ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529

Olney Central College

Associate Degree Nursing Program

NURSING STUDENT HANDBOOK

2022-2023

Some information in this publication may become outdated due to changes in Board of Trustees Policy, state law, and nursing program guidelines. In such instances current board policy, state law, and nursing program guidelines will prevail.

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INTRODUCTION

Welcome to Illinois Eastern Community Colleges - Olney Central College Associate Degree Nursing Program! It is important that you read the college catalog and this handbook. The expectation is that you adhere to the policies and guidelines found in these documents. The College reserves the right to change policies and guidelines as needed to facilitate program and student outcomes. You will be informed, in writing, of any changes that occur, as you progress through the program.

The Illinois Department of Financial and Professional Regulation (IDFPR) has approved Illinois Eastern Community Colleges - Olney Central College Associate Degree Nursing Program. The program maintains continuing accreditation through the Accreditation Commission for Education in Nursing (ACEN). ACEN is located at 3390 Peachtree Road NE, Suite 1400, Atlanta, GA 30326, 404-975-5000, website: www.acenursing.org. All four colleges in the IECC District offer the nursing program. IDFPR has approved the Practical Nursing (PN) "exit" certificate, offered each summer. IDFPR information is located at www.idfpr.com.

IECC-OCC is a District Nursing Program. Courses are scheduled, **whenever possible, on the college site the student is admitted. Sometimes [especially with the transition courses (NUR-1203, NUR-1204, NUR-1205)] students may be required to attend another college site for a course.**

It is our desire to help you meet your educational goals. It is our commitment that you receive quality education while enrolled in the nursing program.

Associate Dean of Nursing and
Allied Health and the Nursing Faculty

EQUAL OPPORTUNITY POLICY

Illinois Eastern Community Colleges, District 529, does not discriminate on the basis of race, color, religion, gender, age, disability, national origin, or veteran status. Illinois Eastern Community Colleges adheres to the Federal Regulations of the Americans with Disabilities Act of 1990 and offers appropriate services or activities with reasonable accommodations to any qualified disabled individual upon request.

REQUIRED CAPABILITIES

Students enrolled in the IECC-Olney Central College Associate Degree Program must possess the physical and psychological capabilities required to meet the classroom and clinical objectives of the curriculum. Curriculum objectives require students to have cognitive, psychomotor, and affective abilities that ensure safe nursing care within the scope of nursing practice. It is IECC policy to provide reasonable accommodations to students with disabilities. If the student would like to request academic support services, he/she needs to contact the Department Head of Nursing or the Learning Skills Center.

Students in the nursing program must comply with clinical affiliate requirements. These include up-to-date immunizations, current health physical, American Heart Association BLS certification, and satisfactory background check. Additionally, students will be required to have a satisfactory drug screening and complete skills competency checks. Students must meet the criteria of each clinical site used by the program. Students who do not meet the criteria of assigned clinical facilities will be dismissed from the program.

EDUCATIONAL MOBILITY

IECC-Olney Central College Nursing Programs offer the following educational mobility options:

Certificate in Practical Nursing

Upon successful completion of the first year of the Associate Degree Nursing Program and NUR 1203 and NUR 1206, the student earns a certificate and becomes eligible to write the National Council Licensure Examination for Practical Nurses NCLEX-PN and apply for licensure as a practical nurse.

Mobility Option

The Associate Degree Nursing student has the educational mobility option of exiting at the practical nurse level or continuing into the second year to complete studies to become a registered nurse. IECC practical nursing students may apply to the ADN program and complete the second year to become a graduate of the associate degree program.

Associate in Applied Science Degree

Upon successful completion of the second year of nursing, the graduate receives an Associate in Applied Science (AAS) Degree in Nursing and is eligible to write the National Council Licensure Examination NCLEX-RN and apply for licensure as a registered nurse.

Advanced Placement

Transfer students and licensed practical nurses may be granted advanced placement status. Nursing and general education course equivalency must be validated. All first-level, general education courses must be completed prior to admittance into the second year.

Continuing Education

Through a cooperative effort of Illinois Eastern Community Colleges-Olney Central College with four-year institutions of higher education, registered nurses are able to earn a Bachelor of Science Degree in Nursing. Support courses for the programs are offered by OCC and other IECC campuses, while the Universities provide instruction through distance technology and/or classes at the college sites for the nursing courses.

SECTION I

PROGRAM OF LEARNING

- **Vision**
- **Values**
- **Mission of the Program**
- **Purposes**
- **Philosophy**
- **Educational Outcomes**
- **Curriculum Design**
- **Program Requirements**
- **Organizational Structure**
- **Organizational Chart**

VISION

Illinois Eastern Community Colleges, Olney Central College Associate Degree Program is committed to excellence in education through innovative teaching and collaboration with the communities we serve. We value and will promote ethical integrity, holistic caring, collaboration, excellence, personal and professional development, and respect of diversity as we facilitate students as members of the profession of nursing and citizens of the broader community. Our values are a reflection of the culture and character of the program and guide us in achieving our vision.

VALUES

Ethical Integrity: We endeavor to adhere to a consistent standard of ethical behavior that is grounded in the *Code for Nurses*, respecting the dignity, self-determination, and worth of all persons across the lifespan.

Holistic Caring: We seek to promote culturally sensitive health, healing, and hope within the context of a wellness-illness continuum. We affirm the uniqueness of individuals based on their experiences, religious beliefs, and value system.

Collaboration: We seek to develop cooperative relationships which reduce conflict, build trust, and create networks for sharing information and for mutual learning.

Excellence: We aspire to continuous improvement in knowledge understanding, and quality care. We recognize that change is constant and endeavor to continually seek ways to improve practice, personal growth, and collegiality.

Personal Development: We encourage persons to engage in activities that nurture mind, body and spirit and enhance maturation as a person and a professional.

Diversity: We recognize the dignity, strength and uniqueness of each person and strive to provide an environment of mutual respect and understanding.

The values of the IECC/OCC Associate Degree Nursing program are congruent with the values of Illinois Eastern Community Colleges, District #529 which are *compassion, respect/self-respect, fairness, truth/honor, and responsibility*.

MISSION OF THE PROGRAM

The mission of the Illinois Eastern Community Colleges-Olney Central College Associate Degree Nursing Program is to provide exceptional educational opportunities for qualified persons to enter the profession of nursing. This mission is achieved by providing a quality, balanced curriculum of general education and nursing courses.

PURPOSES

1. Prepare competent nursing graduates who meet the requirements for beginning practitioners in nursing.

2. Provide a stimulus for development of the individual and commitment to life-long learning.

3. Provide a career mobility program that recognizes and builds on prior education.

4. Develop a climate of respect for diversity of persons and ideas wherein students have opportunity to discuss social and professional issues.

5. Guide students in personal and professional development as members of the profession of nursing and citizens of the broader community.

6. Maintain a program of learning that meets the needs of the student and the community in an evolving, global health care environment.

7. Offer opportunities for students to participate in community service activities.

8. Provide a facilitative work environment that encourages expression of ideas, innovations in teaching, and development of methods that enhance student learning.

9. Provide resources needed to support the program of learning.

10. Assist students in preparing for matriculation to four-year institutions of higher education.

Revised purposes 7/06; 2/08; 4/09; 2/15

PHILOSOPHY

The vision, values, mission, and philosophy of the nursing program supports the mission and purposes of Illinois Eastern Community Colleges. The philosophy reflects the nursing faculty's view of the person, health, nursing practice, nursing education, the teaching-learning process, and the practice and roles of the associate degree nurse.

Upon entry into practice, the graduate is prepared to perform the competencies inherent in the three interrelated roles of nursing:

1. Provider of patient-centered care
2. Manager of patient centered care
3. Member within the profession.

These roles are derived from National League of Nursing competencies, Quality and Safety in Education for Nursing, American Nurses Association: *Scope and Standards of Practice*, and the Illinois Nurse Practice Act.

The nursing faculty believe the following:

- Nursing education is the process by which students engage in learning experiences that develop the cognitive, affective, and psychomotor abilities necessary for safe nursing practice.
- Learning involves three domains: cognitive, affective, and psychomotor. The cognitive domain pertains to knowledge, critical thinking, clinical judgment, and integration of best evidence into practice; the affective domain to attitudes and values; and the psychomotor domain to skills involving physical action.
- The learning process is facilitated when faculty and students function with integrity. The faculty serves as a facilitator and resource person and as a stimulus for critical thinking and intellectual inquiry.
- Faculty/student collaboration is essential in providing a quality and engaging educational experience that prepares students for current nursing practice. Faculty annually review program content and measure student achievement of program learning outcomes to prepare students for transition to practice.

The faculty promote a learning environment conducive to self-motivation and individuality. Within this climate of mutual respect and civility, students and faculty share in a cooperative spirit of inquiry, learning, and teaching. The faculty strive to promote a well-structured, evidenced-based curriculum focused on patient-centered care.

Nursing practice is a helping interaction based on the nursing process in order to meet a person's basic needs. The goals of this interaction is to:

1. Promote and maintain wellness
2. Restore a person to optimal health
3. Support the person through the dying process

The nurse requires effective communication and teaching techniques to accomplish these goals.

EDUCATIONAL OUTCOMES

Upon entry into practice, the graduate of the nursing programs will be able to:

1. Utilize the nursing process, nursing judgment, and evidence-based practice to advocate for and provide safe, effective, and innovative patient-centered care across the lifespan.

2. Demonstrate communication ability by establishing and maintaining individualized and culturally competent therapeutic relationships.

3. Develop, implement, and evaluate teaching plans to achieve quality patient outcomes.

4. Use knowledge of consumer rights and responsibilities to plan for, advocate for, and intervene on behalf of patients, while delivering cost-effective care.

5. Delegate aspects of care to nursing personnel based on education, experience, and scope of practice.

6. Collaborate with other health care providers to provide and improve patient care and outcomes.

7. Use information and technology to communicate, manage knowledge, reduce error, and support clinical decision-making.

8. Assume responsibility for continued education and professional development.

9. Demonstrate professional behavior and integrate the role of professional identity in practice.

10. Practice within the ethical and legal framework of the profession of nursing and State Nurse Practice Act.

CURRICULUM DESIGN

There are four major concepts which flow throughout the Program of Learning:
(a) **person's basic needs**, (b) **growth and development**, (c) **wellness-illness**, and (d) **nursing process**. Each nursing course considers the person's basic needs in relation to growth and development on the wellness-illness continuum by utilizing the activities of the nursing process.

The nursing process provides organization to the written content in the Program of Learning and for patient-centered care. The faculty adopted a five-step approach to the nursing process, which has the following components: (a) **assessing**, (b) **analyzing/diagnosing**, (c) **planning**, (d) **implementing**, and (e) **evaluating**. The nurse applies critical thinking to the nursing process to assess the patient, formulate nursing diagnosis, develop patient goals and desired patient outcomes, implement nursing interventions, and evaluate patient outcomes.

Assessing is the process of comprehensively gathering data. Data is gathered by assessing the patient's (person's) basic needs in relation to growth and development norms.

The **lower needs** are: oxygenation, circulation, regulatory, nutrition, elimination, motor/sensory, and safety/security. An oxygenation need is the basis for the intake, exchange, distribution, and removal of gases. A circulation need is the basis for transportation of nutrients, gases, and waste products. A regulatory need is the basis for the maintenance of fluid and electrolyte balance, temperature control, and endocrine function. A nutritional need is the basis for ingestion, digestion, absorption, and metabolism. An elimination need is the basis for removal of indigestible materials and waste products of metabolism. A motor/sensory need is the basis for the maintenance of stimulation, perception, and mobility. A safety and security need is the basis for the maintenance of the external environment and internal environment. External environment includes physical, mechanical, microbial, thermal, electrical, economics, and employment. Internal environment includes cellular factors.

The **higher needs** are: psychosocial. A psychosocial need is the basis for the cognitive, affective and psychomotor (behavioral) activities, and development of self-concept, including spirituality, effective relationships and communication. This order of basic needs influences the nurse in prioritizing the patient's basic needs when the patient's needs are altered.

Knowledge of patient's needs in relation to **growth and development** is essential for the purpose of individualizing nursing interventions. Growth and development includes the normal progressive and predictable patterns of biological, psychological, and sociological development from conception to death. These predictable patterns are accomplished in a manner and time unique to each person in relation to culture and sexual identity. Development of one stage may be controlled or influenced by the activity of one or more of the preceding stages. The stages of life are: neonate, birth to 28 days; infancy, 1 month to 1 year; toddler, 1-3 years; preschool, 4-5 years; school age, 6-12 years; adolescence, 12-18 years; young adulthood, 19-40 years; middle adulthood, 40-64 years; and older adulthood, 65 years and over (young-old, 65-74 years; middle-old, 75-84 years; oldest-old, 85 and over).

Analyzing/Diagnosing data allows the nurse to place the patient appropriately on the wellness-illness continuum. This continuum is an ever-changing state, ranging from high-level wellness to extreme illness with death imminent. The patient's placement on the continuum is determined by the degree of alterations in basic needs, which have an impact on other basic needs, and the developmental tasks of the patient throughout the life cycle.

While analyzing patient assessment data, the nurse uses nursing judgment to conceptualize and analyze relationships in order to arrive at nursing diagnoses. A nursing diagnosis is a statement of the patient's alteration in basic needs and its related cause that can be impacted by nursing interventions.

Planning includes prioritizing, goal setting, determining desired outcomes, selecting nursing interventions, validating rationale, and initiating and/or collaborating on the nursing plan of care. The patient's participation is most important in the planning step of the nursing process. Congruence with the patient's social, cultural and spiritual values, practices and beliefs is essential. Prioritizing is the ranking of the patient's altered basic needs as reflected in the diagnostic statement in order to determine where nursing interventions commence. The lower needs take priority. Goal setting is determining and writing a clear statement of outcomes to be achieved through nursing intervention. The specific patient responses, or outcomes, stated in measurable terms, are indicators of movement toward meeting the goal and are formulated as the desired outcomes. Interventions are nursing actions which focus on helping the patient meet desired outcomes and the goal. Rationales to validate interventions are based on nursing knowledge and evidence-based practice, and other relevant research and sciences. The nursing care plan is then written for the patient's care which is directed toward enabling the patient to maintain or reach the goal of optimal or high-level wellness or to support the patient through the dying process. This plan is congruent with the multidisciplinary team plan and helps the nursing staff coordinate efforts to meet the patient's basic needs.

Implementing is the initiation and completion of the planned interventions. These may be dependent, collaborative/interdependent or independent nursing actions. The ability of the patient to participate will be determined by the patient's motivation, growth and development stages and placement on the wellness-illness continuum.

Evaluating is the analysis of the patient's responses, or outcomes, to health care interventions, indicating the effectiveness of the nursing care provided. If the outcome criteria are not met, reassessment is necessary.

Integrated in the nursing process are **five therapeutic nursing interventions**: skills performance, communication, patient teaching, management of patient-centered care, and role responsibility.

Skills performance is the action, or procedure, carried out by the nurse while providing patient-centered care. The nurse is expected to perform skills safely and competently.

Communication is a nursing action, verbal or non-verbal, through which the nurse helps the patient to meet basic needs. Communication techniques are used to initiate and maintain culturally competent therapeutic relationships and implement appropriate nursing interventions. Communication is also used to promote teamwork and collaboration with other members of the health team and make appropriate referrals. Information and technology skills are used to coordinate, communicate, and document nursing care according to ethical and legal guidelines.

Management of patient-centered care is the nursing action in which the nurse uses organization, decision-making, and delegation skills to care for a patient or a group of patients and demonstrates shared responsibility with other members of the nursing team.

Patient teaching is the nursing action in which the nurse provides age-appropriate information, informally and formally, to help the patient meet basic needs.

Role responsibility is the nursing action in which the nurse is responsible and accountable for nursing practice within the profession's ethical and legal framework. The nurse is accountable for maintaining competence and recognizing limitations of knowledge and experience. The nurse is responsible for ensuring the patient's rights, recognizing patient responsibilities, maintaining accountability for care given and care delegated, and for utilization and disbursement of equipment, resources and materials.

Integration of these five therapeutic nursing interventions in the nursing process prepares the student for the competencies inherent in three interrelated roles of the associate degree nurse: provider of patient-centered care, manager of patient-centered care, and member within the profession of nursing.

Current nursing initiatives and several theoretical principles guide the program's design. The Program reviews evidence-based nursing practice for inclusion into the curriculum. Patricia Benner's Novice to Expert theory provides a progressive approach to knowledge, skills, and attitudes necessary for the entry-level, bedside nurse. Virginia Henderson's Basic Needs theory provides a context where the nurse addresses the basic needs of an individual. This framework addresses patient care across the wellness-illness continuum, allows the nurse to demonstrate skilled and comprehensive care, and utilizes nursing education as a foundation for current and continuing nursing practice. Watson's Caring Theory and Leininger's Cultural Care Theory are also integrated throughout the curriculum. Knowles' theory for the adult learner contributes to the curriculum design and delivery to meet the needs of our student population.

