CAREER LADDER IN NURSING PROGRAM

FALL 2014 STUDENT HANDBOOK - HSNC PROGRAM

This Student Handbook applies to students of Maui College in the Hawaii Statewide Nursing Consortium curriculum.

TABLE OF CONTENTS

1. PHILOSOPHY OF U.H. MAUI COLLEGE NURSING PROGRAM
2. FIRST LEVEL BENCHMARKS
3. SECOND LEVEL BENCHMARKS
4. PROGRAM POLICIES
   A. PROFESSIONAL BEHAVIOR EXPECTATIONS
      1. Professional Codes and Standards
      2. Civility
      3. Zero Tolerance for Substance Use or Abuse
      4. Liability for Client Safety
      5. Academic Dishonesty
   B. HEALTH CARE/U.H. MAUI COLLEGE AGENCY POLICIES
   C. GRADING POLICIES
      1. General
      2. Late Papers
      3. Clinical Evaluations
         a) Unsafe Practices
         b) Educational and Lab Prescriptions
      4. Withdrawal
   D. ATTENDANCE
      1. Punctuality
      2. Theory
      3. Clinical
   E. TESTING
      1. Math
      2. Testing Absence
      3. Post-test Discussion
      4. Knowledge Assessment
   F. SUPPORT EVALUATION AND NOTICE
      1. Theory
      2. Clinical
G. ADMISSION, ENROLLMENT, CONTINUATION AND READMISSION
   1. Admission
   2. Enrollment
   3. Continuation in first level of Nursing Program
   4. Continuation in second level of Nursing Program
      a) UHMC PN Graduate who continues immediately to second level
      b) Admission Requirements for UHMC-HSNC PN graduate who does not
         continue immediately to second level.
   5. Readmission
H. STUDENT HEALTH
   1. Health Costs
   2. Pre-Enrollment and Drug Testing
   3. Technical Standards Form
   6. Tuberculosis Clearance
   7. Proof of Immunity
   8. Hepatitis A Protection
   9. Pregnancy
   10. Illness/Injury
   11. Injury while in the Clinical Area
   12. Alcohol/Drug Addiction
   13. Immunization and Health Records
I. REASONABLE ACCOMMODATIONS
J. UNIFORM REGULATIONS
K. ON CAMPUS SUPPLIES/PHONES
L. PARKING/TRANSPORTATION
M. LIABILITY INSURANCE
N. SAFETY
O. FINANCIAL ASSISTANCE
P. LIBRARY RESOURCES
Q. ACCESS TO MEDICAL RECORDS
R. STUDENTS’ EVALUATIONS OF FACULTY
S. GRADUATION
T. USE OF SOCIAL MEDIA/SOCIAL COMPUTING GUIDELINES
5. HSNC COMPETENCIES
ADDITIONAL DOCUMENTS PROVIDED:
6. UHMC STUDENT CONDUCT CODE
7. UHMC STUDENT ACADEMIC GRIEVANCE PROCEDURE
8. MAUI MEMORIAL MEDICAL CENTER, NURSING DEPARTMENT DRESS
   CODE
9. AGREEMENT TO POLICIES (to be signed and turned in to faculty)
Mission: The UHMC nursing program provides a collaborative learning experience with access to multiple levels of nursing education, offering personal enrichment and career opportunities for our students. We provide a learning milieu in which faculty, staff, and students from diverse backgrounds work together with the community to create state of the art nursing education and practice.

Vision: We envision a nursing education program that produces caring, competent, and professional nurse leaders prepared to meet the healthcare demands of a diverse community and the challenges of a dynamic healthcare environment.

Core values:

- malama (to take care of, protect)
- mana’olana (hope)
- lokahi (harmony, unity)
- aloha (compassion, kindness)
- kuleana (responsibility)
- pono (goodness, ethical and moral qualities)
UHMC Nursing Program faculty embrace the mission of Maui College. The faculty aim to inspire and support students in the pursuit of nursing education and life-long learning. We prepare students to recognize the trends in health care delivery, respond to the increased complexity of clinical environments, and adapt to economic changes. We believe that the learning process is enhanced when the student is self-directed, and support the student to take responsibility for their own learning when challenged with academic rigor.

The UHMC Nursing Program coursework builds on basic liberal arts, behavioral and natural sciences, and it includes bioethical issues, application of technology, cultural awareness, and evidence-based practice. As a member of the Hawaii Statewide Nursing Consortium, the career ladder program supports students to achieve a Certificate of Achievement and LPN licensure at the end of the first year, an Associate of Science degree and RN licensure at the end of the second year, and, if the student chooses, to continue on for a Bachelor of Science degree from UH Manoa with the addition of a third year. MC nursing graduates are expected to abide by the laws of the state in which they practice, the American Nurses Association Standards of Practice, and the American Nurses Association Code of Ethics.

We believe that nursing is an essential health discipline concerned with providing quality care within a patient-centered framework that includes the ohana and community. We strongly believe that an attitude of caring must be internalized as a part of the professional practice of nursing.

Our philosophy of nursing education is informed by the ideas of Patricia Benner, Christine Tanner, and the Quality and Safety Education in Nursing (QSEN) Institute. We believe that nursing and nursing education incorporates:

- Acquiring and using knowledge and science (knowledge)
- Using clinical reasoning and skilled knowhow (skills)
- Ethical comportment and formation (attitudes)

Accordingly, the Hawaii Statewide Nursing Consortium developed the curriculum with principles from Benner, Sutphen, Leonard, and Day (2010):

1. Replacing decontextualized knowledge with concepts
2. Integrating clinical and classroom teaching
3. Emphasizing clinical reasoning and multiple ways of thinking
4. Guiding the formation of identity and self-understanding to a professional nurse

Clinical instruction in the UHMC Nursing Program is provided recognizing the conclusions drawn by Tanner (2006), that: clinical judgment is unique to the patient context, clinical reasoning occurs in many ways, and reflection is essential for improving clinical reasoning.

As concerned nurse educators, the UHMC Nursing Program faculty emphasize the six competencies of knowledge, skills, and attitudes for the pre-licensure nurse from the Quality and Safety Education in Nursing Institute (2014), these are:
- Patient-Centered Care
- Teamwork and Collaboration
- Evidence-based Practice (EBP)
- Quality Improvement (QI)
- Safety
- Informatics

Originally derived from:

References


Progress toward level benchmarks is expected in each course of the curriculum. In their clinical practice students are expected to:

1. Provide safe care.
2. Practice within the legal scope of practice, and in accordance with the ANA Code of Ethics.
3. Be an active, engaged learner, seeking out new opportunities, and reflecting on their own performance.
4. Be aware of the evidence available to support nursing practices.
5. Provide care that is culturally and age/developmentally appropriate.
6. Practice family and relationship-centered care.
7. Recognize role as a leader, an advocate for individuals, families and communities, and an agent for access and high quality health care.

First Level Benchmarks

The Career Ladder Nursing Program is designed to prepare nurses to function at a foundational beginning level upon completion of the first level of the program. Successful completion of the first level enables the student to be eligible to take the National Council for Nursing Licensure Examination for Practical Nurses (NCLEX-PN). Those students who meet established criteria will be able to continue into the second year of the Career Ladder Nursing Program.

By the end of the first year of the nursing curriculum, it is expected that the student will meet the following performance benchmarks:

1. Ethical Practice
   a. Articulates the provisions in the ANA Code of Ethics and Standards of Practice and the Hawaii Nurse Practice Act and assesses own performance in relation to each provision.
   b. Recognizes biases that may be introduced into clinical reasoning as a result of personal values. Seeks assistance from colleagues or instructor to monitor the influence of own biases and values.
   c. Recognizes when own values are in opposition with values of client and/or family. Recognizes, and remains nonjudgmental, when own values are in opposition with values of client and/or family
   d. Reevaluates own values and biases through reflection, and seeks to identify their impact on future clinical situations. Reflects and acknowledges the impact of values and bias on future clinical situations.
   e. Identifies obvious ethical dilemmas in which there are two or more viable options. Articulation of inherent ethical principles though application in a particular context may be limited.
2. **Reflection on Practice**  
   a. Seeks external feedback and assistance in reflective process and sets realistic goals with consultation.  
   b. Identifies own established patterns of behavior and thought.  
   d. Uses established procedures and forms for self-reflection.  

