities, and a willingness to provide leadership in improving care.
- **Spirit of Inquiry:** Act as an evolving scholar who contributes to the development of the science of nursing practice by identifying questions in need of study, critiquing published research, and using available evidence as a foundation to propose creative, innovative, or evidence-based solutions to clinical practice problems.



## Practical Nursing Program Specific Clinical Evaluations

### Clinical Performance Evaluation

The Practical Nursing program uses a [clinical evaluation tool](#) in all clinical Nursing courses to assess student achievement of the program's core competencies. Each Nursing course builds on prior knowledge, skills, and behaviors. All clinical learning experiences will be evaluated at midpoint and upon completion of each quarter and/or as needed determined by the faculty. Students who are not meeting the clinical outcomes will meet with faculty to discuss progress and/or entered into remediation as needed.

- Each student will complete a self-evaluation twice during the quarter using the clinical evaluation tool, once at midterm and once as a final.
- The clinical Nursing faculty assigned to the clinical will evaluate the student twice during the quarter using the clinical evaluation tool, once at midterm and once as a final.
  - Each competency has a number of expected behaviors with a benchmark score representing a level of proficiency or performance expected by the faculty of the student for each quarter.
  - The benchmark score increases each quarter in the level of expected proficiency as it builds on the student's knowledge, skills, and behaviors from quarter to quarter.
  - Student evaluation: For each competency behavior, the student must assess their level of proficiency or performance using a scale between 0 to 5, with 0 representing not meeting safety standards of the profession and 5 representing being able to perform the competency behavior independently (see below for grading scale).
  - Clinical faculty evaluation: For each competency behavior, the faculty will assess the student's level of proficiency or performance using a scale between 0 to 5, with 0 representing not meeting safety standards of the profession and 5 representing being able to perform competency independently (see below for grading scale).
  - For the midterm clinical evaluation, the faculty will score student's overall level of proficiency or performance as either "S" (satisfactory) or "U" (unsatisfactory). If the faculty scores the student below benchmark score in any competency behaviors, the faculty will initiate remediation for the student that may include a [collaborative performance plan](#) or probation.
  - For the final clinical evaluation, if the faculty score the student below benchmark score in **more than two** competency behaviors for the quarter, the student will be dismissed from the program and subject to the re-entry policy. If the faculty score the student below the benchmark scores for up to two competency behaviors, the faculty may put the student on probation to address the student's performance moving forward. If student is on probation and does not meet or exceed the expected benchmark proficiency or performance level by the end of the following quarter, the student is dismissed from the program and subject to the re-entry policy. If the student receives a final benchmark score of zero (0) for any competency behavior, the student will be subject to the unsafe clinical practices policy.

### Grading Guidelines

Clinical performance will be evaluated using the following scale:

- **Level 5:** Expert: Able to perform fluid, flexible and effective, evidence-based care; independent.
- **Level 4:** Proficient: Wholistic understanding; learns and adapts to modify plan; independent to little supervision/direction required.
- **Level 3:** Competent: Connects theory to practice; performs independent with minimal supervision or direction.
- **Level 2:** Novice: Begins to make connection of theory to practice; focus on skill acquisition; requires direction.
- **Level 1:** Fundamental Awareness: Basic understanding of technique and content; unable to perform without supervision.
- **Level 0:** Unsafe: Does not meet the safety standards of the profession
- **N/A:** Not applicable to this course.

### Core Competencies

- **Human Flourishing:** Promote the human dignity, integrity, self-determination and personal growth of patients, their families, and oneself to provide individualized, culturally appropriate, relationship centered nursing care.
- **Nursing Judgement:** Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care for diverse patients and their families in collaboration with the health care team.
- **Personal Identity:** Articulate a unique role as a member of the health care team, committed to evidence-based practice, caring, advocacy, and safe quality care, to provide optimal health care for diverse patients and their families.
- **Spirit of Inquiry:** By collaborating with health care team members, utilize evidence, tradition, and patient preferences in predicable patient care situation to promote optimal health status.

Appendices



**Appendix A: Acknowledgement of Handbook, Policies, Requirements, and Expected Standards**

I have read the entire Nursing Student Handbook and understand my responsibilities as a student in a Green River College Nursing Program. I understand that I am to be accountable and I agree to comply with the policies, program requirements, and expected standards set forth in the handbook.

I also understand that a violation of any of the policies, program requirements, or expected standards set forth in the handbook can subject me to remediation and/or to be dismissed from the program. Since the information in this handbook is subject to change, I understand that any policy changes supersede or eliminate the policies listed in this handbook. I understand that any changes will be clearly communicated in writing to students enrolled in the Nursing programs, and I am responsible for staying abreast with program communication shared via bulleting postings, email, and CANVAS.

I have received program course information. I am aware that I can find the Green River College Catalog online at GRC Catalog.

---

Student Name (Printed)

Student Initials

---

Student Signature

Date

## Acknowledgement and Understanding of Program Policies

### Directions

- Read each policy listed in the handbook. To indicate your acknowledgement and understanding of each policy, please note the page number and initial by each policy listed below.
  - All Nursing students must acknowledge they understand the Nursing department policies.
  - Each Nursing student must acknowledge they understand their program specific policies.
- By initialing each policy, you are agreeing to abide by said policy and understand that a policy violation may subject you to remediation or dismissal from the program.

Nursing Department Policies All Students/Programs	Page Number	Student Initials
Unsafe Clinical Practices Policy		
Impaired Student Policy		
Professional Behaviors Policy		
Electronic Device & Social Media Use Policy		
Academic Honesty, Plagiarism, and Cheating Policy		
Problem Grievance-Resolution Policy		
Nursing Program Harassment Policy		
Academic Probation Policy		
Collaborative Performance Plan Policy		
Attendance/Participation Policy		
Safety and Technical Standards Policy		
Remote Learning Modalities Policy		
References and Letters of Recommendation Policy		

LPN-to-BSN Program Specific Policies	Page Number	Student Initials
Clinical Requirements Policy		
Clinical Placements Policy		
LPN-to-BSN Dismissal and Re-Entry Policy		
Medication Administration by LPN-to-BSN Students Policy		
LPN-to-BSN Use of an Automated Drug Dispensing Device Policy		
LPN-to-BSN Nursing Kaplan Policy		
LPN-to-BSN Question Challenge Policy		
LPN-to-BSN Graduation Policy		

<b>Practical Nursing Program Specific Policies</b>	<b>Page Number</b>	<b>Student Initials</b>
Clinical Requirements Policy		
Clinical Placements Policy		
Practical Nursing Dismissal and Re-Entry Policy		
Medication Administration by Nursing Students Policy		
Practical Nursing Use of an Automated Drug Dispensing Device Policy		
Practical Nursing Kaplan Policy		
Practical Nursing Question Challenge Policy		
Practical Nursing Graduation Policy		

<b>Nursing Assistant Program Specific Policies</b>	<b>Page Number</b>	<b>Student Initials</b>
Clinical Requirements Policy		
Clinical Placements Policy		
Nursing Assistant Program Dismissal and Re-Entry Policy		

<b>MA-Phlebotomy Program Specific Policy</b>	<b>Page Number</b>	<b>Student Initials</b>
MA-Phlebotomy Program Dismissal and Re-Entry Policy		

<b>Advanced MA-Phlebotomy Program Specific Policies</b>	<b>Page Number</b>	<b>Student Initials</b>
MA-Phlebotomy Program Dismissal and Re-Entry Policy		
Clinical Requirements Policy		
Clinical Placements Policy		

## Appendix B: Immunization Information

### Tuberculosis Screening

#### Two-Step TB Testing:

The two-step tuberculin skin test (TST) is used to detect individuals with past tuberculosis (TB) infection.

Appointment schedule for two-step testing:

#### Visit 1, day 1

The first TST is given to the applicant/student and he/she is told to return in 48 to 72 hours for the test to be read. If the applicant/student does not return within 72 hours he/she will need to be rescheduled for another skin test.

#### Visit 2, Day 2-3

The first TST is evaluated, measured, and interpreted. The results are documented in millimeters of the induration (palpable, raised, hardened area or swelling).

- If the first TST is negative, the applicant/student is given an appointment to return for a second test in 7 – 21 days.
- If the first TST is positive, it indicates that the applicant/student is infected with TB. No further testing is indicated. The applicant/student will be referred for a chest x-ray and physician evaluation. An asymptomatic applicant/student, whose chest x-ray indicates no active disease, may attend class/clinical.

#### Visit 3, Day 7-21

The second TST will be given to all applicants/students whose first test was negative, using the alternate arm and he/she is told to return in 48 to 72 hours for the test to be read. If the applicant/student does not return within 72 hours he/she will need to be rescheduled to begin the entire series again.

#### Visit 4, 48-72 hours after the second test

The second TST is evaluated, measured, and interpreted. The results are documented in millimeters of induration (palpable, raised, hardened area or swelling).

- If the second TST is negative, the applicant/student is not infected.
- If the second test is positive, it indicates that the applicant/student is infected with TB. No further testing is indicated. The applicant/student will be referred for a chest x-ray and physician evaluation. An asymptomatic applicant/student, whose chest x-ray indicates no active disease, may attend class/clinical.

