

Career Training Center

Practical Nursing Program

2020-2021 Student Handbook

POLYTECH Adult Education

823 Walnut Shade Road

P.O. Box 102

Woodside, Delaware 19980

(302) 697-4545

Fax: (302) 697-4544

www.polytechworks.com

POLYTECH Adult Education's Practical Nursing Program is accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN).



3343 Peachtree Road NE, Suite 850

Atlanta, GA 30326 (404) 975-5000

www.acenursing.org

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Board of Education

W. Duane Hammond.....President
Cynthia BrownBoard Member
Dr. Reginald Chandler, Sr. Board Member
Nancy W. CookBoard Member
Deanna Rigby.....Board Member
Sandra Walls.....Board Member

Administration

Dr. Amelia HodgesSuperintendent
Dr. Betsy JonesDirector of Adult Education
Jeremy McEntire.....Assistant Director of Adult Education

Staff

Kent Gory, MSN, RN, CNE.....Coordinator, Practical Nursing
Program
Michael Carrozza, Ph.D, MPH, RN.....Instructor
Elizabeth Crossan, BSN, RN.....Instructor
Kathleen DiMauro MS, RN-BC, IBCLC..Instructor
Kathy Doty, MS, BSN, RN.....Instructor
June Porter, MSN, RN.....Instructor
Holly Pruneda, BSN, RN.....Instructor
Angela Garcia, MSN, RN.....Instructor
Sirena Skipper, MSN, RN.....Instructor
Ruth Snyder, MSN, RN.....Instructor
Mary Wilt.....Career Program Specialist
Jennifer Lane.....Career Placement Specialist
Debby Needam.....Financial Aid

2020-2021 CALENDAR

JULY

June 29 Practical Nursing New Student Orientation
July 13 Practical Nursing Program begins

AUGUST

August 17 Nursing Clinicals begin

SEPTEMBER

September 7 **School Closed** – Labor Day

NOVEMBER

November 4 End of Semester One
November 5 Start of Semester Two
November 26-27 **School Closed** – Thanksgiving

DECEMBER

December 24-31 **School Closed** – Winter Break

JANUARY

January 1 **School Closed** – Winter Break
January 4 Classes Resume

MARCH

March 9 End of Second Semester
March 10 Start of Semester Three

APRIL

April 2-9 **School Closed** – Spring Break
April 12 Classes resume

MAY

May 31 **School Closed** - Memorial Day

JUNE

June 16 End of Semester Three

Graduation: Ceremony held within 1 week of end of semester three

Class of 2021 Program Costs

The following cost estimates are intended to assist students in planning for expenses related to the program. Program costs are subject to change.

Application Fee	\$125.00
Drug Screening Fee (\$47 x 2)	\$94.00
Background Check (\$65 and \$40)	\$105.00
Physical Exam (approximate)	\$75.00
Immunizations (approximate)	up to \$400.00
Cost for 11.5-month program	\$12499.00
Includes:	
Tuition	\$11070.00
Liability Insurance	\$21.00
ATI Online Testing/NCLEX Comprehensive Review	\$731.00
Textbooks	\$429.00
Supplies	\$98.00
Graduation fees	\$150.00
(\$40 for pin, \$22 for lamp, \$8 for plaque, \$80 for admin. fees)	
Additional fees:	
Uniforms and nursing shoes (approximate)	\$300.00
NCLEX-PN Exam Fee	\$200.00
State of Delaware Licensure Fee	170.00
BON Background Check	\$65.00
Total Cost & Estimated Expenses	\$14033.00

POLYTECH School District Mission Statement

POLYTECH Adult Education will strive to provide innovative learning opportunities at an affordable price and in an environment that is conducive to adult learners; deliver high quality workforce development and literacy skills instruction, on campus and in the community; use up-to-date tools and technology to achieve desired outcomes; maintain strong, collaborative ties to business and educational communities; refine our reputation as a premier site for conferencing; offer high quality, flexible and responsive customer service; and continually evaluate and improve the quality of our programs and services.

Organization Overview

POLYTECH Adult Education is an experienced provider of multiple types of educational programs that include apprenticeship, mechanical skills, clerical, customer service, culinary arts, allied health, practical nursing, computer technology and other vocational and avocational courses and programs. We also provide customized education programs to area companies and businesses. Our comprehensive education center offers many additional programs that can benefit students including:

- James H. Groves Adult High School and GED© Prep. classes
- ABE (Adult Basic Education) classes, including instruction in basic reading, writing and math skills
- ESL (English as a Second Language)
- Family Literacy Program and Parents As Teachers Program

An experienced staff of advisors, instructional and placement professionals focus on providing high quality education, guidance and career services to all students at all levels. Students choose from programs in a variety of high demand occupations including, but not limited to, the following:

- Information Technology
- Dental Assistant
- AAPC Medical Coding Specialist
- Automotive Technician
- Certified Nursing Assistant
- Medical Assistant
- Electro-Mechanical Technician
- Practical Nursing

The Career Training Center is conveniently located in Kent County making it possible to serve Kent and Sussex County residents easily, and serves over 5,000 students each year in various career and literacy programs.

Academic Integrity

Students are expected to be honest in all academic pursuits. Conduct such as cheating, falsifying examination results, lying, helping others to cheat, and using someone else's words as your own (plagiarism) are examples of academic dishonesty. Presence of phones is prohibited during exams. Students may only leave the classroom when they have completed the exam, otherwise they are prohibited from leaving the classroom while exams are in progress. Instructors are required to report all episodes of academic misconduct, unintentional as well as deliberate, to the

Practical Nursing Coordinator and the POLYTECH administration for review. An offense of academic dishonesty will be evaluated as to its seriousness and could result in the most severe consequence of dismissal from the program. If you have questions regarding academic integrity, please ask your instructor.

Entrance Requirements

Students applying for admission to the Practical Nursing program must meet the following entry requirements:

- Be 18 years of age or older
- Submit required enrollment documents:
 - Completed application form
 - Official High School transcript or proof of GED (and college transcripts, if applicable)
 - Two letters of professional reference
- Meet specific program entrance requirements as follows:
 - Achieve satisfactory scores on the ATI-TEAS exam
 - Provide complete documentation of favorable drug screening & criminal background investigation
 - Undergo State of Delaware Adult & Child Abuse Registry checks
 - Submit report of a physical examination, providing documentation of his/her ability to meet the physical requirements of student nursing and nursing, in general
 - Submit documentation of required immunizations
 - Provide proof of health insurance or signed waiver of same
- Interview with the Practical Nursing Interview Team.
- Applicants are responsible for all fees associated with admission requirements including admission testing.

Discrimination Policy

The POLYTECH School District does not discriminate in employment, educational programs, services, or activities, based on race, color, creed, national origin, sex, age, disability, genetic information, veteran status or sexual orientation in accordance with State and Federal Laws.

Emergency Closings

School cancellations due to inclement weather or emergency conditions will be announced via www.polytechworks.com, schoolclosings.delaware.gov, district “auto-call” system, a recorded message on the Polytech Adult Education main phone line.

School Opening Delays: In the event that POLYTECH School District announces that there is a one-hour or two-hour delay for the start time of school, morning POLYTECH Adult Education classes will be delayed accordingly.

School District Closings: In the event that POLYTECH School District announces in the morning that it is closed, POLYTECH Adult Education will also be closed for the day, unless otherwise notified.

Enrollment Policy

Only enrolled students may attend classes. No one is permitted to accompany students to class, including children, spouses, or other family members. Animals other than service animals are not permitted on school property.

In order to maintain enrollment in the program, Practical Nursing students are required to:

- Maintain a 75% average in classroom units of study, and a passing score in clinicals.
- Purchase and wear when required, the standard nursing uniform for POLYTECH Adult Education students.
- Provide adequate and reliable transportation to the POLYTECH Adult Education campus and any clinical sites utilized during the program.
- Have access to high speed internet to complete homework assignments.
- Maintain current Healthcare Provider CPR certification as provided by the American Heart Association.*
- Pay all program fees in a timely manner at the time of enrollment.

**A Healthcare Provider CPR class for Practical Nursing students will be provided during regularly scheduled class time. No make-up sessions will be provided. Students who are tardy or absent for the CPR class will be required to obtain certification prior to the start of clinicals through alternate means.*

Change of Address, Telephone Numbers and E-Mail Address

The Career Program Specialist must be notified of any changes in address, phone numbers or e-mail address during the year, so that official records can be updated. Current information enables our staff to stay in touch with students regarding class and program information.

Classroom Safety

Safety regulations must be followed in the classroom, nursing skills laboratory and at clinical sites. It is your responsibility to follow these procedures for your own safety, as well as the safety of your patients and classmates.