3. **Self-directed Learning leads to Evidence-based Practice**  
   a. Increasingly open to new learning opportunities and valid points of view, recognizing own learning needs.  
   b. Seeks local resources to answer specific questions—e.g., unit procedure manuals, textbooks, and practicing nurses.  
   c. Conducts broad database search using digital retrieval systems, including the Internet.  
   d. Able to independently find literature in one database.  
   e. Recognizes needed information sources from other disciplines.  
   f. Recognizes the difference between data-based publications & opinions.  
   g. Reads and summarizes integrative reviews and clinical practice guidelines.  
   h. Looks for supporting evidence for nursing interventions.  
   i. Identifies potential implications for practice from integrative reviews and clinical practice guidelines.  
   j. Understands that information continually evolves.  

4. **Leadership**  
   a. Recognizes leadership issues and responsibilities.  
   b. Identifies personal leadership abilities.  
   c. Uses own leadership abilities primarily relying on a basic set of leadership strategies independent of situation or team characteristic.  
   d. Acknowledges delegation as a needed modality to improve client care.  
   e. Identifies laws and regulations regarding delegation to various levels and categories of personnel.  
   f. Consults with experienced personnel regarding delegation needs for client care.  

5. **Collaboration with members of the health care team.**  
   a. Consults and collaborates with own peers, faculty and nursing staff.  
   b. Demonstrates responsibility to fulfill assignments and commitments.  
   c. Recognizes when feedback to team members may be useful.  
   d. Identifies and supports peers and self in efforts toward wellness.  
   e. Verbalizes an understanding of the need and importance of developing professional networks.  

6. **Health Care System Issues**  
   a. Identifies basic healthcare access issues for assigned client.  
   b. Identifies one or more policies or regulations affecting resource availability in a specific health care situation.  
   c. Assists clients to recognize barriers to accessing optimal health care.  
   d. Describes client characteristics and situations in which access to health care needs improvement.  
   e. Recognizes the need for initiating referrals and own learning need to explore available community resources.
f. Describes current issues for equality and health care access.

7. **Relationship-Centered Care**
   a. Describes personal relationship style.
   b. Initiates meaningful interactions despite personal discomfort.
   c. Recognizes the importance of maintaining professional boundaries.
   d. Establishes rapport.
   e. Recognizes importance of relationship by eliciting client/family story.
   f. Identifies and describes aspects of common local cultures including own, attempts individual assessment of relevant cultural aspects, including history of the community.

G. Attempts to understand the meaning of the health event/illness/death to the client/family across the lifespan.

8. **Communication**
   a. Shows basic understanding of therapeutic communication strategies.
   b. Demonstrates active listening.
   c. Uses open-ended questioning to elicit psychosocial data with increasing confidence.
   d. Notices cues from client.
   e. Written assignments show increasing consistency in accuracy and expected format.
   f. Initiates standardized health teaching but may require assistance in the recognition of client variables impacting learning or health care education needs.
   g. Communicates plan of care to client and family.
   h. Demonstrates beginning self-awareness of own cultural and language variations.
   i. Identifies key cultural variables that affect communication in uncomplicated client situations.

9. **Clinical Judgment**
   a. In stable/common/familiar situations, monitors a variety of subjective and objective data, identifies obvious patterns and deviations, develops prioritized intervention plans.
   b. With assistance advances client assessment to differentiate less relevant from pertinent data, and subsequently expand priorities.
   c. In stable/common/familiar situations, completes nursing care assigned, maintaining safety for client and self.
   d. Demonstrates increasing consistency in evaluating interventions for effect and efficacy.
   e. Implements new nursing skills with supervision.
   f. Demonstrates awareness of the need for ongoing improvement and makes effort to learn from experience and improve performance.
There is no image provided for reading. However, based on the text content, it seems to be about the benchmarks for a nursing program at U.H. Maui College, specifically the Allied Health Career Ladder Nursing Program. The text describes the second level benchmarks, which include ethical practice, reflection on practice, and self-directed learning leading to evidence-based practice. The benchmarks are designed to ensure that graduates are educated to provide nursing care in agencies that provide appropriate orientation, ongoing staff development opportunities, and professional guidance. They are also educated to function as members of the multidisciplinary health care team in direct nursing care roles with adult and pediatric clients. Graduates are eligible to take the National Council for Nursing Licensure Examination for Registered Nurses (NCLEX-RN).
f. Evaluates the arguments supporting opinions.
g. Evaluates the overall strength of evidence supporting a practice.
h. Reads and summarizes original research (qualitative, quantitative, clinical trials).
i. Explains findings of studies to clients or colleagues.
j. Selects and/or writes plans of care that incorporate evidence from integrative reviews and clinical practice guidelines.
k. Seeks research evidence to refine own nursing practice.

4. Leadership
   a. Identifies characteristics of effective leadership.
   b. Engages in self-directed professional development to improve personal leadership characteristics and skills
   c. Understands consequence of making leadership decisions with limited information.
   d. Provides positive and constructive feedback on specific aspects of performance
   e. Delegates to, and evaluates others, ensuring that the task is within their scope of practice, that they are competent to perform the task, and that they receive clear communication and feedback in regard to their performance.
   f. Explains the purpose and desired outcome of the task and the time frame in which the task is to be completed.
   g. Provides leadership in the modification of client care and/or organizational issues toward identified outcomes.

5. Collaboration with members of the health care team.
   a. Readily consults within the health care team; sees self as a participant in collaborative interactions.
   b. Works well with team members who have varying points of view; enters into team relationships and readily accepts and fulfills assignments and commitments.
   c. Actively contributes to team work; offers help and assists team with problem solving and decision making; and shares information necessary to make informed decision.
   d. Gives feedback in a timely and appropriate manner.
   e. Regularly and realistically self evaluates own performance: compares self-evaluation with feedback received, verbalizes intent to use the constructive feedback in future situations.
   f. Recognizes need to manage physical health variables and emotional stressors and sets priorities and time boundaries; asks for assistance and feedback from team members

6. Health Care System Issues
   a. Recognizes current and needed resources within the immediate clinical area.
   b. Makes contacts with community agencies that provide services for clients.
   c. Seeks broadening knowledge of practice needs and resources at individual, family, and/or community level. Makes referrals to established local community resources.
   d. Obtains data to identify areas for improving health care access for client/population.
   e. Identifies impact of laws, regulations, structures, rules, and guidelines on resource availability for health care for individuals, families and the community.
   f. Assists clients to reduce barriers to accessing optimal health care. Identifies practice issues and policies that impact access to health care.
   g. Identifies political and policy making processes and actions to improve health care and solve access problems.

7. Relationship-Centered Care
a. Integrates and adapts personal style with expected professional relationship style
b. Intentionally moves out of personal comfort zones to accommodate patient needs
c. Consistently sets and respects appropriate boundaries
d. Adapts care to individual client/family needs
e. Uses understanding of cultural, economic, environmental and social differences to assess uniqueness of individual client.
f. Analyzes the impact of the culture and history of the community on the client’s situation.
g. Incorporates understanding of client’s/family’s perspective into plan of care.
h. Collaborates with client in care planning
i. Acknowledges and accepts client/family attitudes

8. Communication
a. Establishes goals for client-centered therapeutic interactions.
b. Effectively utilizes verbal and nonverbal approaches for effective therapeutic communication in non-complicated client situations.
c. Readily elicits client’s and family’s communication.
d. Caring apparent through tone and nonverbal behavior.
e. Seeks verbal collaboration with other health care team members.
f. Assesses client’s learning needs, learning styles, and variables impacting the teaching-learning process. Uses appropriate teaching strategies and materials.
g. Spontaneously incorporates health care knowledge and education into routine communication.
h. Creates individualized health teaching plans.
i. Designs and implements health education programs to address learning needs of population.
j. Knowledgeable of own communication skills and deficits.
k. Recognizes own cultural biases and inexperience.
l. Integrates multiple overt variables into the interaction in uncomplicated client situations

9. Clinical Judgment
a. Regularly anticipates/observes/monitors a variety of subjective and objective data.
b. Recognizes most patterns and deviations in data, the majority of subtle signs, and uses these to continually assess
c. Actively seeks subjective information about the client’s situation from the client and family to support planning interventions; usually pursues important leads
d. Usually focuses on the most important data and seeks further relevant information.
e. In most situations, interprets the client’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; recognizes rare or complicated cases where it is appropriate to seek the guidance of a specialist or more experienced nurse
f. Develops interactions based on relevant patient data; monitors progress regularly.
g. Demonstrates effective and efficient performance of nursing skills, providing for clients’ physical, pharmacological, psychological safety while demonstrating caring behaviors.
h. Evaluates personal clinical performance with minimal prompting in analyzing major clinical events and decisions made, as well as alternatives considered
U.H. MAUI COLLEGE  
Career Ladder Nursing Program  

NURSING PROGRAM POLICIES  

Nursing Program Policies are revised periodically. A copy of the revised and current policies is made available to each student at that time. It is each student’s responsibility to read and clarify his/her understanding of the policies and to acknowledge agreement by signing and submitting the attached sheet.