#### Annual TST

If the applicant/student's two-step TST will expire during the program the student will be required to get a one-step TB test no more than 12 months since their last TST the previous year

(for example if the first TST was done on 6/1/2017 and the second on 6/13/2017, the student needs to have the annual TST placed BEFORE 6/1/2018).

- If the second TST is negative, the applicant/student is not infected.
- If the second test is positive, it indicates that the applicant/student is infected with TB. No further testing is indicated. The applicant/student will be referred for a chest x-ray and physician evaluation. An asymptomatic applicant/student, whose chest x-ray indicates no active disease, may attend class/clinical.

#### IGRA Testing (Quantiferon)

A blood test that aids in the detection of Mycobacterium tuberculosis, the bacteria which causes tuberculosis (TB). Note: for some clinical sites, a 2-step TST may still be required.

#### **Influenza**

Getting an annual flu vaccine is the first and best way to protect yourself and those you care for from the flu. There are many different flu viruses and they are constantly changing. The flu vaccines are reviewed and updated annually to match the circulating flu viruses.

The vaccination usually becomes available in late summer/early fall and is available at local pharmacies. It is the student's responsibility to ensure that the vaccination is for the current year. This program requires that all students receive the annual flu vaccine or sign a declination form. However, specific healthcare institutions may require vaccination without exception, alternate clinical rotation arrangements will not be made.

#### **Hepatitis B**

The Hepatitis B vaccination is a series of 3 intramuscular injections completed at appropriate time intervals (1 and 6 months after the initial dose) and a post vaccination titer (blood draw) at 6-8 weeks after the series completion. If the titer is negative, then the series is repeated, and another titer is drawn 6-8 weeks after the completion of the second series.

Students may also provide documentation of a positive titer (anti-HBs or HepB Sab) or sign a vaccination declination. However, specific healthcare institutions may require vaccination without exception, alternate clinical rotation arrangements will not be made.

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

Proof of vaccination (2 doses at appropriate intervals). The first dose is usually done at 12-15 months of age and the second dose at 4-6 years of age. Most teens and adults should be up to date on MMR vaccinations. Students may also provide proof of measles immunity, mumps immunity and rubella immunity by titer (3 separate titers).

#### **Varicella**

Proof of vaccination (2 doses administered at least 4 weeks apart) or proof of immunity by titer. This vaccination can be obtained through your healthcare provider.



**Tetanus, Diphtheria, Pertussis (Tdap)**

The Tdap vaccine protects from tetanus, diphtheria, and pertussis and is routinely given at age 11 or 12. You must have an adult dose Tdap after the age of 18. The Td booster vaccine is required every ten years (after Tdap) and protects against tetanus and diphtheria.

**COVID-19 Vaccine**

Required to participate in the program and clinical placements. Must be either the two-dose Pfizer or Moderna series or the Johnson and Johnson one dose. Requires 1-2 doses, given 3-4 weeks apart. Currently, a booster is also required for those eligible.



Dear Healthcare Provider,

You are receiving this letter to help us document an applicant or current student’s vaccination record. For our Health Sciences Programs we require that students be tested for tuberculosis using one of two options:

1. **A Quantiferon test that is negative.** If the lab result states the applicant/student is positive, the applicant/student will be required to provide a negative chest x-ray and physician evaluation stating the student has no current symptoms. An asymptomatic applicant/student, whose chest x-ray and assessment indicates no active disease, may attend class/clinical.
2. **A two-step TB skin test (TST) that is negative, given 7-21 days apart.** If at any point in the testing the TST is positive, it indicates that the applicant/student has been exposed to TB. The applicant/student will be required to provide a negative chest x-ray and physician evaluation stating the student has no current symptoms. An asymptomatic applicant/student, whose chest x-ray and assessment indicates no active disease, may attend class/clinical.

*For students who received a Quantiferon Test or those requiring physician’s assessment and chest x-ray please attach a signed copy of the medical record indicating the results.*

**Two Step TB Testing Documentation**

First TB Test:	
<b><u>Placement Date:</u></b>	<b><u>Location of Placement:</u></b>
<b><u>Reading Date (48-72 hrs after placement):</u></b>	<b><u>Results (documented in mm):</u></b>

Second TB Test (placed 7-21 days later):	
<b><u>Placement Date:</u></b>	<b><u>Location of Placement:</u></b>
<b><u>Reading Date (48-72 hrs after placement):</u></b>	<b><u>Results (documented in mm):</u></b>

Students Name (First and Last): \_\_\_\_\_

Printed Name of Healthcare Provider and Credentials: \_\_\_\_\_

Signature of Healthcare Provider: \_\_\_\_\_

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

Address of Healthcare Facility: \_\_\_\_\_

## **Appendix C: Conviction/Criminal History**

### General Information

The [Washington State Child and Adult Abuse Information Law](#) (RCW 43.43.830-842) requires that anyone with unsupervised access to certain vulnerable populations be screened for specific information about any convictions for crimes against persons and crimes relating to financial exploitations, and for findings in related actions and proceedings. Students enrolled in the Green River Nursing Programs will have unsupervised access to vulnerable populations defined by this law. In addition, certain criminal convictions and certain court administrative determinations may preclude completion of the clinical portion of the curriculum. Clinical sites are precluded by law from allowing persons with certain convictions histories to have unsupervised access to these vulnerable populations. Contracts with clinical sites require that the Nursing programs assure that its students have been screened.

The Nursing department will review conviction/criminal history records when considering an applicant for admission. Applicants must sign the Nursing program's Conviction/Criminal History Disclosure Form as part of the application process. To be considered for re-entry into the program, the student must sign the Nursing program's Conviction/Criminal History Disclosure Form prior to the first day of the quarter in which they start.

Conviction information, including information regarding certain court and administrative determinations, must be disclosed and verified before an applicant or student can be considered for admission or re-entry in the program. A conviction/criminal history record does not necessarily disqualify an individual from admission or continuation. Conviction/criminal history records must be verified through a private national background check agency specified by the program. Admission and/or continued enrollment is subject to a satisfactory background check review. Individuals who do not sign this Conviction/Criminal History Disclosure Form will not be considered for admission or continuation. Questions about the use of conviction/criminal history information may be referred to the associate dean of nursing.

### Process for Background Check Review

- All applicants/students submit a signed Conviction/Criminal History Disclosure Form
- Every applicant must verify conviction/criminal history through the private national background check agency specified by the Program, by the stated deadline. Failure to comply by the deadline may disqualify the applicant from admission.
- All continuing students must complete a repeat check every year
- If the check is negative, the applicant may be admitted to and the continuing student may continue in the program
- If the check is positive, the applicant/student will be asked to explain any discrepancies. This information will be reviewed by the associate dean of nursing and faculty. If the review indicates that the information and explanation are satisfactory, the applicant may be admitted

to and the continuing student may continue in the program. If the review indicates that information and explanation are not satisfactory, the offer of admission may be withdrawn, and the continuing student may be suspended or dismissed from the program

- The associate dean of nursing will meet with the applicant/student and inform the applicant/student of the decision regarding the background check review verbally and in writing.

## Green River College Nursing Program Conviction/Criminal History Form

First Name: _____ Last Name: _____  Green River SID: _____
--

### Section I: Crimes Against Persons and Crime Relating to Financial Exploitation

Have you ever been convicted of any of the crimes listed below?

Please check appropriate box:    **No**     **Yes**

If YES, please indicate crime by checking appropriate box below:

Crime	Crime
Arson (1st Degree)	Malicious Harassment
Assault (Custodial)	Manslaughter (1st, 2nd Degree)
Assault (Simple or 4th Degree)	Murder (Aggravated)
Assault (1st, 2nd, 3rd Degree)	Murder (1st, 2nd Degree)
Assault of a child (1st, 2nd, 3rd Degree)	Patronizing a Juvenile Prostitute
Burglary (1st degree)	Promoting Pornography
Child Abandonment	Prostitution
Child Abuse or Neglect (Definitions)	Promoting Prostitution (1st Degree)
Child Buying or Selling	Rape (1st, 2nd 3rd Degree)
Child Molestation (1st, 2nd, 3rd Degree)	Rape of a Child (1st, 2nd, 3rd Degree)
Communication with a Minor	Robbery (1st, 2nd Degree)
Criminal Abandonment	Selling/Distributing Erotic Material to a Minor
Criminal Mistreatment (1st, 2nd Degree)	Sexual Exploitation of a Minor
Custodial Interference (1st, 2nd Degree)	Sexual Misconduct with a Minor
Extortion (1st, 2nd, 3rd Degree)	Theft (1st, 2nd, 3rd Degree)
Forgery	Unlawful Imprisonment
Incest	Vehicular Homicide
Indecent Exposure (Felony)	Violation of Child Abuse Restraining Order
Indecent Liberties	Or Any of These Crime That May Have Been Renamed
Kidnapping (1st, 2nd Degree)	

**Section II: Related Proceedings**

Have you ever been found in a dependency action, domestic relations proceeding, disciplinary board hearing, or protection proceeding to have: sexually assaulted or exploited, sexually or physically abused a minor or developmentally disabled person OR to have financially exploited or abused a vulnerable adult?