Communication Devices

Cell phones, texting devices, MP-3s, iPods, iPads or tablets or any other type of electronic communication device are not to be used by students in classroom, lab and clinical areas. Individual exceptions to this policy, in the classroom only, require prior

approval of the instructor. **There will be no text messaging permitted in classroom, lab and clinical areas.** Violation of this policy may result in automatic disenrollment.

When students are at clinical locations, urgent messages may be routed through the clinical instructor. **NO CELL PHONES ARE ALLOWED INSIDE CLINICAL SITES.** Possession of a cell phone will result in dismissal from the clinical site for that day. Student will not receive attendance credit for that day, and must be approved by program administration before being permitted to return to the clinical site.

Information/notifications of an immediate nature concerning class or clinical may be texted to the faculty. All other communications with faculty are to be via email, using appropriate salutations and closings.

Social Media Policy

This policy addresses any electronic equipment or communication devices utilized on or off the POLYTECH Adult Education premises to protect the confidential and proprietary information of patients, clinical sites, health team members, students and faculty.

Social media is a term that describes Internet-based technology communication tools and refers to venues such as blogs and microblogs, social and professional networking sites, photo sharing, and video sharing, as well as comments posted on these sites.

The following specific technologies or sites include, but are not limited to: forums or message boards, Facebook, Instagram, Twitter and LinkedIn.

Prohibited Conduct/Content

It is prohibited to create, maintain or use personal websites or social media forums during class or clinical responsibilities. Disclosing POLYTECH Adult Education and/or the Practical Nursing Program confidential, financial or business-related data is strictly prohibited. Disclosure of confidential protected patient information is prohibited, including, but not limited to Patient records, personal patient information, admission/discharge, treatment, diagnosis or financial information.

It is prohibited to record or publish information of any patient. Posting or publication of photos, images and videos of patients are prohibited.

Disclosure of any confidential information pertaining to health team members, clinical site, students, staff, or administration is prohibited.

It is prohibited to post or publish photographs, images or videos of any health team member or student unless express written permission is obtained from that individual. Any social media postings or commentary shall not contain material that is illegal, unethical, unprofessional, discriminatory or harassing against any other health team members, students, faculty or administration.

It is prohibited to post any commentary that is defamatory to POLYTECH Adult Education, the Nursing Program, clinical site(s), the faculty, staff or administration.

Personal Use of Social Media

Any student who posts communications on their personal computers or other communication devices are personally responsible for their postings and commentary. Such individual can be held personally liable for any commentary that is considered defamatory, obscene, proprietary or libelous by any offended party. Students may not refer to or identify their affiliation with POLYTECH Adult Education or the Practical Nursing Program.

Any infractions of this policy **will** result in disciplinary action which may include suspension or dismissal from the program.

Substance Abuse

The use of illegal drugs and/or alcohol is strictly prohibited on school property. Students found using illegal drugs and/or alcohol on school property or reporting to class under the influence of illegal drugs and/or alcohol will immediately be dismissed from school and not permitted to return. The Delaware State Police will be contacted if drug and/or alcohol use is suspected or if students report to class while under the influence of alcohol and/or illegal drugs. *Please see the Substance Abuse Policy and Procedure in Appendix C.*

Field Trips

Scheduled field trips are an integral part of the Practical Nursing program. They are designed to expose students to different work sites or other opportunities not available in clinical, lab or classroom. They count as instructional time and an absence from a scheduled field trip will be considered an absence from class.

Code of Conduct

It is a privilege to attend POLYTECH Adult Education. Disruption of the educational process will not be tolerated.

POLYTECH Adult Education's philosophy commits its staff and administration to developing a climate where student creativity, responsibility and self-direction are recognized and may be nurtured in an atmosphere free from coercion and fear. Disruption of the educational process will not be tolerated.

Disciplinary action will be taken when an act: 1) disrupts the educational process; 2) violates the personal and/or educational rights of an individual; 3) violates state and/or federal laws. One written warning will be issued, and in extreme cases, disenrollment may be an outcome.

The Code is in force:

1. On school property prior to, during, and following regular school hours.

2. At all school-sponsored events and other activities where school administrators have jurisdiction over students.
3. At all clinical sites.

The Code of Conduct also applies to out-of-school conduct by a student if the school believes the nature of such conduct indicates that the student presents a threat to health, safety, or welfare to other students. Such out-of school conduct shall include, but is not limited to:

1. Acts of violence which are punishable by law.
2. Sexual offenses which are punishable by law.
3. The sale, transfer or possession of drugs which would constitute an offense punishable by law.

Dress Code and Uniforms

All students are required to dress appropriately for classroom, lab and clinical instruction. Students are expected to be in full, appropriate uniform with required accessories at all times in the clinical area. Note: uniform requirements may vary at specific clinical sites. If a student reports to class or clinical in clothing other than that described in the dress code, they may be asked to go home and change, and receive one day's absence (attendance policies will apply). ***Please note: Students who are out of compliance with the dress code at graduation (eg. long hair not tied back) will not be permitted to participate in the ceremony.***

The following guidelines apply:

ASPECT	CLINICAL	CLASSROOM/LAB
<p>JEWELRY</p> <p>Jewelry may be worn in moderation and may not present a safety or infection control hazard to the student or patients, nor interfere with the delivery of patient care.</p>	<p>Students may wear only a watch with a sweep second hand. No bracelets or necklaces permitted (except medical alert <i>jewelry</i>). May wear <i>one</i> pair of <i>small</i> pierced earring studs. No rings other than simple wedding band permitted (no engagement rings). No visible body/facial piercings, including nose, lip, tongue or eyebrow are permitted.</p>	<p>No excessive/large earrings or jewelry. No visible body/facial piercings, including nose, lip, tongue or eyebrow are permitted.</p>
<p>HAIR</p> <p>Hair must be neat, clean and well-groomed. Subtle, natural hair colors permitted.</p>	<p>Hair must be worn at or above the collar. Longer hair must be put up or tied back. Hats/head scarves prohibited (unless for religious purposes). Male students-facial hair must be short and neatly trimmed.</p>	<p>Hats/head scarves prohibited (unless for religious purposes). Male students-facial hair must be short and neatly trimmed</p>
<p>CLOTHING</p> <p>School insignia to be applied with Velcro and removed before laundering.</p> <p>**Please note: No pins, badges, insignias or buttons are permitted on POLYTECH Identification badges.</p>	<p>Crisp, clean uniform scrubs are to be worn in the clinical areas. White top, royal blue pants or skirt. Flesh tone, appropriate undergarments required- no patterns or designs that can be seen through outer garments. Tank tops or T-shirts may be worn as long as they are not visible outside the scrub top. During cold weather, a white turtle neck or other long-sleeved white T-shirt may be worn under the scrub top. White warm-up jackets are permitted.</p>	<p>Short shorts/skirts, tank tops and blouses showing cleavage or bra straps are not permitted. Appropriate underwear must be worn. No beach attire permitted. No bare midriffs or low rise pants where underwear is visible are permitted.</p>
<p>SHOES</p> <p>Shoes must be appropriate, clean and in good repair.</p>	<p>100% white sneakers or nursing footwear and white socks or stockings must be worn. Shoes must be closed. No clogs or open toes.</p>	<p>No open toed shoes permitted in the lab.</p>
<p>MISCELLANEOUS, FINGERNAILS, TATTOOS</p> <p>Good personal hygiene must be maintained.</p> <p>Gum chewing is prohibited in class, nursing skills lab and clinical settings.</p>	<p>Fingernails are to be no longer than ¼ inch, per CDC infection control guidelines. Artificial nails or nail enhancements are not permitted. Nail polish prohibited. No visible tattoos or body art permitted. Use of colognes, perfumes and after-shave should be limited. Make-up allowed in moderation.</p>	<p>Visible tattoos must not be offensive or obscene.</p>
<p>REQUIRED ACCESSORIES</p>	<p>Black ink pen Watch with a second hand Pen light Bandage Scissors Stethoscope</p>	

Attendance and Tardiness Policy

Reliable and prompt attendance is both a professional responsibility and a minimal expectation of our nursing students. Attendance in the classroom, clinical and laboratory is essential in order to achieve the educational objectives of the nursing program. Consistent attendance by the student, with attention to being on time and without leaving early from any of the class or clinical experiences, demonstrates evidence of motivation, interest and responsibility.

Attendance Guidelines:

Classes begin at 8:15 AM-6 hours + ½ hour lunch (subject to change, as needed)

Clinical times vary by clinical site and assignment -8 hours + ½ hour lunch

Students are expected to be present and on time for all class, lab and clinical experiences. ***They are to refrain from making appointments during scheduled school hours and from leaving class or clinical assignments early.***

A doctor's note must be submitted on the day of return for any absence over 3 days. All issues concerning a student's attendance are confidential.