The U.H. Maui College Nursing Program prepares graduates for the nursing profession. The program requires mastery of knowledge and skills and standards of professional behavior of the profession as stated in the rules of the Hawaii Board of Nursing, Hawaii health care facilities and the National League for Nursing. Required knowledge and skills and rules of professional behavior form the framework of the academic competencies in both the theoretical and clinical courses, which make up the certificate and degree requirements.

While strictly adhering to the mastery of knowledge and skills and high professional standards, the nursing faculty provides the student with every opportunity to achieve success in the program. Students are responsible for adhering to the UHMC Student Conduct Code.

A. PROFESSIONAL BEHAVIOR EXPECTATIONS

Students are expected to meet the academic and behavioral performance standards set forth in this section. These standards are academic requirements of the UHMC Nursing Program. Failure to meet these academic standards could result in sanctions, such as dismissal from the program.

1. Professional Codes and Standards

Students are required to conform their conduct to professional codes and standards. Codes that guide professional practice are the American Nurses Association Code of Ethics for Nurses (http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses.aspx) and the International Council of Nurses Code of Ethics for Nurses (http://www.icn.ch/ethics.htm).

Universal moral principles are reflected in the codes and include moral values such as autonomy, or the right for clients to be self-governing; beneficence, or doing what is best for the client; nonmaleficence, or the obligation to minimize or prevent harm; veracity, or truthfulness; confidentiality, or respecting privileged information; fidelity, or keeping promises; and justice, which embraces the concept of fairness. Guided by these principles, along with societal mores and laws, the nurse is able to determine the best course of action.
The U.H. Maui College nursing faculty defines unprofessional behavior using the following standards based on the Rules of the Hawaii Board of Nursing. Hawaii Revised Statutes, Chapter 457,; Hawaii Administrative Rules, Title 16, Chapter 89:

§16-89-59 Unprofessional conduct. Nursing behavior which fails to conform to legal standards and accepted standards of the nursing profession and which reflect adversely on the health and welfare of the public shall constitute unprofessional conduct.

§16-89-60 Types of unprofessional conduct. The types of unprofessional conduct covered in this provision shall include, but are not limited to, the following:

1. Submitting information to the board pursuant to an application for licensure, renewal of licensure, or reinstatement of licensure which is fraudulent, deceitful, or contains misrepresentations regarding the applicant's or licensee's educational background, passing of a licensure examination, pending disciplinary actions, or licensure status;

2. Impersonating any applicant, or acting as proxy for the applicant in any nurse licensure examination, allowing any person to use one's nursing license, or the aiding, abetting, or assisting an individual to violate or circumvent chapter 457, HRS, or this chapter;

3. Practicing nursing within this State without a valid current license, or after the temporary license has expired;

4. Misrepresenting that the person is a licensed practical nurse or licensed registered nurse, verbally or in writing, when the person does not possess the appropriate license;

5. Failing to report to the board any revocation, suspension, or other disciplinary actions against the applicant or licensee by another state or jurisdiction of the United States for any act or omission which would constitute unprofessional conduct;

6. Performing unsafe or unacceptable patient care or failing to conform to professional standards required of a nurse which poses a danger to the welfare of a patient which shall include:
   (A) Intentionally or negligently causing physical or emotional injury to a patient;
   (B) Administering medication and treatment in a careless or negligent manner;
   (C) Failing to take appropriate action or to follow policies and procedures in the practice setting designed to safeguard the patient;
   (D) Failing to take appropriate action in safeguarding a patient from incompetent health care practices;
   (E) Performing nursing techniques or procedures without proper education and training;
   (F) Violating the confidentiality of information or knowledge concerning the patient or failing to safeguard the patient's dignity and right to privacy; and
   (G) Leaving a nursing assignment or abandoning a patient without properly notifying appropriate personnel; and

7. Engaging in any act inconsistent with the practice of nursing as defined in section 457-2, HRS, for that of a licensed practical nurse or a registered nurse including:
   (A) Engaging in conduct which evidences a lack of ability or fitness to discharge the duty owed by the licensee to a patient;
   (B) Practicing nursing when physical or mental ability to practice is impaired by alcohol or drugs, or because of other physical, psychological, or mental impediment;
(C) Willfully, or deliberately, falsifying or altering a patient's, health care facility's, or employee's record;
(D) Unauthorized use or removal of drugs, supplies, or property from a patient or health care facility, institution or other work place location, or diverting or attempting to divert drugs or controlled substances for unauthorized use or appropriating money, supplies, or equipment;
(E) Possessing, obtaining, furnishing, or administering prescription drugs to any person, including self, except as directed by a person authorized by law to prescribe drugs; and
(F) Failing to supervise persons to whom nursing functions have been delegated under one's supervision. [Eff and comp 6/22/90; am and comp 9/5/97; comp 8/9/01; comp 5/5/05; comp 12/27/10] (Auth: HRS §457-5) (Imp: HRS §457-12)

2. Civility
   Classroom & Clinical Conduct
   Students will be respectful of peers, instructors, and guest lecturers during class and clinical time, or they may be asked to leave by the instructor. Disrespectful behavior will not be tolerated in the classroom or clinical setting, and will be documented.

3. “Zero Tolerance” for Substance Use or Abuse
   a. For purposes of this policy “using or abusing substances” shall mean use of any substance that impairs physical, psychological or mental ability.
   b. A student is prohibited from attending nursing class or clinical when using or abusing substances.
   c. A student is to inform nursing faculty when he/she is taking a therapeutic prescriptive drug or over-the-counter drug that could alter mental or behavioral performance in class or clinical.
   d. The following procedures shall apply when a nursing faculty determines that a student is using or abusing substances.
      (1) If a student’s behavior in class or clinical leads faculty to suspect substance use or abuse, the student can voluntarily submit to a substance assessment and screen. This process allows the student to contest faculty assessment of substance use. The substance assessment and screen must be done immediately. Nursing faculty will determine the specific substance assessment and screen and inform the nurse practitioner of the UHMC Campus Health Center, who will coordinate the assessment and screen for the student with the clinical laboratory. The student shall sign a release to allow the clinical laboratory to provide the results to nursing faculty. If the student tests negative, the Nursing Program will pay for the testing. If the student tests positive, the student is responsible to pay for the testing.
      (2) The student will not pass the course and will withdraw immediately. The student will be dismissed from the Nursing Program if one of the following applies:
         (a) The student admits to substance use or abuse.
(b) The student decides not to voluntarily submit to a substance assessment and screen, or
(c) The result of the student’s substance assessment and screen is positive.
(3) The student can apply for readmission (See Section F.5).

4. **Liability for Client Safety**
   a. Each student assumes legal responsibility for his/her own actions
   b. If a nursing faculty member finds evidence of a student being dishonest and/or posing a danger to client safety, the faculty member will immediately remove the student from the clinical area. The student may be subject to sanctions, including dismissal from the Nursing Program. Some examples of dishonest conduct or actions that pose a danger to client safety are: failure to acknowledge a clinical error, intoxication or being under the influence of drugs, mentally impaired, verbally and/or physically threatening or verbally and/or physically abusing any person.