To meet the challenge of workplace entry, the program subscribes to the goals of The Quality and Safety Education for Nurses (QSEN) Institute. The QSEN Institute has defined core quality and safety competencies for entry level nursing. Competency areas include the knowledge, skills, and attitudes for patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics. Information can be found at www.qsen.org.

The program utilizes the National League for Nursing (NLN) Core Values and Competencies for nursing graduates. NLN Core Values consist of caring, diversity, excellence, integrity, ethics, holism, and patient-centeredness. Integrating Concepts address context and environment, knowledge and science, personal and professional development, quality and safety, relationship-centered care, and teamwork. Outcomes for the nursing graduate includes: human flourishing, nursing judgment, professional identity, and spirit of inquiry. Information can be found at www.nln.org.

The program integrates the American Nurse Association (ANA) Scope and Standards of Practice and Code of Ethics for nursing practice into our curriculum design and delivery. Information can be found at www.nursingworld.com. Approval for the program is provided by the Illinois Department of Financial and Professional Regulations (IDFPR). The Nurse Practice Act provides guidelines for curriculum development, delivery, and qualifications of faculty. It also provides guidance for scope of nursing practice in Illinois. Information on IDFPR can be found at www.idfpr.com.

To ensure excellence in nursing education, the program adheres to standards and criteria for Associate Degree Nursing Programs defined by the Accreditation Commission for Education in Nursing (ACEN). The program has been continuously accredited since 1984 and achieved continuing accreditation in 2016 by ACEN through 2024. Standards and criteria can be found at www.acenursing.com.

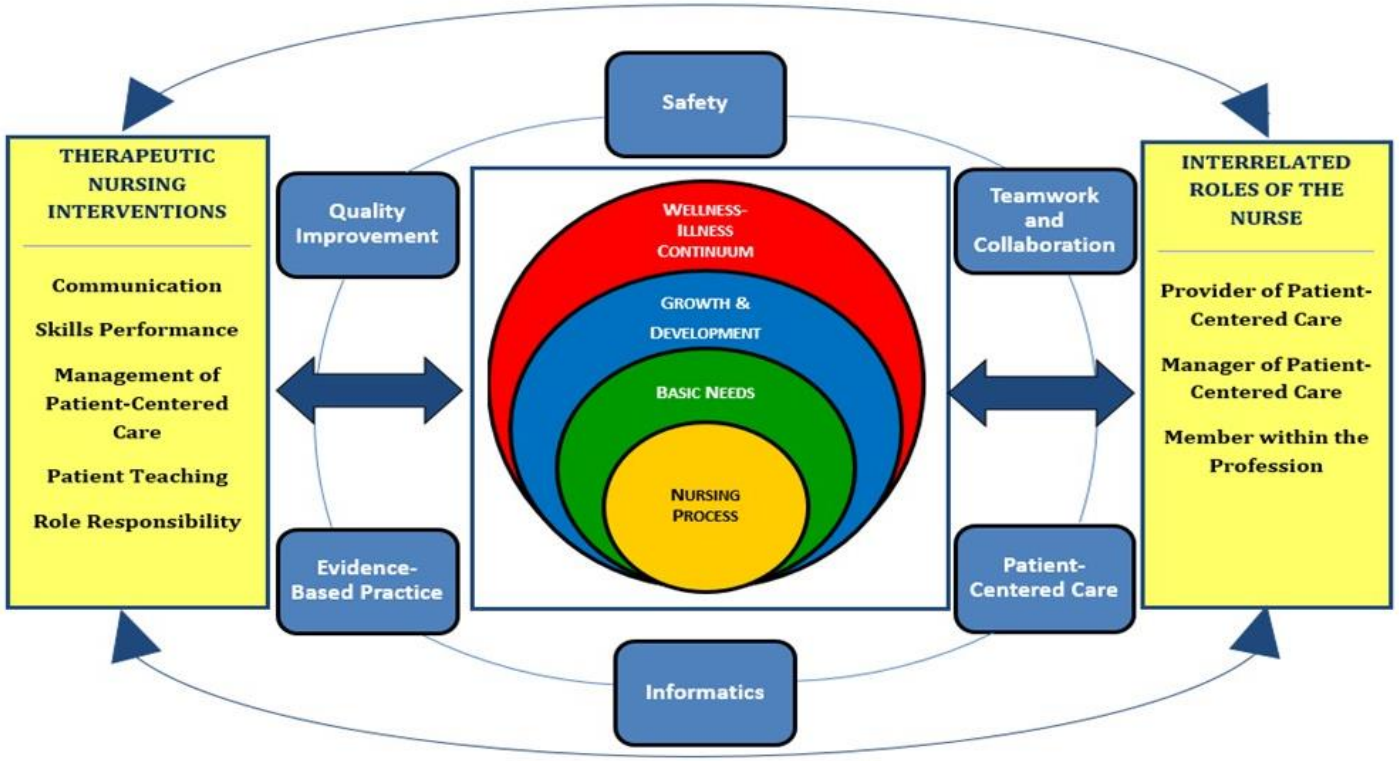


Chart 1: IECC-OCC Nursing Curriculum Design

ILLINOIS EASTERN COMMUNITY COLLEGES NURSING PROGRAM REQUIREMENTS
ASSOCIATE DEGREE NURSING PROGRAM

FIRST YEAR **FIRST SEMESTER (1)**

COURSE NUMBER	COURSE NAME	Weekly Contact Hours Lecture	Lab	Semester Credit
NUR-1201	Nursing I	5	10	10
LSC-2111	Human Anatomy & Physiology I	3	2	4*
PSY-1101	General Psychology I	3	0	3*
		11	12	17

FIRST YEAR **SECOND SEMESTER (2)**

COURSE NUMBER	COURSE NAME	Contact Hours Lecture	Lab	Semester Credit
NUR-1202	Nursing II	5	10	10
LSC-2112	Human Anatomy & Physiology II	3	2	4*
PSY-2109	Human Growth and Development	3	0	3*
ENG-1111	Composition I	3	0	3*
		14	12	20

SECOND YEAR **FIRST SEMESTER (3)**

COURSE NUMBER	COURSE NAME	Contact Hours Lecture	Lab	Semester Credit
NUR-2201	Nursing III	5	10	10
LSC-2110	General Microbiology	3	2	4*
SOC-2101	Principles of Sociology	3	0	3*
		11	12	17

SECOND YEAR **SECOND SEMESTER (4)**

COURSE NUMBER	COURSE NAME	Contact Hours Lecture	Lab	Semester Credit
NUR-2202	Nursing IV	5	10	10
SPE-1101	Fundamentals of Effective Speaking	3	0	3*
ENG-1121	Composition and Analysis	3	0	3*
NUR-2205	Registered Nurse Review Course	2	0	2
		13	10	18

*** General Education Hours (Total 30)** **Total Program Hours 72**

OTHER:

COURSE NUMBER	COURSE NAME	Contact Hours Lec	Lab	Semester Credit
NUR-1203	Clinical Nursing	2	8	6**
NUR-1204	Nursing Constructs	2	2	3***
NUR-1205	Transition to Nursing	(variable credit)		1-4****
NUR-1206	Practical Nurse Review	1	0	1**

****** **Students applying for PN Licensure**

******* **Entering non-IECC LPNs/IECC LPNs who complete first level three years prior to readmittance into second level.**

******** **Transfer students granted advanced placement.**

Prerequisite for LSC-2111, LSC-2112, or LSC-2110 is LSC-1101 (General Biology), or equivalent or consent of instructor.

General education courses must be completed before or during the semester they are scheduled. Students who do not complete the general education courses early or as scheduled will not be allowed to enroll in the next nursing course.

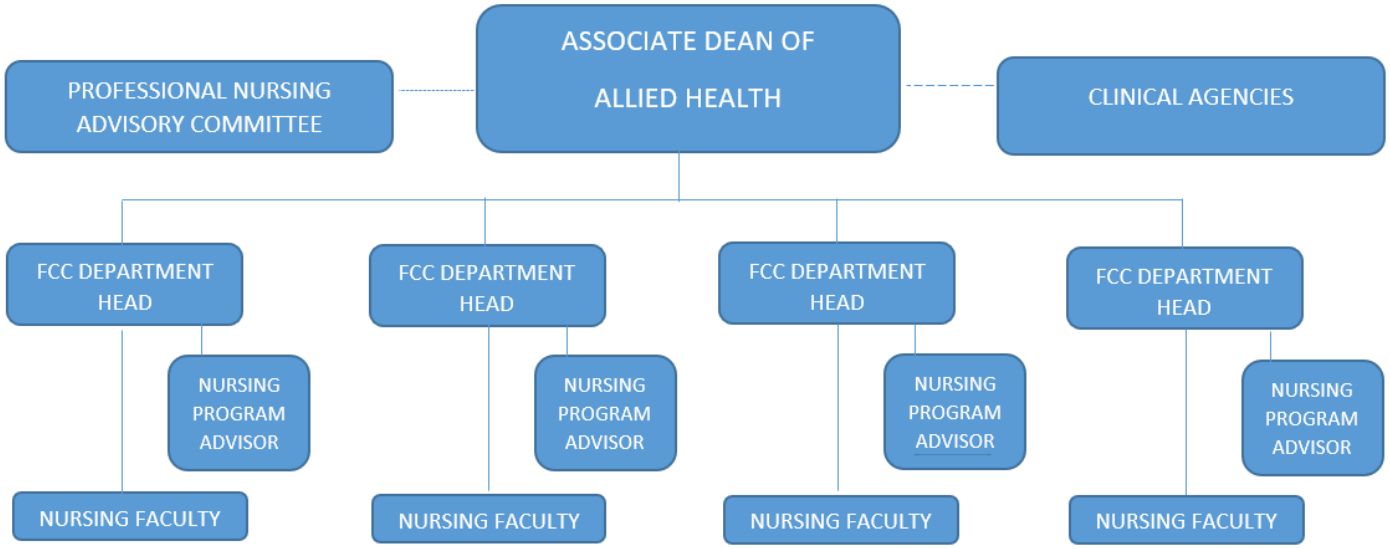
Evidence of completion of a study skills class is required for all students entering their first semester of the first year of nursing. NUR 1210 meets this requirement. Late admissions may be allowed to take a study skills class during NUR-1201.

ORGANIZATIONAL STRUCTURE

Students are expected to address concerns to persons according to the organizational structure in the order listed:

1. Faculty Member Most Directly Involved with the Concern
2. Department Head of Nursing
3. Associate Dean of Nursing and Allied Health
4. President, Olney Central College
5. Chancellor, IECC District 529
6. Board of Trustees, IECC District 529

NURSING ORGANIZATIONAL CHART



_____ Contractual Relationship

---------- Advisory Relationship

Approved: August 1, 1992
Revised: May 2000, June 2007; April 2009, July 2018; April 2020, June 2022

SECTION II

ETHICAL AND LEGAL RESPONSIBILITIES

- **Ethical-Legal Responsibilities of the Nursing Student**
- **American Nurses Association Code for Nurses**
- **State of Illinois Nurse Practice Act**
  - **Qualifications for Licensure**
  - **Grounds for Disciplinary Action**
- **Questions from State Licensing Exam Application**
- **Criminal Background Check and Drug Testing**
- **Social Networking**
- **Standards of Professional Conduct for Registered Professional Nurses**
- **Standards for Professional Conduct for Licensed Practical Nurses**
- **Student Conduct**
- **IECC Student Code of Conduct Policy**

ETHICAL-LEGAL RESPONSIBILITIES OF THE NURSING STUDENT

Nursing students will function under the auspices and guidelines of the **American Nurses Association (ANA) Code for Nurses** and **State of Illinois Nurse Practice Act**. ANA can be accessed at website, http://www.ana.org

AMERICAN NURSES ASSOCIATION
CODE FOR NURSES

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by consideration of social or economic status, personal attributes, or the nature of health problems.

2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.

3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.

7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

Reprinted with permission from American Nurses Association, *Code of Ethics for Nurses with Interpretive Statements*, ©2015 Nursesbooks.org, Silver Spring. To purchase this book, go to www.nursesbooks.org or call 1-800-637-0323.

INFORMATION FROM THE STATE OF ILLINOIS NURSE PRACTICE ACT*

State law regulates requirements for nursing licensure. A state agency, the Illinois Department of Financial and Professional Regulation IDFPR, implements the requirements of licensure laws defined in the State of Illinois Nurse Practice Act, effective January 1, 2018. Students are encouraged to read the copy of the entire State of Illinois Nurse Practice Act and the Rules for Administration* of the Act, which can be accessed at the Illinois Department of Financial and Professional Regulation's website, http://www.idfpr.com .

(225 ILCS 65/60-10)
(Section scheduled to be repealed on January 1, 2028)
Sec. 60-10. RN licensure by examination.

a) Each applicant who successfully meets the requirements of this Section is eligible for licensure as a registered professional nurse.

b) An applicant for licensure by examination to practice as a registered professional nurse is eligible for licensure when the following requirements are met:
   1) the applicant has submitted a completed written application, on forms provided by the Department, and fees, as established by the Department;
   2) the applicant has graduated from a professional nursing education program approved by the Department or has been granted a certificate of completion of pre-licensure requirements from another United States jurisdiction;
   3) the applicant has successfully completed a licensure examination approved by the Department;
   4) (blank);
   5) the applicant has submitted to the criminal history records check required under Section 50-35 of this Act;
   6) the applicant has submitted, either to the Department or its designated testing service, a fee covering the cost of providing the examination; failure to appear for the examination on the scheduled date at the time and place specified after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service shall result in the forfeiture of the examination fee; and
   7) the applicant has met all other requirements established by the Department by rule. An applicant for licensure by examination may take the Department-approved examination in another jurisdiction.

(b-5) If an applicant for licensure by examination neglects, fails, or refuses to take an examination or fails to pass an examination for a license within 3 years of the date of initial application, the application shall be denied. When an applicant's application is denied due to the failure to pass the examination within the 3-year period, that applicant must undertake an additional course of education as defined by rule prior to submitting a new application for licensure. Any new application must be accompanied by the required fee, evidence of meeting the requirements in force at the time of the new application, and evidence of completion of the additional course of education prescribed by rule.

c) An applicant for licensure by examination shall have one year after the date of notification of the successful completion of the examination to apply to the Department for a license. If an applicant fails to apply within one year, the applicant shall be required to retake and pass the examination unless licensed in another jurisdiction of the United States.

d) An applicant for licensure by examination who passes the Department-approved licensure examination for professional nursing may obtain employment as a license-pending registered nurse and practice under the direction of a registered professional nurse or an advanced practice registered nurse until such time as he or she receives his or her license to practice or until the license is denied. In no instance shall any such applicant practice or be employed in any management capacity. An individual may be employed as a license-pending registered nurse if all of the following criteria are met:
   1) He or she has completed and passed the Department-approved licensure exam and presents to the employer the official written notification indicating successful passage of the licensure examination.
   2) He or she has completed and submitted to the Department an application for licensure under this Section as a registered professional nurse.
   3) He or she has submitted the required licensure fee.

4) He or she has met all other requirement established by rule, including having submitted to a criminal history records check.

e) The privilege to practice as a license-pending registered nurse shall terminate with the occurrence of any of the following:
   1) Three months have passed since the official date of passing the licensure exam as inscribed on the formal written notification indicating passage of the exam. The 3-month license pending period may be extended if more time is needed by the Department to process the licensure application.
   2) Receipt of the registered professional nurse license from the Department.
   3) Notification from the Department that the application for licensure has been refused.
   4) A request by the Department that the individual terminate practicing as a license-pending registered nurse until an official decision is made by the Department to grant or deny a registered professional nurse license.

f) (Blank).

g) (Blank).

h) (Blank).

i) (Blank).

j) (Blank).

k) All applicants for registered professional nurse licensure have 3 years after the date of application to complete the application process. If the process has not been completed within 3 years after the date of application, the application shall be denied, the fee forfeited, and the applicant must reapply and meet the requirements in effect at the time of reapplication.

l) All applicants for registered nurse licensure by examination who are graduates of practical nursing educational programs in a country other than the United States and its territories shall have their nursing education credentials evaluated by a Department-approved nursing credentialing evaluation service. No such applicant may be issued a license under this Act unless the applicant's program is deemed by the nursing credentialing evaluation service to be equivalent to a professional nursing education program approved by the Department. An applicant who has graduated from a nursing educational program outside of the United States or its territories and whose first language is not English shall submit evidence of English proficiency, as defined by rule.

m) (Blank).

(Source: P.A. 100-513, eff. 1-1-18.)

(225 ILCS 65/55-10) (was 225 ILCS 65/10-30)
(Section scheduled to be repealed on January 1, 2028)
Sec. 55-10. LPN licensure by examination.

a) Each applicant who successfully meets the requirements of this Section is eligible for licensure as a licensed practical nurse.

b) An applicant for licensure by examination to practice as a practical nurse is eligible for licensure when the following requirements are met:
   1) the applicant has submitted a completed written application on forms provided by the Department and fees as established by the Department;
   2) the applicant has graduated from a practical nursing education program approved by the Department or has been granted a certificate of completion of pre-licensure requirements from another United States jurisdiction;
   3) the applicant has successfully completed a licensure examination approved by the Department;
   4) (blank);
   5) the applicant has submitted to the criminal history records check required under Section 50-35 of this Act;
   6) the applicant has submitted either to the Department or its designated testing service, a fee covering the cost of providing the examination. Failure to appear for the examination on the scheduled date at the time and place specified after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service shall result in the forfeiture of the examination fee; and
   7) the applicant has met all other requirements established by rule.

