ROCHESTER COLLEGE
SCHOOL OF NURSING

BACHELOR OF SCIENCE
IN NURSING
STUDENT HANDBOOK

This handbook is intended to be used in conjunction with the Rochester College Student Handbook. The faculty reserve the right to revise this handbook.

2018-2019 School of Nursing
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SCHOOL OF NURSING MISSION STATEMENT AND CURRICULUM CONCEPTS

MISSION STATEMENT The mission of the Rochester College School of Nursing is to develop socially conscious professional nurses who are empowered to address inequities in healthcare through civic engagement, inter-professional collaboration, and servant leadership. Students will utilize clinical reasoning in the context of an inclusive Christian environment to provide holistic care for diverse populations.

SCHOOL OF NURSING CURRICULUM CONCEPTS

1. **Challenge of Spirituality**: Students are exposed to a Christian perspective and are challenged to approach their life and work through personal responsibility and service.

2. **Critical Thinking**: Students demonstrate the ability to integrate the nursing process, conceptual frameworks/theory, and evidence-based practice (EBP) research to guide decision making in a variety of settings.

3. **Communication**: Students express understanding and collaborate in diverse contexts using a variety of written and verbal forms.

4. **Caring**: Students actively participate in a caring theory model.

5. **Community Oriented**: Students practice in a variety of settings, for the purpose of health promotion and disease prevention across the lifespan.

6. **Cultural Understanding**: Students obtain knowledge of diverse cultures that lead to an opportunity to appreciate a variety of people and their unique health practices and beliefs.

ACCREDITATION

Rochester College is accredited by the Higher Learning Commission and is a member of the North Central Association. The Baccalaureate in Nursing program at Rochester College School of Nursing is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Washington, DC 20001, (202)887-6791.

PRE-LICENSURE BSN

The pre-licensure nursing program requires completion of prerequisite coursework in the pre-nursing degree plan prior to 4 levels of coursework within the nursing major. Additional General Education requirements complete the degree requirements. Graduates of the RC SON Undergraduate program receive a Bachelor of Science in Nursing degree and may sit for the National Council Licensure Examination-RN (NCLEX-RN®) to become a Registered Nurse. The pre-licensure Bachelor of Science in Nursing degree program is comprised of the following requirements:

GENERAL EDUCATION COURSES

**Information Literacy (6 hours)**
- ENG 1113 Composition A
- ENG 1123 Composition B or HON 2013

**Communication Literacy (3 hours)**
- COM 1013, COM 2223, HON 2013

**Quantitative Literacy (10 hours)**
- **Lab Science**: CHE 1314 Intro to Chemistry I
- **Social and Behavioral Science**: BUS 2513; GEO 1013, 3113; HON 2213, 3213; MIN 2613; PED 2023; POS 2013, 2023, 2043, 3013, 4013, 4213, 4613, 4913; PSY 2013, 2113, 2223, 2233; SOC 2013, 2453; SWK 2013, 3003, 3103
- **Critical Thinking/Mathematical Competency**: MAT 1203, MAT 1103 or above; HON 2314 (Pre-Nursing/Nursing students are advised to take MAT 1203 - Survey of Mathematics)

**Cultural Literacy (12 hours)**
- **Fine Arts Appreciation**: ART 1413, 2003, 2213, 2233, 2413, 3213, 4123; ENG 3523; FLM 2013, 2423; HON 2113, 3113; INS 2133; MUS 1203, 2303; PHI 4413; THE 2003, 3113, 3323
- **Literature**: ENG 2513, 2713, 2723, 3213, 3223, 3313, 3323, 4413; HON 2113; THE 4743
- **Global Studies and Diversity**: BUS 3033; COM 3533; ECS 3423; EDU 3263; ENG 2713, 2723, 4413; GEO 1013, 3113; HIS 2213, 2413, 3423; HON 2213, 3213; INS 2123, 2133; LDR 3733; PHI 3043; PSY 3423; RDG 4353; REL 3923; SEN 2013, 3003, 3023, 3033; SOC 2453
- **Western Studies**: HIS 1313, 1323, 2113, 2513, 2523, 3313, 3323, 3503, 3513, 3523, 3533, 3543, 3553, 4323, 4333, 4513, 4523; HON 2113, 3113; INS 3113; PHI 2013

2018-2019
Theological Literacy (9 hours)
REL 1003 - Introduction to the Christian Faith
REL 1013 - Survey of Biblical Literature
BIB 2113, 2223, 2333, 2983, 3113, 3123, 3153, 3203, 3273, 3283, 3323, 3613, 4193, 4293, 4394; HIS 2213; PHI 3043;
REL 3923; THL 2013, 2023, 3613, 3793, 3893 (waived if transferring more than 29 hours)

REQUIRED SUPPORT COURSES
CHE 1314 (See General Education Courses-Lab Science)
BIO 1013/1011 Biological Science I/Lab
BIO 2011 Intro to Anatomy and Physiology Lab
BIO 2013 Intro to Anatomy and Physiology Lecture
BIO 3323/3321 Microbiology/Lab
CHE 1324 Intro to Chemistry II
PSY 2223 Life Span Development