5. **Academic Dishonesty**
   Nursing students are expected to adhere to all sections of the UHMC Student Code of Conduct. To emphasize the importance of academic integrity and avoiding plagiarism, this section of the Student Code is repeated here:

   Because the University is an academic community with high professional standards, its teaching, research and service purposes are seriously disrupted and subverted by academic dishonesty. Such dishonesty includes cheating and plagiarism as defined below. Ignorance of these definitions will not provide an excuse for acts of academic dishonesty.

   1. Cheating includes but is not limited to giving or receiving unauthorized assistance during an examination; obtaining or distributing unauthorized information about an examination before it is given; using inappropriate or unallowable sources of information during an examination; falsifying data in experiments and other research; altering the record of any grade; altering answers after an examination has been submitted; falsifying any official University record; or misrepresenting the facts in order to obtain exemptions from course requirements.

   2. Plagiarism includes but is not limited to submitting, in fulfillment of an academic requirement, any document that has been copied in whole or in part from another individual's work without attributing that borrowed portion to the individual; neglecting to identify as a quotation another's idea and particular phrasing that was not assimilated into the student's language and style or paraphrasing a passage so that the reader is misled as to the source; submitting the same written or oral material in more than one course without obtaining authorization from the instructors involved; or dry-labbing, which includes obtaining and using experimental data and laboratory write-ups from other sections of the course or from previous terms, or fabricating data to fit the desired or expected results.
3. In cases of suspected or admitted academic dishonesty, the instructor shall attempt to discuss the matter with the student. If appropriate, the instructor may bring it to the attention of the departmental chairperson and the student's advisor. Additionally, an instructor may refer such case of academic dishonesty to the Vice Chancellor of Student Affairs for action under this code. In cases where the student admits that an act of academic dishonesty was committed, the instructor may, within the context of the course requirement, the student to re-do the assignment, give the student a failing or reduced grade for the assignment, or give a failing or reduced grade for the course. If the student contests his or her liability, the instructor may not take action against the student but must refer the case to the Vice Chancellor of Student Affairs for hearing and disposition under this code. The Vice Chancellor of Student Affairs may pursue such matters as disciplinary actions under this code if after a preliminary investigation, it is his/her determination that probable cause exists to establish that acts of academic dishonesty took place.

B. HEALTH CARE/U.H. MAUI COLLEGE AGENCY POLICIES

1. The student is expected to observe all of the policies of the nursing program, school and/or clinical agencies. See attached "Summary of Student Conduct" University of Hawaii Maui College.

2. Each student giving client care is to maintain certification in Basic Life Support in the following five areas:
   a. Adult CPR by One-Person
   b. Adult CPR by Two-Person
   c. Child CPR
   d. Infant CPR
   e. Obstructed Airway: Conscious & Unconscious Victim

It is the student's responsibility to take a course CPR-BLS for Health Care Providers and present to the instructor a card verifying current certification prior to direct client care.

3. No eating in the clinical setting except in designated areas.

4. Smoking is permitted only in designated areas.

5. The student is to give direct physical care only when instructor/preceptor is in the clinical facility, and the instructor/preceptor is aware of the student's clinical objectives.

6. When in the clinical area outside of scheduled clinical hours, professional attire is required, including name pin and full uniform. Preferred attire will be defined in those instances when uniforms are not required. No mini-skirts, shorts, bare midriffs or open-toe or heel shoes are allowed when uniforms are not required. Name pins are to be worn in the clinical setting, and removed when the student is not in a student nurse role.

7. The student must have the instructor's consent to:
   a. Meet assigned clients.
   b. View records of assigned clients only.
   c. Attend special experiences, i.e., psychiatric conferences, nursing audit or other agency activities. (Students may attend community activities open to the public).

8. Clinical facility phones shall NOT be used for personal calls.
9. Interactions with clients, their families, staff, faculty and peers must be professional, courteous and diplomatic at all times.

10. When in the clinical setting, students are not to have visitors or phone calls at any time. If an emergency occurs, significant others should call the agency and ask for any UHMC instructor if the student's instructor is not known. The instructor will contact the student.

11. If on rare occasion an item is to be delivered to a student, it is to be left at the front desk and the operator will notify a UHMC instructor. A student is not to leave the unit to meet visitors or pick up deliveries.

12. Children will not be allowed in theory or clinical classes without permission of the instructor.

13. Taking of photographs is prohibited in all clinical settings, unless all individuals photographed have provided written consent. Photographs may never be taken of a client with a cell phone.

14. Discretion should be used regarding social networking. Students are advised that any sharing of clinical information on a social networking site is a violation of HIPAA, and is forbidden. Photographs of any client should never be posted on the internet.

C Grading Policies

1. General
   Nursing students are required to work toward letter grades in ALL courses. All students must achieve at least a "C" in ALL required non-nursing courses in order to remain in the program. Nursing students enrolled in support courses are required to notify the Program Coordinator when having difficulty in support courses and/or prior to withdrawal from support courses. This is to assure that the student is aware of Nursing Program requirements for graduation.

   A minimum grade of “C” is required in all first level nursing courses to remain in the nursing program, except N230. In order to continue from first level to second level, a “B” is required in N230. A grade less than “C” is not considered passing in any nursing course.

   A minimum grade of “B” is required in all second level nursing courses in order to pass a course and to remain in the nursing program.

   Grading Scale
   A = 90 - 100%
   B = 80 - 89.9%
   C = 70 - 79.9%
   D = 60 - 69.9%
   F = Below 60%

2. Late Papers
   When papers are submitted late, 10% will be deducted from the score for each school day that the paper is late. Any late clinical papers will reduce the student's clinical score. For example, if the highest possible score for the paper is 20 points and the paper is one (1) school day late, then 2 points will be deducted because the
paper is late. If the maximum possible score is 10 and the paper is 2 school days late, then 2 points will be deducted because the paper is late.

3. **Clinical Evaluation**
Clinical performance is graded on a Pass/Fail basis. If a student fails the clinical portion of a nursing course (by criteria specified in the course syllabus and clinical evaluation tool), they will automatically receive a “D” grade in the entire course, regardless of total points earned. This applies unless the points earned are in the failing range, in which case the student will receive the grade of “F.”

Evaluation is an on-going process, and the student or faculty member can request an evaluation conference at any time. The student will receive a clinical evaluation form at the beginning of each clinical course. It is the student's responsibility to keep an account of examples of his/her own clinical performance in the clinical evaluation form. The clinical evaluation form must be legible and written in blue or black ink.

The evaluation form provides the documentation of student performance and is the property of the Nursing Program. It is the student's responsibility to keep the evaluation form secure. Loss or destruction of the clinical evaluation form will result in a reduction in clinical grade, at the discretion of the clinical instructor.

Learning is sometimes stressful and students may require additional assistance to cope with anxiety or improve focus. If referred by the instructor due to emotional or behavioral difficulties that could impact clinical performance, the student is required to see the nursing counselor, or a counselor of choice before returning to the clinical setting. Written verification of counselor visits may be requested.

a) **Unsafe Practices**
Unsafe practices are actions that potentially or actually jeopardize the safety of clients, students or others, or may be actions that demonstrate poor judgment in areas in which the student has had previous opportunities for learning. Upon identifying an unsafe practice, the instructor will inform the student of the unsafe practice as soon as possible in an appropriate setting and the student will have the opportunity to explain his or her action. Students who have demonstrated unsafe practices will be required to explain and complete a safe practice paper.

Unsafe practices include, but are not limited to, FAILURE TO:
1. Follow standard precautions. (Examples: failure to wash hands or failure to wear gloves appropriately; recapping contaminated needles; incorrectly disposing of body fluids.)
2. Maintain client privacy/confidentiality. (Examples: not utilizing curtains appropriately for privacy; unnecessary exposure of the client during care or procedures; discussing client information inappropriately or outside of the clinical setting.)
3. Properly identify client. (Examples: not using identification bands and/or ID cards appropriately.)
4. Complete client care in assigned time and/or report to instructor and staff.
5. Know status of client and/or report significant change in condition.
6. Validate therapy rationale with instructor when contrary to classroom instruction.
7. Recognize and report any error or unsafe condition.
8. Accurately record information or observations in client's chart. (Examples: not signing your name; incomplete charting.)
9. Notify faculty and staff of clinical absence at least 1 hour prior to beginning of clinical so that client care can be adequately planned.
10. Notify faculty and staff prior to leaving nursing unit. (Examples: abandonment of client.)
11. Properly monitor I.V. therapy.
12. Administer medications correctly.
13. Recognize break in sterile technique.
14. Respond to faculty guidance based on rationales for safe nursing practice.
15. Follow policies of the nursing program, school and/or clinical agencies.