Please check appropriate box: **No**  **Yes**

If YES, please provide detailed information in Section VI.

**Section III: Drug Related Crimes**

Have you ever been convicted of a crime related to the manufacture of, delivery, or possession with intent to manufacture or deliver a controlled substance?

Please check appropriate box: **No**  **Yes**

If YES, please provide detailed information in Section VI.

**Section IV: Medicare Fraud-Related Crimes**

Have you been debarred, excluded or otherwise ineligible for participation in federal health care programs?

Please check appropriate box: **No**  **Yes**

If YES, please provide detailed information in Section VI.

**Section V: Health Care Licensure**

Have you ever had your license as a health care practitioner revoked?

Please check appropriate box: **No**  **Yes**

If YES, please provide detailed information in Section VI.

**Section VI: For All Items Checked in Sections I – V**

Please provide detailed information below. If you have more than one, please use other side of page.

Specific details including the court or agency involved	
Conviction or action date(s)	
Sentence(s) or penalty(ies) imposed	
Prison release date(s)	
Current standing (e.g. parole, work release, suspended license, etc.)	

**General Conviction Information**

Aside from those crimes listed above, within the past 10 years, have you ever been convicted of or released from prison for any crimes, excluding parking tickets/traffic citations?

Please check appropriate box: **No**  **Yes**

If YES, please indicate all conviction dates, prison release date(s) and the nature of the offense(s). Please use other side of page if necessary.

**Read the Information Below:**

Under penalty of perjury, I certify that the above information is true, correct and complete. I understand that I am obligated to notify the program within 30 days, in writing, of if I am convicted of any crime or if any of the specified court or administrative determinations are made against me during the application period and/or while enrolled as a student. I understand that any misrepresentation or omission in the above-stated information may lead to denial of admission or dismissal. I understand and agree that the Green River College Health Sciences may verify this information through a private national background records verification agency. I also understand and agree that admission and continuation is conditioned on the Program’s receipt of a satisfactory background check report from the agency.

**Authorization for Repeat Background Checks and Dissemination of Results:**

I agree to initiate, pay for and provide the Green River College with repeat background check every year from the date of my admission to the Program. I authorize dissemination of my self-disclosure information, background check results, and conviction records to clinical training sites as deemed necessary by the Program during the completion of my academic program. I understand that the program will provide the records listed above only with the condition that the receiving party or parties will be notified by the Program that they may not disclose the information to other parties, in a personally-identifiable form, without my further consent, unless the other parties are otherwise eligible under federal or state law to receive the records. I further understand that any statements that I have placed in my records commenting on consented information contained in the records listed above will be released along with the records to which they relate.

Student signature \_\_\_\_\_

Date \_\_\_\_\_

**Appendix D: FERPA Release**

The college as well as the Nursing programs comply with the [Family Educational Rights Privacy Act](#) or FERPA in protecting the privacy of the students it serves. There are some instances in the Nursing program whereby it is important to access and share certain information. The Nursing program therefore requests that the students sign a waiver allowing certain information to be shared. Some examples of shared information are immunization/health records and background checks for patient care/clinical experience, written assignments utilized for teaching, students grading other student’s work, student’s progress in support courses that needs to be shared with the associate dean of nursing, and/or information that needs to be released in order for students to take the certification exams.

I give the Green River Nursing Program my permission to:	Student Initials:
Release records, including health and immunization history, drug screening, and background checks as necessary for participation in patient care/clinical experience.	
Send my transcript to any governmental agency, or perspective employer.	
Provide prospective employers an employment recommendation.	
Provide professional associations information as necessary for participation.	

I understand that my records are protected under federal and state confidentiality regulations and cannot be disclosed without my written consent. I also understand that by signing this form, I am releasing the faculty and Green River College from any and all liability, damages, or expenses for providing the information requested.

If, at a later date, you no longer want to permission for any of the above, send a written notification to:

Associate Dean of Nursing  
 Green River College  
 12401 SE 320th Street  
 Auburn, WA 98092

Printed Student Name: \_\_\_\_\_

Student’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Witnessed by / Date \_\_\_\_\_



**Appendix E: Hold Harmless: Personal Responsibility of Healthcare Costs**

POLICY: Green River College encourages each student participating in a clinical/lab education program to acquire comprehensive health and accident insurance that will provide continuous coverage of such student during his or her participation in the education program. Students are informed they are responsible for their own health needs, healthcare costs and follow-up care, including but not limited to health issues or incidents occurring during or at classroom lab sites. \_\_\_\_\_ (Initials)

Please check the appropriate box below:

Attached is a copy (both front and back) of my current health insurance card. I will supply the Nursing Program Clinical Coordinator with a current health insurance card should my insurance change.

I currently do not have any healthcare insurance. I am aware that I am responsible for any healthcare expenses that may occur during my enrollment in the program.

Emergency first aid for on-the-job injuries that may occur to students during clinical experiences shall be provided by the affiliating agency, however the student will assume financial responsibility for emergency care expenses incurred and agree to hold Green River College harmless. \_\_\_\_\_ (Initials)

By signing below, I understand the above statements and accept responsibility thereof:

Printed Student's Name \_\_\_\_\_

Student's Signature \_\_\_\_\_

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

Witnessed by/Date \_\_\_\_\_ Date \_\_\_\_\_

**Appendix F: Photography/Video Release Form**

I, the undersigned, for purposes of chapter [63.60 RCW](#) and all other applicable laws, hereby consent to each and every use by Green River College, and all of its officers, employees, and agents, of each photograph, video and audio recording and any other likeness of me. Such uses may include, but are not limited to, every use in a classroom presentation, program, catalogue, schedule, newspaper, web site, brochure, advertisement, or other publication or recording that describes, portrays, publicizes or advertises the college or any college operation and every reproduction, republication, or other reuse of the same. I also hereby waive any right to compensation for such uses, and any right to inspect or approve the uses beforehand.

I further consent to the reproduction and/or authorization by Green River College to reproduce and use said photographs and recordings of my voice, for use in all domestic and foreign markets. Further, I understand that others, with or without the consent of Green River College may use and/or reproduce such photographs and recordings.

I hereby release Green River College, its legal representatives and all persons acting under its permission or authority, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composition form, whether intentional or otherwise, that may occur or be produced in taking of said picture and/or video and audio recording, or in any subsequent processing thereof, as well as any publication or other uses thereof.

Print name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

If model is under the age of 18: I, \_\_\_\_\_ am the parent/legal guardian of the individual named above. I have read this release and approve the terms.

Guardian: Print name \_\_\_\_\_

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

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

**Appendix G: Lost Nursing Program Mailbox Key**

I understand that a mailbox and key will be assigned to me at the beginning of the fall quarter for use while enrolled in the Nursing program. The confidential mail box has been utilized by Nursing faculty to return exams and assignments, and for correspondence with students.

I understand that, upon departing the Nursing program, I must return your key to the Nursing program or my transcripts will be held until either the key is received, or lost key payment is made. The fee to replace a lost key is \$5.00 will be paid through the college's cashiers office.

Your signature below signifies that you are aware of the \$5.00 lost key charge.

Printed Student's Name \_\_\_\_\_

Student's Signature \_\_\_\_\_

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

**Appendix H: Lost Nursing Program Lab Bag**

I understand that a lab bag will be assigned to me at the beginning of the fall quarter for use while enrolled in the Nursing program. The supplies are to be used when learning a skill or demonstrating the proficiency of a skill.

I understand that, if I lose the lab bag, the fee to replace the lab bag will be \$100. Upon departing the Nursing program, I must pay the fee to the Nursing program or my transcripts will be held until the last lab bag fee is paid through the college’s cashiers office.

Your signature below signifies that you are aware of the \$100.00 lost lab bag charge.

Printed Student’s Name \_\_\_\_\_

Student’s Signature \_\_\_\_\_

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

**Appendix I: Kaplan Resources**

I understand that the Nursing program pays my fee associated with the use of Kaplan products in the Practical Nursing program. The program is used as a supportive tool to help students be successful throughout the program prepare for their NCLEX-PN.

I understand that, if I do not complete or participate in all required Kaplan components, I am responsible for paying the \$500.00 fee associated with the cost of the services provided. Upon departing the Nursing program, I must pay the fee to the Nursing program or my transcripts will be held until the last lab bag fee is paid through the college’s cashiers office.

Your signature below signifies that you are aware of the \$500.00 Kaplan fee.

Printed Student’s Name \_\_\_\_\_

Student’s Signature \_\_\_\_\_

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

**Appendix J: Doctor’s Clearance and/or Release Following Illness or Injury**

\_\_\_\_\_ (print name) is a student enrolled in the \_\_\_\_\_  
Program at Green River College. The student has notified the faculty that he/she has/is:  
\_\_\_\_\_.

This program includes direct client contact in a number of clinical/lab settings. The program has a standard of physical requirements students must meet to participate in the program. Any student with a visible injury or illness involving potential infectious disease will be required to furnish medical clearance.

Students who are pregnant must submit a letter from their physician stating any restrictions on their activities and the estimated date of delivery.