All clinical absences or expected lateness must be reported to the instructor directly, at least one half hour before the start of clinical. Messages are not to be forwarded by fellow students.

Students who are dismissed from clinical for cause must report back to the school campus and meet with nursing administration. May not return to clinical until released to do so.

Clinical absences and tardiness: Point System

Clinical points will be accumulated until student returns to clinicals. A student exceeding the allotted points in any clinical rotation **will not pass** clinicals and will be dismissed from the program.

Clinical Rotation

Allotted Points

Semester I

Fundamentals of Nursing	10 points	at 11 points =dismissal
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Semester II

Medical-Surgical Nursing I	7 points	at 8 points =dismissal
Maternal-Child/Peds. Nursing	4 points	at 5 points =dismissal

Semester III

Medical-Surgical Nursing II	5 points	at 6 points =dismissal
Mental Health Nursing	4 points	at 5 points =dismissal

****At 6 points in a semester, student will be required to do a clinical make-up day

Absence = **3 points**

Lateness = **1 point**

Lateness greater than 1 hour = **3 points**

Non-notification of instructor within ½ hr. prior to lateness or absence = **1 point**

Leaving clinicals early = **1 point**

Leaving clinicals prior to 12 noon will be considered an absence = **3 points**

Clinical Make-up time:

Students obligated to do a clinical make-up day will be subject to a \$100.00 fee for each make-up day.

Classroom attendance grading policy:

Purpose: Encourage good attendance; identify course grade consequences for absences, tardiness and early departures; quantify a safe level of missed class time. (Key concepts: Safety, professionalism)

****A student who is absent more than 20% of the total classroom time for all courses, in any semester, will not be permitted to continue in the program.**

1. Attendance/Participation score amounts to 10% of course grade
2. A student who misses >20% or more of a course's scheduled lecture time, in a level I course, will receive a "0" for attendance and a 10% downward adjustment in his/her course grade.
3. The 20% will be based upon scheduled hours for the course.

Human Growth and Development	48 hours	20% = 10 hours
Microbiology	30 hours	20% = 6 hours
Anatomy and Physiology	60 hours	20% = 12 hours
Pharmacology	48 hours	20% = 10 hours
NCLEX Preparation	48 hours	20% = 10 hours

4. For level II courses with a clinical component: Students who miss >10% of scheduled lecture time will receive a "0" for attendance. The higher standard is due to the relationship between lecture and clinical content.

Fundamentals of Nursing	180 hours	10% = 18 hours
Medical-Surgical Nursing I	123 hours	10% = 12 hours

Medical-Surgical Nursing II	138 hours	10% = 14 hours
Maternal-Child/Peds Nursing	60 hours	10% = 6 hours
Mental Health Nursing	54 hours	10% = 5 hours

5. Nursing Skills Lab:

Fundamentals of Nursing	66 hours	10% = 7 hours
Med/Surg I and Mat.-Child	42 hours	10% = 4 hours
Medical-Surgical Nursing II	9 hours	10% = 1 hours

6. Tardiness greater than 15 minutes will count as one hour absent.
7. Leaving before the end of the class day will also be calculated and added to total absenteeism.
8. Leaving at lunchtime will result in 3 hours of missed time.
9. Absences of an extreme and/or unavoidable nature will be reviewed by faculty and evaluated on a case by case basis.

A graduated point system will be applied to attendance, up to the maximum allotted. The gradient will allow for an attendance score of 75% to 100% based upon student performance. For lecture courses with a clinical component, the result of missing greater than 20% of class will be a 10% reduction in the overall course grade.

10. Missed exams/projects/presentations: Must be made up the next class day. and the grade will suffer by a 10% loss, i.e., the highest grade possible will be a 90%.
 - Faculty have the option of administering an alternate exam, varied format, with no loss of 10%.

Grading Policy

Grading policy will be addressed in the class outline provided by the instructor and may include the following: attendance, written examinations, ATI exams and assignments, classroom participation, field trip participation, hands-on projects, clinical/lab performance, and observed evaluations. Numerical grading and Satisfactory/Unsatisfactory grading will be used. Students must maintain an average of 75% in each unit of study in order to progress and remain enrolled in the program. If a student earns a final grade of less than 75% in any course, they will be dismissed from the program. Students dropped from the program for poor academic performance may reapply for admission in a subsequent school year.

POLYTECH Adult Education uses the following grade scale:

93-100	A
85-92	B
75-84	C
Less than 75, No Credit Awarded	

Final grade appeals must be made in writing no later than 5 business days following receipt of the final course grade and should be directed to the PN Program Coordinator. Inquiries made more than 5 business days following the receipt of the final course grade will not be considered.

Graduation Policy

Participants must complete all units of study with a passing grade of 75% in order to be eligible for graduation. A Graduation and Pinning ceremony will be held annually at the completion of the program, and students are required to attend.

Assessment Technologies Institute (ATI) Policy

The POLYTECH Adult Education Practical Nursing Program has chosen to incorporate the services and products of ATI into the curriculum to promote enrichment of course content and enhance student NCLEX-PN success. The comprehensive program offers multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking and learning styles, online tutorials, online practice testing, and proctored testing over the major content areas in nursing. These tools, provided through ATI, along with the nursing program content, assist students to prepare for course work and exams more efficiently and to increase confidence and familiarity, not only with nursing content, but with test taking skills.

All students are required to complete all ATI assignments as noted on course syllabi. It is the student's responsibility to utilize all of the books, tutorials and online resources from ATI. The practice and proctored assessments will be given periodically throughout the program as noted on individual course syllabi. All students are expected to take the practice and proctored assessments as scheduled, and create and complete a focused review for each assessment, as directed.

ATI assessments and assignments are mandatory as part of the course requirements and will count for 15% of each course grade. The assessment portion of the grade will count as 5% of the total, while all other assignments, tutorials, etc., will comprise the remaining 10%. Mandatory remediation and review classes will be implemented and assigned, as needed.

ATI Skills Modules are integrated into the Nursing Skills Lab requirements and make up. Students must meet completion and score requirements on each assigned ATI module post-test.

Due to the significance of the ATI assessments for performance evaluation, determination of progress in the program, and the identification of students needing

additional instruction, guidance and support, any breach in academic integrity during the proctored exams will result in dismissal from the program.

During the third semester, Virtual ATI, an innovative, online partnership which prepares students for NCLEX success, will be introduced and implemented. Following the Comprehensive Predictor Exam, each student will be partnered with their own personal online mentor from ATI to intensively assist them with preparation for the NCLEX-PN. All students are expected to achieve green light status before taking the NCLEX-PN exam. All students are expected to achieve green light status and complete the NCLEX-PN exam within 12 weeks of graduation.

*See Appendix A for ATI grading rubrics.

Problem-Solving Policy (Chain of Command)

Questions and concerns regarding any of the policies described in this handbook should first be addressed to the program counselor. Subsequent concerns should be forwarded to the PN Program Coordinator and then to the Assistant Director.

Questions and concerns regarding classroom or clinical practices should first be addressed to your Instructor. Subsequent concerns should be forwarded to the program counselor, the PN Program Coordinator, and then to the Assistant Director.

Student Advisement

Polytech Adult Education is committed to helping students achieve success in their educational pursuits. Career Program Specialists and assigned Faculty Advisers work closely with staff and with students to determine issues to be addressed.

The Career Program Specialists assist students in identifying resources, within the organization or outside resources to address specific issues. For example, if a student is having financial or budgeting issues, the Career Program Specialist can refer the student to meet with a representative from Stand By Me®, which is a free financial coaching service for students and their families. Referrals are also made to the Career Placement Specialists if an enrolled student is seeking employment during training, or needs job coaching. Students are referred to state agencies and counseling if deemed appropriate by the Career Program Specialist. The Career Program Specialists are available during evening hours as well as daytime hours for student convenience.

Fire Drills

Evacuation instructions are posted in every room for the occupants of that particular room during a drill. Fire drills should be carried out with seriousness of purpose. In a real case of fire, many lives depend on the effective execution of these practices. Please remember to take your personal belongings with you when you evacuate the building!

Health Insurance

All students must provide proof of comprehensive health insurance or agree to sign a waiver of same prior to enrollment in the program. Students further agree to assume responsibility for any and all costs associated with health related admissions requirements and health care that may be required during training. A confidential record of all health documentation is kept on each student during the admissions process and throughout the program.