If a student believes the determination of unsafe practice is unfair, the student can follow the process outlined in the Academic Grievance Procedures. (See attached)

b) Educational and Lab Prescriptions
When the instructor determines that a student needs additional tutoring or practice with a skill, the instructor may write an educational or lab prescription. The student will be required to complete the prescribed activity within the timeframe indicated.

5. **Withdrawal**
   If a student has made the decision not to continue in a nursing course, he/she is encouraged to formally withdraw. Failure to complete a withdrawal form available at Student Services will result in the student transcript reflecting the grade earned as opposed to a W and would adversely affect grade point average. Students may drop a course with a W until the date set by the registrar.

D. **Attendance**
1. **Punctuality**
   It is the student's responsibility to be early or on time to all planned learning experiences. Each instructor is responsible for the classroom environment and will set the standard for behavior in the classroom; see the UHMC Student Conduct Code. Lateness in the clinical learning situation poses an imposition upon the instructor, the staff of the clinical agency and ultimately disrupts the care of the client(s) to whom the late student has been assigned. Scheduled starting times vary depending on the clinical assignment.

2. **Theory**
   Attendance in theory class meetings is expected. If attendance is required it will be specified in the course syllabus. If a student is absent, it is the student’s responsibility to obtain all class information (i.e., content, handouts and announcements) from a classmate, and communicate with the instructor about any
missed course work. Students are encouraged to attend class to enhance the learning experience.

3. **Clinical**
   Attendance is required for all clinical learning activities. The nursing student is to attend ALL scheduled skills labs and clinical assignments, unless other arrangements are made with the clinical instructor.
   If absent, the student must notify the instructor, and call the assigned unit or agency and leave a message of absence at least one (1) hour prior to the beginning of the clinical assignment. The student should obtain the name of the person to whom the message is given.

   An "excused absence" may be granted due to physical illness or mental health issues with written verification from a health care provider or a counselor (including the Nursing Counselor, a UHMC counselor, a psychiatrist, a psychologist, or a Master's level professional counselor working with a community agency). If a student is absent due to a child’s illness, he/she needs to obtain written verification from the child’s health care provider.

   Examples of mental health issues that may qualify for a counselor’s excuse are unexpected, sudden life and family changes such as changing homes, death or serious illness of a family member, personal or family abuse, and other situations that may impair or impede performance.

   **If an excused absence is given, the student will meet with the Nursing Counselor or other mental health care provider within 24 hours to begin to develop a plan to address the situation. The student will be expected to meet with the counselor in follow up appointments. Inability to attend follow-up counseling appointments will determine whether further excuses for clinical assignments will be given.**

   The student may return to clinical if the student and counselor/health care provider have developed a plan of action to help the student cope with the crisis, and the student can successfully attend to his/her clinical responsibilities. A letter from the health care provider verifying the existence of a plan of action must be provided to the Nursing Program Coordinator.

   Based on faculty consensus, the student may be placed on a Support Evaluation or Notice. Missed clinical time may be made up, if necessary, for the student to meet the clinical objectives of the course.

   The student is required to remain on the assigned unit during clinical hours, unless excused by the clinical instructor.

4. **E. Testing**

   1. **MATH**
Testing of math skills will be included in every clinical nursing course. Each course will establish criteria for math competency, and requirements (if indicated) will be stated in the course syllabus.

2. **Testing Absence**
   If a student is physically or emotionally ill, he/she should not test at the scheduled time. The student must give notice to the instructor prior to the test and obtain a medical or counseling excuse within twenty-four hours of the test.

   If a student is absent on a scheduled testing day, he/she will be given a make-up test, and the grade will be lowered ten (10) percentage points unless the student brings in a written statement verifying an excused absence. A student who tests late may be required to provide brief written rationales for 5% to 10% of the questions on the test. Faculty administering the test will choose these questions. Both the answer selected and the rationale must be correct in order for the student to receive credit for the answer. The make-up test must be taken as soon as possible and within one week of the student's return to school unless the student has a medical statement testifying of illness.

3. **Post-test Discussion**
   After unit exams, a post-test discussion may be provided. The student may not write down or tape record exam questions. **If the student disagrees with the instructor’s answer to a question, the student will need to submit professional literature to support his/her answer.** This discussion is held to promote additional learning and mastery of the skills and information. If additional discussion is required the student will meet privately with the instructor. **If a student requests reconsideration of an answer, the request is to be submitted in writing within 48 hours of the post-test discussion.** If a student is unable to attend the post-test discussion, the student is to notify the instructor prior to the discussion and provide the reason. If the instructor determines that there is a valid reason for the absence, the instructor will provide a specific time for the student to review the exam.

4. **Knowledge Assessment (remediation)**
   If a student's percentage score on a test is below the minimum passing score (70% first level, or 80% in N230 and second level), the student may be required to pass a knowledge assessment on material answered incorrectly. This is done to assure that the student has a level of knowledge equal to other students in the course.

4. **Minimum 70% or 80% required on exams in courses**
   First level courses (N210, N211, N212, N220) require a minimum of 70% average on exams and proctored quizzes to pass the course. Second level courses (N320, N360, N362) require a minimum of 80% average on exams and proctored quizzes to pass the course. Generally, this does not apply to open-book or take-home quizzes.

   If the student does not obtain at least 70% average on exams and proctored quizzes in first level, the student will receive no higher than a “D” in the course, even if the total points earned for the course are 70% or above.
If the student does not obtain at least 80% average on exams and proctored quizzes in second level, the student will receive no higher than a “C” in the course and will not progress to the next course or graduate.

F. SUPPORT EVALUATION AND NOTICE

1. **Theory**
   When a student scores below the minimum passing level on a test or other assignment, or may be in jeopardy of not passing a course, a Support Evaluation may be written with the student and faculty member. The Support Evaluation will define deficiencies and identify areas needing improvement. Specific plans to remedy the deficiency with timelines will be included. A student who does not improve with the Support Evaluation will be advanced to Notice. A Notice specifically defines the criteria necessary to pass the course. A Support Evaluation precedes a Notice in most situations.

2. **Clinical**

   A Support Evaluation in the clinical setting is used by a faculty member to assist a student in identifying areas of difficulty and developing a plan for success.

   If a student demonstrates unsatisfactory clinical performance or has had frequent absences, a Support Evaluation is written and signed by the student and instructor. The Support Evaluation assesses the problem and sets evaluative expectations to assist the student to be successful in the program. A discussion document prepared by the student containing specific plans and timelines may be attached to the Support Evaluation. The student may consult nursing faculty and/or the Nursing Counselor for help or suggestions. If the Support Evaluation expectations are not met, the student may be placed on Notice.

   A Notice advises a student they are in danger of failure based on clinical performance. A Notice can be written when a student demonstrates serious deficiency in clinical performance or when a student has failed to meet the terms of the Support Evaluation. A serious deficiency is defined as any behavior or act that endangers the safety and welfare of others.

   The student will meet as soon as possible with two faculty members to develop a plan of action to meet the required evaluative expectations. The Notice will be signed by the student and faculty. A discussion document containing specific plans and timelines prepared by the student with assistance of faculty and/or counselor may be attached to the Notice.

   If a student fails to meet the evaluative expectations of the Notice, the student will not pass the course, and will receive the letter grade earned (D or F). The student may complete other concurrent courses, but cannot continue in the Nursing Program as the prerequisite for subsequent courses will not have been met. Requirements for graduation also may not have been met.
A student who completes a course on a Notice may continue into the next clinical course(s) on a Support Evaluation.