NURSING COURSES
FALL-1ST YEAR
NUR 2102 Introduction to Professional Nursing
NUR 2304 Health Assessment
NUR 2402 Fundamentals of Nursing with clinical
NUR 2503 Nursing Skills Acquisitions
SPRING-1ST YEAR
NUR 2203 Integrated Pathophysiology
NUR 2604 Innovative Pharmacology
NUR 2705 Medical/Surgical Nursing I with clinical

FALL-2ND YEAR
NUR 3215 Medical/Surgical Nursing II with clinical
NUR 3314 Mental Health Nursing with clinical
NUR 3412 Applied Nursing Research I
SPRING-2ND YEAR
NUR 3422 Applied Nursing Research II
NUR 3514 Maternal-Infant Nursing with clinical
NUR 3614 Pediatric Nursing with clinical

FALL-3RD YEAR
NUR 4115 Medical/Surgical Nursing III with clinical
NUR 4214 Population Based Nursing with clinical
SPRING-3RD YEAR
NUR 4414 Pre-Licensure Capstone Practicum
NUR 4614 Comprehensive Nursing
CAN BE TAKEN EITHER FALL OR SPRING-3RD YEAR
LDR 3653 Strategic Leadership Theory and Practice

APPLICATION/ADMISSION POLICY – TRADITIONAL PRE-LICENSURE NURSING PROGRAM
A. Application deadline for Fall entry into Rochester College School of Nursing is the last Friday in May. Complete application includes full acceptance to Rochester College and receipt of all transcripts by the application deadline.
B. To be eligible to apply, applicants must have a minimum GPA of 3.2 in cumulative and a minimum GPA of 3.0 in prerequisite coursework.
C. Rochester College School of Nursing applicants will submit a personal goal statement in a Word document to sgriffin@rc.edu by the last Friday in May. This 500-1000 word essay should highlight the reasons the applicant wants to attend Rochester College School of Nursing and describe skills, experiences, and personal attributes that make him/her a good fit for the nursing profession. This goal statement will be used as a source of information about the applicant and as an example of the applicant’s writing ability.
D. As part of the application review process, potential Rochester College School of Nursing candidates will be invited to an individualized face-to-face interview with nursing faculty. Qualifying applicants will be notified of their interview date and time.
E. Important documents in this evaluation also include the academic transcript and the personal information provided on the Rochester College application form.
F. Decisions regarding acceptance to Rochester College School of Nursing are made by the Admissions Committee. The Admissions Committee reviews all applications that meet minimum requirements.
FRESHMAN DIRECT ADMIT APPLICATION
Information on Freshman Direct Admit can be found at the following link: http://rc.edu/academics/undergraduate/school-of-nursing/

BSN PROGRAM OUTCOMES

End of Program, Leveled Outcomes
At the end of Level IV, and at the end of the program, the RC-SON graduate will be able to:

1. Support individuals, families, and communities as an advocate. (Challenge of Spirituality)
   - Level III: Evaluate the impact of spiritual beliefs.
   - Level II: Interpret impact of spiritual beliefs and values on life, health, illness, and death.
   - Level I: Identifies own personal attitudes, value, and beliefs.

2. Synthesize knowledge from liberal arts, applied sciences, and current research in the delivery of nursing care. (Critical Thinking)
   - Level III: Examine research as a tool for seeking answers to clinically significant nursing problems.
   - Level II: Demonstrates the use of the nursing process as a systematic approach for thinking through practice issues.
   - Level I: Define conceptual/theoretical frameworks to organize nursing practice.

3. Evaluate communication techniques utilized in the teaching-learning process. (Communication)
   - Level III: Compare and contrast different communication strategies.
   - Level II: Apply therapeutic communication principles during interactions with others.
   - Level I: Describe verbal and non-verbal language that conveys the intended meaning.

4. Model behaviors associated with Jean Watson’s Theory of Human Caring/Caring Science. (Caring)
   - Level III: Demonstrate Jean Watson’s Theory of Human Caring/Caring Science behaviors.
   - Level II: Discuss Jean Watson’s Theory of Human Caring/Caring Science
   - Level I: Define Jean Watson’s Theory of Human Caring/Caring Science

5. Develop commitment to community involvement and leadership. (Community Oriented)
   - Level III: Appraises own practice of nursing through leadership and community service.
   - Level II: Demonstrate health promotional and disease prevention activities in a variety of settings.
   - Level I: Identify health promotion and disease prevention strategies in a variety of settings.

6. Advocate for culturally diverse healthcare practices. (Cultural Understanding)
   - Level III: Appraise culturally diverse healthcare practices.
   - Level II: Demonstrate cultural assessment.
   - Level I: Recognize diverse cultural practices.