Letters from physicians regarding student illness, injury, or pregnancy must include specific limitations or restrictions as well as a statement defining clinical activities allowed. Any exclusion must be followed up by a written release from the student’s physician before returning to the clinical facility.

In all cases, students must be able to meet the objectives of the course when being permitted to remain in the clinical setting.

Green River College requires a release from his/her physician/medical provider stating the student meets the essential functions/physical requirements of the program, without restrictions prior to returning to the clinical setting.

Please see the specific essential functions/physical requirements PN Essential Functions

Physician print name: \_\_\_\_\_

Physician signature: \_\_\_\_\_

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

## Appendix K: Practical Nursing Informed Consent Regarding Human Subjects

The use of human subjects for educational purposes carries with it the responsibility to protect the rights, wellbeing, and personal privacy of individuals; to assure a variable climate for the acquisition of practical skills and conduct of academically-oriented inquiry, and to protect the interests of the institution. Some Nursing program courses involve classroom, laboratory, and clinical activities where learning by students requires the use of fellow students as part of the training procedures and/or demonstrations.

Laboratory Testing of Body Fluids: Involves working with body fluids (such as blood and urine) obtained from fellow students within the classroom laboratory.

Topic	Description
Possible risks and discomforts	Exposure to infection carried by body fluids
	Injury while handling laboratory equipment
Benefits	Participation in a learning experience necessary to become a nurse
	Acquisition of empathy for future patients undergoing testing

Appropriate Alternatives: Individual contractual agreement with a laboratory.

Injections: Involves being the recipient of up to two injections administered by a fellow student; intramuscular, subcutaneous, and intradermal. Each will contain sterile water or sterile saline and be given privately under the direct supervision of the course instructor.

Topic	Description
Possible risks and discomforts	Personal embarrassment
	Damage to nerve, muscle, or other soft tissue
	Pain resulting from the procedure itself
Benefits	Acquisition of empathy for future patients undergoing testing
	Participation in a learning experience necessary to become a nurse

Appropriate Alternatives: Individual contractual agreement with a physician.

Venipuncture: Involves being the recipient of one or more venipuncture procedure(s) performed by fellow students for the purpose of initiating intravenous access under the private and direct supervision of the course instructor.

Topic	Description
Possible risks and discomforts	Damage to nerve, muscle, or other soft tissue.
	Introduction of infection into body tissues.
	Pain resulting from the procedure itself.
	Bleeding that may result in bruising.
Benefits	Participation in a learning experience necessary to become a nurse.
	Acquisition of empathy for future patients undergoing testing.

Appropriate Alternatives: Individual contractual agreement with a physician.

Fingerstick: Involves receiving fingersticks performed by fellow students for the purpose of obtaining capillary blood samples under the direct supervision of the course instructor.

Topic	Description
Possible risks and discomforts	Damage to nerve, muscle, or other soft tissue.
	Introduction of infection into body tissues.
	Pain resulting from the procedure itself.
	Bleeding that may result in bruising.
Benefits	Participation in a learning experience necessary to become a nurse.
	Acquisition of empathy for future patients undergoing testing.

Appropriate Alternatives: Individual contractual agreement with a laboratory.

As a student in the Nursing program at Green River College, I am aware of the possible risks and discomforts, benefits, and appropriate alternatives to my voluntary participation in the nursing courses. I agree to abide by the safety rules and regulations promulgated by Green River College and the instructor of each course as they relate to my participation in the courses. I have made the Program Coordinator for Green River College Nursing and the appropriate instructor aware of any preexisting condition (such as a seizure disorder, bleeding disorder, etc.) that I have that might put myself or others at risk through my participation. I further state that I am of legal age and legally competent to sign this agreement or that I will obtain signature from my legal guardian. I have read and understand the terms of the agreement and I sign the agreement as my own free act.

By signature below, I acknowledge that I have read the above policies and procedures regarding *Informed Consent for Coursework Regarding Human Subjects* and understand my responsibilities thereof in participation of the Nursing program.

---

Name of Student (printed)

---

Student name - Signature

---

Date



**Appendix L: GRC Nursing Program Collaborative Performance Plan**

Student: \_\_\_\_\_

Quarter: \_\_\_\_\_

Course: \_\_\_\_\_

Concern/Reason for Collaborative Performance Plan	Strategies and Resources (To be Completed by the Student)	Date to be Completed	Expected Outcome	Evidence Expected Outcome has been Met

By signing, I agree to the terms of this contract:

Student: \_\_\_\_\_

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

Faculty: \_\_\_\_\_

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

Faculty: \_\_\_\_\_

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

Faculty: \_\_\_\_\_

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

Faculty: \_\_\_\_\_

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

ADN: \_\_\_\_\_

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

**Appendix M: Question Challenge Form**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

All exam question challenges must be submitted in writing or by email to the course faculty that taught the content. Students have up to one week (5 business days) to challenge an exam question after exam grades have been posted on Canvas.

Course: \_\_\_\_\_ Faculty: \_\_\_\_\_

Exam: \_\_\_\_\_ Content Area: \_\_\_\_\_ Question # \_\_\_\_\_

I would like to support my answer of choice \_\_\_\_\_ (A, B, C, D, E, etc.) based on my explanation below which is supported by textbook and/or nursing research.

Why I believe my answer is a correct choice or the most correct choice:

I am attaching a copy of textbook references and/or peer-reviewed nursing research. I have highlighted the text that supports my answer.

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

*Typed name indicates electronic signature.*

**Appendix N: Equipment Release**

Green River College Nursing Equipment Release Form

I understand that I am responsible for the items listed below:

Item Description	Equipment Number	Approx. Value	Student Initial	Date

I understand that I am responsible for the equipment listed above. If the item(s) listed are not returned by (date) \_\_\_\_\_ or are returned damaged, I will be liable for the cost of replacement at the value listed above. This fee will be applied to the student’s account at Green River College and paid through the cashier’s office.

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

**Appendix O: Green River Nursing Program Clinical Incident Reporting Form**

Student Name \_\_\_\_\_  
Student ID Number \_\_\_\_\_  
Clinical Faculty \_\_\_\_\_  
Date of Occurrence \_\_\_\_\_  
Location of Occurrence \_\_\_\_\_

Type of Occurrence: Choose an item.

Description of Incident:

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Name of Witnesses/Others Involved:

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Assessment of Findings and Suspected Causes/Contributing Factors:

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Steps Taken Following Incident:

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Additional Comments:

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Remediation Plan:

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Immediate Notification of Incident to the Associate Dean of Nursing by Faculty:

NO       YES      Date/Time Completed: \_\_\_\_\_

“Student Practice Event Evaluation Tool” (SPEET) Form Completed with Student and Faculty:

NO       YES      Date/Time Completed: \_\_\_\_\_

Name of Person Completing the Form: \_\_\_\_\_

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

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

\_\_\_\_\_  
Signature of Associate Dean of Nursing: \_\_\_\_\_ Date: \_\_\_\_\_

The associate dean for nursing will notify the Washington State Nursing Commission no later than 48 hours after the event on the [Adverse Events Reporting Program website](#). The event will be logged in compliance with [WAC 246-840-513](#) and [RCW 70.56.010](#).

Appendix P: Practical Nursing Just Culture (SPEET) Form

NCBON Just Culture Student Practice Event Evaluation Tool (SPEET)

Event(s):		Event Number:				Criteria		Score
Criteria	Human Error	At Risk Behavior			Reckless Behavior		Score	
	0	1	2	3	4	5		
<b>G</b> General nursing practice	No prior counseling for practice related issues.	Prior counseling for single <b>non-related</b> practice issue.	Prior counseling for single <b>“related”</b> issue.	Prior counseling for <b>“same”</b> issue.	Prior counseling for multiple related or non-related practice issues.	Prior counseling for <b>same</b> or <b>related</b> issue with no or little evidence of improvement.	0	
<b>U</b> Understanding expected based on program level, course objectives/ outcomes	Has knowledge, skill and ability – <i>Incident was accidental, inadvertent, or an oversight.</i>	Task driven/rote learning. OR <u>Wrong action for this circumstance.</u>	Failed to demonstrate appropriate understanding of options/resources. OR Aware of safety issues but in this instance <u>cut corners.</u>	Understands rationale but failed to recognize situations in terms of overall picture or to prioritize actions. OR In this instance, failed to obtain sufficient info or consult before acting.	Able to recognize potential problems. In this instance <b>“negligent”</b> OR <b>failed to act according to standards.</b> Risk to client outweighed benefits.	Knows or should have known correct action, role and limitations. In this instance action was <b>“gross negligence/ unsafe act”</b> and demonstrated no regard for patient safety.	0	
<b>I</b> Internal program or agency policies/ standards/ interdisciplinary orders	Unintentional breach OR No policy/standard/ order available.	Policy not enforced. OR <u>Cultural norm</u> or common deviation of staff. OR Policy/order misinterpreted.	Student cut corners or <i>deviated</i> in this instance from policy/standard/ order as <u>time saver.</u> - No evidence or suggestion of a pattern of behavior.	Aware of policy/ standard/ order but <u>ignored or disregarded</u> to achieve <i>perceived expectations</i> of faculty, staff, patient or others. May indicate pattern or single event.	Disregarded policy/standard/order for <u>own personal gain.</u>	<u>Maliciously</u> disregarded policy/standard/order	0	
<b>D</b> Decision/choice	Accidental/ mistake/ Inadvertent error.	<u>Advantages</u> to patient <u>outweighed risk</u>	<u>Emergent situation</u> - quick response required.	<u>Non-emergent situation.</u> Chose to act/not to act without weighing options or utilizing resources. Used poor judgement.	Clearly a prudent student would not have done. <u>Unacceptable risk to patient/agency/ public.</u> Disregard for patient safety.	Conscious choice. Put own interest above that of patient/agency/public. <u>Egregious choice.</u> <u>Neglected red flags.</u>	0	
<b>E</b> Ethics/ credibility/ accountability	Identified own error and <u>self-reported.</u> Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Admitted to error and <u>accepts responsibility.</u> Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Acknowledged role in error but <u>attributes to circumstances</u> and/or blames others to justify action/inaction. Cooperative during investigation. Demonstrates desire to improve practice.	Denies responsibility until confronted with evidence. Reluctantly accepts responsibility. <u>Made excuses or made light of occurrence.</u> Marginally cooperative during investigation.	Denied responsibility despite evidence. Indifferent to situation. <u>Uncooperative and/or dishonest</u> during investigation.	Took active steps to <u>conceal</u> error or <u>failed to disclose known error.</u>	0	