G. **ADMISSION, ENROLLMENT, CONTINUATION AND READMISSION**

1. **Admission:** Admission to the Nursing Program is competitive. The process is described in the U.H. Maui College catalog. Nursing faculty serve on the selection committee. Application deadline is January 31 for fall semester and July 15 for spring semester.

2. **Enrollment:** All nursing students are expected to report to class on the first day of instruction.

   In order to participate in classes, the student must:
   
a. Sign the agreement to the Nursing Program Policies
   
b. Pay all tuition and professional fees (which will include coverage for nursing student liability insurance).

   A student will not be allowed to attend client-contact clinical if the student has not satisfactorily met, and continues to meet, the program requirements for:

   a. Technical Standards
   
b. Tuberculosis clearance, and
   
c. Positive titers for Rubeola, Rubella (German Measles), varicella (chicken pox), Hepatitis B, or currently completing requirements.
   
d. Hepatitis A series is strongly recommended.
   
e. CPR certification for Healthcare Providers.
   
f. MMMC background check and drug screening. Students must comply with the MMMC policy to report any convictions or other infractions to the hospital Human Resources department should they occur after the initial criminal background check.

   Withdrawal from support courses may impact graduation requirements; therefore, when a student registers after a course has begun, or changes sections or withdraws from a nursing or support course, the student will submit a copy of the fee slip to the Program Coordinator within two days. This is to assure that the student is aware of Nursing Program requirements for graduation. Continuous enrollment in nursing courses is required to maintain liability insurance.

3. **Continuation First Level Nursing Program**

   To continue into subsequent courses, the student must achieve a minimum of 70% in all first level nursing courses and meet all course requirements.

4. **Continuation to Second Level in Nursing Program**

   a) The UHMC PN-Statewide graduate may continue immediately to the second level if all of the following conditions are met.

   (1) The student must achieve a minimum grade of B, or 80%, for NURS 230.
(2) The HESI PN Exit exam must be taken during the N230 course, with the score incorporated into the N230 grade.

(3) The student must score 80% or better on the N230 Math Exam.

(4) NCLEX PN Exam:
   - NCLEX-PN testing must be completed within one month of the beginning of the semester. The student is encouraged to send their application to test by certified mail to the Board of Nursing. Any extenuating circumstance that delays testing will be evaluated by the Nursing Program Faculty.
     - Students with extenuating circumstances should document their attempts to obtain authorization to test, and consult with the 2nd level Program Coordinator.
   - Students are required to notify the N320 course coordinator of their NCLEX-PN test results by email within 48 hours of receipt.
   - The student who is unsuccessful on the first attempt with NCLEX-PN testing will be required to withdraw from second level courses. The student must submit intent to re-enter by the deadline for admission. Re-admission will be dependent upon passing the NCLEX PN exam, meeting current requirements and is based on the evaluation and decision of the Nursing Program Selection Committee.

(6) To remain in the ADN program, the student must achieve a minimum "B" (80% or better) in all second level nursing courses.

(7) Requirements for the student to graduate with an associate degree will include, but are not limited to, completion of designated computerized testing (such as HESI tests) with a satisfactory score and remediation as required per course syllabi. The student who fails to complete the computerized testing with a satisfactory score will be required to complete a designated NCLEX-RN review course at his or her own expense prior to graduation in order to meet that graduation requirement.

b) Admission Requirements for Hawaii Statewide Nursing Consortium PN graduate who does not continue immediately to ADN Level:

(1) A UHMC (or Kauai Community College if space available) practical nursing graduate of the Hawaii Statewide Nursing Curriculum, who passes the LPN licensure exam and who desires to reenter within one year of completion of the practical nurse program must demonstrate theoretical and clinical competency in NURS 230 with a grade of "B" or better. Each applicant will be individually considered in terms of readiness to succeed at the ADN level. Re-entry is based on the evaluation and decision of the Nursing Program Selection Committee.

(2) Application deadline for admission into the ADN Nursing Program (and NURS 230) is 90 days prior to the start of the session. Each applicant shall:
• Meet all UHMC nursing admission requirements. This includes the NLN Pre-Nursing Exam, transcript review, counseling session, PHRM 203, Math 23 or 82 with C or better or Compass placement score of Algebra 46, English placement (Compass Writing Score of 74 or higher and Reading Score of 79 or higher), CPR, program health requirements, and meet MMMC background check and drug screen. The student not enrolled for longer than 1 year may be required to repeat some or all requirements.
• Enroll in NURS 230 and complete with a grade of B or better.
• The student applying for ADN must take the HESI PN Exit exam during the N230 course, with the score incorporated into the N230 grade.
• The student applying for ADN must score 80% or better on the ADN Admission Math Exam.

Selection is based on the evaluation and decision of the Nursing Program Selection Committee.

5. **Readmission**

Any student who does not meet minimum requirements (as specified in G Admission, Enrollment, Continuation and Readmission) or who withdraws from the program, and subsequently wishes to re-enter, must request readmission and provide in writing a plan of action and satisfactory evidence that the conditions precipitating failure or withdrawal are no longer present or have been altered sufficiently to no longer interfere with academic pursuits. Re-admission requirements will be defined by faculty at the time of withdrawal and placed in the student file. The nursing program coordinator will meet with students at the time of their withdrawal to review re-admission requirements. Students will attend one of the nursing advising group sessions prior to admission. Request for readmission (letter of intent) must be submitted by January 31 for summer/fall admission or July 15 for spring admission.

Selection is based on the evaluation and decision of the Nursing Program Selection Committee.

The student will meet the usual admission requirements, including completion of Math 23 or 82 with C or better, or Compass placement score of Algebra 46 within two years prior to admission; English placement (Compass Writing Score of 74 or higher and Reading Score of 79 or higher) within two years of admission; current CPR certification; program health requirements; and completion of the MMMC background check and drug screen.

**H. STUDENT HEALTH**

Nursing students are required to meet all health requirements as outlined for admission to UH Maui College. In addition to the college’s basic health clearance requirements, the Nursing Program requires: meeting specific technical standards; vaccinations or proof of
immunity to measles (rubeola), rubella (German measles), mumps, varicella (chicken pox), hepatitis B, Tdap; two-step tuberculosis testing and special lab testing. The Nursing requirements are more stringent than that of the general campus population because of the need to protect the nursing student from contagious disease exposure while caring for the ill or injured. Nursing Program requirements may be revised at any time to meet changes as dictated by the current requirements of Maui’s clinical sites and cooperating facilities. **Students must meet minimum proof of immunization requirements prior to registration for course or admission to the clinical setting.**

It is the student’s responsibility to have all of the health requirements met by the deadline set by the nursing program. A student that fails to meet the deadline will be ineligible for admission, or may be suspended from the program.

1. **Health Costs:**
   Each student is responsible for his/her own individual health requirement cost. Enrollment in a health insurance program is strongly recommended. Health insurance may not cover all the costs of titers and immunizations. The student is urged to question several facilities to compare costs. The UHMC Student Health Center provides many services.

2. **Pre-Enrollment Drug Testing Required by Clinical Facilities**
   a. **Purpose:** 1) to promote a drug-free workforce and environment; 2) to provide a safe, healthy and productive environment for students, faculty and clients, and 3) to implement policies consistent with health care agencies on Maui.
   b. **Policy:** All applicants who have been selected for admission to the PN/ADN Career Ladder Nursing Program will be required to pass a *pre*-enrollment drug-screening test as a condition of enrollment.

3. **Technical Standards Form:**
   Before entering the UHMC Nursing Program a student shall provide documentation of sensory and mobility standards that support the student’s ability to perform basic nursing functions. The technical standards assessment must be current and performed within twelve months prior to the first day of instruction. At any given time, reassessment of the student’s ability to perform basic technical standards may be required at the discretion of the nursing faculty. Continued evidence of minimal function standards is required to safeguard the student, the client, fellow classmates and other health care agency staff. **It is the student’s responsibility to inform the nursing faculty of any change in physical or mental status which may alter basic sensory/mobility functions.**

4. **Tuberculosis Clearance:** Certification of a negative two-step P.P.D. intradermal test or a negative chest x-ray is required within one year prior to the first day of instruction. Subsequent one-step P.P.D. intradermal testing shall be done one year or less from two-step. If greater than one year, even if by a few days, a two-step must be repeated.