<table>
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<td>NUR 3514</td>
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<td>NUR 2402</td>
<td>NUR 2705</td>
<td>NUR 3614</td>
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<td>NUR 2503</td>
<td>NUR 3215</td>
<td>NUR 4115</td>
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<td>NUR 3314</td>
<td>NUR 4214</td>
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<td>NUR 3412</td>
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<tr>
<td>RC-SON Concepts</td>
<td>Level 1 Courses (Outcome) Competency</td>
<td>Level 2 Courses (Outcome) Competency</td>
<td>Level 3 Courses (Outcome) Competency</td>
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<tr>
<td>Challenge of Spirituality</td>
<td>(Identifies own personal attitudes, value, and beliefs.) Recognize personal attitudes, values, and beliefs during treatment of illness. Examine how personal values relate to contemporary ethical issues. (AACN Essential I, II, VII, IX) (ANA Standard 7, 8, 14)</td>
<td>(Interpret impact of spiritual beliefs and values on life, health, illness, and death.) Examine personal and client attitudes, values, and beliefs, and its effects on health, illness, and death. Incorporate legal/ethical standards and accountability into professional nursing practice. (AACN Essential I, VI, VIII, IX) (ANA Standard 8, 9)</td>
<td>(Evaluate the impact of spiritual beliefs.) Evaluate and modify care plans in recognition of client practices/beliefs. Honor client practices to promote health and wellness. (AACN Essential I, VI, IX) (ANA Standard 7, 9)</td>
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<tr>
<td>Critical Thinking</td>
<td>(Define conceptual/theoretical frameworks to organize nursing practice.) Complete basic nursing skills using the nursing process. Applies Standards of Practice in the nursing care of individuals. Comprehend the critical thinking process and its relevance to nursing practice. (AACN Essential III, V, VII, VIII, IX) (ANA Standard 5, 7)</td>
<td>(Demonstrate the use of the nursing process as a systematic approach for thinking through practice issues.) Utilize the nursing process as a systematic approach for thinking through practice issues. Examine how the teaching-learning process is related to the nursing process. Determines care management needs of clients, and identifies resources that affect delivery of care and client outcomes. (AACN Essential III, V, VII, VIII, IX) (ANA Standard 13, 14)</td>
<td>(Examine research as a tool for seeking answers to clinically significant nursing problems.) Critique the value of his/her critical thinking process. Utilize research as a tool for seeking answers to clinically significant nursing problems. Manages complexities of clients. Identifies needs, and anticipates coordination of services. (AACN Essential III, V, VII, VIII, IX) (ANA Standard 9, 13, 14, 15)</td>
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<td>Communication</td>
<td>(Describe verbal and non-verbal language that conveys the intended meaning.) Differentiates between therapeutic, social, and professional communication. Applies principles of therapeutic communication with assigned clients.</td>
<td>(Apply therapeutic communication principles during interactions with others.) Demonstrates effective communication skills during nurse-client and professional interactions. Demonstrate ability to communicate in writing with a variety of</td>
<td>(Compare and contrast different communication strategies.) Affects patient care through initiation of effective communication (written and verbal) with clients and colleagues. Evaluates own communication skills. (AACN Essential I, IV,</td>
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<tr>
<td>Topic</td>
<td>(AACN Essential I, IV, VI, VII, IX) (ANA Standard 9)</td>
<td>(AACN Essential I, IV, VI, VII, IX) (ANA Standard 9,10)</td>
<td>VI, VII, IX (ANA Standard 9,10, 13,14)</td>
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<td>Community Oriented</td>
<td>(Identify health promotion and disease prevention strategies in a variety of settings.) Explain basic key health promotion and risk reduction strategies. Describe health determinants relevant to the individual, family, and community. (AACN Essential I, V, VII, VIII, IX) (ANA Standard 7, 11)</td>
<td>(Demonstrate health promotional and disease prevention activities in a variety of settings.) Educate clients about disease prevention and risk reduction strategies. Analyze the importance of cultural and global factors on perception of health and illness. (AACN Essential I, V, VII, VIII, IX) (ANA Standard 7, 13, 16, 17)</td>
<td>(Appraises own practice of nursing through leadership and community service.) Identifies vulnerable populations. Apply disease prevention and risk reduction strategies to vulnerable populations.(AACN Essential V, VII, VIII, IX) (ANA Standard 7, 13, 16, 17)</td>
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<td>Cultural Understanding</td>
<td>(Recognize diverse cultural practices.) Situate professional nursing in the treatment of disease within the cultural context. Perform appropriate assessments for diverse clients. (AACN Essential I, VIII, IX) (ANA Standard 1, 2, 3)</td>
<td>(Demonstrate cultural assessment.) Situate health assessment within the cultural context. Implement nursing interventions that reflect understanding of diversity. (AACN Essential III, VII, IX) (ANA Standard 1, 2, 3)</td>
<td>(Appraise culturally diverse healthcare practices.) Differentiate between cultural and social determinants of health. Develop plan of care for culturally diverse vulnerable populations. (AACN Essential III, VII, IX) (ANA Standard 1, 2, 3)</td>
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**ACADEMIC ADVISING**

The Academic Coordinator will help students with class scheduling, transcript updating, transfer evaluation and general questions about Rochester College. **It is the student's responsibility to meet with the Coordinator at least once each semester to ensure that the student is meeting requirements for the nursing program and is progressing satisfactorily towards graduation.**

All faculty serve as Academic Advisers to students. They will advise students about professional/academic direction and other nursing questions.