Score \_\_\_\_\_

Adapted from the NCBON© SPEET TOOL

Mitigating Factors – check all identified		Aggravating Factors – check all identified	
Communication breakdown (multiple handoffs, change of shift, language barriers)		Especially heinous, cruel, and / or violent act	
Unavailable resources (inadequate supplies/equipment)		Knowingly created risk for more than one client	
Interruptions / chaotic environment / emergencies – frequent interruptions / distractions		Threatening / bullying behaviors	
Inadequate supervision by faculty or preceptor		Prior formal student disciplinary record for practice issue(s)	
Inappropriate assignment by faculty or preceptor		Other (identify)	
Policies / procedures unclear			
Client factors (combative/agitated, cognitively impaired, threatening)			
Non-supportive environment – interdepartmental/staff/student conflicts			
Lack of response by other departments / providers			
Other (identify)			
<b>Total # mitigating factors identified</b>		<b>Total # aggravating factors identified</b>	

Scoring	
Criteria Score (from front page)	
Mitigating factors (subtract 1 point for 1 – 3 factors; 2 points for 4 – 6 Factors; and 3 points for 7 or more factors)	
Aggravating factors (add 1 point for each identified factor)	
<b>Total Overall Score</b>	

Human Error	At-Risk Behavior	Reckless Behavior
# of criteria in green= _____ IF 3 or more criteria in Green OR total score <8 – Address event by consoling student and/or developing remedial improvement plan with student	# of criteria in yellow= _____ IF 3 or more criteria in yellow OR total score 8-19 – Address event by coaching student, possibly counseling, and/or developing remedial improvement plan with student	# criteria in red= _____ If 3 or more criteria in red OR total score 20 or greater – Consider disciplinary action and/or remedial action in addressing event with student

Faculty Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Date of Event: \_\_\_\_\_

NOTE: This SPEET is NOT used if event involves misconduct such as: academic cheating, confidentiality, fraud, theft, drug abuse, diversion, boundary issues, sexual misconduct, mental/physical impairment. Instead, these are managed through established mechanisms outside of this clinical framework.

Human Error = Inadvertently doing other than what should have been done; a slip lapse, mistake. At-Risk Behavior = Behavioral choice that increases risk where risk is not recognized or is mistakenly believed to be justified. Reckless Behavior = Behavioral choice to consciously disregard a substantial and unjustifiable risk. Consoling = Comforting, calming; supporting student while examining event. Coaching = Supportive discussion with the student on the need to engage in safe behavioral choices. Remedial Action = Actions taken to aid student including education, training assignment to program level-appropriate tasks. Counseling = A first step disciplinary action; putting the student on notice that performance is unacceptable. Disciplinary Action = Punitive deterrent to cause student to refrain from undesired behavioral choices.

*Adapted from the NCBON© SPEET TOOL*



# CLINICAL PERFORMANCE EVALUATION

GREEN RIVER COLLEGE

NURSING PROGRAMS

2020 – 2021



### TOOL GUIDLINES

- The clinical evaluation tool is used for all clinical nursing courses. Each nursing course builds on prior knowledge, skills, and behaviors. All clinical learning experiences will be evaluated upon completion and/or as deemed necessary by the faculty. Students who are not meeting clinical outcomes will be counseled and/or entered into remediation as needed.
- Each student will complete a self-evaluation at midterm (when required by the course due to clinical length) and final using the guidelines established in the Nursing Program Student Handbook.
- Each faculty member will fill out the faculty comments section at midterm (when required by the course due to clinical length) and at final.
- Each competency must be evaluated by placing a number in the appropriate box at midterm and final evaluation.
- The overall score given by the instructor for midterm clinical evaluation will be either “S” (satisfactory) or “U” (unsatisfactory).
- The overall score given by the instructor for final clinical evaluation will be either: 100 (all at benchmark), 97% (missed 1 benchmark), 94% (missed two benchmarks), or a zero.
- Clinical faculty will initiate remediation for a student who receives a number less than the benchmark on any expected behaviors being evaluated.
- Final grades for any nursing clinical related component must be equal to or greater than the benchmark on any expected behaviors being evaluated.

FALL – N105

WINTER – N107

SPRING – N109

SUMMER – N113

### GRADING GUIDLINES

Clinical performance will be evaluated using the following scale:

- **Level 5:** Expert: Able to perform fluid, flexible and effective, evidence-based care; independent.
  - **Level 4:** Proficient: Wholistic understanding; learns and adapts to modify plan; independent to little supervision/direction required.
  - **Level 3:** Competent: Connects theory to practice; performs independent with minimal supervision or direction.
  - **Level 2:** Novice: Begins to make connection of theory to practice; focus on skill acquisition; requires direction.
  - **Level 1:** Fundamental Awareness: Basic understanding of technique and content; unable to perform without supervision.
  - **Level 0:** Unsafe: Does not meet the safety standards of the profession
  - **N/A:** Not applicable to this course.
- Students may not fall below benchmark on more than two areas to pass the course. Any student receiving Level 0 at final clinical evaluation are subject to dismissal from the program

**CORE COMPETENCY – HUMAN FLOURISHING**

Promote the human dignity, integrity, self-determination and personal growth of patients, their families, and oneself to provide individualized, culturally appropriate, relationship centered nursing care.

Expected Behavior	FALL - NURSE 105					WINTER - NURSE 107					SPRING - NURSE 109					SUMMER - NURSE 113				
	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)
Demonstrate that holistic care is fundamental to patient satisfaction and individualized care.	2					3					4					5				
Apply national safety standards to patient care recognizing that both the individual and systems are responsible for patient safety.	2					3					4					5				
Demonstrate respectful communication with patients, their families, and the health care team.	3					4					5					5				
Respect patient's right to autonomy and self-care decision making.	3					4					5					5				
Participate in culture changes that empowers patients, families and health care workers to achieve a meaningful work and life experiences.	1					2					3					4				
Examine personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.	3					4					5					5				
Identify barriers to transitions in care including the social determinants of health.	2					3					4					5				

**CORE COMPETENCY – NURSING JUDGEMENT**

Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care for diverse patients and their families in collaboration with the health care team.

Expected Behavior	FALL - NURSE 105					WINTER - NURSE 107					SPRING - NURSE 109					SUMMER - NURSE 113				
	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)
Prevent complications through the provision of timely evidence-based care to inform clinical judgment.	1					2					3					4				
Perform clinical procedures safely.	1					2					3					4				
Accept only those assignments that fall with individual scope of practice and professional standards that govern LPN practice, based on experience and educational preparation.	3					4					5					5				
Practice priority setting in a dynamic work environment.	1					2					3					4				
Recognize and report unsafe practices to appropriate member of the health care team.	2					3					4					5				
Collaborate with members of the health care team to report changes in patient status, assessment, care planning, and making care decisions.	1					2					3					4				
Utilize ethical standards to inform clinical judgment.	1					3					4					5				

**CORE COMPETENCY – NURSING JUDGEMENT**

Make judgements in practice, substantiated with evidence, that integrate nursing science in the provision of safe, quality care for diverse patients and their families in collaboration with the health care team.