Illness

Students who become ill during class, laboratory practice, or while in clinical are to notify their instructor.

Students who become ill prior to reporting to their assigned area are to notify the responsible class, laboratory, or clinical instructor. If the instructor is not able to be reached, students are to call the Adult Education office and report the absence to an available counselor or staff member. The stated attendance policy will apply in cases of reported illness.

Injuries

Students are to report all injuries that occur during educational activities to the instructor that is present. An Occurrence Report Form must be completed. The instructor will activate the POLYTECH Adult Education emergency protocol and document all required information.

Return to class/clinical

Students who have been absent due to illness, injury or surgery may be asked to provide a physician note prior to their scheduled day of return. The note must include the reason for the absence, any restrictions in student activities and any required accommodations. The Program Coordinator or lead instructor will review the physician note and determine whether the student may return.

Appointments

Routine medical/dental appointments and or elective procedures are ***not*** to be scheduled during class or clinical time.

Immunizations

Students must provide proof of a 2-step PPD test within the last 6 months (or have a Quantiferon-TB Gold or T-Spot.TB blood test)and a Tdap (tetanus) shot within the past 10 years, and an annual flu shot. Students must provide documentation of 2 shot series or titer for MMR and documentation of varicella immunization or documentation from healthcare provider verifying year of disease, or titer. Hepatitis B is also recommended but is optional for enrollment; students who do not have the Hepatitis B immunizations must sign a declination form.

Medical Emergency on Campus

In the event of a medical emergency on campus the school will call 911. The student will be responsible for any associated charges.

Physical Exam

A complete physical examination is a requirement of enrollment. Students must provide documentation from their health care provider of their ability to meet the physical requirements of training and of the nursing profession.

Phone Calls

The Adult Education office staff is only permitted to take messages for students in emergency situations. If such a situation should occur, every effort will be made to forward the message immediately. Other callers will be informed that messages cannot be relayed.

For short, local calls students may use the phone in the Career Training office (Rm. 5050). The telephones in the classrooms are for staff use only.

Refund Policy

If, for any reason, the student does not complete the program through the end of the second week of classes, 50% of the **full** tuition amount will be refunded, minus the registration fee, which is 15% of the contract price, not to exceed \$150. Through the end of the third week of classes, 25% of the **full** tuition amount will be refunded, minus the registration fee. No refund will be issued after the end of the third week of classes.

In order to obtain a refund, a written request must be submitted. Forms are available at the Adult Education Office. Refunds are not made in cash. Fees paid by cash or check will be refunded with a "State of Delaware" refund check via U.S. mail. Fees paid by credit card will be refunded electronically to the credit card. Please allow 2-3 weeks for refund processing.

Payment Plan Policy

Payment in full is desired before the program begins; however, a payment plan can be established for students. A down payment of \$5,000.00 is required, with monthly payments due on the last day of each month thereafter, with a maximum of 9 monthly payments. **Failure to make a payment on time will result in suspension from the program until all debts are current.** Any hours missed due to failure to make payment on time will be counted against the total number of hours allowed.

POLYTECH Adult Education Office Hours

*September - May: Monday through Thursday, 8:00 a.m. - 9:00 p.m.,
Friday, 8:00 a.m. - 4:00 p.m.*

*June - August: Monday through Thursday, 8:00 a.m. - 4:00 p.m.,
Friday 8:00 a.m. - 4:00 p.m.*

Sexual Harassment Policy

The POLYTECH School District is committed to protecting the rights and dignity of all students. Sexual harassment is a form of sexual discrimination and is a violation of federal and state law. The District will not tolerate sexual harassment. Sexual harassment is defined as any unwelcome advances or requests for sexual favors, and other verbal or physical conduct of a sexual nature, which leads to negative consequences if the student does not comply; or which has the purpose of unreasonably interfering with an individual's study or creates an intimidating, hostile, or offensive environment. If you feel you have been sexually harassed, report it to the Career Program Specialist immediately.

Smoking Policy

POLYTECH School District is a Smoke-Free Environment. Smoking is not permitted anywhere on school property. This tobacco-free zone includes school premises, school vehicles, and school events, both on and off school property. **No smoking is permitted while in uniform on campus or at any clinical sites, with no exceptions.** Violation of the non-smoking policy may result in dismissal.

Solicitation on Campus

Students are not permitted to solicit, conduct business or raise funds on POLYTECH Adult Education's campus. This policy includes, but is not limited to, the posting or distribution of business cards, flyers, leaflets, and circulation of fundraising catalogs.

Lunch and Break Areas

Students may bring their lunch, or leave campus at lunch time. ***Important:** Students who attend classes during the day **do not** have access to the high school's cafeteria.* There are vending machines located in the Adult Education break room. **The lobby is not to be used for break or lunch times.**

Professional Decorum

Students are expected to behave in a professional manner at **ALL** times in the clinical areas. Conversations should be quiet and appropriate. Discussion of patients and/or their families, medical diagnoses, the health care team or clinical instructors in any open area of the clinical facilities **WILL NOT** be tolerated. This includes but is not limited to hallways, parking lots, lobbies, cafeteria and elevators.

Grievance Procedure

Any student who believes that he or she has been treated unfairly has the right to question this treatment and receive a prompt response to their concerns. Students are encouraged to first resolve the matter informally by discussing their particular situation with an appropriate staff member. The order of address should be:

1. Individual instructor
2. Lead Instructor
3. Career Program Specialist and/or Program Coordinator

Should resolution not be satisfactory to the student, the student may submit his/her grievance, in writing, to the Coordinator of the nursing program within 5 school days of the suggested resolution. The written grievance shall include:

- a. A statement that the student wishes a review of the situation by a committee comprised of the Program Coordinator, and Assistant Director, and another member of the faculty.
- b. Identification of the person or group at whom the grievance is directed
- c. The specifics of the perceived inequitable treatment
- d. Evidence to support the student's allegation(s).
- e. The outcome desired by the student.

The committee will review the circumstances, may request additional information from any or all parties involved, and may request that the parties involved appear before them. Within 5 school days of this meeting, the student will receive a written report of the committee's decision and recommendations.

The decision of the committee may be appealed in writing by the student to the Director of Adult Education for further review and resolution within 5 school days of notification from the committee. The decision of the Director of Adult Education may be appealed in writing by the student to the Superintendent of the Polytech School District.

Consumer complaints related to student financial assistance not resolved through district internal processes may be addressed to the following external source:

Shana Payne, Director
Delaware Higher Education Office
The Townsend Building
401 Federal St., Suite 2
Dover, DE 19901
(302) 735-4120
(800) 292-7935
Fax: (302) 739-5894
Email: dheo@doe.k12.de.us

Termination Policy

Violation of school policy, including the non-smoking policy, may result in counseling and/or dismissal. Subsequent offenses will result in immediate dismissal. In addition, actions that threaten the health, safety, and well-being of members of our POLYTECH community will result in immediate dismissal.

Dismissal Appeal Process

Dismissal from the program due to academic failure, non-compliance with policies and procedures, attendance and time infractions, behavioral issues and financial non-

payment must be appealed in writing to the Coordinator of the program, within 5 school days of the action, or the right to appeal is waived.

[Due to the rapid advancement of the program, any actions would need to be expedited to prevent possible additional time lost in the program.]

Re-Admission to Nursing Program

If a student drops out of or is dismissed from the nursing program, the Coordinator of the program, along with the Lead Instructor and/or administration will review the reasons for departure and the considerations for possible re-admission. If it is considered advisable and appropriate for the student to return and complete the program with the next class, the student will be notified of this option. S/he will be informed as to which semesters s/he must repeat. If the student then wishes to re-enter the program, s/he may come in if a seat is available at no additional tuition cost. If, however, s/he elects to have the school hold a seat for them, s/he will be expected to pay individually determined tuition fees.

Vision for Practical Nursing Program

To positively impact the health and wellness of the Delmarva community, in particular, and other populations, in general, by preparing competent, dynamic practical nurses.

Mission for Practical Nursing Program

The Practical Nursing program embraces the mission of the POLYTECH School District to provide the highest quality learning experiences which reflect current knowledge and best practices and up-to-date technology in an environment conducive to adult learning. Further, it is our mission to provide excellence in Practical Nursing education that guides each student toward personal and professional growth and nursing competence beyond the successful completion of the NCLEX-PN and entry into a dynamic Practical Nursing career.

Practical Nursing Program Philosophy

We believe that practical nurses are vital members of the healthcare team and that practical nursing, which is both art and science, is a valid entry level into nursing.