**ADDITIONAL COSTS FOR NURSING STUDENTS**

- ACEMAPP clinical placement (annual) $50
- Drug Screen (annual) $38 at Crittenton (Check w/PCP/possible ins. coverage)
- Michigan Background Check (annual) $10
- Immunizations/titeris (1st year if not up-to-date) Varies
- [MMR, Varicella, Hep B, Tdap(every 10 years)]
- Check with PCP/possible insurance coverage
- Tb skin test (annual) varies (Check with PCP)
- Flu vaccine (annual) Free at RC Health Fair
- Physical exam (1st year only) Varies/May be covered by insurance at PCP
- CPR certification (every 2 years) $80 (if completed at Rochester College)

  **Must be Basic Life Support (BLS) Health Care Provider (HCP)**

- Uniform with RC logo (1st year only) $130-$150
- Kaplan NCLEX test prep (every semester) $100
- Lab fee (1st year only) $100
- Skills Lab Kit (1st year only) $236
- Secondary skills equipment (1st year only) varies
  (Includes stethoscope, BP cuff, hemostat/scissors, and penlight)
- Available at Scrubs and Beyond
- National Student Nurse Association membership $35

**DOCUMENTATION REQUIREMENTS FOR ADMISSION TO RC SON**

All official documents are to be completed before a student is allowed to attend lecture/clinical. Rochester College uses ACEMAPP as our clinical placement tool. Upon acceptance into the Rochester College School of Nursing, new student names and email addresses will be provided to ACEMAPP.

**Once the student has an ACEMAPP account, the following requirements will be uploaded, by the student, to ACEMAPP.** Please use the uploading instructions from the following ACEMAPP link: [https://acemapp.org/kb/57](https://acemapp.org/kb/57)
To be uploaded to ACEMAPP:

- **Physical Exam.** Complete the student information portion of the *Comprehensive Clinical Health Form (Appendix A)* and take it to your appointment. The top portion is to be filled out by the student; the bottom portion by the healthcare provider. You can complete this at your private physician’s office and bill to your health insurance company (if applicable).

- **Drug Screen.** A urine drug screen may be obtained at the student’s private physician’s office or at Crittenton Hospital’s Occupational Medicine dept. (248-652-5203). Go to Crittenton ER between 7am-4pm to leave a urine sample. Ask to have the results sent to Rochester College School of Nursing. The student will be responsible for payment. The drug screen will need to be submitted at the beginning of each school year.

- **Background Check.** RC SON requires a Michigan State Police online background check in order to comply with clinical agency requirements. The background check will be required at the beginning of each year of nursing school. If the student provides a background check from another source it must be a statewide Michigan search. Please follow the procedure listed below for obtaining clearance:
  
  Log on to [https://apps.michigan.gov/Home/Login?q=MlGPpWZJC+eyoP6U6CpNUq==%27](https://apps.michigan.gov/Home/Login?q=MlGPpWZJC+eyoP6U6CpNUq==%27). Choose the “Get Started” tab. Log in as a guest user and follow instructions. Review the information provided, follow the requirements, and print your search. Print the sheet with results and not the payment confirmation page. (There is a $10 charge [Visa, Discover, or MasterCard] by the Michigan State Police for this service).

- **Immunization Records.** Students must provide documentation of all vaccines received. Without proof of vaccine, titers will need to be obtained to show immunity. Proof of immunization will be needed for *Hepatitis B, MMR (Mumps, Rubella and Rubeola), TDaP (pertussis must be a part of this), Varicella (disease history of chicken pox is not proof), and flu (immunization offered later in Fall)*. Students should keep a copy for their records.

- **BLS Healthcare Provider.** Students must have a valid *American Heart Association (AHA) Basic Life Support (BLS) Healthcare Provider* card prior to starting class. The BLS card will be valid for 2 years. Re-certification must be completed and uploaded to ACEMAPP prior to expiration. The BLS card must be kept current throughout nursing school.
### Clinical Requirements Student Checklist

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<th>FREQUENCY</th>
<th>PROOF OF REQUIREMENT</th>
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<tr>
<td>Background check</td>
<td>Annually</td>
<td>Copy of criminal record response</td>
</tr>
<tr>
<td>MMR (Mumps, Rubella, Rubeola)</td>
<td>One time</td>
<td>Documented dates of 2 vaccinations OR Titer indicating immunization</td>
</tr>
<tr>
<td>Varicella</td>
<td>One time</td>
<td>Documented date of vaccination OR Titer indicating immunization</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>One time</td>
<td>Documented dates of 3 vaccinations OR Titer indicating immunization OR signed waiver</td>
</tr>
<tr>
<td>TDaP</td>
<td>Every 10 years</td>
<td>Documentation of injection (Pertussis must be included)</td>
</tr>
<tr>
<td>TB Test (PPD)</td>
<td>Annually</td>
<td>Date and result of skin test. Chest X-ray with negative result will be accepted if student has a history of positive skin test</td>
</tr>
<tr>
<td>Drug Screen</td>
<td>Annually</td>
<td>Copy of drug screen result</td>
</tr>
<tr>
<td>BLS/HCP</td>
<td>Every 2 years</td>
<td>Copy of BLS/HCP card</td>
</tr>
<tr>
<td>Flu Vaccine</td>
<td>Annually</td>
<td>Documentation of injection</td>
</tr>
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### GENERAL POLICIES

#### RC SON CRIMINAL BACKGROUND POLICY

Admission to RC School of Nursing academic program is conditional upon review of prospective student’s criminal background check.

**Policy:**

A. Students must submit annual criminal background check prior to the start of each fall semester.

B. Any applicants with a misdemeanor on their record must meet with the Dean/Director of RC SON prior to the beginning of the academic year.

C. Any active RC SON student who commits a misdemeanor will be subject to the State of Michigan Board of Nursing rules.

D. If a student commits a felony while enrolled in the RC School of Nursing, the student will be dismissed from the RC School of Nursing.