5. **Proof of Immunity:** All students entering the nursing program must present evidence of blood titers indicating positive immune status for rubeola, rubella,
varicella (chicken pox) and hepatitis B. The titers may be obtained from the Student Health Center or from your personal healthcare provider. If these titers are negative, the student must provide proof of immunization for these diseases. Some immunizations may not be obtained during pregnancy, but a letter from a healthcare provider is required. If hepatitis B immunization is incomplete at the time of admission, the student shall provide current documentation of the injection dates and will then be expected to complete the series according to the recommended scheduling. A follow-up titer is further required one to two months after completion of the series. If the titer is negative following completion of the initial HepB series, follow up vaccination will be done according to CDC Advisory Committee on Immunization Practices (ACIP) protocol. Exceptions are considered by nursing faculty on an individual basis.

6. **Hepatitis A Protection:** Recent development of a safe hepatitis A vaccine has prompted the UHMC Nursing Program to recommend additional protection against the hepatitis A virus. Students are encouraged to obtain the hepatitis A series of injections.

7. **Pregnancy:** A student who is pregnant will be permitted to register and attend all educational activities provided a medical statement is submitted. The medical statement must be signed by the student’s personal physician verifying that the student is able to continue to attend class and perform nursing functions in the clinical setting as described in UHMC Nursing’s basic sensory and mobility technical standards. **It is the pregnant student’s responsibility to inform the nursing faculty of any change in physical or mental status, which may alter basic sensory/mobility functions.**

8. **Illness/Injury:** A student with any deficit in sensory or mobility functions, which may affect the safety of self or those around them, cannot attend class or the clinical area. The student shall inform the instructor of any such deficit (which may be related to a physical or mental concern). If the student demonstrates an unreported sensory or mobility deficit (unusual behavior), the attending instructor may remove the student from the classroom or clinical area for safety reasons. The student may then be asked to report for emergency care as indicated and if necessary the personal physician will be informed. A written medical clearance may be required prior to the student’s return to class or clinical, based on the circumstance and the faculty’s professional nursing judgment.

9. **Injury While in the Clinical Area:**
In case of an accident, needle-stick, exposure to body fluids or injury in the clinical area, the student shall inform the instructor in charge, report for emergency care as indicated and, if necessary, the personal physician will be informed. The student must comply with the policies of the clinical facility by reporting the incident to the charge/supervisory nurse and completing any facility forms as requested. In the case of an injury, UHMC requires the submission of a UH incident report form. The report form is obtained from the faculty instructor and is collaboratively completed by the student and instructor. A follow-up visit to the UHMC Health Center is required to complete the documentation. Treatment costs and subsequent
testing for infectious disease are the responsibility of the student. (In the case of injury, tetanus immunization within the last five years is recommended.)

10. **Immunization and Health Records:**
Immunization records are kept at the UHMC Health Center. Students are encouraged to keep their own records of immunization. A courtesy copy of all records may be obtained upon graduation. At any other time, there will be a minimal charge for copies of the record.

I. **REASONABLE ACCOMMODATIONS**
It is the student's responsibility to request reasonable accommodations because of a learning disability or a physical challenge. A student requesting reasonable accommodations is required to consult with Lisa Deneen, Disability Services Coordinator, and provide documentation of the disability in order to develop an individualized accommodation plan. 1) Reasonable accommodations will be available to students who have been evaluated or are in the process of being evaluated. 2) Students are responsible for having assessments completed as soon as possible.

1. If you have a disability and have not voluntarily disclosed the nature of your disability and the support you need, you are invited to contact counselor Lisa Deneen, Disability Services Coordinator, at 984-3227. Her office is in the Ho’okipa Building.

2. Please contact Lisa Deneen also if you have a documented disability and would like to discuss your academic accommodations.

3. Extended time in a distraction-free environment may be an appropriate accommodation based on a student’s disability and the recommendations from the assessment.

4. The student is responsible to inform a counselor or faculty member of a learning disability or a physical challenge, if the student wishes to have reasonable accommodations.

5. Special accommodations are not provided for clinical courses.

J. **UNIFORM REGULATIONS**
Students in uniform represent the UHMC Nursing Program; therefore, students must only wear COMPLETE uniform (see #7).

1. Uniforms and underclothing must be neat and clean at all times. If undershirts are visible they should be white. Underwear should not be visible. Students will not be permitted to enter the clinical area if they do not present a neat, clean and well-groomed appearance.

2. An appropriate hairstyle is required when in uniform. Hair must be neat and clean, and if long (past your collar), must be tied back from the face and put up if it is flowing. It is expected that male students without beards or mustaches be clean-shaven. Beards and/or mustaches must be clean and neatly trimmed. A clinical instructor can ask the student to modify appearance when indicated.

3. Conservative use of make-up shall be used in the clinical facility. Perfume and flower scents (ornamental or leis) can be very irritating to some clients and should not be worn. Personal hygiene (bathing, oral care and the use of non-scented deodorant) is essential to avoid unpleasant body odor.
4. Only wedding rings, engagement rings, or small inconspicuous earrings may be worn in the clinical facility. Dangling earrings may not be worn. Bracelets must be removed before clinical, unless the student appeals based on personal/cultural beliefs. Guidelines for rings/bracelets may be stricter in specialty clinical areas.

5. Artificial nails are not allowed. Fingernails need to be short/clean, and polish, if worn, should be neutral color and in good condition.

6. Facial and tongue piercings should be removed. Tattoos should be covered, if possible, prior to clinical.

7. Student Uniform (see Maui Memorial Medical Center Dress Code attached):
   a. The student uniform for first year is a teal scrub top with matching teal or white long uniform pants. The student uniform for second year is a burgundy (or wine) scrub top and matching burgundy or white long uniform pants. Students may wear a color-matched scrub jacket if desired. Students in the final associate degree semester (2nd semester, 2nd year) will wear black pants with the burgundy scrub top. They may choose to wear black shoes and black socks with the black pants if desired.
   b. Shoes and laces must be kept clean and in good condition. They must have closed toes and heels. White shoes (athletic shoes are acceptable) will be worn until the final semester (see above), and then black shoes may be worn.
   c. White socks may be worn with slacks. If students choose to wear black shoes in the final semester, they may also choose to wear black socks.

8. Required Clinical Supplies
   a. Name badges worn on left bodice of uniform at all times while in the clinical area.
   b. Watch with second’s indicator.
   c. Bandage scissors.
   d. Black ballpoint pen - no felt pens for charting.
   e. Stethoscope.
   f. Penlight (beginning second semester of PN year)
   g. Kelly (mosquito) clamp (optional)

Individual instructors may establish minimum dress guidelines to avoid distractions in the classroom.

K. ON CAMPUS SUPPLIES/PHONES
Equipment/supplies may leave campus lab only with the instructor's consent for unusual circumstances.
Students are not to use Nursing Office supplies and equipment (computers, typewriters, Xerox machines, paper clips, pens, scissors, etc.). An instructor's office and instructor's bookshelves are private (off limits for students), except with instructor's permission.

Students are to use the pay phones on campus and health care facilities and are not to use any of the staff phones in the Nursing Building or agency. Incoming calls should be for emergencies only. Non-emergency messages cannot be taken due to limited staff.

Cell phones and pagers are not to be audible during instructional classes. Cell phones are NOT to be brought to the clinical area.
L. **PARKING/TRANSPORTATION**
Students will be responsible for arranging their own transportation to and from scheduled educational activities. UH Maui College assumes no liability for accident or injury while traveling to or from scheduled activities.

Parking at Maui Memorial Medical Center is not permitted at this time. **Students are required to park in areas designated by nursing faculty for all theory and clinical experiences. Students must comply with parking rules as defined by faculty.**

M. **LIABILITY INSURANCE**
Students pay a fee for malpractice liability insurance each year, at the time of college registration. This coverage is provided by an insurance company for claims arising out of real or alleged malpractice, when the injury being claimed is the result of error, accident, or omission. Coverage is for malpractice related to normal curriculum, studies and assignments 24 hours a day.