The patient, as the receiver of care, is recognized and respected as a holistic individual linked to family and community, who demonstrates unique cultural and social characteristics. Safe and effective nursing care can only be provided for this individual through utilization of the nursing process and critical thinking/clinical reasoning skills. Comprehensive, compassionate care is accomplished when there is appropriate and meaningful communication and collaboration with the patient, family and the healthcare community.

Nursing education promotes cognitive, emotional and behavioral development essential to the nursing role. Students acquire knowledge, safety awareness, psychosocial and technical skills, as well as health promotion strategies to insure appropriate patient care outcomes. Accountability, responsibility and discipline are essential professional attributes which are highly valued and upheld.

The evolution of nursing and healthcare requires that practical nurses engage in lifelong learning as an ongoing obligation of practice. The assurance of high quality patient care demands this commitment.

Program Outcomes

1. Provide an environment which fosters the development of knowledge, skills, caring and compassion, and personal and professional attributes in practical nursing students who:
 - A. Successfully complete the program
 - B. Pass NCLEX-PN at a rate at or above the national mean
 - C. Are employed within 6 months of passing the NCLEX-PN
2. Maintain partnership with the local healthcare community by involving them in our program through:
 - A. Clinical agreements with facilities which adhere to current best practices and nationally established patient and health safety goals
 - B. An Advisory Board that provides ongoing input and collaboration with the program
3. Demonstrate responsiveness to the cultural, racial and ethnic diversity of Kent County and the State of Delaware through our student population and their educational process.
4. Maintain the highest quality of education, utilizing the most current information and trends, facilities, equipment and materials.
5. Promote a culture of continuous improvement by applying ACEN standards and making modifications and changes, as appropriate, utilizing ongoing:
 - A. Student evaluation
 - B. Faculty evaluation
 - C. Program evaluation
 - D. Evaluation of student learning outcomes
 - E. Employer indicators of willingness to hire other POLYTECH LPN graduates, as the need arises (95% or greater)
6. Meet or exceed the Delaware Board of Nursing requirements for practical nursing education programs as outlined in the state regulations.

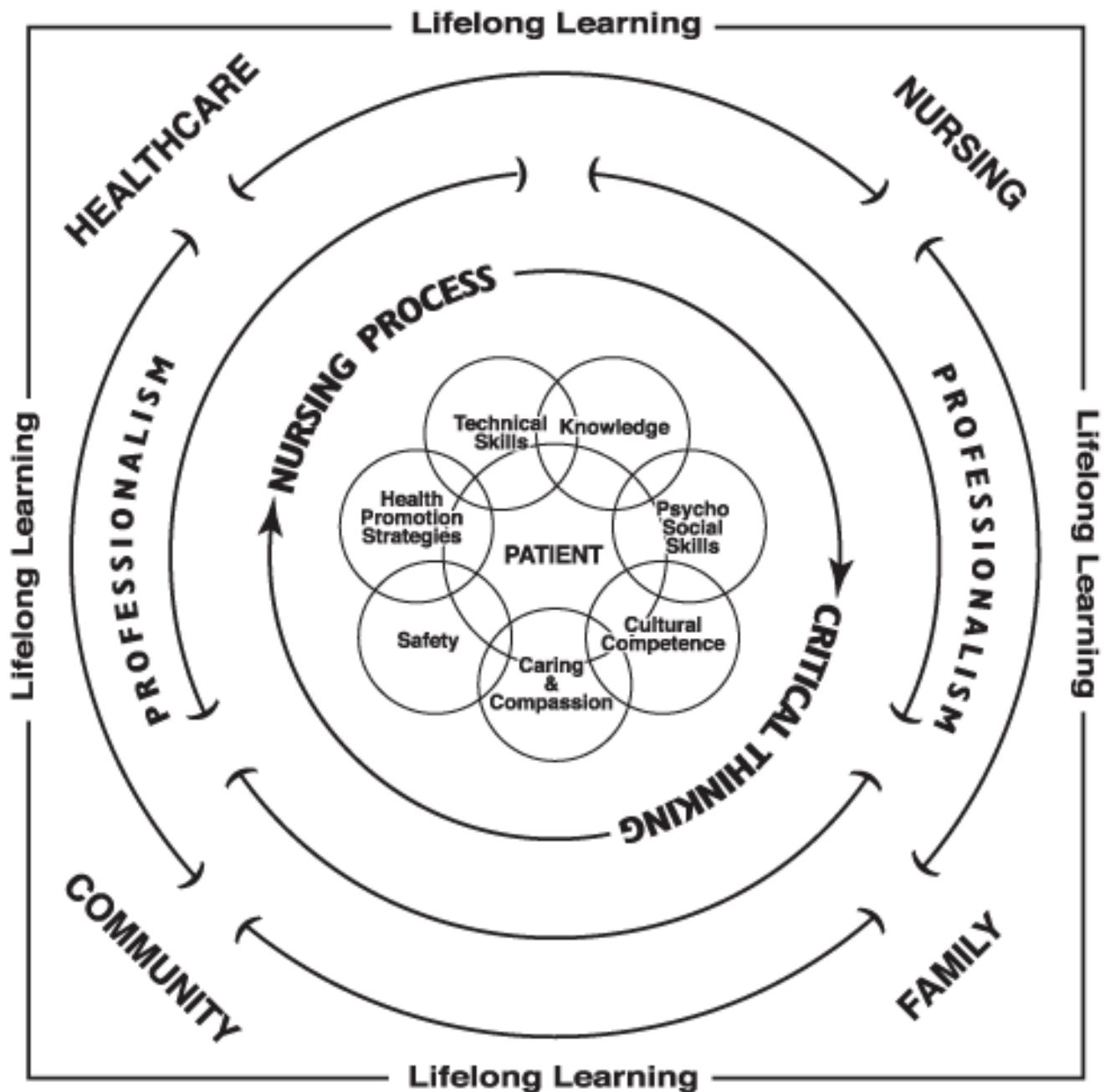
Student Learning Outcomes

Upon completion of the Practical Nursing Program, the graduate Practical Nurse will be prepared to enter nursing at a basic level and to practice nursing safely. The Graduate Practical Nurse will:

1. Recognize and respect the patient as a holistic individual with unique characteristics and health care needs.
2. Integrate nursing knowledge and concepts of evidence-based practice in the provision of quality nursing care.
3. Demonstrate safe, accurate, competency-based nursing skills within the scope of practice of entry level Practical nursing.

4. Effectively communicate and collaborate with patients, families, and all members of the healthcare team to deliver comprehensive compassionate care.
5. Assist individuals, families and groups across the lifespan in attaining and maintaining a maximum level of total wellness.
6. Demonstrate appropriate professional, cognitive, emotional and behavioral development through actions which reflect respect for human dignity, individual rights and sensitivity to individuality related to culture, race, gender, and age.
7. Utilize the nursing process to meet the patient's healthcare needs along the healthcare continuum with emphasis on health promotion strategies.
8. Use critical thinking/clinical reasoning skills in all aspects of professional decision making.
9. Demonstrate accountability in personal practice through:
 - A. Compliance with the scope of practice outlined by the Nurse Practice Act of the licensing state
 - B. Adherence to the nursing code of ethics
 - C. Functioning as an advocate for the health care consumer
 - D. Assumption of responsibility for personal actions in the provision of care
10. Utilize educational opportunities and value lifelong learning.

Polytech Adult Education Practical Nursing Program Conceptual Framework



Master Curriculum Plan

Required Courses

PN100- Pharmacology
 PN101- Anatomy & Physiology
 PN102- Microbiology
 PN103- Human Growth and Development
 PN201- Fundamentals of Nursing
 PN202- Medical-Surgical Nursing I
 PN203- Medical-Surgical Nursing II
 PN204- Maternal-Child/Pediatric Nursing
 PN205- Mental Health Nursing
 PN210- NCLEX Preparation

Curriculum Sequence

	Class	Lab	Clinical	Total Hours
First Semester				
PN201 - Fundamentals of Nursing	180	66	192	438
PN100 - Pharmacology	48			48
PN101 - Anatomy & Physiology	60			60
	288	66	192	546
Second Semester				
PN202 - Medical-Surgical Nursing I	123	36	174	333
PN204 - Maternal-Child/Pediatric Nursing	60	6	64	130
PN102- Microbiology	30			30
PN103- Human Growth & Development	48			48
	261	42	238	541
Third Semester				
PN203 - Medical-Surgical Nursing II	138	9	112	259
PN205 - Mental Health Nursing	54		48	102
PN210 - NCLEX Preparation	48			48
	240	9	160	409
TOTAL HOURS	789	117	590	1496

Course Descriptions

PN100 Pharmacology, 48 hours

This course introduces the student to pharmacological methods of treatment and the role of the practical nurse in medication administration. Medications are examined according to classification, indications for use, mechanism of action, side effects, contraindications, nursing implications and related patient educational needs. The legal and ethical responsibilities of the practical nurse as well as safety considerations related to medication administration are emphasized. The routes of medication administration and related documentation are detailed.