### CLINICAL REQUIREMENT POLICY

A. Rochester College School of Nursing Clinical requirements, as outlined in the clinical requirement student checklist, is to be updated/completed and uploaded to ACEMAPP two weeks prior to the fall semester.

B. Any requirement, as outlined in the clinical requirement student checklist, that expires within the academic year must be updated and submitted prior to the expiration date.

C. Students may not attend clinical with any undocumented or expired clinical requirements.
PROGRESSION POLICY

- All NUR courses required for the nursing education program will be evaluated based on satisfactory completion of class, lab, and/or clinical competencies. The classroom competency standard requirement is 80% or higher. Students are required to achieve a satisfactory evaluation in the lab and clinical components of each NUR course. Numerical grades below 80% in the NUR courses and/or an unsatisfactory lab and/or clinical evaluation for the semester are considered unsatisfactory attainment of course competencies. One Unsatisfactory evaluation in class, lab and/or clinical will result in the student’s failure to progress in the NUR course sequence. Students who complete a nursing course with a 79.9 average or below will not progress in the nursing program. In clinical courses, final course grade will reflect actual cumulative test score earned from objective testing of course native exams. In non-clinical courses, final course grade will reflect actual grade earned by total body of work in the course. Progression to the next level of clinical courses cannot occur without successful completion of the previous level clinical courses.

- Students who experience non-progression in the nursing program and who desire to remain in the program must submit a reflective summary with a plan for improvement. They must also meet with their academic faculty. A student must submit the reflective summary with a statement of intent to remain in the program and their improvement plan within six months from the term of non-progression to be reinstated as a RC SON student. Reinstatement to the nursing program will be allowed one time only. Acceptance is contingent upon:
  - Meeting the current admission, advanced placement, and graduation requirements in effect at the time of consideration for reinstatement.
  - Submitting a reflective summary, statement of intent to remain in the program, and a plan for improvement.

- Failure of any two nursing courses/clinical will result in dismissal from the Rochester College School of Nursing.

- Program completion must occur within four years of entry into the School of Nursing.

MATH POLICY

In order to demonstrate competency in calculating safe medication dosages, the student is required to pass a math competency examination each semester with a score of 100% prior to administering medication in clinical. Students have three (3) attempts to achieve this benchmark. The 2nd/3rd attempt can occur no less than 48 hours after the previous attempt allowing time for remediation. Students who are not successful after the 3rd attempt are deemed unsafe in clinical practice and will receive a grade of "unsatisfactory" for the clinical component of the course. No additional attempts may be given and no alternative assignments may be utilized in place of this competency examination.

TESTING POLICY

In order to receive a passing score in a NUR course with clinical, a student must average a cumulative score of 80% on examinations. This average is to include all course-native examinations. Kaplan product testing will not be included.

DISMISSAL FROM NURSING PROGRAM

Students may be dismissed from the RC SON when any of the following occur:

1. A student earns less than a 2.7 (80%) in any nursing course. In a clinical/lecture class the student must pass both components to pass the class. Clinical is a pass/fail.
2. A student earns less than a 2.0 (73%) in a general education class.
3. A student withdraws from or earns an incomplete in a nursing course.
4. A student engages in any act that is in violation of the Criminal Code of Michigan or compromises the welfare or integrity of another person.
5. A student experiences physical, behavioral or psychological difficulties that would interfere with his or her ability to meet academic or professional standards.
6. A student produces a drug screen that reflects illicit drug use or a background check that reveals a criminal record.

WITHDRAWAL FROM NURSING PROGRAM POLICY

Withdrawal from RC SON may have both academic and financial aid consequences. Students are encouraged to understand the consequences of withdrawal.

All withdrawals from NUR courses require approval from the RC School of Nursing Dean/Director.

BEHAVIOR GUIDELINES

Students in the RC SON are expected to hold themselves to the highest standard of integrity in all learning environments in which they participate. They should be respectful of peers, instructors, and patients with whom they come in contact.
Students should be accountable for all supplies and equipment that are issued to them. Posted guidelines in the skills lab must be followed. Students found in violation will be reviewed under the Rochester College Code of Academic Integrity.

**PLAGIARISM REPORTING PROCESS**
Any instances of plagiarism will be reported to the Dean/Director and Registrar who will follow the guidelines detailed in the Rochester College Code of Academic Integrity.

**CHAIN OF COMMUNICATION**
When a situation involving conflict arises, whether in the classroom or clinical setting, the student is expected to discuss the issue with the peer, clinical instructor or course faculty with whom they are having conflict. This meeting should be face-to-face at a mutually agreed upon time. If resolution cannot be achieved an appointment should be made with the Level Lead Faculty prior to involving the Dean/Director of the School of Nursing. For clinical or skills related concerns, it may be appropriate to include the Lab Coordinator as well. This will be done at the discretion of the clinical or course faculty.

**LAPTOP COMPUTER**
Students are required to have a laptop computer for nursing classes. IPads and other tablets are not sufficient.

**COMMUNICATION DEVICES**
Cell phones and other communication devices should be in the silent mode during classes and while in the skills lab. Computers will be utilized for learning purposes only. Taping of lectures and presentations are only by consent of the instructor.