(b-5) If an applicant for licensure by examination neglects, fails, or refuses to take an examination or fails to pass an examination for a license under this Act within 3 years of the date of initial application, the application shall be denied. When an applicant's application is denied due to the failure to pass the examination within the 3-year period, that applicant must undertake an additional course of education as defined by rule prior to submitting a new application for licensure. Any new application must be accompanied by the required fee, evidence of meeting the requirements in force at the time of the new application, and evidence of completion of the additional course of education prescribed by rule.

An applicant may take and successfully complete a Department-approved examination in another jurisdiction. However, an applicant who has never been licensed previously in any jurisdiction that utilizes a Department-approved examination and who has taken and failed to pass the examination within 3 years after filing the application must submit proof of successful completion of a Department-authorized nursing education program or recompletion of an approved licensed practical nursing program prior to re-application.

c) An applicant for licensure by examination shall have one year from the date of notification of successful completion of the examination to apply to the Department for a license. If an applicant fails to apply within one year, the applicant shall be required to retake and pass the examination unless licensed in another jurisdiction of the United States.

d) A licensed practical nurse applicant who passes the Department-approved licensure examination and has applied to the Department for licensure may obtain employment as a license-pending practical nurse and practice as delegated by a registered professional nurse or an advanced practice registered nurse or physician. An individual may be employed as a license-pending practical nurse if all of the following criteria are met:

1) He or she has completed and passed the Department-approved licensure exam and presents to the employer the official written notification indicating successful passage of the licensure examination.
2) He or she has completed and submitted to the Department an application for licensure under this Section as a practical nurse.
3) He or she has submitted the required licensure fee.
4) He or she has met all other requirements established by rule, including having submitted to a criminal history records check.

e) The privilege to practice as a license-pending practical nurse shall terminate with the occurrence of any of the following:

1) Three months have passed since the official date of passing the licensure exam as inscribed on the formal written notification indicating passage of the exam. This 3-month period may be extended as determined by rule.
2) Receipt of the practical nurse license from the Department.
3) Notification from the Department that the application for licensure has been denied.
4) A request by the Department that the individual terminate practicing as a license-pending practical nurse until an official decision is made by the Department to grant or deny a practical nurse license.

f) (Blank).

g) All applicants for practical nurse licensure by examination who are graduates of nursing educational programs in a country other than the United States or its territories shall have their nursing education credentials evaluated by a Department-approved nursing credentialing evaluation service. No such applicant may be issued a license under this Act unless the applicant's program is deemed by the nursing credentialing evaluation service to be equivalent to a professional nursing education program approved by the Department. An applicant who has graduated from a nursing educational program outside of the United States or its territories and whose first language is not English shall submit evidence of English proficiency, as defined by rule.

h) (Blank).

i) (Blank).

j) (Blank).

k) (Blank).

l) (Blank).

m) All applicants for practical nurse licensure have 3 years from the date of application to complete the application process. If the process has not been completed within 3 years from the date of application, the

application shall be denied, the fee forfeited, and the applicant must reapply and meet the requirements in effect at the time of reapplication.

(Source: P.A. 100-513, eff. 1-1-18.)

(225 ILCS 65/70-5) (was 225 ILCS 65/10-45)
(Section scheduled to be repealed on January 1, 2028)
Sec. 70-5. Grounds for disciplinary action.

a) The Department may refuse to issue or to renew, or may revoke, suspend, place on probation, reprimand, or take other disciplinary or non-disciplinary action as the Department may deem appropriate, including fines not to exceed $10,000 per violation, with regard to a license for any one or combination of the causes set forth in subsection (b) below. All fines collected under this Section shall be deposited in the Nursing Dedicated and Professional Fund.

b) Grounds for disciplinary action include the following:

1) Material deception in furnishing information to the Department.
2) Material violations of any provision of this Act or violation of the rules of or final administrative action of the Secretary, after consideration of the recommendation of the Board.
3) Conviction by plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment or by sentencing of any crime, including, but not limited to, convictions, preceding sentences of supervision, conditional discharge, or first offender probation, under the laws of any jurisdiction of the United States: (i) that is a felony; or (ii) that is a misdemeanor, an essential element of which is dishonesty, or that is directly related to the practice of the profession.
4) A pattern of practice or other behavior which demonstrates incapacity or incompetency to practice under this Act.
5) Knowingly aiding or assisting another person in violating any provision of this Act or rules.
6) Failing, within 90 days, to provide a response to a request for information in response to a written request made by the Department by certified or registered mail or by email to the email address of record.
7) Engaging in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud or harm the public, as defined by rule.
8) Unlawful taking, theft, selling, distributing, or manufacturing of any drug, narcotic, or prescription device.
9) Habitual or excessive use or addiction to alcohol, narcotics, stimulants, or any other chemical agent or drug that could result in a licensee's inability to practice with reasonable judgment, skill or safety.
10) Discipline by another U.S. jurisdiction or foreign nation, if at least one of the grounds for the discipline is the same or substantially equivalent to those set forth in this Section.
11) A finding that the licensee, after having her or his license placed on probationary status or subject to conditions or restrictions, has violated the terms of probation or failed to comply with such terms or conditions.
12) Being named as a perpetrator in an indicated report by the Department of Children and Family Services and under the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected Child Reporting Act.
13) Willful omission to file or record, or willfully impeding the filing or recording or inducing another person to omit to file or record medical reports as required by law.

(13.5) Willfully failing to report an instance of suspected child abuse or neglect as required by the Abused and Neglected Child Reporting Act.

14) Gross negligence in the practice of practical, professional, or advanced practice registered nursing.
15) Holding oneself out to be practicing nursing under any name other than one's own.
16) Failure of a licensee to report to the Department any adverse final action taken against him or her by another licensing jurisdiction of the United States or any foreign state or country, any peer review body, any health care institution, any professional or nursing society or association, any governmental agency, any law enforcement agency, or any court or a nursing liability claim related to acts or conduct similar to acts or conduct that would constitute grounds for action as defined in this Section.

17) Failure of a licensee to report to the Department surrender by the licensee of a license or authorization to practice nursing or advanced practice registered nursing in another state or jurisdiction or current surrender by the licensee of membership on any nursing staff or in any nursing or advanced practice registered nursing or professional association or society while under disciplinary investigation by any of those authorities or bodies for acts or conduct similar to acts or conduct that would constitute grounds for action as defined by this Section.
18) Failing, within 60 days, to provide information in response to a written request made by the Department.
19) Failure to establish and maintain records of patient care and treatment as required by law.
20) Fraud, deceit or misrepresentation in applying for or procuring a license under this Act or in connection with applying for renewal of a license under this Act.
21) Allowing another person or organization to use the licensees' license to deceive the public.
22) Willfully making or filing false records or reports in the licensee's practice, including but not limited to false records to support claims against the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
23) Attempting to subvert or cheat on a licensing examination administered under this Act.
24) Immoral conduct in the commission of an act, including, but not limited to, sexual abuse, sexual misconduct, or sexual exploitation, related to the licensee's practice.
25) Willfully or negligently violating the confidentiality between nurse and patient except as required by law.
26) Practicing under a false or assumed name, except as provided by law.
27) The use of any false, fraudulent, or deceptive statement in any document connected with the licensee's practice.
28) Directly or indirectly giving to or receiving from a person, firm, corporation, partnership, or association a fee, commission, rebate, or other form of compensation for professional services not actually or personally rendered. Nothing in this paragraph (28) affects any bona fide independent contractor or employment arrangements among health care professionals, health facilities, health care providers, or other entities, except as otherwise prohibited by law. Any employment arrangements may include provisions for compensation, health insurance, pension, or other employment benefits for the provision of services within the scope of the licensee's practice under this Act. Nothing in this paragraph (28) shall be construed to require an employment arrangement to receive professional fees for services rendered.
29) A violation of the Health Care Worker Self-Referral Act.
30) Physical illness, mental illness, or disability that results in the inability to practice the profession with reasonable judgment, skill, or safety.
31) Exceeding the terms of a collaborative agreement or the prescriptive authority delegated to a licensee by his or her collaborating physician or podiatric physician in guidelines established under a written collaborative agreement.
32) Making a false or misleading statement regarding a licensee's skill or the efficacy or value of the medicine, treatment, or remedy prescribed by him or her in the course of treatment.
33) Prescribing, selling, administering, distributing, giving, or self-administering a drug classified as a controlled substance (designated product) or narcotic for other than medically accepted therapeutic purposes.
34) Promotion of the sale of drugs, devices, appliances, or goods provided for a patient in a manner to exploit the patient for financial gain.
35) Violating State or federal laws, rules, or regulations relating to controlled substances.
36) Willfully or negligently violating the confidentiality between an advanced practice registered nurse, collaborating physician, dentist, or podiatric physician and a patient, except as required by law.
37) Willfully failing to report an instance of suspected abuse, neglect, financial exploitation, or self-neglect of an eligible adult as defined in and required by the Adult Protective Services Act.
38) Being named as an abuser in a verified report by the Department on Aging and under the Adult Protective Services Act, and upon proof by clear and convincing evidence that the licensee abused, neglected, or financially exploited an eligible adult as defined in the Adult Protective Services Act.
39) A violation of any provision of this Act or any rules adopted under this Act.
40) Violating the Compassionate Use of Medical Cannabis Program Act.

c) The determination by a circuit court that a licensee is subject to involuntary admission or judicial admission as provided in the Mental Health and Developmental Disabilities Code, as amended, operates as an automatic suspension. The suspension will end only upon a finding by a court that the patient is no longer subject to involuntary admission or judicial admission and issues an order so finding and discharging the patient; and upon the recommendation of the Board to the Secretary that the licensee be allowed to resume his or her practice.

d) The Department may refuse to issue or may suspend or otherwise discipline the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of the tax, penalty, or interest as required by any tax Act administered by the Department of Revenue, until such time as the requirements of any such tax Act are satisfied.

e) In enforcing this Act, the Department, upon a showing of a possible violation, may compel an individual licensed to practice under this Act or who has applied for licensure under this Act, to submit to a mental or physical examination, or both, as required by and at the expense of the Department. The Department may order the examining physician to present testimony concerning the mental or physical examination of the licensee or applicant. No information shall be excluded by reason of any common law or statutory privilege relating to communications between the licensee or applicant and the examining physician. The examining physicians shall be specifically designated by the Department. The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of this examination. Failure of an individual to submit to a mental or physical examination, when directed, shall result in an automatic suspension without hearing.

f) All substance-related violations shall mandate an automatic substance abuse assessment. Failure to submit to an assessment by a licensed physician who is certified as an addictionist or an advanced practice registered nurse with specialty certification in addictions may be grounds for an automatic suspension, as defined by rule.

g) If the Department finds an individual unable to practice or unfit for duty because of the reasons set forth in this subsection (e), the Department may require that individual to submit to a substance abuse evaluation or treatment by individuals or programs approved or designated by the Department, as a condition, term, or restriction for continued, restored, or renewed licensure to practice; or, in lieu of evaluation or treatment, the Department may file, or the Board may recommend to the Department to file, a complaint to immediately suspend, revoke, or otherwise discipline the license of the individual. An individual whose license was granted, continued, restored, renewed, disciplined or supervised subject to such terms, conditions, or restrictions, and who fails to comply with such terms, conditions, or restrictions, shall be referred to the Secretary for a determination as to whether the individual shall have his or her license suspended immediately, pending a hearing by the Department.

h) In instances in which the Secretary immediately suspends a person's license under this subsection (e), a hearing on that person's license must be convened by the Department within 15 days after the suspension and completed without appreciable delay. The Department and Board shall have the authority to review the subject individual's record of treatment and counseling regarding the impairment to the extent permitted by applicable federal statutes and regulations safeguarding the confidentiality of medical records.

i) An individual licensed under this Act and affected under this subsection (e) shall be afforded an opportunity to demonstrate to the Department that he or she can resume practice in compliance with nursing standards under the provisions of his or her license.

(Source: P.A. 102-558, eff. 8-20-21.)

Taken from the Illinois Nurse Practice Act www.idfpr.com.

THE FOLLOWING QUESTIONS APPEAR ON THE STATE LICENSING EXAM APPLICATION FOR PN AND RN:

1. Have you been convicted of or pled guilty or nolo contendere to any criminal offense in any state or in federal court? Please do not give details on minor traffic charges, but do include information relating to Driving While Intoxicated (DWI) charges. *If yes, attach a certified copy of the court records regarding your conviction, the nature of the offense and date of discharge, if applicable, as well as a statement from the probation or parole office.*

2. Have you been convicted of a felony? *In general, a felony conviction by itself does not usually result in denial of licensure.*

3. If yes, have you been issued a Certificate of Relief from Disabilities by the Prisoner Review Board? *If yes, attach a copy of the certificate.*

4. Have you had or do you now have any disease or condition that interferes with your ability to perform the essential functions of your profession, including any disease or condition generally regarded as chronic by the medical community, i.e., (1) mental or emotional disease or condition; (2) alcohol or other substance abuse; (3) physical disease or condition that presently interferes with your ability to practice your profession? *If yes, attach a detailed statement, including an explanation whether or not you are currently under treatment.*

5. Have you been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit disciplined in any way by any licensing authority in Illinois or elsewhere? *If yes, attach a detailed explanation.*

6. Have you ever been discharged other than honorably from the armed service or from a city, county, state or federal position? *If yes, attach a detailed explanation*.

CRIMINAL BACKGROUND CHECK AND DRUG TESTING

After acceptance into the nursing program, a background check is required. Drug testing will also be required to meet clinical affiliate requirements. An unsatisfactory background check or positive drug test may result in negation of admission or withdrawal from the program due to failure to proceed into the agency setting. A positive drug test at any time in the program may be grounds for immediate dismissal from the program. A change in student status during the program which results in a criminal conviction may be grounds for dismissal or administrative withdrawal from the program. **Students are required to report any incident which might result in a change in criminal history status to the Department Head within 5 days.** Failure to report a change in status is grounds for immediate dismissal from the program.

SOCIAL NETWORKING

Social networking is not permitted during classes, lab, and clinical education. Information about a patient in any context is a possible HIPAA violation. Discussing any clinical information on a social network site is a potential HIPAA violation.

Some employers screen the social networking practices of potential employees. As the job market has become more competitive, some human resource departments have adopted the practice of reviewing a candidate's Facebook profile when considering that individual for employment. Inappropriate comments and/or photos may adversely affect an individual's ability to secure employment. Be advised that social media is not as private and secure as perceived.

If a social networking issue should arise during enrollment in the program, the consequence could be recommendation for dismissal from the nursing program.

Additional information and resources on social media and networking for nurses can be found at the National Council of State Boards of Nursing (NCSBN) website at https://www.ncsbn.org/professional-boundaries.htm.

SECTION 1300.350
STANDARDS OF PROFESSIONAL CONDUCT FOR REGISTERED PROFESSIONAL NURSES

a) The Registered Professional Nurse shall:

1) Practice in accordance with the Act and this Part;

2) Uphold federal and state regulations regarding controlled substances and alcohol;

3) Practice nursing only when in functional physical and mental health;

4) Be accountable for his or her own nursing actions and competencies;

5) Practice or offer to practice only within the scope permitted by law and within the licensee's own educational preparation and competencies;

6) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;

7) Delegate tasks only to individuals whom the licensee knows or has reason to know are competent by education or experience to perform those tasks;

8) Delegate professional responsibilities only to individuals whom the licensee knows or has reason to know are licensed to perform;

9) Be accountable for the quality of nursing care delegated to others;

10) Report unsafe, unethical, or illegal health care or conditions to appropriate authorities; and

11) Assume responsibility for continued professional growth and education to reflect knowledge and understanding of current nursing care practice.

b) Violations of this Section may result in discipline as specified in Section 70-5 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill. Adm. Code 1110.

Taken from the State of Illinois Nurse Practice Act.

SECTION 1300.260
STANDARDS OF PROFESSIONAL CONDUCT FOR
LICENSED PRACTICAL NURSES

a) The licensed practical nurse shall, but is not limited to, upholding the following professional standards:

1) Practice in accordance with the Act and this Part;

2) Practice nursing only when in functional physical and mental health;

3) Be accountable for his or her own nursing actions and competencies;

4) Practice or offer to practice, including delegated nursing activities, only within the scope permitted by law and within the licensee's own educational preparation and competencies;

5) Perform nursing activities as delegated;

6) Seek instruction from a registered professional nurse or advanced practice nurse when implementing new or familiar nursing activities;

7) Report unsafe, unethical, or illegal health care practice or conditions to appropriate authorities and to the Division;

8) Assume responsibility for continued growth and education to reflect knowledge and understanding of current nursing care practice;

b) Violations of this Section may result in discipline as specified in Section 70-5 of the Act. All disciplinary hearings shall be conducted in accordance with 68 Ill. Adm. Code 1110.