PN101 Anatomy & Physiology, 60 hours

This course is a presentation of the fundamental concepts of human anatomy and physiology. Content includes the structure and function of cells, tissues, and human organ systems. Related pathophysiology of major body systems is presented. Upon completion students will identify normal structures and functions of the human body systems, and common diseases that may afflict each system.

PN102 Microbiology, 30 hours

This course introduces the student to the types and characteristics of pathogenic microorganisms. The modes of transmission and resulting disease states are examined. Methods for identifying microorganisms and the body's defense against pathogens are considered. The prevention, treatment, and control of communicable diseases through the use of medications and/or environmental controls are described with an emphasis upon established and emerging pathogens.

PN103 Human Growth & Development, 48 hours

This course is an introduction to the study of human growth and development. Emphasis is placed on the physical, cognitive and psychosocial aspects of normal human development from conception to death. The relationship between nutrition, environment and growth and development is incorporated. Content includes infant/child growth and developmental delay indicators, and signs and symptoms of common developmental abnormalities. Upon completion students are able to demonstrate knowledge of human growth and development across the life span, and to apply this knowledge in their practice of nursing.

PN201 Fundamentals of Nursing, 438 hours (180 Lecture/66 Lab/192 Clinical)

This course introduces fundamental concepts and skills of nursing which are essential to providing basic care (to) the adult patient. The role of the practical nurse in the long term care setting is emphasized. The student is introduced to the nursing process and critical thinking/clinical reasoning as the logical framework(s) upon which nursing actions are based. The patient, as the focus of nursing care, is introduced as a unique, irreducible whole. The concepts of basic human needs, health and illness, homeostasis, safety, nutrition, elimination, and comfort are considered in the class, laboratory and clinical setting. Students progress from learning about interventions in the classroom, to practicing in the lab and finally to performing interventions in the

clinical setting. Students apply teaching and learning principles as a means of health promotion.

PN202 Medical-Surgical Nursing I, 333 hours (123 Lecture/36 Lab/174 Clinical)

This course prepares the student to care for the adult client with needs ranging from simple to complex in the acute and sub-acute settings. This course initiates students in a system based approach with emphasis on respiratory, neurological, cardiovascular, gastrointestinal, hematological and immunological systems. Common diseases, including cancer, their effect upon the patient, and related health care responses are considered. Utilization of the nursing process and critical thinking/clinical reasoning skills are emphasized in the delivery of safe, effective care.

PN203 Medical -Surgical Nursing II, 259 hours (138 Lecture/9 Lab/112 Clinical)

This course prepares the student to care for the adult patient with needs ranging from simple to complex in the acute care setting. The system based approach is continued with emphasis on urological, musculoskeletal, endocrine, reproductive, integumentary and sensory systems. Ear, nose and throat disorders will be addressed. Common diseases, their effect upon the patient, and related health care responses are considered. Utilization of the nursing process and critical thinking/clinical reasoning skills are emphasized and reinforced in the delivery of safe, effective care. Students complete transition to the role of the practical nurse and member of the interdisciplinary healthcare team.

PN204 Maternal-Child/Pediatric Nursing, 130 hours (60 Lecture/6 Lab/64 Clinical)

This course is an introduction to maternity and pediatric nursing. A holistic approach to nursing care for the antepartum, intrapartum, postpartum patient and the neonate focuses upon the needs of the growing family. Complications occurring during pregnancy are considered. Care of the hospitalized pediatric client is examined as well as common disorders from infancy through adolescence. Medication administration and pediatric dosage calculations are incorporated. The nursing process and critical thinking/clinical reasoning skills are utilized in the maternity and pediatric settings.

PN205 Mental Health Nursing, 102 hours (54 Lecture/48 Clinical)

This course is designed to introduce the student to the foundational concepts of providing mental health care to patients experiencing psychiatric problems within different health care environments. This course offers the student an opportunity to provide nursing care that promotes emotional, mental and social well-being of the patient and significant others. Emphasis is placed on the practical nurses' role as an effective member of a multidisciplinary mental health team. The use of the nursing process promotes critical thinking/clinical reasoning in the care of patients with alterations in mental health. The student's knowledge of the bio psychosocial and cognitive aspects of the individual's development throughout the lifespan is emphasized. The clinical experiences in different healthcare environments provide an opportunity to become aware of various modalities of care and use of self as a therapeutic tool.

PN210 NCLEX Preparation, 48 hours

The course is designed for practical nursing students preparing to take the National Council Licensure Examination for Practical Nurses (NCLEX-PN) and enter into the workforce. Students are instructed in strategies of test taking and in the development of an individualized preparation plan. The course includes a comprehensive, focused practical nursing review and administration of a NCLEX-PN success predictor examination. Students learn about the application process for licensure and are instructed on effective methods for obtaining employment.

Delaware Board of Nursing Standards of Practice for the Licensed Practical Nurse

The following Standards of Practice for the Licensed Practical Nurse are adopted from the Delaware Code, Title 24, Professions and Occupations, Chapter 19, Nursing.

7.0 Standards of Nursing Practice

Nursing practice encompasses several levels of accountability in order to ensure safe, competent practice. At the foundation of accountability are standards of nursing practice developed by general and specialty nursing professional organizations. A second level of accountability is provided by statutes, rules and regulations promulgated by individual states, based upon each state's nurse practice act which defines nursing practice. Nurses are also accountable to the institution or agency where they are employed through institutional policies and procedures. A final level of accountability resides with nurses' self-determination of those aspects of practice they believe themselves competent to perform.

7.1 Definitions

"Standards of Nursing Practice" are those standards adopted by the Board that interpret the legal definitions of nursing, as well as provide criteria against which violations of the law can be determined. Such standards shall not be assumed the only evidence in civil malpractice litigation, nor shall they be given a different weight than any other evidence.

"Nursing Process" includes assessment, diagnosis, outcome identification, planning, implementation and evaluation.

7.2 Purpose

The purpose of standards is to establish minimal acceptable levels of safe practice for the Registered and **Licensed Practical Nurse**, and to serve as a guide for the Board to evaluate safe and effective nursing practice.

7.2.1 The board will not rule on for what purpose a drug is given.

7.2.2 Standards of nursing practice and position statements developed by general and specialty nursing professional organizations may be used to address scope of practice accountability.

7.2.3 Nursing practice occurs where the patient is located.

7.3 Standards of Practice, Competencies and Responsibilities for the Registered and Licensed Practical Nurse

7.3.1 Registered and **Licensed Practical Nurses** shall:

7.3.1.1 Have knowledge of and function within the statutes and regulations governing nursing.

7.3.1.2 Accept responsibility for competent nursing practice.

- 7.3.1.3 Function as a member of the health team through interdisciplinary and/or interagency consultation and collaboration to provide optimal care, seeking guidance, instruction and supervision as necessary.
- 7.3.1.4 Contribute to the formulation, interpretation, implementation and evaluation of the objectives and policies related to nursing practice within the employment setting.
- 7.3.1.5 Participate in evaluating nurses through peer review.
- 7.3.1.6 Report unsafe nursing practice to the Board and unsafe practice conditions to recognized legal authorities.
- 7.3.1.7 Practice without discrimination as to age, race, religion, sex, sexual orientation, national origin, or disability.
- 7.3.1.8 Respect the dignity and rights of clients regardless of social or economic status, personal attributes or nature of health problems.
- 7.3.1.9 Respect the client's right to privacy by protecting confidentiality unless obligated by law to disclose the information.
- 7.3.1.10 Respect the property of clients, their families and significant others.
- 7.3.1.11 Teach safe practice to other health care workers as appropriate.
- 7.3.1.12 Perform waived and moderately complex laboratory point of care testing after appropriate education, including annual competency demonstration and quality control measures for equipment, which are completed and documented.
- 7.3.1.13 Nurses who perform any special procedures should possess specialized knowledge and competent technical skill in the performance of the procedure, be knowledgeable of the potential complications and adverse reactions which may result from the performance of the procedure, possess the knowledge and skill to recognize adverse reactions, and take appropriate actions.
- 7.4 Standards related to the Registered Nurse.
- 7.4.1 The Registered Nurse shall conduct and document nursing assessments in accordance with the nursing process. The registered nurse shall assess the health status of individuals and groups by:
- 7.4.1.1 Collecting objective and subjective data from observations, examinations, interviews, in person or by electronic communication and written records in an accurate and timely manner. The data include but are not limited to:
- 7.4.1.1.1 Biophysical and emotional status and observed changes;
- 7.4.1.1.2 Growth and development;
- 7.4.1.1.3 Ethno-cultural, spiritual, socio-economic and ecological background;
- 7.4.1.1.4 Family health history;
- 7.4.1.1.5 Information collected by other health team members;
- 7.4.1.1.6 Ability to perform activities of daily living;
- 7.4.1.1.7 Consideration of client's health goals;
- 7.4.1.1.8 Client knowledge and perception about health status and potential, or maintaining health status;
- 7.4.1.1.9 Available and accessible human and material resources;
- 7.4.1.1.10 Patterns of coping and interaction.
- 7.4.1.2 Sorting, selecting, reporting, and recording the data.