**APA WRITING STYLE**
All formal papers must be completed using the Publication Manual of the American Psychological Association (APA).

**EXAM PROCEDURES**
The following guidelines will be adhered to in all testing sessions:

1. No food or drink will be allowed during the administration of an exam.
2. Students may take a pen or pencil to their seat, and their personal computer. All other electronic devices will be left in a designated area in the room where students do not have access to them during the exam.
3. Book bags, backpacks and other personal items will be placed in a designated area in the room.
4. Students may be subject to assigned seating.
5. Students may leave the testing room ONLY when the exam is complete.
6. No talking is allowed during an exam.
7. Faculty reserve the right to investigate any suspicious activity.
8. Students arriving late for an exam will be given the amount of time remaining in the regularly scheduled timeframe to complete the exam. If any student has completed the test and left the room prior to the arrival of the late student, the late student will not be allowed to take the exam.
9. Students are responsible for protecting the integrity of their own exam.
10. Review of exams shall not occur during class time.
11. It is expected that students will take exams on the scheduled date and time.

**INVASIVE PROCEDURE GUIDELINES**
Students are not permitted to perform invasive procedures on other students for practice purposes.

**GUIDELINES FOR CLINICAL AND NURSING LAB EXPERIENCES**
**GENERAL STUDENT ATTIRE EXPECTED IN ALL SETTINGS**

1. RC Student Identification Badge and identification required by agency
2. Uniform that is clean and wrinkle free
3. May wear a white long sleeve t-shirt under uniform
4. Stethoscope with diaphragm and bell, watch with second hand and blood pressure cuff
5. Fingernails must be short and trimmed, no fingernail polish
6. Watch, plain wedding band, and one small post earring per ear lobe
7. Undergarments required and must be covered by uniform
8. Hair clean, natural color, and off collar
9. No visible tattoos
10. Neatly trimmed beard or mustache allowed
11. Closed toe shoes of a neutral color, with socks or hose
STUDENT ATTIRE FOR ACUTE CARE SETTING

1. Neither shoes nor scrub uniform should be worn outside of acute setting.
2. White lab coat may be required in some clinical settings.

STUDENT ATTIRE FOR COMMUNITY HEALTH AND MENTAL HEALTH CARE SETTINGS

1. RC Identification badge
2. Professional dress
3. White lab coat may be required.

COMMUNICATION RECORDS
A student reflection of the event in which a communication record is submitted will be due one week after the communication record is received by the student. Completion date of clinical lab referral time will be within one week or as determined by the clinical instructor and the lab coordinator.

CLIENT CONFIDENTIALITY

Protected Health Information Policy (PHI):

1. All RC-SON students will agree to maintain patient confidentiality through the NURSING STUDENT CONFIDENTIALITY AGREEMENT (Appendix E).
2. Confidentiality and Use of Medical Records:
   a. Students and faculty with any access to a clinical setting must comply with HIPAA rules and regulations, and cooperating clinical agency guidelines for training.
   b. Students and faculty are required to follow agency policies regarding use of and access to electronic medical records.
   c. Cooperating agency compliance modules must be completed as per cooperating clinical agency protocols.
   d. Patients’ PHI must be de-identified. PHI includes sufficient information about a patient such that the patient could be identified.
3. Use of Technology and Social Media
   a. Any technology, tool, or on-line space in clinical agencies cannot be used for personal business. This applies to social media platforms. Students must follow clinical agency policies regarding use of technology or social media. At times, a clinical setting may allow use of technology or on-line space or use of social media for work purposes. They are only to be used as they relate directly to patient care or specified agency activities.
   b. Agency computers cannot be used for personal business such as checking e-mail or social media sites.
   c. Any personal communication such as cell phone use or texting must be done outside of agency clinical areas on the student’s personal time.
   d. Posting or discussing any information about faculty, staff, other students or external clients (i.e. patients and families) on social media or on-line space is not permitted.
3. HIPAA Guidelines for Travelers and Alternative Clinical Experiences
   a. Regardless of laws and practices at foreign sites, students who violate HIPAA while abroad will face the same consequences they would for a violation committed here at home. Students should be especially mindful of those consequences when writing about and posting images of their experiences on social media.
   b. In the event of alternative clinical experiences in which facilities do not accept insurance, or for other reasons are not subject to HIPAA compliance, patient confidentiality is expected to be maintained and treated in accordance with HIPAA guidelines.
4. Violation of HIPAA and Patient Confidentiality
   a. Non-compliance with policies regarding HIPAA, the use of technology and social media, patient confidentiality, or respecting patient privacy will result in a course failure and may be subject to dismissal from the RC-SON.

ATTENDANCE POLICY-THEORY COURSES
Attendance policy for RC SON will be consistent with policy in the RC Student Handbook.
CLINICAL ABSENCE

1. Students and faculty are expected to complete all orientation requirements for their respective cooperating clinical agencies. This must be accomplished as established by cooperating clinical agency protocol.
2. In accordance with the RC-SON attendance policy, three tardies at clinical is counted as an unexcused clinical absence.
3. Two missed clinical days result in a course failure.
4. All clinical absences will be made up at the discretion of individual course instructors, and will be comparable to the missed clinical experience.
5. Acceptable clinical make-up experiences will be assigned by the course Faculty of Record and approved by the Dean of Nursing.
   a. Examples of acceptable clinical make-up experiences may be, but are not limited to: additional clinical days at the cooperating clinical agency, and clinical lab simulation for a portion (not all) of the missed clinical time.
   b. Examples of unacceptable clinical make-up experiences may be, but are not limited to: conference and in-service attendance, and off-unit vicarious experiences.