Taken from the State of Illinois Nurse Practice Act.

STUDENT CONDUCT

The process of becoming an effective member of the nursing profession involves attaining competency in knowledge, skills and behavior. Students are evaluated by testing and oral and written assignments, through skills performance and observation and interaction in class and laboratory settings. A shared process of student self-assessment and faculty assessment is used. Input from peers, other faculty and agency staff is also considered. Underlying all evaluation is the assumption that the student practices the core values of the nursing program and IECC. IECC core values are truth/honor, fairness, compassion, respect/self-respect and responsibility. Program values are integrity, collaboration, competence, personal development and diversity.

Truth includes doing one's own work. Students are expected to do homework, tests and other assignments unassisted unless the instructor provides other directions. No credit will be given for material that is not the student's own work. Any student who displays dishonest behavior will be brought before the total faculty on that college site for review and may be dismissed from the program.

Honor means integrity in one's beliefs and actions. Honor involves congruence between what one says and what one does and consistency in behaviors. The student is expected to adhere to policies of the college, the nursing program and clinical agencies. As the student develops in the profession, adherence to the ethics and standards of nursing is required.

Fairness involves weighing situations and interactions and responding reasonably. It also means the student will be courteous and civil in expressing opinions and agreeing or disagreeing with others.

Compassion means demonstrating an understanding of the difficulties of others. It also includes recognizing that decisions involve looking at the context of a situation. The student is expected to realize that balancing different needs requires flexibility to allow for suitable adjustments.

Self-respect involves valuing self and is demonstrated by conduct, appearance, and interaction with others. The student is expected to respect diversity and interact with peers, faculty, other campus personnel, and all agency persons with respect. Respect also involves collaboration, including not talking when others are speaking, listening to others, responding nonjudgmentally to the views of others, and demonstrating tolerance. Appropriate verbal and non-verbal communication is required. The student is expected to meet the standards of the nursing program and clinical agencies in dress and appearance.

Responsibility involves choosing responses and accepting consequences of choices. A student automatically assumes certain responsibilities when enrolling in nursing courses. The student will be on time, take exams on scheduled days, maintain alertness, make full use of class/lab time, avoid excessive conversation during class, and maintain composure when discussing exam results and other forms of evaluation. The student also assumes responsibility for accurate self-assessment of competency. When Skills Performance Verification, Laboratory Competency Evaluation, and Professional Behaviors Evaluation are signed, the student's signature indicates that the student has evaluated his/her own performance as meeting the criteria. The student also assumes responsibility for monitoring progress in the course through review of grades and feedback on assignments. The student is expected to confer with instructor and modify behaviors as necessary to enhance personal and professional development.

Students will be given feedback, formally and informally, related to conduct. If concerns are identified, the instructor(s) and student will develop a plan for change. If a student does not demonstrate appropriate conduct following counseling, the situation will be reviewed with the college site nursing faculty. Such review may result in the student being dismissed from the program.

IECC Student Code of Conduct Policy

Illinois Eastern Community Colleges is committed to the personal growth, integrity, freedom of civility, respect, compassion, health and safety of its students, employees, and community. To accomplish this commitment, IECC is dedicated to providing an environment that is free from discrimination, harassment, retaliation, and harmful behavior that hinders students, employees, or community members from pursuing IECC education or services.

IECC's Student Conduct Policy 500.8 establishes the Student Code of Conduct to communicate its expectations of students and to ensure a fair process for determining responsibility and appropriate sanctions when a student's behavior deviates from those expectations. The Student Code of Conduct can be viewed here https://www.iecc.edu/studentconduct.

SECTION III

GRADING - EVALUATION

- **Evaluation of Student Performance**
- **Determination of a Nursing Course Grade**
  - **Classroom Grading**
  - **Evaluation of Nursing Laboratory Competencies**
  - **Written Assignments for Nursing Laboratory**
  - **Laboratory Competency Evaluation**
  - **Critical Areas of Concern**
  - **Professional Behaviors Criteria**
  - **Use of the Anecdotal Forms**
- **Assignments**
- **Testing**
- **Testing Philosophy**
- **Criteria for Medication Dosage Calculation Testing**
- **Criteria for Medication Administration Competency**
- **Standardized Computerized Exam**
- **Attendance Policy**
- **Nursing Laboratory Expectations**
  - **Responsibilities Related to Nursing Agency Laboratory**
  - **Dress Code for Agency Laboratory**
  - **Cell Phone Use**

EVALUATION OF STUDENT PERFORMANCE

A grade is awarded at the conclusion of each nursing course. However, evaluation of student performance exists on a continuum from program entry to program exit. Student evaluations are shared and reviewed by nursing faculty. This process allows faculty to provide appropriate classroom and laboratory experiences to assist each student in meeting educational outcomes of the program.

DETERMINATION OF A NURSING COURSE GRADE

A course grade is comprised of a classroom grade, a laboratory evaluation, and evaluation of professional behaviors. If the classroom grade is passing and the laboratory evaluation and professional behaviors evaluation is satisfactory, the grade earned in the classroom will be the course grade. If the classroom grade is passing and the laboratory and/or professional behaviors evaluation is unsatisfactory, the course grade will be recorded as "F".

Classroom Grading Scale

A uniform grading scale is used by the Nursing Faculty. The grading scale will be provided to students in writing each semester.

Theory grades will be based on module exams, quizzes, and a comprehensive final exam. A theory grade of at least 78% is required to pass the course. The grading scale is:

A = 90-100
B = 83-89
C = 78-82
D = 65-77
F = 0-64

Rounding will be done based on tenths. For example: 77.5% will be rounded to 78%; 77.45% will not round to 78%.

Percentage score is calculated after every testing opportunity. The percentage score is determined by the following formula:

$$\frac{\text{Total points earned}}{\text{Total points available}} = \text{Percentage score}$$

Content and points of module exams will be designated at the beginning of the term.

A grade of "C" or above must be obtained in all nursing and general education courses in the nursing curriculum.

Evaluation of Nursing Laboratory Competencies

Laboratory competency is evaluated on performance in the laboratory, campus and agency, and on written assignments associated with these experiences.

Written Assignments for Nursing Laboratory:

Students are required to write Nursing Care Plans/Concept Maps, Teaching Plans, and Process Recordings. Each tool has specific criteria for satisfactory completion. The student submits the completed assignment and a copy of the appropriate evaluation tool. The following are used to assign an S+, S, S- or U to each area of the evaluation tool:

a. S+ Outstanding: Nursing written assignment is superior; work is above expected level; exceeds assignment criteria.
    1. Assignment complete; no instructor guidance needed.
    2. Knowledge from nursing and the behavioral sciences is integrated into assignment.
    3. Observations and judgments are above expected level.
    4. Evaluates outcomes and generates alternatives.

b. S Satisfactory: Nursing written assignment is satisfactory: work is at expected level; meets assignment criteria.
    1. Minimal instructor guidance needed to complete assignment.
    2. Knowledge from nursing and behavioral sciences applied to situation depicted in assignment.
    3. Observations and judgments are at expected level.
    4. Evaluates outcomes and identifies reasons if outcomes not met.

c. S- Minimal: Nursing written assignment is not at expected level; does not meet assignment criteria consistently.
    1. Moderate instructor guidance needed to complete assignment.
    2. Knowledge from nursing and behavioral sciences utilized.
    3. Observations and judgments are at expected level, but not consistently demonstrated in assignment.
    4. Evaluation of outcomes not consistently at expected level.

d. U Unsatisfactory: Nursing written assignment is below expected level; consistently does not meet assignment criteria.
    1. Maximum instructor guidance needed to complete assignment.
    2. Assignment does not reflect appropriate use of knowledge from nursing and behavioral sciences.
    3. Observations and judgments are below expected level.
    4. Evaluation of outcomes is not appropriate.

Evaluations of S+, S, and S- meet the criteria for "S" in the written evaluation criteria.

It is the instructor's discretion how unsatisfactory written assignments (Nursing Care Plans, Teaching Plans, and Process Recordings) will be corrected. The instructor will take into consideration the following factors before deciding whether the assignment needs to be rewritten or corrected on future assignments within the semester:

a. The opportunity will be available for the student to write an assignment in a similar clinical assignment.
b. The student's verbalization of the written work requirements and clinical experience during a conference.
c. The student's request for rewriting the assignments for feedback before he/she completes future assignments.
d. The student's past performance during the semester on similar written assignments.
e. Ability to gather needed data to correct the written assignment.

Laboratory Competency Evaluation:

The Nursing Care Plans, Teaching Plans, and Process Recordings for each course are reflected in the Laboratory Competency Evaluation tool. At least twice during the semester and as deemed necessary, the student will self-assess and the instructor will assess laboratory performance using the Laboratory Competency Evaluation tool for that particular course. Student and instructor will mutually identify strengths and concerns and formulate plans for continuous improvement. There are specific criteria for satisfactory completion of nursing laboratory competencies.

For a satisfactory laboratory evaluation, the student must achieve S or S+ in at least 85% of all categories and sub-categories, and S- in no more than 15% of all categories and sub-categories. By the end of the course no grade of U in any category is acceptable for satisfactory completion. Satisfactory nursing laboratory competency is mandatory for passing a nursing course.

The following terms are descriptors used in measuring student achievement in the nursing laboratory. Although the Laboratory Competency Evaluation tool changes from course to course, the rating scale for each course is:

A. S+ Outstanding: Nursing laboratory performance is superior; functions consistently above expected level.

1. Functions safely and effectively.
2. Demonstrates ability to integrate knowledge from nursing and the behavioral science with nursing laboratory.
3. Makes appropriate nursing observations and judgments.
4. Identifies nursing laboratory objectives readily and completely.
5. Answers questions relating to nursing laboratory objectives.
6. Identifies rationale underlying his/her actions.
7. Builds on previous level of learning to fulfill nursing laboratory objectives of the course.

B. S Satisfactory: Nursing laboratory performance is safe; functions consistently at expected level.

1. Functions safely and effectively with minimum instructor guidance.
2. Demonstrates adequate ability to apply knowledge from nursing and the behavioral sciences with nursing laboratory practice.
3. Makes expected nursing observations and judgments.
4. Identifies nursing laboratory objectives readily and completely with minimal guidance.
5. Answers questions relating to nursing laboratory objectives with minimal guidance.
6. Identifies rationale underlying his/her actions with minimal instructor guidance.
7. Builds on previous level of learning to fulfill nursing laboratory objectives of the course with minimal guidance.

C. S- Minimal: Nursing laboratory performance is safe with guidance; functions at expected level only with guidance.

1. Functions safely with moderate instructor guidance.
2. Demonstrates the ability to utilize knowledge from nursing and the behavioral sciences with nursing laboratory practice with moderate instructor guidance.
3. Makes expected nursing observations and judgments with moderate instructor guidance.
4. Identifies nursing laboratory objectives.
5. Answers questions relating to nursing laboratory objectives with moderate instructor guidance.
6. Identifies rationale underlying his/her actions with moderate instructor guidance.

7. Demonstrates the ability to transfer prior learning to progress toward fulfilling nursing laboratory objectives of the course with moderate instructor guidance.

D. U Unsatisfactory: Nursing laboratory performance is unsafe, functions consistently below expected level.
Demonstrates little or no changes in undesirable behaviors after counseling.

1. Functions safely only with maximum instructor guidance.
2. Demonstrates inability to utilize knowledge from nursing and the behavioral sciences with nursing laboratory practice.
3. Does not make expected obvious nursing observations and judgments.
4. Does not identify nursing laboratory objectives.
5. Answers basic questions relating to nursing laboratory objectives only with maximum instructor guidance.
6. Identifies rationale underlying his/her actions only with maximum instructor guidance.
7. Is inconsistent in progress toward meeting nursing laboratory objectives of the course.
8. Transfers prior learning only with maximal guidance; demonstrates no progress toward meeting nursing laboratory objectives of the course.

Critical Areas of Concern

Critical areas of concern include any actions or inactions on the part of the student that increase the risk of or exposure to loss, harm, death or injury of the client. Critical concerns include, but are not limited to, the following:

1. Theft from clients, visitors or agency employees, or the unauthorized removal of supplies, drugs or other property from the premises of the agency.
2. Alteration, falsification or destruction of any agency records.
3. Refusal to perform assignment or follow directions of the instructor or appropriate agency personnel.
4. Reporting to laboratory or performing at laboratory while under the influence of alcohol and/or controlled substances, drugs, or having possession of same on agency property.
5. Departure from the assigned department or unit, or the facility during scheduled laboratory hours without authorization.
6. Willful conduct which could endanger clients, visitors, or others.
7. Making false, vicious, or malicious statements concerning the agency, its employees, or its services.
8. Use of abusive, threatening, or profane language, or gestures on agency premises.
9. Willful, deliberate, violation of or disregard for the agency's safety and security, and its rules and policies.
10. Solicitation or acceptance of gifts or gratuities from clients, their significant others or vendors.
11. Neglect of duty or incompetence either in quantity or quality of work.
12. Breach of confidentiality of the client, significant others, or of the agency and its employees.
13. Evidence of disregard or disrespect of the rights of clients or others, or of the agency and its employees.
14. Arriving prior to the start of the agency clinical day without an 8 hour break between outside employment and the agency experience.

Such actions or inactions will result in the student being immediately relieved of the nursing laboratory assignment, followed by a faculty review and possible dismissal from the nursing program.

Unsafe or unsatisfactory laboratory evaluation and/or dismissal from the nursing program, whether culminating in receiving a failing grade or withdrawal, may prevent readmission.

The student has the right to appeal according to the college policy. Refer to the Student Complaint Policy in the College Catalog.

Evaluation of Professional Behaviors

The following behaviors are relevant to the student in all aspects of the educational process and are not limited to formal contacts in class and clinical. These are core behaviors of the profession, which are initiated and developed during the educational process and expanded and refined during practice in the profession.

The student will use the following descriptors and the evaluation form to self-assess professional behaviors. The instructor will also assess the student. These assessments will be done at the midterm and final conferences and at other times as deemed necessary to foster student development. Student and instructor will review assessments for congruence and mutually develop specific guides for continued progress in development of professional behaviors. If a student demonstrates behaviors inconsistent with these expectations, the following response(s) will occur:

1. The student will be provided feedback regarding perceived inappropriate behavior(s) and relevant expectations of the instructor/faculty.
2. If a change to more appropriate behavior(s) does not occur with remediation, the campus nursing faculty will review the situation. The student may be dismissed from the program.
3. The following level of achievement is expected by course completion for the associate degree program: NUR-1201 - a minimum of 8 areas at beginning level; NUR-1202 - a minimum of 4 areas at beginning level and 4 areas at developing level; NUR-1203 - a minimum of 2 areas at beginning level, 3 at developing level and 3 at entry level; NUR-2201 - a minimum of 4 areas at developing level and 4 areas at entry level; NUR-2202 - a minimum of 2 areas at developing level and 6 areas at entry level.

Any ranking of less than the stated criterion constitutes unsatisfactory performance. Satisfactory professional behaviors evaluation is mandatory for passing a nursing course.