Expected Behavior	FALL - NURSE 105					WINTER - NURSE 107					SPRING - NURSE 109					SUMMER - NURSE 113				
	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)
Prevent complications through the provision of timely evidence-based care to inform clinical judgment.	1					2					3					4				
Perform clinical procedures safely.	1					2					3					4				
Accept only those assignments that fall with individual scope of practice and professional standards that govern LPN practice, based on experience and educational preparation.	3					4					5					5				
Practice priority setting in a dynamic work environment.	1					2					3					4				
Recognize and report unsafe practices to appropriate member of the health care team.	2					3					4					5				
Collaborate with members of the health care team to report changes in patient status, assessment, care planning, and making care decisions.	1					2					3					4				
Utilize ethical standards to inform clinical judgment.	1					3					4					5				

Provide evidence to advocate for resource allocation to meet patient care needs.	1					3					4					5				
Identify valid sources of evidence in clinical decision making.	2					3					4					5				
<b>CORE COMPETENCY – PROFESSIONAL IDENTITY</b>																				
Articulate a unique role as a member of the health care team, committed to evidence-based practice, caring, advocacy, and safe quality care, to provide optimal health care for diverse patients and their families.																				
Expected Behavior	FALL - NURSE 105					WINTER - NURSE 107					SPRING - NURSE 109					SUMMER - NURSE 113				
	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)
Adhere to program behavioral standards including, but not limited to attire, hygiene, attendance, preparation, personal equipment use, etc.	3					4					5					5				
Recognize personal capabilities and knowledge base when making decisions about safe care delivery.	3					4					4					5				
Reflect on actions, developing greater awareness of behaviors, skills, and attitudes to provide safe, cost-conscious, quality care.	2					3					4					5				

Apply national safety standards to patient care recognizing that both the individual and systems are responsible for patient safety.	2					3					4					5				
Apply regulatory and legal factors to the practice of nursing.	2					3					4					5				
Accept accountability for one's actions and is receptive to feedback.	3					4					5					5				
Value the contribution of all members of the health care team to ensure safe, quality health care environment.	3					4					4					5				
Use verbal and non-verbal communication principles to improve patient and staff interaction.	2					3					4					5				
Advocate for activities that improve health care access and service delivery.	1					2					3					4				
Demonstrate tolerance for unpredictability and complexity of health care, and its effect on care delivery.	2					3					4					5				
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement with a commitment to professional growth.	3					4					4					5				
Respect diverse cultural perspectives.	3					4					5					5				

**CORE COMPETENCY – SPIRIT OF INQUIRY**

By collaborating with health care team members, utilize evidence, tradition, and patient preferences in predictable patient care situation to promote optimal health status.

Expected Behavior	FALL - NURSE 105					WINTER - NURSE 107					SPRING - NURSE 109					SUMMER - NURSE 113				
	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)	BENCHMARK	Midterm (student)	Midterm (instructor)	Final (student)	Final (instructor)
Demonstrate the importance of patient/family satisfaction as a key determinant of quality.	2					3					4					5				
Demonstrate innovation when considering alternative options in response to patient care.	1					2					3					4				
Respect the unique talent, knowledge and experience of all interprofessional team members.	3					4					5					5				
Promote patient engagement in care decisions seeking new solutions to improve their care.	2					3					4					5				
Demonstrate humility, trust, and empathy in considering high quality, low cost solutions to patient care.	2					3					4					4				
Participate in continuing education opportunities that prompt new ways of thinking regarding care delivery.	2					3					3					4				



**FALL QUARTER – MIDTERM COMMENTS – NURSE 105**  
(Address strengths and opportunities for improvement.)

<b>Student Comments:</b>	Click here to enter text.	
<b>Instructor Comments:</b>	Click here to enter text.	
<b>Absences:</b> Click here to enter text.	<b>Unusual Occurrences:</b> Click here to enter text.	<b>Satisfactory performance?</b> Click here to select YES or NO.

**PLEASE SIGN – FALL QUARTER MIDTERM EVALUATION – NURSE 105**  
(Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)

<b>Student Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.
<b>Instructor Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.

**FALL QUARTER – FINAL COMMENTS – NURSE 105**  
(Address strengths and opportunities for improvement.)

<b>Student Comments:</b>	Click here to enter text.	
<b>Instructor Comments:</b>	Click here to enter text.	
<b>Absences:</b> Click here to enter text.	<b>Unusual Occurrences:</b> Click here to enter text.	<b>Satisfactory performance?</b> Click here to select YES or NO.

**PLEASE SIGN – FALL QUARTER FINAL EVALUATION – NURSE 105**  
(Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)

<b>Student Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.
<b>Instructor Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.

WINTER QUARTER – MIDTERM COMMENTS – NURSE 107 (Address strengths and opportunities for improvement.)		
Student Comments:	Click here to enter text.	
Instructor Comments:	Click here to enter text.	
Absences: Click here to enter text.	Unusual Occurrences: Click here to enter text.	Satisfactory performance? Click here to select YES or NO.
PLEASE SIGN – WINTER QUARTER MIDTERM EVALUATION – NURSE 107 (Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)		
Student Signature:	Click here to enter text.	Date: Click here to enter a date.
Instructor Signature:	Click here to enter text.	Date: Click here to enter a date.
WINTER QUARTER – FINAL COMMENTS – NURSE 107 (Address strengths and opportunities for improvement.)		
Student Comments:	Click here to enter text.	
Instructor Comments:	Click here to enter text.	
Absences: Click here to enter text.	Unusual Occurrences: Click here to enter text.	Satisfactory performance? Click here to select YES or NO.
PLEASE SIGN – WINTER QUARTER FINAL EVALUATION – NURSE 107 (Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)		
Student Signature:	Click here to enter text.	Date: Click here to enter a date.
Instructor Signature:	Click here to enter text.	Date: Click here to enter a date.

**SPRING QUARTER – MIDTERM COMMENTS – NURSE 109**  
(Address strengths and opportunities for improvement.)

<b>Student Comments:</b>	Click here to enter text.	
<b>Instructor Comments:</b>	Click here to enter text.	
<b>Absences:</b> Click here to enter text.	<b>Unusual Occurrences:</b> Click here to enter text.	<b>Satisfactory performance?</b> Click here to select YES or NO.

**PLEASE SIGN – SPRING QUARTER MIDTERM EVALUATION – NURSE 109**

(Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)

<b>Student Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.
<b>Instructor Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.

**SPRING QUARTER – FINAL COMMENTS – NURSE 109**  
(Address strengths and opportunities for improvement.)

<b>Student Comments:</b>	Click here to enter text.	
<b>Instructor Comments:</b>	Click here to enter text.	
<b>Absences:</b> Click here to enter text.	<b>Unusual Occurrences:</b> Click here to enter text.	<b>Satisfactory performance?</b> Click here to select YES or NO.

**PLEASE SIGN – SPRING QUARTER FINAL EVALUATION – NURSE 109**

(Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)

<b>Student Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.
<b>Instructor Signature:</b>	Click here to enter text.	<b>Date:</b> Click here to enter a date.

SUMMER QUARTER – MIDTERM COMMENTS – NURSE 113 (Address strengths and opportunities for improvement.)		
Student Comments:	Click here to enter text.	
Instructor Comments:	Click here to enter text.	
Absences: Click here to enter text.	Unusual Occurrences: Click here to enter text.	Satisfactory performance? Click here to select YES or NO.
PLEASE SIGN – SUMMER QUARTER MIDTERM EVALUATION – NURSE 113 (Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)		
Student Signature:	Click here to enter text.	Date: Click here to enter a date.
Instructor Signature:	Click here to enter text.	Date: Click here to enter a date.
SUMMER QUARTER – FINAL COMMENTS – NURSE 113 (Address strengths and opportunities for improvement.)		
Student Comments:	Click here to enter text.	
Instructor Comments:	Click here to enter text.	
Absences: Click here to enter text.	Unusual Occurrences: Click here to enter text.	Satisfactory performance? Click here to select YES or NO.
PLEASE SIGN – SUMMER QUARTER FINAL EVALUATION – NURSE 113 (Type your full name and enter the date below as your electronic signature to indicate you have read and agree with the content in this document.)		
Student Signature:	Click here to enter text.	Date: Click here to enter a date.
Instructor Signature:	Click here to enter text.	Date: Click here to enter a date.

<http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nln-competencies-for-graduates-of-nursing-programs#:~:text=NLN%20Competencies%20for%20Graduates%20of%20Nursing%20Programs.%20Addressing,ensures%20that%20all%20members%20of%20the%20public%20>

**Nurse Tech Skills List**

\_\_\_\_\_ has completed the following nursing courses:  
(Checked box indicates student has completed the following Nursing courses.)