N. **SAFETY**
In college labs, and in the clinical areas, personal safety for students and instructors is extremely important. Safety lectures, demonstrations, and other activities are a regular part of the UH Maui College instructional program. In addition, certain types of personal protective equipment are required for participation in many activities taking place in classrooms, labs, and clinical areas. Students are required to fully participate in safety related instruction, furnish their own personal protective equipment when required and utilize facility personal protective equipment when provided.

Failure to act in a safe, responsible manner may result in an Unsafe Practice and may result in the immediate removal from class, lab or clinical area.

O. **FINANCIAL ASSISTANCE**
To qualify for financial assistance, the student must establish eligibility by filing a Free Application for Federal Student Aid (FAFSA). You may apply online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) or contact the Educational Opportunity Center for assistance in this process (984-3286). All students are encouraged to submit a FAFSA. Students may also qualify to receive a nursing loan, supplementary educational grant, or Basic Educational Opportunity Grant.

Maui Nurses Scholarship Foundation provides a limited amount of emergency funds to assist nursing students. To obtain emergency assistance see the Nursing Counselor, your instructor, or the Nursing Program Coordinator.

A limited amount of emergency loan money (up to $200 per student) is available through UHMC Student Services to assist students on a temporary basis. Repayment must be made within 30 days. For further information on financial assistance, contact the UHMC Financial Aid Officer.

P. **LIBRARY RESOURCES**
UH Maui College Library:
A great deal of nursing literature is available by online via the UHMC Library’s website (maui.hawaii.edu/library). Online resources consist of subject guides, professional journal articles and full-text books. Students may access these online resources off campus. Library faculty (librarians) are available to assist students in performing research and to help students find materials. Many nursing materials (especially books) are physically available in the library. Unpaid overdue or lost book fines will block a student’s account. Until these fines are paid, the student will not be allowed to off-campus library resource use, to register for courses, and will not be granted a certificate/degree (per: UHMC Library Policy).

Q. ACCESS TO MEDICAL RECORDS
Access to medical records will comply with current Hawaii State client privacy regulations. When reading records on currently hospitalized clients, students are to remain in the designated hospital area. Students are not to congest the chart area or be disruptive to the flow of processing new orders. Health team professionals have priority access to clients' charts. All medical records are confidential and may be discussed only with appropriate health team professionals. Confidential medical records must not be discussed with the public, classmates (except in clinical conference), friends or family. Chart information should never be duplicated, faxed, or scanned. Students must wear name badges and be in uniform or wear a lab coat when reviewing medical records.

R. STUDENTS’ EVALUATIONS OF FACULTY
Students are expected to objectively and professionally complete evaluations of faculty performance following each course within twenty-four hours after distribution of evaluation forms. The evaluations are important to promote continuous improvement of nursing instruction and the Nursing Program. The instructor will receive a compiled summary of the student evaluation and will never see the individual evaluations.

S. GRADUATION
Pinning ceremonies are traditional events accepting graduates into the profession of nursing. The nursing pin is placed on the nursing uniform. The ceremonies are organized by faculty with student input. Uniforms for graduation Pinning Ceremony will be prescribed and the dress code for the pinning ceremony will be enforced.

The associate degree graduate is invited to attend the UHMC campus graduation to receive the Associate in Science Degree. Practical Nursing graduates from the previous year are allowed to attend the UHMC graduation to formally receive the Certificate of Achievement.

T. USE OF SOCIAL MEDIA
Please refer to the National Council of State Boards of Nursing for “A Nurse’s Guide to the Use of Social Media” https://www.ncsbn.org/Social_Media.pdf

Social Computing guidelines:
- Students are personally responsible for the content they publish on blogs, wikis, social networks, forum boards, or any other form of user-generated media. Be mindful that what you publish may be public for anyone to see and may be traced back to you even after a long time – protect your privacy. This includes online publishing and discussion on blogs, wikis, file-sharing, user-generated video and audio, virtual worlds and social networks.
- Be thoughtful on how you present yourself. Nursing students are preparing for a career providing services to the public. The UH Maui College Nursing Program and future employers hold you to a high standard of behavior. By identifying yourself as a UH Maui College nursing student through postings and personal web pages, you are connected to your colleagues, clinical agencies, and even clients/patients. Ensure that content associated with you is consistent with your professional goals. If you are a new nursing student, be sure to update your social profiles to reflect our guidelines.

- Protect confidential information. While you are posting to your friends, many of the sites are open to browsing or searching. Be thoughtful about what you publish. Do not disclose or use confidential information or that of any other person or agency. Respect HIPAA regulations. (http://www.hhs.gov/ocr/privacy/hipaa/administrative/index.html)

- Do not post any information about your clinical rotations or clients in any online forum or webpage.
5. **UH Hawai'i Statewide Nursing Competencies**

1. **A competent nurse's professional actions are based on core nursing values, professional standards of practice, and the law.**
   
   1.1 Core nursing values include social justice (from the ANA statement), caring, advocacy, respect for self and others, collegiality, and ethical behavior

   1.2 Ethical dilemmas are embedded in clinical practice; an obligation of nurses is to notice, interpret respond and reflect on these dilemmas using ethical principles and frameworks as a guideline

   1.3 It is essential for nurses to participate in discussions of ethical issues in health care as they affect communities, society, and health professions

   1.4 Professional nursing functions within legally defined standards of practice and state specific regulations

2. **A competent nurse develops insight through reflective practice, self-analysis, and self care through the understanding that...**

   2.1 Ongoing reflection, critical examination and evaluation of one's professional and personal life improves nursing practice

   2.2 Reflection and self-analysis encourage self-awareness and self-care

   2.3 Pursuing and advocating healthy behaviors enhance nurses’ ability to care for client

3. **A competent nurse engages in ongoing self-directed learning and provides care based on evidence supported by research with the understanding that . . .**

   3.1 Knowledge and skills are dynamic and evolving, in order to maintain competency one must continuously update their knowledge using reliable, current sources of information from the biological, social, medical, public health, and nursing sciences

   3.2 The nurse uses legitimate sources of evidence for decision-making such as research evidence, standards of care, community perspectives and practical wisdom gained from experience

   3.3 As “best practices” are continuously modified and new interventions are constant, the nurse incorporates changes into practice

4. **A competent nurse demonstrates leadership in nursing and health care through the understanding that ...**

   4.1 An effective nurse is able to take a leadership role to meet client needs, improve the health care system and facilitate community problem solving

   4.2 A competent nurse effectively uses management principles, strategies, and tools

   4.3 An effective nurse works with the health care team including the delegation of responsibilities and supervision

5. **A competent nurse collaborates as part of a health care team**

   5.1 The client is an essential member of the healthcare team
5.2 A collegial team is essential for success in serving clients

5.3 Effective team members must be able to give and receive constructive feedback

5.4 Colleagues create a positive environment for each other that values holistic client care

6. A competent nurse practices within, utilizes, and contributes to the broader health care system

6.1 All components of the healthcare system must be incorporated when providing interdisciplinary care

6.2 The effective nurse contributes to improvements of the health care system through involvement in policy, decision-making processes and political activities

7. A competent nurse practices client-centered care

7.1 Effective care is centered around a respectful relationship with the client that is based on empathy, caring, mutual trust, and advocacy

7.2 Nursing practice should reflect the attitudes, beliefs and values of clients

7.3 An understanding of the culture and history of the community is fundamental in the practice of nursing

8. A competent nurse communicates effectively through the understanding that …

8.1 Effective use of communication is an essential part of all interventions to establish caring and therapeutic relationships to educate and advocate for clients

8.2 When working with colleagues or clients, it is important to insure that accurate, timely and complete communication has occurred

8.3 Successful communication requires attention to elements of cultural influences, variations in the use of language and a participatory approach

9. A competent nurse demonstrates clinical judgment/critical thinking in the delivery of care of clients while maintaining safety through:

9.1 Analysis and integration of available data

9.2 Implementation of prioritized care based on evaluation of data

9.3 Evaluation and analysis of the nurses’ personal clinical performance

9.4 A competent nurse engages in risk reduction activities, recognize, communicate and intervene to promote client safety