Accountability

Beginning

Demonstrates dependability
Demonstrates punctuality
Follows through on commitments
Recognizes own limits
Seeks feedback from others

Developing (builds on preceding level)

Accepts responsibility for actions and outcomes
Offers and accepts help
Utilizes feedback for appropriate behavioral change
Completes assignments without prompting
Critiques own performance

Entry (builds on preceding level)
- Accepts direction
- Delegates appropriately
- Utilizes feedback when establishing goals
- Utilizes self-assessment for growth
- Provides constructive evaluation of others, assignments, program

Communication Skills

Beginning
- Demonstrates understanding of basic English (verbal and written): uses correct grammar, accurate spelling and expression
- Writes legibly
- Recognizes impact of verbal and non-verbal communication
- Recognizes own barriers to effective communication
- Communicates with respect and consideration of others

Developing (builds on preceding level)
- Utilizes effective communication techniques
- Utilizes a variety of communication systems, verbal, written, computer
- Recognizes cultural differences in communicating
- Communicates clearly, verbally and in writing

Entry (builds on preceding level)
- Modifies communication to be contextually congruent
- Presents verbal or written message with logical organization and sequencing
- Utilizes communication technology effectively
- Adapts communication for cultural congruence
- Maintains open and constructive communication

Interpersonal Skills

Beginning
- Demonstrates active listening skills
- Maintains two-way communication
- Respects cultural and personal differences of others
- Actively seeks feedback and help
- Demonstrates acceptance of limited knowledge and experience
- Communicates in a respectful manner, verbally and non-verbally

Developing (builds on preceding level)
- Establishes trust
- Assumes responsibility for own actions
- Maintains professional demeanor in all situations
- Seeks to gain knowledge and input from others
- Works as a team member
- Recognizes contributions of self and others

Entry (builds on preceding level)
- Approaches others to discuss differences in opinions
- Reconciles differences with sensitivity
- Works effectively with challenging persons
- Helps to build teams

Responds effectively to unexpected situations
Values contributions of self and others

Effective Use of Time and Resources

Beginning
Focuses on tasks at hand without dwelling on past mistakes or experiences
Uses existing resources effectively
Uses scheduled time efficiently
Completes assignments in timely fashion

Developing (builds on preceding level)
Uses unscheduled time efficiently
Sets up own schedule with consideration of others
Demonstrates flexibility
Plans ahead

Entry (builds on preceding level)
Coordinates schedule with others
Recognizes own limitations
Sets priorities and reorganizes as needed
Performs multiple tasks simultaneously and delegates when appropriate

Commitment to Learning

Beginning
Demonstrates a positive attitude (motivation) toward learning
Formulates appropriate questions
Offers own thoughts and ideas
Identifies need for further information
Identifies and locates appropriate resources

Developing (builds on preceding level)
Identifies own learning needs based on previous experiences
Prioritizes information needs
Welcomes and/or seeks new learning opportunities
Seeks out professional literature
Sets personal and professional goals

Entry (builds on preceding level)
Applies new information and re-evaluates situations
Accepts that there may be more than one answer to a problem
Reads articles critically and considers application to professional practice
Recognizes and supports nursing research in advancing nursing practice
Researches and studies areas where knowledge base is lacking

Problem Solving

Beginning
- Recognizes problems
- States problem clearly
- Describes known solutions to problems
- Identifies resources needed to develop solutions

Developing (builds on preceding level)
- Prioritizes problems
- Identifies contributors to problem
- Consults with others to clarify problem
- Begins to examine multiple solutions to problem
- Considers consequences of possible solutions

Entry (builds on preceding level)
- Implements solutions
- Accepts responsibility for implementing solutions
- Evaluates outcomes
- Reassesses solutions

Critical Thinking

Beginning
- Raises relevant questions
- Considers all available information
- Recognizes "holes" in knowledge base
- States the results of scientific literature
- Articulates ideas

Developing (builds on preceding level)
- Feels challenged to examine ideas
- Understands scientific method
- Formulates new ideas
- Seeks alternative ideas
- Formulates alternative hypotheses
- Critiques hypotheses and ideas

Entry (builds on preceding level)
- Exhibits openness to contradictory ideas
- Assesses issues raised by contradictory ideas
- Justifies solutions selected
- Determines effectiveness of applied solutions

Professionalism

Beginning
- Demonstrates awareness of state licensure regulations
- Follows major tenets of Code for Nurses
- Abides by policies and procedures of college, program and clinical agencies
- Projects interest, enthusiasm and commitment to nursing

Has membership in SNA
Demonstrates compassion, truthfulness, fairness and continuous regard for all
Recognizes that change will occur

Developing (builds on preceding level)
Identifies positive professional role models
Projects professional image
Actively participates in SNA
Discusses societal expectations of the profession
Performs community service
Demonstrates ability to adapt to change

Entry (builds on preceding level)
Mentors beginning students
Recognizes impact of health policy on practice
Practices in accordance with state practice act and Code
Discusses role of nursing in health care
Attends professional meetings
Demonstrates tolerance for ambiguity
Participates in change

USE OF ANECDOTAL FORMS

Anecdotal forms are used by faculty in the nursing program to communicate information on progress within the program, performance concerns, and reinforcement of program objectives.

To support the performance of students in the nursing program, the anecdotal forms will be used by all faculty in the following circumstances:

1. Behavior that does not meet classroom or laboratory behavioral criteria.
2. Evaluation of S- or U in a laboratory performance evaluation area:
   a. behaviors will be documented.
   b. remediation plan will be developed with student.
3. Failures at midterm, which could be the result of failure in theory, laboratory, or both.
4. Absences—the anecdotal will be used for counseling in the case of student absences for more than 10% of nursing laboratory hours. Absences are cumulative only for the semester. However, a pattern of absences throughout the program will be addressed and evaluated by faculty.
5. Disseminate information pertinent to the student and/or program.

If a student refuses to sign, or cannot sign an anecdotal, a copy of the anecdotal shall be mailed to that student with a return receipt requested. The receipt shall be placed on the student's file indicating why it was used. Anecdotals are retained in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT #529 OLNEY CENTRAL COLLEGE NURSING PROGRAM FCC - LTC - OCC - WVC ANECDOTAL/COUNSELING RECORD		
DATE:	**NAME:**	
INCIDENT:		
DISCUSSION:		
RECOMMENDATIONS:		
Revised: 7/22/92 Reviewed: 4/28/97; 10/2000; 4/09	Signatures: _____ Faculty _____ Student	_____ Date _____ Date

ASSIGNMENTS

All assignments must be typewritten or written legibly in black ink, using correct grammar, spelling, sentence structure, and prepared on appropriate forms only. References used for written assignments may not be more than five years old except with permission of instructor. Assignments must be turned in on date due as written or announced by faculty. Any subsequent missed due dates given on the same assignment will be considered an additional late assignment. This will affect the late assignment policies as outlined below. Late assignments without faculty permission will receive a failing grade.

Any student with three (3) late assignments within a semester (this includes any assignment with a designated due date) will be counseled by the faculty. A fourth (4^{th}) late assignment will result in an Unsatisfactory Laboratory Performance Evaluation for the semester, which equates to a failing grade in the course.

TESTING

Faculty construct online tests utilizing ExamSoft testing software. Online testing, utilizing the iPad device and Examplify testing app, will be done for all exams. The Examplify app should be downloaded at the beginning of the semester prior to the first exam. This software will be utilized throughout the program. Students are responsible for bringing a charged iPad to class for each exam and ensuring the test is downloaded to their device prior to the exam.

Students may not wear an iWatch, FitBit, or other non-essential electronic accessory during test. Phones must be put away and on silent or turned off.

Quizzes may be given during classes or skills labs at the discretion of the instructor. **Quizzes will not be allowed to be made up.**

Attendance at tests and feedback sessions is imperative, unless previously discussed with instructor. All tests are to be taken as scheduled. If absence is necessary, the instructor must be notified prior to the scheduled test time.

In the event a paper test and Scantron card is used for a test, the answer marked on the Scantron will be the one and only answer that is graded. Answers marked on the test itself will not be considered. Scantrons and paper testing will be used as a back-up only for technical difficulties or reasons beyond program control.

All make-up tests will be taken on the scheduled make-up test day. Make-up tests may not be scheduled during a student's laboratory or regular class time. An alternate test may be administered whenever a student takes a make-up test.

Patterns of absence in relation to the test schedule are studied. After the first missed test, the student will be counseled and a plan of action will be provided

Test reviews are conducted after the test has been administered. Students are expected to review tests. If a student has rationale regarding an alternate answer to a question, the student is to document their rationale for the alternate answer and cite the resource where the alternate answer was found (include resource name and page number) on a separate piece of paper and submit to the instructor for review. The only accepted resources are the required textbook list and/or faculty provided resources. No further consideration of test questions will be allowed following the review. The instructor will return comments and appropriate rationale to the student within one week of review. If a test review is missed, the student must review the test within the next three school days following the return of the scheduled test. The student is responsible for contacting the instructor to set up a time for the review. If the student does not schedule a review within the timeframe specified, then the test score will stand, with no further review. No review of semester tests and quizzes will be allowed following the final exam review.

TESTING PHILOSOPHY

The faculty believes testing is an integral part of the curriculum. Testing is an observable measurable activity from which inference of learning can be made. Testing requires the student to behave in a predefined way, by testing or performing a task while the teacher observes. By testing, the student demonstrates competencies necessary to obtain the associate degree in nursing or practical nursing certificate and therefore is eligible to take the licensure exam.

In addition to measuring student competency, the faculty believes tests can be used to evaluate teaching methods. Tests are also viewed as tools faculty and students can use to differentiate individual strengths and concerns. The faculty believes students have the right and the responsibility to participate in a timely test review and to direct questions to the content instructor. The review is an opportunity for the student to reinforce learning, to evaluate problem solving and critical thinking in responding to simulated situations and to enhance test-taking skills. The faculty value student input as a part of the process improvement faculty use to enhance student outcomes.

Testing reflects curriculum objectives and progresses from simple to complex. Test blueprinting serves as a guide to ensure that the tests are congruent with the course objectives and similar in format to the manner in which the objectives are presented.

The faculty has the responsibility of developing valid tests. Tests are valid when they show relevance and reliability. Tests are relevant when they cover the intended content. They are reliable when they are not influenced by factors other than the knowledge being tested. Test blueprinting and test analysis are used to evaluate validity and reliability of written tests. If a test question has two correct choices, credit will be given for either choice.

The faculty is responsible for providing a testing environment that is comfortable and free of distractions. The manner in which tests are administered is consistent. Guidelines for record keeping are congruent with IECC District 529 Retention Policy.

The faculty believes return demonstration and implementation of skills is another observable measurable activity from which inference of learning can be made. The faculty uses uniform criteria for evaluation of skills performance.

REQUIRED COMPETENCY TESTING
MEDICATION DOSAGE CALCULATION

Achievement of satisfactory on any NUR skills performance checklist requires students to achieve a 90% or greater on a dosage calculation test consisting of approximately 20 questions. This must be achieved **within 4 (four) attempts by midterm in NUR 1201, within 3 (three) attempts by the end of the third full week of NUR 1202, and by 2 (two) attempts by the end of the third full week of NUR 2201 and NUR 2202. In NUR 1203, 90% competency must be achieved within 3 (three) attempts prior to attending agency laboratory.** If the student does not demonstrate proficiency in the allotted time, the student will be administratively withdrawn from all NUR prefixed courses.

Medication dosage calculation problems shall not be in multiple-choice form for competency tests. A program-approved calculator may be used in testing. Credit will be given for a correct answer achieved by correct calculation work. In NUR-1201, the student is required to show the process used to achieve the answer. Test results for medication dosage calculation competency shall not be included as points toward the student's theory grade. Accurate dosage calculation meets a laboratory competency requirement.

After the module entitled "Medication Administration" is presented in NUR-1201 dosage calculation problems may be added to tests or quizzes as part of theory grades at the discretion of the instructor.

Students will not be allowed to administer **routine** medications in any course until medication dosage competency has been achieved.

MEDICATION ADMINISTRATION COMPETENCY TESTING

Students enrolled in exit courses (NUR-1203 or NUR-2202) must pass a medication administration test. An 85% competency must be achieved on this test within three attempts by the last scheduled day of the course. If a student does not demonstrate this proficiency, the student will be administratively withdrawn from all NUR prefixed courses.

STANDARDIZED COMPUTERIZED EXAM: HESI

Students enrolled in exit review courses (NUR-1206 or NUR-2205) will be required to achieve a minimum passing score on the Health Education System, Inc. (HESI) computerized exit exam for nurses or an equivalent standardized nursing exit exam which is approved by the Associate Dean of Nursing and Allied Health. Each RN nursing student will be required to achieve a minimum passing score of 850 on the Health Education System, Inc. (HESI) computerized exit exam. Each LPN nursing student will be required to achieve a minimum passing score of 700 on the Health Education System, Inc. (HESI) computerized exit exam. The required score and the approved exit exam will be specified in the applicable course syllabus for NUR 1206 or NUR 2205. If the minimum score is not achieved, the student will be required to successfully complete remediation as assigned by faculty.

ATTENDANCE POLICY

Class attendance provides opportunity for the student to interact with faculty and peers to receive maximum benefits from the course.

Classroom Attendance

1. Regular class attendance is encouraged for the student to receive maximum benefits from the course. Attendance is the responsibility of the student.

2. The student is expected to be on time for class and to be ready to participate in the learning process.

3. If absent, the student is responsible for meeting the learning objectives and activities of material presented in class.

4. Attendance on scheduled test dates is **mandatory**. (See Testing.)

5. The instructor will permit students to make up work missed due to participation in field trips and activities approved or sponsored by the college.

6. Students are not allowed to bring their children or dependents to class or lab (campus and agency).

Nursing Laboratory Attendance

1. Agency and campus laboratory experiences are **mandatory**. Students are expected to attend all scheduled hours.

2. Students should be aware that agency nursing laboratory hours are impossible to reschedule. At the discretion of the instructor, when agency lab is missed, assignment(s) will be made to assure the student has opportunity to meet the expected learning objectives/outcomes of the missed experience. The assignment(s) will not negate the missed time.

3. Campus laboratory makeup will be at the discretion of the instructor.

If a student is absent from more than 10% but less than 15% of the total laboratory hours required in the semester, the matter will be reviewed by the department head and a plan of action developed.

If a student is absent from more than 15% of the total laboratory hours required in the semester, the matter will be elevated to the Associate Dean of Allied Health for possible dismissal from the program. The final decision to dismiss a student based upon absences will rest with the Associate Dean of Allied Health.

NURSING LABORATORY EXPECTATIONS

The importance of the nursing laboratory (campus and/or agency) is accepted as an integral part of achieving competency as an associate degree or practical nurse. It is essential that students be present and punctual for all assigned experiences. The student must inform the nursing instructor and/or the unit in the agency where nursing lab is to take place if unable to attend. Failure to contact the agency or instructor will result in an evaluation by the nursing faculty on that college site and may result in an unsatisfactory nursing laboratory evaluation.

To maintain a safe agency clinical environment for the patient and healthcare team, a student must have a minimum of 8 hours off from outside employment prior to the start of the agency clinical day. Students who violate this policy will be sent home, lose agency hours missed, will have to meet with faculty and Department Head, and may be subject to dismissal from the program.

Nursing laboratory experiences may occur in a variety of settings (health agencies, hospitals, doctor's offices, childcare centers, mental health centers, campus laboratories, etc.) Transportation to affiliating agencies is the student's responsibility.

RESPONSIBILITIES RELATED TO NURSING AGENCY LABORATORY

Confidentiality:

All client records (the chart and any other information, oral or written, and those notes taken from the record) are confidential. Violations of this confidentiality may be subject to litigation.

Students shall not retain any individually identifiable client information nor should this data be recorded on client assignments. The information includes the following as well as any other unique information:

Name
Names of relatives
Names of employers
All elements of dates, including birth date, admission date, discharge date, etc.
Telephone numbers
Fax numbers
Electronic mail address
Social Security number
Certificate/license number
Serial number of a vehicle or other device
Internet URL
Internet protocol
(IP) address number
Photographic images

Students shall be protective of client information during the agency laboratory and once it is removed from the laboratory setting. General guidelines include:

DO NOT leave documents open/uncovered.
DO NOT leave client information lying around unattended.
Log off computers when leaving unattended.
Do not leave computer screens up and keep away from public view.
Keep password secret and don't use other's password.
Shred information when no longer needed.
Do not take any agency documents (report sheets, flow sheets, care plans, med lists) from agency.

Do not discuss information in public places.
Do not discuss clients, nursing staff, physicians, or other agency personnel with other persons outside nursing laboratory or classroom.
Do not discuss client concerns with or around other clients.
Do not electronically (e.g., e-mail, instant messaging, text messaging) transmit information which identifies clients or agency personnel.

Students shall not identify nursing staff, physicians or other persons by name in any recorded data other than agency documents.

Do not post any information regarding agency on any form of social media.

Recording:

Charting by nursing students shall have the full signature of the student followed by NS and any other identification required by the college and/or agency.

Passwords shall be kept confidential and shall be used only by the student to whom it is assigned.

A student shall not chart data for other students using his/her assigned password.

Controlled Substances:

Controlled drug records shall be co-signed by the instructor or RN providing direct supervision to the students.

Students should never accept a narcotic key or narcotic digital access number.
Substance use by a nursing student while in agency laboratory will not be allowed and constitutes grounds for further investigation by nursing instructor and agency personnel.

In addition to meeting the nursing program and the IECC student conduct criteria, students must meet the standards of the clinical agency.

<u>Dress Code for Agency Laboratory</u>

In the agency laboratories, the nursing student shall wear:

1. School uniform, clean and neatly pressed.
2. School identification badge on left side of uniform.
3. School patch on left sleeve of uniform top and of lab coat.
4. Clean, white or black leather shoes (no open toes or open backs; no canvas)
5. No undergarments should be visible. Shirt worn under white uniform top, must be white with no lettering.
6. Pants should be hemmed and hem should not touch the floor.
7. Socks must match shoe color and cover the ankle with pants uniform; white hose with dress uniform
8. Hair in a controlled style that avoids contamination. No extreme hair color/style. NO obtrusive hair ornaments are to be worn. Hair must be neat and clean.
9. Cosmetics in moderation. No fragrances may be used; body deodorants used as needed.
10. Nails short and neatly trimmed. No nail polish and no artificial nails of any kind are allowed.
11. No jewelry other than one small stud in each ear lobe and a wedding band.
12. No visible tattoos.
13. Males may wear beards and mustaches – short, clean, neat, and well-trimmed.

Agency policy and faculty discretion will always prevail over this written dress code.

Nursing uniforms may not be worn except in nursing program laboratory experiences. Nursing laboratory coats with identification badge must be worn over street clothes when collecting data in the agency. Nursing laboratory coats are not to be worn during client care. No jeans, shorts, or jogging clothes may be worn for any agency laboratory nursing assignment.

Cell Phone Use

Personal cell phone and/or smart watch use during clinical experiences is prohibited. No photographs and/or videos may be taken in the agency laboratory setting without the permission of the clinical instructor and agency.