**Quarter 1 – Nursing Courses:**  
**102/103/104/105/107**

- Medical asepsis
- Hand hygiene
- Clean gloving
- PPE
- Isolation: entering and exiting rooms
- Vital signs including oximetry and pain
- Body mechanics
- Positioning
- Occupied bed making
- Transfers and assistive devices
- Ambulation
- Restraints
- Comprehensive Physical Assessment
- Pediatric Assessment
- Geriatric Assessment
- Hygiene: bathing/showering, mouth care, skin care
- Feeding
- Elimination: enema, stoma care, urinal, condom catheter, bedpan, rectal tube
- Pre-op teaching
- TED/SCD
- Oxygen administration
- Incentive spirometer
- Specimen collection (except blood): Capillary blood glucose; Urine (clean, sterile, catheter); Wound; Sputum; Stool
- Wound care (including wound vac)
- Surgical asepsis/sterile technique
- Sterile gloving
- Medication Administration (PO, TransDermal, Rectal, Oto, Optic)
- Blood Glucose

**Quarter 2 – Nursing Courses:**  
**112/113/114/115/117**

- Medication Administration (IM, SubQ)
- Urinary catheter (insertion, care, removal)
- Oral suctioning
- Trach care and suctioning
- AD/DD
- Antepartum Assessment
- Postpartum Assessment
- Neonatal Assessment

**Quarter 3 – Nursing Courses:**  
**122/123/125/126/127**

- Cardiac monitor lead placement
- Peripheral line placement
- Peripheral line assessment
- Peripheral line removal
- IV Fluid administration
- IV Medication administration; Push; Piggyback; Intermittent; Continuous; Flushing
- Lab draw (peripheral and central line)
- Chest tube
- Central line recognition
- NG (insertion, functioning, removal)
- NG/PEG (placement checks, feeding)
- Blood products
- Pre-op teaching

---

Associate Dean of Nursing

Date

## Appendix S: Nurse Tech Verification Letter



**Date:**

**Name:**

**Address:**

Dear **[student]**,

You have completed sufficient course work in the Green River College Nursing Program to be employable as a Nurse Technician (NT). Please remember both the employing institutions and colleges are required to keep track of your progress. We need you to help us in providing information to each organization on a timely basis. Here is a list of tasks to become and maintain your status as a Nurse Technician:

- Seek employment as an NT.
- Be offered an NT job by an employer.
- Review the legal responsibilities of the position ([WAC 246-840-840 – WAC 246-840-095](#))
- Download and submit the DOH [Employment Verification Form](#) to your employer to verify a job offer.
- Submit the [Education Verification Form](#) to the associate dean of nursing for signature and required skills checklist.
- At the successful completion of each quarter, request an updated skills checklist from the associate dean of nursing.
- Should you fail to complete a course, you must notify the employer and inform the associate dean of nursing where you have been employed as an NT.

Good luck in your new position. Feel free to contact me at (253) 931-6882 or email [KLaValley@greenriver.edu](mailto:KLaValley@greenriver.edu) if you have questions.

Sincerely,

Dr. KaraLynn LaValley, Ph.D., MN, RN  
Associate Dean of Nursing

## Appendix T: Assumption of Risk and Consent to Procedures

### General Information

During this program you will be participating in laboratory activities in which learning by students requires the use of human subjects as part of the training. As a part of these learning activities you will be asked to perform specific skills as well as be the subject of specific skills practiced by students. These learning activities will be conducted under the supervision of the course instructor.

### Benefits

The activities listed have been selected because they are skills essential to the learning process and the faculty believe that realistic practice is essential for optimum learning.

### Bloodborne Pathogen Exposure

It is important that you be aware that blood and other body fluids have been implicated in the transmission of certain pathogens, particularly Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV), the virus responsible for Acquired Immune Deficiency Syndrome (AIDS). In order to minimize risk of exposure to bloodborne pathogens, the student must agree to follow Standard Precautions guidelines as well as comply with regulations outlined in the OSHA Bloodborne Pathogen Standard.

### Risks/Discomforts

Participation may create some anxiety or embarrassment for you. Some procedures may create minor physical or psychological discomfort. Specific risks are listed below.

### Your Rights

You have the right to withhold consent and to withdraw consent after it has been given. You may ask questions and expect explanation of any point that is unclear.

Learning Activity	Specific Benefit	Risks/Discomfort
Venipuncture using both evacuated tube system (ETS) and syringe system	Student gains experience needed prior to performing procedures on actual patients	Possibility of hematoma or bruising; slight, temporary pain with procedure; slight risk of temporary nerve inflammation
Finger puncture	Student gains experience needed prior to performing procedures on actual patients	Slight, temporary pain upon puncture; minimal possibility of infection (provided area is kept clean)

I have read the Human Subjects Document. I acknowledge my understanding of the risks and benefits described. My questions have been answered. I agree to participate as a subject in the learning activities listed above.

---

Signature of Student Date

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Parent/Guardian Signature (if student is under 18) Date

Printed Student Name, Phone Number and Address:

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Printed Parent/Guardian Name, Phone Number and Address (if student is under 18):

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## Green River College

### Clinical Performance Evaluation LPN-to-BSN Nursing Program



**Course:**

Choose an item.

**Student Name:**

**Quarter:**

## Tool Guidelines

- The clinical evaluation tool is used for all clinical nursing courses.
- Students will perform a self-evaluation at the midpoint of the clinical experience, followed by the clinical faculty performing an evaluation of the student at midpoint. The clinical faculty and student will meet in person or online to discuss the midpoint evaluation findings.
- Students will submit their self-evaluation on Canvas.
- During the final week of the clinical experience, students will perform another self-evaluation on the same document, followed by the clinical faculty performing a final evaluation of the student. The clinical faculty and student will meet in person or online to discuss the midpoint evaluation findings.
- Each row item (boxes) must be checked by placing a number ranging from 1-4 in appropriate box at midterm and final evaluation week.
- Students who are not meeting clinical outcomes will be counseled individually at any point in the clinical experience, as needed.
- All students at midpoint will identify 3 areas of growth to achieve by final evaluation.
- Midpoint evaluation may contain scores below a 3. A Collaborative Performance Plan (CPP) will be developed collaboratively to address opportunities for growth.
- A score of “4” requires the student to write an example demonstrating above expectations. Clinical Faculty and student will collaboratively meet to agree.

## Grading Guidelines:

Grades are calculated using the following scale:

Expected Behaviors with a Score of 3 (Meets Expectations) or 4 (Above Expectations)	Grade for Clinical Performance Evaluation
40	100%
39	97.5%
38	95%
Any score of 1 for any Expected Behavior at Final Evaluation	0%

- Students with a score below 95% at Midpoint Evaluation will receive a Collaborative Performance Plan.
- Students with a score below 95% at Final Evaluation will be held from progressing in the program. If the faculty score the student below “meets expectation” for up to two competency behaviors, the faculty may put the student on probation to address the student’s performance moving forward. If student is on probation and does not meet or exceed the expected proficiency or performance level by the end of the following quarter, the student is dismissed from the program and subject to the re-entry policy.
- If the student receives a final benchmark score of one (1) for any competency behavior, the student will be subject to the unsafe clinical practices policy.

## Grade Descriptions for Scoring:

### A number “4” score: Above Expectations

- Demonstrates all the attributes of “3” meets expectations.
- Functions consistently with **minimum** guidance in the clinical situation.
- Recognized by staff, peers, patients, families, or community as practicing above and beyond expectations for course objectives.
- A score of “4” requires the student to write an example demonstrating above expectations. Clinical Faculty and student will collaboratively meet to agree.
- Engages **consistently** in self-direction in approach to learning.

### A number “3” score: Meets Expectations

- Functions satisfactorily with **moderate to minimum** guidance in the clinical setting.
- Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes among interdisciplinary team members.
- **Occasional** prompting for engaging in self-direction in approach to learning.
- Provides evidence of preparation for all clinical learning experiences.
- Follows directions and performs evidence-based care safely.
- Identifies own learning needs and seeks appropriate assistance.
- Demonstrates continued improvement during the clinical experience.
- Demonstrates clinical judgment and effective decision making.

### A number “2” score: Below Expectations

- Functions safely with **moderate to extensive** amount of guidance in the clinical situation.
- Demonstrates adequate knowledge and requires **moderate** assistance in integrating knowledge with skills.
- Requires some direction in recognizing and utilizing learning opportunities.

### A number “1” score: Does Not Meet Expectations

- Requires **intense** guidance for the performance of activities at a safe level.
- Clinical performance reflects difficulty in the provision of nursing care.
- Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills.
- Requires **frequent and detailed** instructions regarding learning opportunities and is often unable to utilize them.
- Is often **unprepared** and has **limited insight** into own behavior.
- Is **unable** to identify own learning needs and neglects to seek appropriate assistance.
- Not dependable.
- Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality.

### A N/A score: Not in this clinical course

**HUMAN FLOURISHING: Incorporate the knowledge and skills learned in didactic and clinical courses to help patients, families, and communities.**

Expected Behaviors	LINKAGE: AACN Domain	LINKAGE: QSEN	LINKAGE: Program Outcome	MIDPOINT: Student	MIDPOINT: Clinical Faculty	FINAL: Student	FINAL: Clinical Faculty
Apply knowledge from nursing science as well as the natural, physical, and social sciences to gain a holistic perspective of the person, family, community, and population.	1, 2	P	1	1	2	3	4
Describe the impact of policies on population outcomes, including social justice and health equity.	3	P	1	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Recognize system processes that impact care coordination and transition of care.	7	T	1	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Recognize the impact of health disparities and social determinants of health on care outcomes.	7	P	1, 2	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate the use of electronic health, information and communication technology to deliver safe nursing care to diverse populations in a manner that supports the nurse-patient relationship.	8	I	6	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Apply principles of therapeutic relationships and professional boundaries, communicating in a professional manner with patients and the health care team.	5, 9	T	2, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Advocate and implement for policies that promote health and prevent harm.	9	P	2, 4	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Demonstrate respect for diverse individual differences and diverse communities and populations to promote social justice and human rights into practice.	9	T, P	2, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
<b>NURSING JUDGMENT: Make judgments in practice, substantiated with evidence, that synthesize nursing science and knowledge from other disciplines in the provision of safe, quality care and promote the health of patient's families, and communities.</b>							
<b>Expected Behaviors</b>	<b>LINKAGE: AACN Domain</b>	<b>LINKAGE: QSEN</b>	<b>LINKAGE: Program Outcome</b>	<b>MIDPOINT: Student</b>	<b>MIDPOINT: Clinical Faculty</b>	<b>FINAL: Student</b>	<b>FINAL: Clinical Faculty</b>
Integrate nursing knowledge (theories, multiple ways of knowing, evidence) and knowledge from other disciplines and inquiry to inform clinical judgment.	1	E	1	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Perform clinically relevant, holistic, and accurate health assessment, distinguishing between normal and abnormal health findings to recognize cues related to the patient's health status.	2	E	1, 2	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Synthesize assessment data in the context of the individual's current preferences, situation, and experience and analyze cues to create a list of problems/health concerns	2	E	1, 2	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Prioritize hypotheses for problems/health concerns.	2	E	1, 2	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Generate solutions to problems/health concerns based on mutual health goals, addressing patient's experiences and perspectives in designing plans of care.	2	E	2	Choose an item.	Choose an item.	Choose an item.	Choose an item.