CLINICAL AND CLASS CANCELLATION

1. Refer to Clinical Cancellations due to Inclement Weather policy.
2. There may be times when a decision must be made by individual faculty about clinical and classroom experiences when there is no official cancellation. In this event, the RC-SON faculty members must make a judgment regarding the wisdom of having clinical or class experiences at this time. In making this decision, faculty should consider that maintaining safety of all is a priority.
   a. Class cancellation: Refer to the process outlined in Rochester College Faculty Handbook, III. Instructional Responsibilities of Faculty and Adjuncts, Section F. Faculty and Adjunct Absences.
   b. Clinical Cancellation when there is no official cancellation:
      i. Clinical faculty will contact cooperating clinical agency to inform them of the cancellation.
      ii. Clinical faculty will contact the Course Faculty of Record to provide reason for cancellation and plan for clinical make-up. Follow Clinical Absence Policy above.

STUDENT PARKING
Faculty at the clinical site will provide information regarding parking for students at the site. Students are expected to adhere to the clinical site policy.

PERSONAL BELONGINGS
Students should leave books, purses and other personal items locked in their car or at home. Small items that are needed, such as identification and money, should be carried in uniform pockets.

CHAPEL/CONVOCATION
Please refer to the Rochester College Chapel-Convocation guidelines found at the following link:
http://docs.rc.edu/en/2018-2019/Course-Catalog/Center-for-Student-Life/Spiritual-Formation

LICENSING REQUIREMENTS
Requirements for the state board examination and licensure (NCLEX) can be found at:

INSURANCE
The RC SON will follow the policy of Rochester College, found in the Student Handbook, regarding Health Insurance.

All RC SON students will be required to carry a $1 million/$5 million liability insurance policy and covered by Rochester College within an umbrella policy.

INJURY/EXPOSURE/INCIDENT REPORTING
Any injury, exposure or incident (involving student, faculty or patient) occurring on the Rochester College campus will be documented on the RC SON Occurrence Report Form (Appendix C) and reported to the Dean/Director of the School of Nursing. The Dean/Director will then report the incident to the Human Resources Office. Attending faculty or clinical instructor will assist the student with medical needs prior to initiating the reporting process. If the occurrence is offsite
during clinical rotation, the student will fill out the agency’s incident report forms and bring a copy to the RC SON office. If the student is unable to acquire a copy, he/she must fill out the RC SON Occurrence Report Form. For theft and other similar types of incidents the student should use the RC Incident Report Form (Appendix D).

**CODE OF ACADEMIC INTEGRITY**
The Rochester College School of Nursing adheres to the Rochester College Code of Academic Integrity found at:

## TO BE COMPLETED BY STUDENT (PLEASE PRINT)

Name (Last, First, M.I.) ____________________________________________

Birth Date: ____________ Gender: ___ Female   ____ Male   RC ID #: ____________ RC email: ____________

<table>
<thead>
<tr>
<th>Are you being treated for any disease, disability or condition?</th>
<th>Yes (Please explain)</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Current Medications: ____________________________   Current Allergies: ____________________________

*This record will become part of the student’s School of Nursing file and disclosed to school officials with a legitimate interest.

I hereby represent that each answer to a question herein and all other information otherwise furnished is true and correct. I further represent that such answers and information constitute a full and complete disclosure of my knowledge with respect to the question or subject to which the answer or information relates. I understand that any incorrect or false statements or information furnished by me will subject me to disqualification from the Rochester College School of Nursing at any time.

Authorization to release this medical record to Rochester College School of Nursing

Student Signature ____________________________   Date ____________

## TO BE COMPLETED BY HEALTH CARE PROVIDER

NAME OF STUDENT: ____________________________________________

Height: ____________ Weight: ____________ Blood pressure: _______/_______ Pulse: ____________

Distance vision: right 20/________ corr. to 20/________ left 20/________ corr. to 20/________

Examining Health Care Provider: ____________________________

<table>
<thead>
<tr>
<th>Normal</th>
<th>Abnormal</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKULL, SCALP, FACE, NECK, THYROID</td>
<td>Check each item in appropriate column. Enter NE if not evaluated.</td>
</tr>
<tr>
<td>NOSE and SINUSES</td>
<td>ENDOCRINE SYSTEM</td>
</tr>
<tr>
<td>MOUTH (tongue, gingivae, teeth)</td>
<td>G.U.SYSTE (OPTIONAL) (Pap test-optional)</td>
</tr>
<tr>
<td>THROAT and TONSILS</td>
<td>UPPER EXTREMITIES</td>
</tr>
<tr>
<td>EARS (Int. and Ext. Canals)</td>
<td>FEET (lateral pain, infection)</td>
</tr>
<tr>
<td>EYES (Pupils, E.O.M. conjunct.)</td>
<td>LOWER EXTREMITIES</td>
</tr>
<tr>
<td>LUNGS and CHEST (include breasts)</td>
<td>SKIN, OTHER MUSCULOSKELETAL</td>
</tr>
<tr>
<td>HEART (rhythm, sounds, murmurs)</td>
<td>LYMPHATIC GLANDS</td>
</tr>
<tr>
<td>ABDOMEN and VISCERA (include hernia)</td>
<td>NEUROLOGIC</td>
</tr>
</tbody>
</table>