SECTION IV

CRITICAL GUIDELINES FOR NURSING LABORATORY

- **Client Safety**
- **Standard Precautions**
- **Blood borne Pathogen Exposure Guidelines**
- **Psychiatric or Psychological Examination Guidelines**
- **Substance Abuse Policy of IECC District 529**
- **Procedures for Substance Abuse at Agency Laboratory**
- **Guidelines for Latex Allergy**
- **Exclusion from Agency Laboratory**

CLIENT SAFETY

In order to maintain a minimum level of safety in client care for the contracted agencies, any NUR student who has a 70% or below at midterm or after will not be allowed to give direct client care in agency lab. An alternate experience will be assigned at the discretion of faculty. Failure to complete the alternative experience as directed can result in an unsatisfactory laboratory evaluation.

STANDARD PRECAUTIONS

Before providing client care, all nursing students are expected to read/review the CDC criteria for Standard Precautions. Standard precautions should be demonstrated in all contact with clients and throughout the clinical assignments. Students are expected to follow the agency's protocol for standard precautions.

BLOOD BORNE PATHOGEN EXPOSURE GUIDELINES

Nursing students should immediately report to their clinical instructor any exposure or suspected exposure to blood borne pathogens.

Students are expected to follow the written protocol of the institutions in which they are performing their clinical work. The student will be responsible for physician, lab, and treatment costs for services rendered.

Students will be responsible for meeting the prescribed follow-up care of the institutions. Treatment costs for services rendered will be at student expense.

PSYCHIATRIC OR PSYCHOLOGICAL EXAMINATION GUIDELINES

Nursing students who may for any reason appear to be unsafe in the clinical area or who may compromise client safety may be required to submit to a psychiatric or psychological examination at any time at the student's expense. Alcohol/drug screening is included as part of these guidelines.

SUBSTANCE ABUSE POLICY OF ILLINOIS EASTERN COMMUNITY COLLEGES DISTRICT 529

The IECC Board of Trustees recognizes the importance of a college environment that is free of substance abuse. The college environment includes students, employees, and other persons participating in IECC District 529-sponsored classes, programs, services, and other activities and events. Substance abuse is defined as unauthorized possession, sale, transfer, purchase or use of alcohol, cannabis, unlawful narcotics, or any other controlled substance. Substance abuse within the college environment is prohibited. Students and employees involved in substance abuse within the college environment are subject to disciplinary action. Any illegal substance abuse will result in involvement of law enforcement officials.

Contractors to District 529 are expected to comply with the Drug-Free Workplace Act of 1988. See Drug-Free Workforce Policy (400.19) in the IECC Policy Manual.

PROCEDURES FOR SUBSTANCE ABUSE AT AGENCY LABORATORY

Any student who arrives at the clinical agency and is suspected of drug or alcohol use will not be allowed to continue the clinical assignment. The instructor will ask another nurse to validate the student behavior and/or odor of alcohol-like substance. The other nurse shall be another IECC instructor or the nurse in

charge of the unit, or a nurse appointed by the CEO of the nursing department. If the two nurses concur that the student may be under the influence of drug or alcohol, the hospital policy for drug screening will be implemented.

If the student is determined to be under the influence of inappropriate drug use, the instructor will attempt to arrange transportation home for him/her. The instructor shall notify the Department Head and the Associate Dean as soon as possible. The student will receive no credit for the clinical lab experience.

Inappropriate drug use means: Impaired ability to function safely in the clinical agency.

Prescribed medication may be used as long as judgment or coordination are not impaired.

The following actions will be taken for a student with suspected and/or confirmed drug/alcohol use:

1. The student will be required to have an evaluation by a substance abuse specialist and follow the recommended plan of care. This will be at the student's expense.

2. Each case will be reviewed by the college site nursing faculty, Department Head, and Associate Dean, who will make a decision regarding the student's continuation in the nursing program.

GUIDELINES FOR LATEX ALLERGY

Latex allergy is a serious threat to health care workers as well as clients. Allergic reactions to latex may be mild, such as skin disturbances, to severe reactions resulting in death. Exposure to latex products may cause hypersensitivity response either locally or systemically. A systemic reaction may occur even with trivial exposure to latex and may result in cardiopulmonary arrest within minutes.

Students are asked to self-identify known latex sensitivity or allergy. This allows the student, faculty and administration to collaborate regarding potential exposures in campus or agency laboratory experiences. The Nursing Program cannot guarantee a latex free laboratory environment at the colleges or agencies.

The following guidelines are recommended by Illinois Eastern Community Colleges-Olney Central College Nursing Programs to address potential incidences of acquired latex sensitivity by students in the laboratory component of the program.

PROCEDURE:

1) Students should become knowledgeable of latex allergy causes and potential clinical manifestations.

2) Students should immediately report to the nursing instructor actual (or suspected) latex allergic incidences.

3) Students should seek medical care for EARLY diagnosis and treatment of hand dermatoses and symptoms suggestive of latex allergy. Precautions recommended by the practitioner, if any, should be reported to Department Head on the college attendance site.

4) The nursing program provides latex-free gloves for campus laboratory practice and for use in health care agencies if unavailable in the agencies.

Please note:

-The nursing curriculum addresses nursing care for a client with latex allergy. The guidelines above are for nursing students.

-Nursing students are responsible for their own health care fees. Therefore, it is recommended that nursing students carry their own health insurance.

EXCLUSION FROM AGENCY LABORATORY

Faculty have the authority to exclude a student from a clinical experience. The following is a list of possible reasons for exclusion from clinicals and is not meant to be all inclusive:

- tardiness greater than 30 minutes
- student's lack of preparation for the clinical experience
- student illness
- impairment of the student to perform safely
- failure of a student to follow clinical affiliating agency and Nursing Program policies

If a student is excluded from the clinical day, the student will be counted absent for the total contact hours assigned for the day.

Students must remain at the clinical site until dismissed by faculty. Leaving the clinical site early will be counted in the student's total absence time. Students are not allowed to leave and then return to clinical.

Students are responsible for tracking their own absences/tardiness times. Illness, family deaths, accidents, emergencies etc. will not be treated as exceptions. Students are encouraged to conserve absences to cover unforeseen occurrences.

SECTION V

PROGRAM REQUIREMENTS AND COSTS

- **Required Technology**
- **CPR Requirements**
- **Liability Insurance**
- **Physical Examination and Immunizations**
- **Health Status/Update**
- **Health Insurance**
- **Nursing Program Costs**
- **Nursing Laboratory Items Required for Student Purchase**
- **Nursing Laboratory Items Optional for Student Purchase**
- **Nursing Pins**

REQUIRED TECHNOLOGY

All nursing students are required to have an iPad for testing purposes. Current requirement is for an iPad with current operating system and enough memory to support program technology requirements. This includes eTexts, software applications (apps), and in class testing software (ExamSoft). Active learning strategies in the classroom may also be assigned requiring the iPad. Students should bring their iPad to every class in the event of a quiz or class activity.

Some information will be communicated through the College Entrata system. Students must set up an Entrata e-mail account with the College. Many student learning resources that accompany textbooks must be accessed online. Internet access is required to use Entrata and to access these learning resources. Students who do not have access to the internet through a personal computer may use computers in the college libraries during regularly scheduled hours.

CPR REQUIREMENTS

All students must provide proof of current CPR certification through the American Heart Association - BLS Healthcare Provider Course.

A copy of the CPR certification card will be placed in the student's file prior to enrolling in the initial course. It is the STUDENT'S responsibility to maintain certification for the ENTIRE time he/she is a nursing student. Every student is required to complete a review of professional rescuer CPR skills and knowledge annually.

This requirement also applies to those individuals who take NUR-1203 or NUR-1204.

LIABILITY INSURANCE

Each student must carry the Professional - Personal Liability Insurance Policy provided by IECC. The fees for this policy are paid at the beginning of the fall term each year or at the beginning of NUR-1204 (Nursing Constructs). Students who enter spring semester will pay the same fee.

PHYSICAL EXAMINATION AND IMMUNIZATIONS

All incoming nursing students will have a complete physical exam by a qualified health practitioner of their choice using the approved physical form. Any student who returns to the program following an absence of one or more semesters must also complete a physical exam. The original physical form and immunization record shall be maintained in the student's file at the College site of attendance. Students are required to comply with any additional agency requirements, such as the seasonal flu vaccine. Cost of receiving the flu vaccine is at the student's expense. Changes in health status must be reported to the Department Head if the change interferes with the student's ability to perform the essential functions of a nursing student, such as lifting restrictions. A release from the physician or other health care provider may be required to return to laboratory experiences at the discretion of the department head as deemed necessary. This information is necessary to plan for student safety and to meet agency standards. Information from the physical and immunization record shall be made available to the clinical agency upon request of the agency.

HEALTH STATUS/UPDATE

Students are required to have a physical examination completed by a healthcare provider before entry into the first nursing course. In subsequent semesters, students are required to complete a Health Update Form.

This allows the instructor to be aware of any health concerns/needs of the student. It is the student's responsibility to notify the instructor of any changes in his/her health condition throughout the program.

HEALTH INSURANCE

It is recommended that all nursing students carry their own personal health insurance. Each student is responsible for health care costs including costs related to incidents occurring in the clinical agencies.

Nursing students should immediately report to their clinical instructor any exposure or suspected exposure to blood borne pathogens or hazardous products, or any injury sustained in the clinical agency. In the event of an untoward incident, students are expected to follow the written protocol of the institution in which they are performing their clinical work. The student is responsible for physician, diagnostic and treatment costs for services rendered by a clinical facility. Students are also responsible for meeting the prescribed follow-up care of the institution and for treatment costs of such care.

PROGRAM COSTS - D350 ASSOCIATE DEGREE NURSING
2022-2023

IN-DISTRICT STUDENTS

All Costs Are Approximate and Subject to Change

FIRST YEAR

Fall Semester

Tuition per credit hour	$147.00		$1,470.00
NUR 1201 Nursing I	Credit hours:	10	
Tuition per credit hour	$100.00		$700.00
LSC 2111 Human Anatomy & Physiology I	Credit hours:	4	
PSY 1101 General Psychology	Credit hours:	3	
Maintenance Fee (per credit hour)	$15.00		$255.00
Student Support Fee (per credit hour)	$12.00		$204.00
Technology Fee (per credit hour)	$5.00		$85.00
Activity Fee			$60.00
Facilities Usage Fee			$5.00
IECC/OCC Nursing Student Handbook Fee			$5.00
Liability Insurance Fee			$15.00
iPad with Maintenance Agreement*			$458.00
NurseThink® Complete			$644.00
NUR 1201 Course Review Fee			$50.00
NUR 1201 Module Fee			$16.00
NUR 1201 Nursing Lab Fee			$50.00
LSC 2111 Science Lab Fee			$10.00
Testing Fee			$98.40
Background Check			$65.00
Badges			$10.00
Drug Screening			$75.00
Flu Vaccine			$35.00
Health Physical Exam and Immunizations			$300.00
Nursing uniforms, shoes, watch, etc.			$200.00
Support Course Textbooks			$550.00
Textbooks for Nursing**			$1,200.00
			$6,560.40

*Actual cost at IECC District contract price

**May be less with eBook option

Spring Semester

Tuition per credit hour	$147.00		$1,470.00
NUR 1202 Nursing II	Credit hours:	10	
Tuition per credit hour	$100.00		$1,000.00
LSC 2112 Human Anatomy & Physiology II	Credit hours:	4	
PSY 2109 Human Growth and Development	Credit hours:	3	
ENG 1111 Composition I	Credit hours:	3	
Maintenance Fee (per credit hour)	$15.00		$300.00
Student Support Fee (per credit hour)	$12.00		$240.00
Technology Fee (per credit hour)	$5.00		$100.00

Activity Fee			$60.00
Facilities Usage Fee			$5.00
NUR 1202 Course Review Fee			$50.00
NUR 1202 Module Fee			$16.00
NUR 1202 Nursing Lab Fee			$50.00
LSC 2112 Science Lab Fee			$10.00
ENG 1111 Computer Lab Fee (per credit hour)	$10.00		$30.00
Testing Fee			$98.40
Support Course Textbooks			$350.00
			$3,779.40
		1st Year Costs:	**$10,339.80**

SUMMER SEMESTERS

Summer Semester (Req'd for PRACTICAL NURSE option only)

Tuition per credit hour	$147.00		$1,029.00
NUR 1203 Clinical Nursing	Credit hours:	6	
NUR 1206 Practical Nurse Review	Credit hours:	1	
Maintenance Fee (per credit hour)	$15.00		$105.00
Student Support Fee (per credit hour)	$12.00		$84.00
Technology Fee (per credit hour)	$5.00		$35.00
Facilities Usage Fee			$5.00
NUR 1203 Course Review Fee			$50.00
NUR 1206 Course Review Fee			$75.00
NUR 1203 Module Fee			$9.00
NUR 1203 Nursing Lab Fee			$50.00
Fingerprinting			$55.00
School Pin (optional - starting from approximately $31 and up)			$31.00
Pictures (optional)			$50.00
NCLEX-PN Application Fee for Licensure Exam ($200 registration; $107 Continental Testing; $50 licensure)			$357.00
Graduation Fee			$30.00
			$1,965.00
		1st Year and PN Option Costs:	**$12,304.80**

Summer Semester (Req'd for IECC LPN grads returning after 3 years and LPNs who graduated elsehwere)

Tuition per credit hour	$147.00		$441.00
NUR 1204 Nursing Constructs	Credit hours:	3	
Maintenance Fee (per credit hour)	$15.00		$45.00
Student Support Fee (per credit hour)	$12.00		$36.00
Technology Fee (per credit hour)	$5.00		$15.00
IECC/OCC Nursing Student Handbook Fee			$5.00
iPad with Maintenance Agreement*			$458.00
Prorated Nurse Think Fee			$324.50
NUR 1204 Course Review Fee			$50.00
NUR 1204 Module Fee			$9.00
NUR 1204 Nursing Lab Fee			$50.00

			$1,433.50

SECOND YEAR

Fall Semester

Entering new/re-entering LPN students must have current textbooks, uniforms, supplies, health physical exam, immunization, background checks, drug screening, etc. (See Fall semester First Year)			
Tuition per credit hour	$147.00		$1,470.00
NUR 2201 Nursing III	Credit hours:	10	
Tuition per credit hour	$100.00		$700.00
LSC 2110 General Microbiology	Credit hours:	4	
SOC 2101 Principles of Sociology	Credit hours:	3	
Maintenance Fee (per credit hour)	$15.00		$255.00
Student Support Fee (per credit hour)	$12.00		$204.00
Technology Fee (per credit hour)	$5.00		$85.00
Activity Fee			$60.00
Facilities Usage Fee			$5.00
Liability Insurance Fee			$15.00
NUR 2201 Course Review Fee			$50.00
NUR 2201 Module Fee			$16.00
NUR 2201 Nursing Lab Fee			$50.00
LSC 2110 Science Lab Fee			$10.00
Testing Fee			$98.40
Badges			$5.00
Flu Vaccine			$35.00
Support Course Textbooks			$350.00
			$3,408.40

Spring Semester

Tuition per credit hour	$147.00		$1,764.00
NUR 2202 Nursing IV	Credit hours:	10	
NUR 2205 Registered Nurse Review Course	Credit hours:	2	
Tuition per credit hour	$100.00		$600.00
SPE 1101 Fundamentals of Effecting Speaking	Credit hours:	3	
ENG 1121 Composition & Analysis	Credit hours:	3	
Maintenance Fee (per credit hour)	$15.00		$270.00
Student Support Fee (per credit hour)	$12.00		$216.00
Technology Fee (per credit hour)	$5.00		$90.00
Activity Fee			$60.00
Facilities Usage Fee			$5.00
NUR 2202 Course Review Fee			$50.00
NUR 2205 Course Review Fee			$75.00
NUR 2202 Module Fee			$16.00
NUR 2202 Nursing Lab Fee			$50.00
ENG 1121 Computer Lab Fee (per credit hour)	$10.00		$30.00
Testing Fee			$98.40
Fingerprinting			$55.00
Pictures (optional)			$50.00
School Pin (optional - starting from approximately $37 and up)			$37.00
Support Course Textbooks			$225.00

NCLEX-RN Application Fee for Licensure Exam ($200 registration; $107 Continental Testing; $50 licensure)	$357.00
Graduation Fee	$30.00
	$4,078.40
2nd Year Costs:	**$7,486.80**
Total Cost for (4-Semester) ADN Program:	**$17,826.60**
Total Cost for ADN Program with PN Option:	**$19,791.60**

Students are required to furnish their own transportation to nursing agency laboratory.
Students are responsible for their own health insurance costs.

NURSING LABORATORY ITEMS REQUIRED FOR STUDENT PURCHASE

1. Stethoscope
2. Blood Pressure Cuff
3. Gait Belt
4. Scissors
5. Pen light
6. Identification Badges
7. Professional Shoes
8. Program approved uniforms
9. Lab Coat
10. 2 IECC program patches
11. Watch with second hand

Uniforms and lab coat must be from the approved selection.