7.4.1.3 Analyzing data.

7.4.1.4 Validating, refining and modifying the data by using available resources including interactions with the client, family, significant others, and health team members.

7.4.1.5 Evaluating data.

7.4.2 Registered Nurses shall establish and document nursing diagnoses that serve as the basis for the strategy of care.

7.4.3 Registered Nurses shall develop strategies of care based on the nursing process. This includes, but is not limited to:

7.4.3.1 Prescribing nursing intervention(s).

7.4.3.2 Initiating nursing interventions through giving, assisting and/or delegating care.

7.4.3.3 Identifying priorities in the plan of care.

7.4.3.4 Setting realistic and measurable goals for implementation.

7.4.3.5 Identifying measures to maintain comfort, to support human functions and responses, to maintain an environment conducive to well being, and to provide health teaching and counseling.

7.4.4 Registered Nurses shall participate in the implementation of the strategy of care by:

7.4.4.1 Providing care for clients whose conditions are stabilized or predictable.

7.4.4.2 Providing care for clients whose conditions are critical and/or fluctuating, under the direction and supervision of a recognized licensed authority.

7.4.4.3 Providing an environment conducive to safety and health.

7.4.4.4 Documenting nursing interventions and client outcomes.

7.4.4.5 Communicating nursing interventions and client outcomes to appropriate health team members.

7.4.5 Registered Nurses shall evaluate outcomes, which may include the client, family, significant others and health team members.

7.4.5.1 Evaluation data shall be documented and communicated appropriately;

7.4.5.2 Evaluation data shall be used as a basis for modifying health care strategies including but not limited to reassessing client health status, modifying nursing diagnoses, or prescribing changes in nursing interventions.

7.4.6 Delegation

7.4.6.1 Definitions

“Accountability” - The state of being accountable, answerable, or legally liable for actions and decisions, including supervision.

“Delegation” - Entrusting the performance of selected nursing duties to individuals qualified, competent and legally able to perform such duties while retaining the accountability for such act.

“Supervision” - The guidance by a registered nurse (RN) for the accomplishment of a function or activity. The guidance consists of the activities included in monitoring as well as establishing the initial direction, delegating, setting expectations, directing activities and courses of action, critical watching, overseeing, evaluating, and changing a course of action.

“Unlicensed Assistive Personnel” - Individuals not licensed to perform nursing tasks that are employed to assist in the delivery of client care. The term “unlicensed assistive personnel” does not include members of the client’s immediate family, guardians, or friends; these individuals

may perform incidental care of the sick in private homes without specific authority from a licensed nurse (as established in 24 Del.C. §1921(a)(4) of the Nurse Practice Act).

7.4.6.2 Conditions. The following conditions are relevant to delegation:

7.4.6.2.1 RNs, **not LPNs**, may delegate.

7.4.6.2.2 The RN must be knowledgeable regarding the unlicensed assistive personnel's education and training and have opportunity to periodically verify the individual's ability to perform the specific tasks.

7.4.6.2.3 The RN maintains accountability for determining the appropriateness of all delegated nursing duties and responsibility for the delivery of safe and competent care. The RN is accountable for decisions made and actions taken in the course of that delegation. Unlicensed assistive personnel may not reassign a delegated act.

7.4.6.3 Criteria

7.4.6.3.1 The RN may delegate only tasks that are within the scope of sound professional nursing judgment to delegate. Nursing judgments and actions include decisions made when delegating nursing tasks to others and providing supervision for those activities.

7.4.6.3.2 Determination of appropriate factors include, but are not limited to:

7.4.6.3.2.1 stability of the client's condition

7.4.6.3.2.2 educational background, skill level, or preparation of the individual

7.4.6.3.2.3 nature of the nursing act that meets the following:

7.4.6.3.2.3.1 task is performed frequently in the daily care of a client

7.4.6.3.2.3.2 task is performed according to an established sequence of steps

7.4.6.3.2.3.3 task may be performed with a predictable outcome

7.4.6.3.2.3.4 task does not involve ongoing assessment, interpretation or decision making that cannot be logically separated from the task itself.

7.4.6.3.3 Variables in each service setting include, but are not limited to:

7.4.6.3.3.1 complexity and frequency of care needed by a given patient population

7.4.6.3.3.2 proximity of patients to staff

7.4.6.3.3.3 number and qualifications of staff

7.4.6.3.4 The RN must be readily available in person or by telecommunication.

7.4.6.4 Exclusions

7.4.6.4.1 The following activities require nursing knowledge, judgment, and skill and may not be delegated by the RN to an unlicensed assistive person.

7.4.6.4.2 Physical, psychological, and social assessment which requires professional nursing judgment, intervention, referral, or follow-up;

7.4.6.4.3 Development of nursing diagnoses and/or care goals;

7.4.6.4.4 Formulation of the plan of nursing care and evaluation of the effectiveness of the nursing care provided;

7.4.6.4.5 Specific tasks involved in the implementation of the plan of care which require nursing judgment, skill, or intervention, that include, but are not limited to: performance of sterile invasive procedures involving a wound or anatomical site; nasogastric, newly established gastrostomy and jejunostomy tube feeding; nasogastric, jejunostomy and gastrostomy tube insertion or removal; suprapubic catheter insertion and removal; (phlebotomy is not considered a sterile, invasive procedure);

7.4.6.4.6 Administration of medications, including prescription topical medications; and

7.4.6.4.7 Receiving or transmitting verbal orders.

7.5 Standards of Practice for the Licensed Practical Nurse

7.5.1 Standards related to the Licensed Practical Nurse's contributions to the nursing process.

7.5.1.1 At the direction and under the supervision of a recognized licensed authority, the Licensed Practical Nurse shall contribute to the nursing process and document nursing assessments of individuals and groups by:

7.5.1.1.1 Collecting objective and subjective data from observations, examinations, interview and written records in an accurate and timely manner. The data include but are not limited to:

7.5.1.1.1.1 Biophysical and emotional status and observed changes;

7.5.1.1.1.2 Growth and development;

7.5.1.1.1.3 Ethno-cultural, spiritual, socio-economic, and ecological background;

7.5.1.1.1.4 Family health history;

7.5.1.1.1.5 Information collected by other health team members;

7.5.1.1.1.6 Ability to perform activities of daily living;

7.5.1.1.1.7 Consideration of client's health goals;

7.5.1.1.1.8 Client knowledge and perception about health status and potential, or maintaining health status;

7.5.1.1.1.9 Available and accessible human and material resources;

7.5.1.1.1.10 Patterns of coping and interaction.

7.5.1.1.2 Sorting, selecting, reporting, and recording the data.

7.5.1.1.3 Analyzing data.

7.5.1.1.4 Validating, refining and modifying the data by using available resources including interactions with the client, family, significant others, and health team members.

7.5.1.2 **Licensed Practical Nurses** shall participate in establishing and documenting nursing diagnoses that serve as the basis for the strategy of care.

7.5.1.3 **Licensed Practical Nurses** shall participate in developing strategies of care based on assessment and nursing diagnoses.

7.5.1.3.1 Contributing to setting realistic and measurable goals for implementation.

7.5.1.3.2 Participating in identifying measures to maintain comfort, to support human functions and responses to maintain an environment conducive to well-being, and to provide health teaching and counseling.

7.5.1.3.3 Contributing to setting client priorities.

7.5.1.4 **Licensed Practical Nurses** shall participate in the implementation of the strategy of care by:

7.5.1.4.1 Providing care for clients whose conditions are stabilized or predictable.

7.5.1.4.2 Providing care for clients whose conditions are critical and/or fluctuating, under the directions and supervision of a recognized licensed authority.

7.5.1.4.3 Providing an environment conducive to safety and health.

7.5.1.4.4 Documenting nursing interventions and outcomes.

7.5.1.4.5 Communicating nursing interventions and outcomes to appropriate health team members.

7.5.1.5 **Licensed Practical Nurses** shall contribute to evaluating outcomes through appropriate documentation and communication.