Please Print ____________________________   Examiing Health Care Provider: ____________________________

Address: ______________________________________ City: __________________ State: _____ Zip: ______ Phone: ____________
APPENDIX B

HEPATITIS B VACCINE ACKNOWLEDGMENT AND RELEASE
ROCHESTER COLLEGE
SCHOOL OF NURSING STUDENTS

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. However, I have declined the hepatitis B vaccination at this time. I agree to release, exonerate and forever unconditionally discharge and hold harmless Rochester College, its Board of Trustees, officers, directors, employees, representatives, agents and assigns and the facility where I receive my clinical training, from any and all liability, claims or causes, known or unknown, now or hereafter arising directly or indirectly out of or relating in any way to my declining the Hepatitis B vaccinations. I acknowledge that I am placing myself and others at risk of serious illness should I contract a disease that could have been prevented through proper vaccination.

Student Name: ___________________________________________________
(Please Print)

Student Signature: ___________________________________________________

Date: ______________________

____________________________________________________
(Signature of parent or guardian if student is a minor)

Date: ________________
RC SON OCCURRENCE REPORT

For Use by Nursing Faculty and Students ONLY

This form should be completed immediately after the incident and taken to the RC SON Office.

PLEASE PRINT CLEARLY

Incident/Exposure Date/Time: ________________________________

Person Reporting Incident/Exposure:
Name: ______________________________________________________
Address: ____________________________________________________
City/State/Zip: ______________________________________________
Cell Phone number: ____________________
RC email: ______________________________

Employee/Student ID Number: ____________________ Injured Person is: ___RC Student ___RC Employee ___Other

Location of incident/exposure (include room # if possible): ________________________________

How did incident/exposure occur? ______________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Nature of injury/exposure: ____________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Did injured person receive medical attention: _____ If yes, by whom? __________________________________________

Person was transported to medical facility by ________________________________

Medical Attention Refused ____________________ Signature of Injured Person

Date: ____________________

Signature of Person Reporting Incident ____________________ Signature of Dean

Human Resources Signature

Date

Documentation of follow-up and planned debriefing: ______________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
APPENDIX D

Incident Report

This form should be completed immediately after the incident and taken to the Human Resources office. As with any incident it is up to the person reporting the incident to contact the police and file a report – the college cannot file a report for an individual.

Person Reporting Incident: ____________________________ Date/Time: __________________

Exact location on campus where this incident took place (include room number if applicable):

______________________________________________________________

Describe what happened in detail. If theft occurred, name all items with descriptions and any details that would identify the items. Use back of form if necessary.

____________________________________________________________________

____________________________________________________________________

If theft occurred, was the area secured or locked? YES NO

Was there indication of forced entry? YES NO

Was there any property damage? YES NO

Please list damage: ____________________________________________

____________________________________________________________________

Was anyone injured? YES NO

Please list all injured and describe injury: ____________________________

____________________________________________________________________

What insurance coverage exists? ________________________________

If known, give company name and policy number. ____________________

Whom did you contact about the incident? ________________________

What is their title or role on campus? _____________________________

Was an emergency service called? YES NO

What services were notified or contacted? __________________________

☐ I chose to file a police report. Report number: ____________________ ☐ I chose not to file a police report.

_________________________ __________________________

Signature of Person Reporting Incident Date

_________________________ __________________________

Human Resources Signature Date

Documentation of follow-up: ______________________________________

____________________________________________________________________

____________________________________________________________________

Copies to:

_____ Person Reporting

_____ Human Resources
APPENDIX E

RC-SON: NURSING STUDENT CONFIDENTIALITY AGREEMENT

I understand that I may have access to confidential patient information and confidential information about the business and financial interests of the clinical facilities where I care for patients. I understand that Confidential Information is protected in every form, such as written and/or electronic records and correspondence, oral communications, images, and computer programs and applications.

I agree to comply with all existing and future policies and procedures of the clinical agencies to protect the confidentiality of Confidential Information. I agree not to share confidential information through electronic means such as texting, nor any social media platforms. I agree not to use, copy, make notes regarding, remove, release, or disclose Confidential Information with another individual. I agree not to share or release any authentication code or device, password, key card, or identification badge to any other person, and I agree not to use or release anyone else’s authentication code or device, password, key card, or identification badge.

I agree not to allow any other person, except those authorized by the clinical agency, to have access to the clinical agency information system under my authentication code or device, password, key card, or identification badge. I agree to notify the appropriate administrator immediately if I become aware that another person has access to my authentication code or device, password, key card, or identification badge, or otherwise has unauthorized access to the clinical agency’s information system or records.

I agree that my obligations under this Agreement continue after my role as a student ends.

Print Name: ___________________________ Signature: ___________________________

Date: _____________________
APPENDIX F

ROCHESTER COLLEGE SCHOOL OF NURSING STUDENT ACKNOWLEDGEMENT STATEMENT

I have read the RC-SON Student Handbook and agree to adhere to all guidelines and policies.

_______________________________________             _____________________________________

Printed Name                        Signature

__________________

Date