OPTIONAL NURSING LABORATORY ITEMS

1. Hemostat
2. Pocket Saver
3. CPR Mask
4. Goggles

NURSING PINS

The purchase of graduation pins is optional. Either gold or gold-filled pins may be chosen for the associate degree graduate. The PN graduate pin is silver. Chain guard with college site initials is optional. Orders are made through the designated personnel at each college site.

SECTION VI

STUDENT RIGHTS AND SERVICES

- **Student Rights**
  - **Student Representation on Committees**
  - **Program Evaluation**
  - **Inter-college Site Transfer**
  - **Auditing of Nursing Courses**
  - **Student Policies**
    - **Student Complaint Policy**
    - **Sexual Harassment Policy**
    - **Privacy of Student Information**
    - **Campus Safety and Security**
- **Services**
  - **Nursing Organization**
  - **Career Placement**
  - **Financial Aid and Scholarships**
  - **Learning Resource Center**
  - **Learning Skills Center**

STUDENT RIGHTS

Student Representation
Students are asked to select representatives to participate in the nursing advisory committee meetings and the Student Advisory Committee meetings. Students are provided opportunities to evaluate learning experiences in the classroom, campus laboratory, and agency laboratories. A member(s) of the college site Student Nurse Association may serve as a class representative to the Student Senate.

Program Evaluation
Student evaluations of faculty, resources, and courses are essential for improvement of the Nursing Program. Students are given the opportunity to complete evaluations of faculty at least once a year. Students also evaluate learning experiences in the classroom, clinical agencies and with preceptors. At graduation, the student completes a program evaluation and self-assessment of educational outcomes.

Intercollege Site Transfer
Intercollege site transfer is discouraged; however, it is permitted in extraordinary circumstances. The major reason transfer is permitted is in the case of a change in residence beyond control of the student. A request must be filed with the Department Head on the original site one semester prior to the date of transfer. These guidelines are for currently enrolled students in good standing. First time students who have been accepted and have not attended nursing classes may not request a transfer. Forms may be obtained from the administrative assistant. Each request for transfer will be considered on an individual basis.

Auditing of Nursing Courses
Students will be allowed to audit the lecture and campus laboratory portion of a nursing course on a space available basis. There will be no auditing of agency nursing laboratory. Being allowed to audit a nursing course does not convey in any way acceptance of an auditing student into the IECC-OCC Nursing Programs.

A nursing student who has passed the nursing program but has not passed the NCLEX may audit a class on a space available basis. The college catalog requirements for auditing must be met.

Student Policies
Information regarding the following policies is found in the Student Conduct and Rights section of the college catalog.

1. Student Complaint Policy
2. Sexual Harassment Policy
3. Privacy of Student Information
4. Campus Safety and Security

Detailed information is provided in the Student's Right to Know and Student Conduct Section of the IECC college catalog.

SERVICES

Nursing Organization
Associate degree nursing students are encouraged to participate in the college site nursing organization and establish membership in the Illinois Student Nurse Association. Membership in this pre-professional organization is considered important for professional development and is considered in evaluations of professionalism.

Career Placement
The placement offices will assist graduates in obtaining positions for which they are qualified.

Financial Aid and Scholarships
Applications for financial aid and scholarships may be secured from Student Services Offices.

Learning Resource Center (LRC)
IECC libraries offer 24/7 services to students, wherever they are working on assignments. IECC is part of the Consortium of Academic and Research Libraries (CARLI) of over 85 libraries who share 36+ million materials via a five-day delivery service at no cost to patrons. Each library has a web page with direct links to:

- **I-Share online catalog of online books, videos, DVDs, and CDs**
- **Online subscription services** that connect students to authoritative reference resources, online magazine and journal articles, newspapers, maps, and e-books with remote access
- **Citation resources**
- Nursing reference collection, Springer eBook Medical Collection, and nursing journals in print
- Alexander Street Press Educational Videos
- Tutorials about how to access journals and create bib cards are on the college library websites
- Library nursing resources web page on college library websites
- Copyright information on library web page to help students avoid plagiarism

The print collections of the LRCs are complemented by a variety of electronic resources with remote access available. The collection includes CINAHL Plus with Full Text (620 full text journals, Evidence-Based Care Sheets, Quick Reference Charts, Continuing Education Units and Search Strategies), Springer eBooks Medical Collection (33,000 books and open source journals published 2005-present), AccessScience online database with a Medicine module, CREDO*reference* (29 medical reference books online), EBSCOhost Health Source: Nursing/Academic Edition (550 full-text journals and the Lexi-PAL Drug Guide) and several other EBSCOhost databases that are relevant to nursing and allied health.

Computer labs are available in each college library with numerous desktop PC's loaded with nursing software programs. Wireless service is available in the libraries also, allowing students to connect to the Internet using their own laptops and personal devices. FCC and OCC have assistive technology workstations with devices and software to help students with a variety of learning or physical challenges.

Learning Skills Center (LSC)
Students who encounter difficulty with studies in the nursing program and support courses are encouraged to seek the help of the staff in the LSC.

See the college catalog for a more detailed description of services available to students.

SECTION VII

PROGRESSION AND GRADUATION

- **Progression**
  - **Progression and Retention**
  - **Change of Personal Data**
  - **Withdrawal Procedure**
- **Petition and Readmission**
- **Graduation**
  - **Graduation Requirements**
  - **Articulation with Senior Institutions**
  - **Licensure Application**
  - **Employment or Scholastic References**
  - **Copy of Transcripts**
  - **Educational Guarantee**
  - **Program Evaluation**

PROGRESSION

Progression and Retention

1. Students must achieve a minimum grade of "C" in classroom theory as well as a satisfactory grade for professional behaviors and the laboratory components of each nursing course as determined by the criteria of each nursing course. Any grade of less than "C" achieved in a nursing or concurrent general education course is unacceptable for progression in the Nursing Program.

2. Associate degree students must achieve a minimum of "C" in the following general education courses:

PSY-1101	General Psychology
LSC-2111	Human Anatomy and Physiology I
PSY-2109	Human Growth and Development
LSC-2112	Human Anatomy and Physiology II
SPE-1101	Fundamentals of Effective Speaking
ENG-1111	Composition I
LSC-2110	General Microbiology
SOC-2101	Principles of Sociology
ENG-1121	Composition and Analysis

3. Students must have a satisfactory background check and negative drug screening to continue in the nursing program. Failure to meet these criteria, at any time a report or test is required, may result in negation of admission or dismissal from the program.

Change of Personal Data

A change in name, address and/or telephone number must be reported immediately to the Department Head or administrative assistant. This is necessary to ensure timely communications from the nursing program and the college.

Withdrawal Procedure

Students must follow college withdrawal policies. Nursing students shall inform the Department Head or administrative assistant of their intention to withdraw from the program and fill out a student withdrawal form and appropriate college forms.

PETITION AND READMISSION

Nursing students who leave the college or program by reason of academic deficiency or dismissal may petition for readmission to the program no sooner than one semester following official notification of status. Such petition will be reviewed by an Academic Standards Committee. This statement applies as follows:

1. Any student who withdraws from a required nursing or concurrent general education course will be required to file a petition for re-entry into the program.

2. Any student who achieves less than "C" in a nursing course or concurrent general education course must petition for re-entry. The student may not petition for re-entry more than one time. *, **, ***. However, If the student chose to withdraw before the 10 day semester drop date, the student may petition the Associate Dean of Allied Health for a waiver to allow for one additional petition, if necessary, during the nursing program.

3. Any student who receives an unsafe or unsatisfactory laboratory competency evaluation or is dismissed from the college or program, whether culminating in failure or withdrawal, must petition for readmission.

Readmission will be granted only if it is shown that the student possesses the requisite ability, and that the prior performance did not indicate a lack of capacity to complete the course of study in the program and/or college. The burden of making such a showing rests with the petitioning student. In general, a petition for readmission must include a description of circumstances, which adversely affected the petitioner's ability to meet the academic standards of the program and/or the college. Petitioners must resubmit all the admission materials required for a first-time admission unless this requirement is waived by the chief student personnel officer. Petitioners must meet the current college and nursing program admission requirements and ranking requirements. Petition approval does not guarantee readmission to the nursing program. The petitioning process must be completed at least sixty (60) days prior to the semester of readmission. For entry into the spring semester, all other admission requirements must be met on or before the college's official fall withdrawal date. For entry into the fall semester, all admission requirements must be met by the application deadline (February 15).

If the petitioner is granted re-admittance but fails to enter the semester designated by their petition, the petition for readmission is nullified and must be fully repeated for consideration of a different semester.

If a written petition is denied by the Academic Standards Committee, the petitioners shall be granted a personal appearance upon timely request before the Academic Standards Committee. A petitioner for readmission whose petition has been denied by the committee may request a rehearing before the President of the College. A request for a hearing before the President of the College must affirmatively show:

1. That there are new or extraordinary circumstances, not known by or available to the petitioner at the time of the original petition for readmission, which adversely affected the petitioner's ability to meet the academic standards, or

2. That the procedures employed by the Committee failed to give the petitioner a fair hearing.

The decision of the president is final and is not subject to review. A student in the nursing program who has been denied readmission may repetition no sooner than three calendar years from the date of his/her

original petition. If the student is readmitted and withdraws or fails, he/she will not be allowed to petition again.

*The Academic Standards Committee has the right to review the admission status of any student based on faculty recommendation and documentation of extraordinary circumstances that adversely impacted student performance.

**IECC nursing students, who have exhausted their petition options and have not obtained a practical nurse license, may reapply to the first year of the program, one time, after five years from the last program exit, without regard to prior academic performance. Applicant will be subject to the following criteria:

1. Student was not dismissed from the program for any safety violations in the clinical setting.
2. Student has not violated any student conduct policies.
3. No violation of critical concerns from the Nursing Student Handbook during their initial time in the program.

***IECC nursing students may reapply to the second year of the program one time after three years from the last program exit, without regard to prior academic performance, subject to the following criteria:

1. Successful completion of the Practical Nurse curriculum.
2. Licensure as a Practical Nurse.
3. Employment as a Licensed Practical Nurse with documentation of at least 2,000 hours of work from the time of the last exit from the nursing program.

If readmitted, the student progression/retention will follow the guidelines of a first-time student.

GRADUATION

Graduation Requirements
Nursing students should read the graduation requirements addressed in the college catalog.

Articulation with Senior Institutions
Students desiring to articulate with a senior institution should seek information from counselors of the desired institution for guidance in their curriculum development plan.

Licensure Application
Students who successfully complete requirements of the practical nurse or registered nurse curriculum are eligible to apply for licensure. The State of Illinois Nurse Practice Act explains that actions, in the past and/or future, such as a felony, misdemeanor, or substance abuse, could possibly result in refusal to **issue** or renew a license to practice nursing. One convicted of a criminal offense is not automatically barred from licensure, but the Illinois Department of Financial and Professional Regulation will take such convictions into consideration. Changes in student status, occurring during progression through the program, must be reported to the Department Head on the college site at the time of the event. This may also allow the nursing program to be proactive with further inquiries or actions necessary to assist with the licensure application process.

Employment or Scholastic References
Students may sign a release form to allow faculty to provide references for employment or continuing education. Written permission is required for references to be provided.

Copy of Transcripts

The student may request a transcript of his/her college courses at any time. Requests must be made in writing and submitted to the Office of Student Records, or an unofficial record can be accessed through ENTRATA.

Educational Guarantee

Information regarding technical degree/certificate educational guarantee and transfer degree educational guarantee is found in the Student's Right to Know and Student Conduct section of the college catalog.

Program Evaluation

Six months following graduation, the **graduate** is asked to complete a self-assessment indicating the degree to which the program prepared them for beginning practice as a registered nurse and to evaluate the program and services. The graduate is also asked to provide specific suggestions to improve outcomes. Additionally, the graduate is requested to ask their employer to evaluate the preparation of the graduate to meet role expectations of an entry-level registered or practical nurse. **Survey responses are anonymous. The goal is to evaluate the degree to which the program is meeting its mission and purposes, not to evaluate individuals.**

Graduate cooperation is appreciated. This feedback is essential to provide direction for change to maintain a quality Nursing Program.

SECTION VIII

FORMS

- **Authorization to Release Information Form**
- **Release of Liability Form**
- **Statement of Understanding – Background Check and Drug Screening Form**
- **Statement of Understanding – Social Networking Policy Form**
- **Statement of Understanding – IECC Student Code of Conduct Form**
- **Student Exhibit Permission Form**
- **Student Release Form for Promotional and Educational Purposes**
- **Student Technology Requirement Form**
- **Handbook Review Verification Form**

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC - WVC

AUTHORIZATION TO RELEASE INFORMATION FORM

I, _____, hereby authorize Illinois Eastern Community Colleges to give appropriate information regarding my scholastic and clinical performance to prospective employers. I realize that the inquiry from such individual(s) might be over the telephone or by letter.

_____ _____
Signature Date

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC - WVC

RELEASE OF LIABILITY FORM

Nursing students should immediately report to their clinical instructor any exposure or suspected exposure to blood borne pathogens or hazardous products, or any injury sustained in the clinical agency. In the event of an untoward incident, students are expected to follow the written protocol of the institution in which they are performing their clinical work. The student is responsible for physician, diagnostic, and treatment costs for services rendered by a clinical facility. Students are also responsible for meeting the prescribed follow-up care of the institution and for treatment costs of such care.

It is recommended that all nursing students carry their own personal health insurance. Each student is responsible for his/her own health care costs including costs related to incidents occurring in the clinical agencies.

I, _____, hereby release and hold harmless Illinois Eastern Community Colleges and all clinical agencies from any and all medical expenses or liability claims that may arise in relation to clinical experiences.

_____ _____
Student Date

After this form has been signed and dated, it is placed in the student's file.

[A signed copy of this form may be required for <u>each</u> clinical agency.]

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC – WVC

STATEMENT OF UNDERSTANDING

BACKGROUND CHECK AND DRUG SCREENING FORM

I understand that a copy of my criminal background check and/or drug screening test results may be required by affiliating agencies in which I will have clinical experiences.

I, _____ give Illinois Eastern Community Colleges permission to release the results of my background check and/or drug screening test results to affiliating agencies upon request.

Statement of understanding regarding unsatisfactory background check:

I, _____understand that an unsatisfactory background check will result in negation of my admission to the IECC-OCC Nursing Program or administrative withdrawal from the Program. I understand that a change in my background check which results in a criminal conviction during my progression through the nursing program must be reported and that such a change may result in administrative withdrawal or dismissal from the program. Failure to report a change within 5 working days is grounds for automatic dismissal from the program.

I understand that passing the IECC criminal background check does not ensure eligibility to meet requirements for licensure.

Statement of understanding regarding positive drug screening result:

I, _____ understand that a positive drug screening test will result in negation of my admission to the IECC-OCC Nursing Program or administrative withdrawal from the Program. I further understand that I can apply for readmission after one year and three consecutive satisfactory drug screening tests.

_____ _____
Student's Signature Date

_____ _____
Witnessed By Date

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC - WVC

STATEMENT OF UNDERSTANDING REGARDING SOCIAL NETWORKING FORM

I, _____, understand that social networking is not permitted during classes, lab, and clinical education. Information about a patient in any context is a possible HIPAA violation. Discussing any clinical information on a social network site is a potential HIPAA violation.

I understand that if a social networking issue should arise during enrollment in the program, the consequence could be recommendation for dismissal from the nursing program.

_____ _____
Student's Signature Date

_____ _____
Witnessed By Date

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC – WVC

STATEMENT OF UNDERSTANDING REGARDING IECC STUDENT CODE OF CONDUCT

I have read the IECC Student Code of Conduct in its entirety. I acknowledge and understand the policy and agree to abide by it.

_____
Student's Signature

_____
Date

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE ASSOCIATE DEGREE NURSING PROGRAM
FCC - LTC - OCC – WVC

STUDENT EXHIBIT PERMISSION FORM

I, _____, give permission for the IECC/OCC Associate Degree Nursing Program faculty/staff to use any assignment, in part or in whole, as an exhibit for the Accreditation Commission for Education in Nursing (ACEN) self-study and/or site visit.

_____
Student Printed Name

_____
Student Signature

_____
Date

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE ASSOCIATE DEGREE NURSING PROGRAM
FCC - LTC - OCC – WVC

STUDENT RELEASE FORM FOR PROMOTIONAL/EDUCATIONAL PURPOSES

Through your association with Illinois Eastern Community Colleges: Frontier Community College; Lincoln Trail College; Olney Central College; and Wabash Valley College, you are likely to participate in events that are recorded on behalf of the college. By submitting this release, you authorize Illinois Eastern Community Colleges and those acting on its behalf to copyright, publish and use audio, photographs, video and other recordings or representations of you for promotional and educational purposes. You release and discharge the Illinois Eastern Community Colleges Board of Trustees, its assigns and those acting on its behalf from any liability arising from such use.

Publications can include:
IECC Catalog
IECC Poster/Brochure
IECC Homepage; Intranet, or Internet link, including multi-media electronic presentations
IECC printed and electronic marketing materials
IECC Newspaper and Magazine Advertisements
IECC Television Advertisements
IECC Social Media pages, including FCC, LTC, OCC and WVC Social Media pages.