Implement safe, individualized evidence-based interventions to improve outcomes and safety.	2, 5	E	1, 2	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Monitor and reassess the individual to evaluate health outcomes/goals and recognize the need and modify plan of care as needed.	2	E	2, 4	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Recognize when additional expertise and knowledge is needed to manage the patient and collaborate with appropriate resources.	2	T	1, 2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Address social determinants of health regarding access and equity for proposed management of the patient.	2	P	1, 2, 5	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Prioritize patient-focused and/or community action plans that are safe, effective, and efficient in the context of available resources.	3	P	1, 2, 5	Choose an item.	Choose an item.	Choose an item.	Choose an item.
<b>PROFESSIONAL IDENTITY: Express one's identity as a nurse through actions that reflect integrity, a commitment to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients, families, and communities, and a willingness to provide leadership in improving care.</b>							
<b>Expected Behaviors</b>	<b>LINKAGE: AACN Domain</b>	<b>LINKAGE: QSEN</b>	<b>LINKAGE: Program Outcome</b>	<b>MIDPOINT: Student</b>	<b>MIDPOINT: Clinical Faculty</b>	<b>FINAL: Student</b>	<b>FINAL: Clinical Faculty</b>
Perform person-centered care, establishing mutual respect and demonstrating empathy, compassion, and emotional intelligence.	2	P	1, 2, 3, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Employ individualized educational strategies based on learning theories, methodologies, health literacy, vision, hearing, and cultural sensitivity to educate individuals and families regarding self-care	2	P	1, 2, 3, 6	Choose an item.	Choose an item.	Choose an item.	Choose an item.

for health promotion, illness prevention, and illness management.							
Identify personal, system, and community resources available to support self-care management.	2	T	2, 3	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Participate in the implementation of socio-culturally responsive interventions, incorporating an understanding of public health and the public health system.	3	P	1, 2, 5	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Identify actual and potential level of risks and assume accountability for reporting unsafe conditions, near misses, and errors to reduce harm.	5	Q	2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Use various communication tools and techniques (verbal/non-verbal) effectively to communicate information in a professional, accurate, and timely manner informed by legal, ethical, regulatory, and policy guidelines.	6, 8	T	2, 4, 6	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Apply principles of collaborative team dynamics, including team roles, to facilitate effective team functioning, delegating work to team members based on their roles and competency.	6	T	1, 5, 7, 8	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate an awareness for one's own biases and demonstrate respect for the perspectives and experiences of other individuals and professions.	6	T	1, 2, 4, 5, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Safeguard privacy, confidentiality, and autonomy in all interactions, advocating for the individual's right to self-determination.	2, 9	P	1, 2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate empathy, cultural sensitivity, and humility to the individual's life experience.	9	P	1, 2, 4	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate professional and personal honesty and integrity, taking responsibility and accountability for one's roles, professional attire and demeanor,	9	T	2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.

decisions, obligations, actions, and care outcomes.							
Adhere to the registered nurse scope and standards of practice consistent with one's educational preparation, regulatory requirements and workplace policies.	9	T	1, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate the core values of professional nursing identity, ethical behaviors, and moral courage in decision making and actions.	9	T	2, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Engage in guided and spontaneous reflection of one's practice.	10	Q	1, 2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Integrate feedback to improve performance, demonstrating professional development.	10	Q	1, 2, 4, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Demonstrate leadership behaviors, modifying one's own leadership behaviors based on guided self-reflection and professional feedback.	10	T	1, 5, 7, 8	Choose an item.	Choose an item.	Choose an item.	Choose an item.
<b>SPIRIT OF INQUIRY: Act as an evolving scholar who contributes to the development of the science of nursing practice by identifying questions in need of study, critiquing published research, and using available evidence as a foundation to propose creative, innovative, or evidence-based solutions to clinical practice problems.</b>							
<b>Expected Behaviors</b>	<b>LINKAGE: AACN Domain</b>	<b>LINKAGE: QSEN</b>	<b>LINKAGE: Program Outcome</b>	<b>MIDPOINT: Student</b>	<b>MIDPOINT: Clinical Faculty</b>	<b>FINAL: Student</b>	<b>FINAL: Clinical Faculty</b>
Participate in scholarly inquiry as an individual and a team member.	4	T	1, 3, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.



Evaluate clinical practice to generate questions to improve nursing care.	4	S	1, 3, 4, 8	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Evaluate appropriateness and strength of the evidence.	4	S	1, 2, 3, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Examine basic safety design principles to reduce risk of harm.	5	S	1, 3, 7, 8	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement with a commitment to professional growth.	9	E, S	7	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Expand personal knowledge to inform clinical judgment.	10	E	1, 2, 7	Choose an item.	Choose an item.	Choose an item.	Choose an item.

**MIDPOINT STUDENT:**

**Three areas for growth:**

**MIDPOINT CLINICAL FACULTY:**

**FINAL STUDENT**

**FINAL CLINICAL FACULTY:**

**STUDENT EXAMPLE TO SUPPORT ABOVE EXPECTATIONS: (if applicable)**

**STUDENT EXAMPLE TO SUPPORT ABOVE EXPECTATIONS: (if applicable)**

**Participation:**

**Student signature signifying they have read clinical faculty feedback:**

**Clinical faculty signature:**

## References:

- [https://www.ncsbn.org/NGN\\_Winter22\\_English\\_Final.pdf](https://www.ncsbn.org/NGN_Winter22_English_Final.pdf)
- <https://qsen.org/clinical-evaluation-tools-integrating-qsen-core-competencies-and-aacn-bsn-essentials/>
- <https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf>
- <https://qsen.org/competencies/graduate-ksas/>
- National League of Nursing. (2010). *Outcomes and competencies for graduates of practical/vocational, diploma, associate degree, baccalaureate, master's, practice doctorate, and research doctorate programs in nursing*. National League of Nursing.

**Appendix V: Phlebotomy Human Subjects Logs**

Student Name

Date

Venipuncture Log				
Subject ID - Venipuncture	Procedure	Date	Initials	Comments
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				

14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
28.				
29.				
30.				

Student Name

Date

Finger Puncture Log				
Subject ID – Finger Puncture Log	Procedure	Date	Initials	Comments
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

---

Student Name

Date

Other Skills Log				
Subject ID – Other Skills Log	Procedure	Date	Initials	Comments
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				

**Appendix W: Phlebotomy Skills Checklist**

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Skills	Date	Instructor Initials	Comments/Results
<b>General</b>			
Introduction & ID			
Glove Removal & Hand Wash			
Equipment Selection			
Specimen Labeling			
Artificial Arm Venipuncture			
Artificial Arm Syringe Procedure			
Artificial Arm Butterfly Procedure			
<b>Capillary Puncture Procedures</b>			
EDTA Microtainer			
Heparin Microtainer			
Red/SST or Amber Microtainer			
PKU simulation			
<b>Venipuncture Procedures</b>			
Evacuated Tube Method (arm)			
Evacuated Tube & Butterfly (arm)			
Evacuated Tube & Butterfly (hand)			
Needle & Syringe (arm)			
Butterfly & Syringe (hand)			



Skills	Date	Instructor Initials	Comments/Results
<b>Special Venipuncture Procedures</b>			
Blood Bank ID & Labeling			
Blood Cultures (Syringe)			
Buccal Collection			
Glucose Tolerance Test Simulation			
Urine Drug Screen Collection			
<b>POCT</b>			
Capillary Glucose			
HCT Collection & Reading			
Hemocult/Fit testing			
Pregnancy Testing			
Urine Testing (i.e dipstick)			
<b>Urine Specimen Collection</b>			
Clean Catch Collection Instruction			
24 Hr Collection Instruction			
Specimen Labeling			
<b>Miscellaneous Skills</b>			
ABG Simulation			
PPD Simulation			
Throat Culture Collection			
<b>Specimen Processing</b>			
Accessioning & Paperwork			
Handling & Processing			