This form verifies that I do not have on file any restrictions prohibiting the release of student information.

Student Name (please print) _____

Student Signature _____

Date _____

IECC Staff Signature _____

Date _____

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, OLNEY CENTRAL COLLEGE
ASSOCIATE DEGREE NURSING PROGRAM

STUDENT TECHNOLOGY REQUIREMENT FORM

Students purchasing their iPads through IECC will be charged a one-time fee based on the actual cost of the iPad. If the student has financial aid, the iPad and warranty are approved for coverage as a program requirement. Keep in mind, the cost of the iPad will be less due to our institutional contracted price. The program has worked to reduce costs for other program requirements to offset the cost of the iPad.

Your signature below acknowledges receipt of the iPad and Apple Care Warranty. The iPad is yours to keep. No exchanges or refunds will be provided once the iPad is signed out.

It is your responsibility to register the iPad with Apple upon setup to initiate the Apple Care Warranty. Defective devices should be reported to Apple per the warranty directions. If the iPad is lost or stolen, it is the student's responsibility to get a replacement. Many homeowner policies may cover electronic devices.

Students may use their own iPad if it meets the program criteria.

_____
Signature

_____
Date

Developed: 4/6/2018

After this form has been signed and dated, it is placed in the student's file.

ILLINOIS EASTERN COMMUNITY COLLEGES, DISTRICT 529
OLNEY CENTRAL COLLEGE NURSING PROGRAM
FCC - LTC - OCC - WVC

NURSING STUDENT HANDBOOK REVIEW VERIFICATION FORM

I have read the Nursing Student Handbook in its entirety. I acknowledge and understand the policies printed in the handbook and agree to abide by them.

I acknowledge and understand some information in this publication may become outdated due to changes in Board of Trustees Policy, state law, and nursing program guidelines. In such instances current board policy, state law, and nursing program guidelines will prevail.

The date of fulfillment for this requirement will be designated by nursing faculty.

_____
Student's Signature

_____
Date

After this form has been signed and dated, it is placed in the student's file.

GLOSSARY

ADVOCACY: The act or process of pleading the cause of another; to support or defend someone or something (as patient rights).

ALTER: To make different without changing into something else.

ALTERATION: A change in the person's ability to meet own basic needs.

> **Simple Alteration:** A basic need with a simple alteration which has a minimal impact on other basic needs and growth and development across the lifespan.
>
> **Moderately Complex Alteration:** A basic need with a moderately complex alteration which has a greater impact on other basic needs and growth and development across the lifespan.
>
> **Complex Alteration:** A basic need with a complex alteration which has a severe impact on other basic needs and growth and development across the lifespan.

ANTEPARTAL: The period of time from conception to onset of labor.

ARTICULATION AGREEEMENT: An agreement between a two- year college and a four-year university that specifies what courses at the community college will transfer to the university and meet the university's degree requirements in order to ensure a smooth transition.

ASSISTIVE PERSONNEL: Employees who give and/or support patient care as delegated by a licensed or registered nurse.

BASIC NEEDS: The person's needs ranging from survival to the development of own maximum potential.

> **Oxygenation Need:** A basis for the intake, exchange, distribution and removal of gases.
>
> **Circulation Need:** A basis for the transportation of nutrients, gases, and waste products.
>
> **Regulatory Need:** A basis for the maintenance of fluid and electrolyte balance, temperature control, and endocrine function.
>
> **Nutritional Need:** A basis for ingestion, absorption, and metabolism of nutrients.
>
> **Elimination Need:** A basis for the removal of indigestible materials and waste products of metabolism.
>
> **Motor/Sensory Need:** A basis for the maintenance of stimulation, perception, and mobility.
>
> **Safety and Security Need:** A basis for the maintenance of external and internal environmental protection.
>
> **Psychosocial Need:** A basis for the maintenance of affective, cognitive, and psychomotor (behavioral) activities; and the development of self-concept including spirituality, effective relationships and communication.

CARING: Interaction of the nurse and client in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support, and compassion to help achieve desired outcomes (NCSBN, 2019).

COLLABORATION/TEAMWORK: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care. (Adapted from QSEN Institute, http://qsen.org/).

COLLEGIALITY: Striving to work effectively with others for the benefit of persons served; power of authority vested equally in a number of associates in a profession who demonstrate shared accountability and mutual respect.

COMMON WELL-DEFINED HEALTH PROBLEMS: Health problems about which an essential core of knowledge exists.

COMMUNICATION AND DOCUMENTATION: verbal and nonverbal interactions between the nurse and the client, the client's significant others, and the other members of the health care team. Events and activities associated with client care are recorded in written and/or electronic records that demonstrate adherence to the standards of practice and accountability in the provision of care (NCSBN, 2019).

COMPASSION: A feeling of concern for the untoward circumstances of another that stimulates a desire to provide assistance.

COMPETENCE: The quality or state of having requisite or adequate ability; effective use of talents, time and resources.

COMPETENCY: The knowledge, attitudes, skills and behaviors that establish acceptable performance in a particular situation.

CRITICAL THINKING: The application of reasoned judgment utilizing knowledge, skills, and attitudes within the framework of the nursing process for goal-directed activity.

CULTURAL AWARENESS: Conscious and informed recognition of the differences and similarities between different cultural or ethnic groups.

CULTURAL COMPETENCE: A process in which health care workers deliver services that are respectful of and responsive to the health beliefs, practices and cultural and linguistic needs of diverse patients.

CULTURAL DIVERSITY: The difference in beliefs, values, and behavioral patterns, which are common to particular groups, and are transmitted to succeeding generations.

CULTURAL SENSITIVITY: Respect and appreciation for cultural behaviors based on an understanding of the other person's perspective.

CULTURE AND SPRITUALITY: Interaction of the nurse and the client (individual, family or group, including significant others and populations) which recognizes and considers the client-reported, self-identified, unique and individual preferences to client care, the applicable standard of care and legal considerations (NCSBN, 2019).

DELEGATION: Transferring to an individual the authority to perform a selected nursing activity or task, in a selected situation.

DIVERSITY: The uniqueness of all individuals which encompasses different personal attributes, values and roles. It is represented in many forms ranging from differences in ideas, viewpoints, perspectives, values, religious beliefs, backgrounds, race, gender, age, sexual orientation, human capacity and ethnicity (excerpted from Chapter 3, 3-4-1, *Higher Learning Commission Handbook on Accreditation*, version 1:10/03)

ENVIRONMENT: The aggregate of conditions, circumstances and influences surrounding and affecting the person.

ETHICS: "Involves reflective consideration of personal, societal, and professional values, principles, and codes that shape nursing practice." *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing, p. 13.)

EVIDENCE-BASED PRACTICE: Integration of best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care. (Adapted from QSEN Institute, http://qsen.org/).

EXCELLENCE: "Creating and implementing transformative strategies with daring ingenuity. *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing, p. 12.)

FAIRNESS: Straight forwardness; uprightness of character and action.

FAMILY: "Two or more individuals who provide physical, emotional, economic, or spiritual support to each other." (Treas, L.S. & Wilkinson, J.M. (2018). Basic Nursing: Concepts, Skills and Reasoning. FA Davis Co.: Philadelphia, PA, p. 292)

GROWTH AND DEVELOPMENT: A normal, progressive, and predictable biological and sociological development of man, from conception to death.

Stages of growth and development according to chronological ages are:

Neonatal: birth – 28 days
Infancy: 1 month – 1 year-of-age
Toddler: 1-3 years-of-ages
Preschool: 4-5 years-of-age
School Age: 6-12 years-of-age
Adolescence: 12-18 years-of-age
Young Adulthood: 19-40 years-of-age
Middle Adulthood: 40-64 years-of-age
Older Adulthood: 65 years and over (young-old, 65-74 years; middle-old, 75-84; oldest-old, 85 and over).

HEALTH: A dynamic state in which the person strives to meet basic needs in order to promote and maintain maximum potential.

HELP: To provide assistance or support; to change for the better.

HOLISM: The culture of human caring in nursing and healthcare that affirms the biopsychosocial needs of the patient.

HONOR: Integrity in one's beliefs and actions. Acting consistently with principles of right conduct.

HUMAN FLOURISHING: The effort to achieve self-actualization and fulfillment within the context of a larger community of individuals, each with the right to pursue his or her own such efforts (*Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing).

ILLNESS: A process in which the basic needs of the person are altered or impaired compared to the previous state of health.

INFORMATICS (NURSING): The use of information and technology to communicate, manage knowledge, reduce error, and support decision-making. (Adapted from QSEN Institute, http://qsen.org/).

INTEGRITY: Adherence to a consistent standard of ethical behavior. "Respecting the dignity and moral wholeness of every person without conditions or limitations." (*Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing, p. 67.)

INTRAPARTAL: The period of time from onset of labor through the fourth stage of labor.

KSA: Knowledge, Skills, and Attitudes expected for pre-licensure nursing students.

LEARNING: Development of the cognitive, psychomotor and affective abilities.

LEVELS OF NURSING CARE: Three possible focal points of nursing practice, when providing total care for the patient.

> **Promote and maintain health:** Nursing practice in which the nurse helps the patients who are either healthy, disabled, or ill to increase or maintain their level of wellness.
>
> **Restore to optimal health:** Nursing practice in which the nurse helps patients return to their highest level of wellness after an illness.
>
> **Support the person through the dying process:** Nursing practice in which the nurse supports the patient through the dying process.

MATRICULATION: The formal process of entering a university or becoming eligible to enter by fulfilling certain academic requirements

MAXIMUM POTENTIAL: The highest degree of wellness within the person's capacity.

NCLEX: National Council of State Boards of Nursing Licensure Exam.

NEONATAL: The period of time from birth to 28 days (four weeks).

NURSING JUDGMENT: Utilizing the processes of critical thinking, clinical judgment, and integration of best evidence into practice to make decisions about clinical care. (Adapted from *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing).

NURSING PRACTICE: A helping interaction based on the nursing process that assists the person to meet basic needs. Caring is an inherent part of this helping interaction.

NURSING PROCESS: A scientific, clinical reasoning approach to client care that includes assessment, analysis, planning, implementation, and evaluation.

> **Assessing:** The process of comprehensively gathering and organizing data.
>
> **Analyzing/Diagnosing:** The process of critically examining data to place the patient appropriately on the wellness-illness continuum. Examination requires critical thinking to recognize relationships and to identify causes, key factors and possible results to arrive at a nursing diagnosis. A nursing diagnosis is a statement of the patient's alteration in basic needs and its related cause that can be impacted by nursing interventions.
>
> **Planning:** The process of prioritizing, goal setting, determining desired outcomes, selecting nursing interventions, validating rationale, and the writing of the nursing care plan.
>
> **Implementing:** The process of initiating and completing the planned intervention, which may be dependent, collaborative/interdependent or independent nursing actions.
>
> **Evaluating:** The process of analyzing the patient's response or outcome, which indicates the effectiveness of the nursing care provided. If the desired outcomes are not met, reassessment is necessary.

OUTCOMES: The result of performance.

> **Client Outcomes:** Specific desired client responses, stated in measurable terms, which serve as indicators toward meeting the goal.
>
> **Educational Outcomes:** These outcomes encompass competencies expected of the student at graduation from the program. These statements describe behaviors, which demonstrate that the graduate has acquired the knowledge, skills, and attitudes inherent in the core components of the three roles basic to associate degree nursing practice: provider of patient-centered care, manager of patient-centered care, and member within the profession of nursing.
>
> **Program Outcomes:** Standards by which program effectiveness is documented such as: admission data enrollment patterns, graduation rates, NCLEX-RN results, patterns of employment, and other standards identified by the program.

PATIENT (CLIENT): A person who interacts with healthcare professionals for assistance in meeting healthcare needs. The client may be an individual, a family or group.

PATIENT-CENTERED CARE: Care that recognizes the patient as the source of control and full partner in providing compassionate and coordinated care based on respect for patient preferences, values, and needs. (Adapted from QSEN Institute, http://qsen.org/).

PERSON: A unique being with bio-psychosocial, cultural, and spiritual dimensions, who interacts with the environment and responds as an integrated whole.

POSTPARTAL: The period of time after completion of the fourth stage of labor to approximately 6 weeks afterwards.

PRACTICAL NURSE or LICENSED PRACTICAL NURSE: A person who is licensed as a practical nurse and practices practical nursing as defined by the nursing act. May use the abbreviation "L.P.N." (Taken from the Nurse Practice Act; Sec.50-10 Definitions.)

PRACTICAL NURSING: The performance of nursing acts requiring the basic nursing knowledge, judgment, and skill acquired by means of completion of an approved practical nursing education program. Practical nursing includes assisting in the nursing process as delegated by a registered professional nurse or an advanced practice nurse. The practical nurse may work under the direction of a licensed physician, dentist, podiatrist, or other health care professional determined by the Department. (Taken from the Nurse Practice Act; Sec.50-10 Definitions.)

PROFESSIONAL IDENTITY: "The internalization of core values and perspectives recognized as integral to the art and science of nursing" (page 68, *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing).

PROFESSIONALISM: The conduct, aims, and qualities that characterize a profession.

QUALITY IMPROVEMENT: Utilizing 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 the health care systems. (Adapted from QSEN Institute, http://qsen.org/).

QUALITY AND SAFETY EDUCATION FOR NURSES (QSEN) INSTITUTE: An organization that outlines core knowledge, skills, and attitudes that should be mastered by pre-licensure students.

REGISTERED NURSE or REGISTERED PROFESSIONAL NURSE: A person who is licensed as a professional nurse and practices nursing as defined by the nursing act. May use the abbreviation "R.N.". (Taken from the Nurse Practice Act; Sec. 50-10 Definitions.)

RESPECT (SELF): To consider worthy of high regard. Proper esteem or regard for the dignity of one's character.

RESPONSIBILITY: Ability to answer for one's conduct and obligations.

ROLES OF THE ASSOCIATE DEGREE NURSE: Three interrelated practice roles defined for graduates of associate degree nursing programs based upon assumptions underlying the scope of practice. These roles are provider of care, manager of care, and member within the profession of nursing.

> **Provider of Patient-Centered Care:** The associate degree-nursing graduate develops, implements, and evaluates individualized plans of care by using the nursing process, nursing judgment, and evidence-based practice as a basis for decision-making. The graduate utilizes communication techniques to maintain culturally competent therapeutic relationships and promotes participation of patient, family, and health care team members in the plan of care. Patient-centered care respects the patient's role in the community context. The graduate collaborates with other health team members

to assess the need for information, develop goals, implement a teaching plan, and evaluate the effectiveness of the teaching process. The graduate maintains awareness of consumer rights and responsibilities while demonstrating responsible allocation of resources.

Manager of Patient-Centered Care: The associate degree-nursing graduate collaborates with the multidisciplinary team to assess and set nursing care priorities for a group of patients. The graduate delegates aspects of care to peers, licensed practical nurses, and assistive personnel, consistent with their level of education, experience, and scope of practice, in order to meet patient needs. The associate degree-nursing graduate, in situations beyond their preparation, knowledge, and experience, consults with and seeks guidance from nurses with greater experience or education.

Member within the Profession of Nursing: The associate degree-nursing graduate maintains accountability for care given and care delegated to assure adherence to ethical and legal stands as defined by the State of Illinois *Nurse Practice Act*, the American Nurses Association *Scope and Standards of Practice* and *Code of Ethics.* The associate degree nurse graduate functions competently within the scope of practice as a member of the healthcare team. The associate degree-nursing graduate assumes responsibility for continued education, recognizing this as necessary to maintain competence in a society of rapid technological change and complex issues in health care delivery. The associate degree nursing graduate strives for personal and professional growth and involvement in activities to promote nursing practice and improve quality of care and patient outcomes.

SAFETY: Minimizing risk of harm to patients and providers through both system effectiveness and individual performance. (Adapted from QSEN Institute, http://qsen.org/).

SEXUALITY: The culmination and coming together within the individual of physical, mental and spiritual influences that result in sex-role behavior.

SPIRIT OF INQUIRY: Persistent sense of curiosity that leads one to examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients, families, and communities. (Adapted from *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing*. (2010). New York, NY: National League for Nursing).

TEACHING/LEARNING: Facilitation of the acquisition of knowledge, skills and abilities promoting a change in behavior (NCSBN, 2019).

THERAPEUTIC NURSING INTERVENTIONS: Actions drawn from the cognitive, psychomotor and affective domain, grounded in nursing and related sciences and the humanities, which are used to assist patient(s) to promote and maintain wellness, restore to optimal health, and support through the dying process.

TRUTH: Honesty; absence of distortions or misrepresentations.

UNLICENSED ASSISTIVE PERSONNEL: A health care worker that is unlicensed and may be delegated aspects of nursing care by the nurse. Are "nurse extenders" and include, but are not limited to, certified nurse aides/assistants, home health aides, patient care technicians, orderlies or surgical technicians.

WELLNESS-ILLNESS CONTINUUM: An ever-changing state in which a person ranges from high level wellness to extreme illness with death imminent.

WELLNESS: A process in which the person's basic needs are met.

Revised: 7/06; 6/08; 4/09, 4/13; 02/15; 05/17; 7/18; 6/22