7.6 Dispensing

7.6.1 Definitions

7.6.1.1 "Dispensing" means providing medication according to an order of a practitioner duly licensed to prescribe medication. The term shall include both the repackaging and labeling of medication from bulk to individual doses.

7.6.1.2 "Prescription Label" - a label affixed to every prescription or drug order which contains the following information at a minimum.

7.6.1.2.1 A unique number for that specific drug order.

7.6.1.2.2 The date the drug was dispensed.

7.6.1.2.3 The patient's full name.

7.6.1.2.4 The brand or established name and manufacturer and the strength of the drug to the extent it can be measured.

7.6.1.2.5 The practitioner's directions as found on the prescription order.

7.6.1.2.6 The practitioner's name.

7.6.1.2.7 The initials of the dispensing nurse.

7.6.1.2.8 The name and address of the facility or practitioner from which the drug is dispensed.

7.6.1.2.9 Expiration date.

7.6.1.3 "Standing order" - An order written by the practitioner which authorizes a designated registered nurse or nurses to dispense prescription drugs to his/her patients(s) according to the standards listed below.

7.6.2 Authority to Dispense

7.6.2.1 Registered Nurses may assume the responsibility of dispensing as defined in the Nurse Practice Act.

7.6.2.2 **Licensed Practice Nurses** may assume the responsibility of dispensing as authorized by the Nurse Practice Act and defined in these Regulations, Section 7.6.2.2.1., 7.6.2.2.2, and 7.6.2.2.3

7.6.2.2.1 **Licensed Practical Nurses** may provide to a patient pre-packaged medications in accordance with the order of a practitioner duly licensed to prescribe medication where such medications have been pre-packaged by a person with lawful authority to dispense drugs.

7.6.2.2.2 **Licensed Practical Nurses**, per written order of a physician, dentist, podiatrist, advanced practice nurse, or other practitioner duly licensed to prescribe medication, may add the name of the client to a preprinted label on a pre-packaged medication.

7.6.2.2.3 **Licensed Practical Nurses** in a licensed methadone clinic may apply a preprinted label to a pre-packaged medication.

7.6.3 Standards for Dispensing

7.6.3.1 All licensed nurses engaged in dispensing shall adhere to these standards.

7.6.3.1.1 The medication must be prepackaged by a pharmaceutical company or prepared by a registered pharmacist.

7.6.3.1.2 The nurse shall be responsible for proper drug storage of the medication prior to dispensing.

7.6.3.1.3 The practitioner who originated the prescription or drug order must be on the premises or he/she or their designated coverage shall be available by telephone during the act of dispensing.

7.6.3.1.4 Once a drug has been dispensed it shall not be returned for reuse by another or the same patient in an institutional setting.

7.6.3.1.5 The nurse may not delegate any part of the dispensing function to any other individual who is not licensed to dispense.

7.6.3.1.6 The dispensing nurse must assure compliance to the state generic substitution laws when selecting the product to be dispensed.

7.6.3.1.7 The nurse-dispensed prescription may not be refillable; it requires the authority of the prescriber with each dispensing.

7.6.3.1.8 A usage review process must be established for the medicines dispensed to assure proper patient usage.

7.6.3.1.9 All dispensed drugs must be labeled as defined above and dispensed in proper safety closure containers that meet the standards established by the United States Pharmacopoeia for stability.

7.6.3.1.10 Record keeping must include the maintenance of the original written prescription of drug order for at least three years, allow retrospective review of accountability, and provide an audit trail. All dispensing records must be maintained on site, and available for inspection by authorized agents of the Board of Health, Pharmacy, and Nursing.

7.6.3.1.11 The dispensing nurse shall assume the responsibility of patient counseling of drug effects, side-effects, desired outcome, precautions, proper storage, unique dosing criteria, drug interactions, and other pertinent data, and record evidence of patient education.

7.6.3.1.12 Conformance to paragraphs 6 through 11 are not necessary if the original prescription was dispensed by a pharmacist for that specific patient.

7.7 Intravascular Therapy by Licensed Nurses. Intravascular therapy encompasses several components, some of which require primarily skill proficiency with a minimum of critical judgment. Other aspects of intravascular therapy require skill proficiency and more importantly a high degree of knowledge, critical judgement and decision making to perform the function safely.

7.7.1 Definition of Terms.

7.7.1.1 Intravascular therapy (IV) - is the broad term including the administration of fluids and medications, blood and blood derivatives into an individual's vascular system.

7.7.1.2 Intravascular therapy maintenance - Monitoring of the therapy for changes in patient's condition, appropriate flow rate, equipment function, the hanging of additional fluid containers and the implementation of site care.

7.7.1.3 Intravenous and intra-arterial medications - are drugs administered into an individual's vascular system by any one of the following methods:

7.7.1.3.1 By way of infusion diluted in solution or suspended in fluid and administered over a specified time at a specified rate.

7.7.1.3.2 Through an established intra-vascular needle or catheter (referred to as "IV push").

7.7.1.3.3 By venipuncture carried out for the sole purpose of administering the medication. This method is referred to as direct medication injection (direct IV push).

7.7.1.4 Intravenous fluids - include solutions, vitamins, nutrient preparations, and commercial blood fractions designed to be administered into an individual's vascular system. Whole blood

and blood components, which are administered in the same manner, are considered intravenous fluids in this definition.

7.7.1.5 Subcutaneous Infusion- Continuous infusion or intermittent injection of medication into the layer of fatty tissue between the skin and muscle using a subcutaneous needle.

7.7.1.6 Supervision - a registered nurse, licensed physician or dentist is physically present in the unit where the patient is being provided care, or within immediate electronic/telephone contact.

7.7.1.7 Termination of intravascular therapy - Cessation of the therapy either by withdrawing a needle or catheter from an individual's vascular system or by discontinuing the infusion and maintaining the device as a reservoir.

7.7.1.8 Vascular access - Utilization of an established device or the introduction of a needle or catheter into an individual's vascular system.

7.7.1.9 Vascular system - is composed of all peripheral and central veins and arteries.

7.7.1.10 Venipuncture - Introduction of a needle or catheter into an individual's peripheral vein for the purpose(s) of withdrawing blood or establishing an infusion or administering medications.

7.7.2 Conditions of Performing Intravascular Therapy Procedures by Licensed Nurses

7.7.2.1 Intravascular therapy must be authorized by a written order from a state licensed and authorized prescriber.

7.7.2.2 The performance of any procedures of intravascular therapy by a licensed practical nurse will be done under the supervision of a registered nurse, APRN, or person licensed to practice medicine, surgery, or podiatry.

7.7.2.3 Admixed intravascular solutions documented and instituted by one licensed nurse and subsequently interrupted may be re-instituted by another licensed nurse after confirmation with the state licensed and authorized prescriber's order.

7.7.2.4 Admixed intravascular solutions documented and prepared by one licensed nurse may be initiated or continued by another licensed nurse after confirmation with the state licensed and authorized prescriber's order.

7.7.2.5 Intradermal or topical anesthetics may be used by the RN or **LPN** when initiating vascular access therapy in various situations or settings, provided there is an authorized prescriber's order and organizational policy/procedure to support use of these medications. All RNs and **LPNs** must have documented educational preparation according to the employing agency's policies and procedures. Documented evidence must include both theoretical instruction including anatomy and physiology, pharmacology, nursing management and education of patients and demonstration of clinical proficiency in performance of the task.

7.7.3 Functional Scope of Responsibility for Intravascular Therapy Procedures

7.7.3.1 Registered Nurses bear the responsibility and accountability for their nursing practice under the license granted by the Board of Nursing and are permitted to perform the following:

7.7.3.1.1 Assessment of the patient and the prescribed intravascular therapy before, during and after the therapy is carried out.

7.7.3.1.2 Acceptance and confirmation of intravascular therapy order(s).

7.7.3.1.3 Calculation of medication dosage and infusion rate for intravascular therapy administration.

7.7.3.1.4 Confirmation of medication dosage and infusion rate for intravascular therapy administration.

- 7.7.3.1.5 Addition of prescribed medications in intravascular solution, labeling and documenting appropriately.
- 7.7.3.1.6 Start initial solution or add replacement fluids to an existing infusion as prescribed.
- 7.7.3.1.7 Vascular access for establishing an infusion or administering medications.
- 7.7.3.1.8 Administration of medications by "IV push".
- 7.7.3.1.9 Intravascular therapy maintenance.
- 7.7.3.1.10 Termination of intravascular therapy, including the removal of subclavian and PICC lines.
- 7.7.3.1.11 Access the vascular system for the purpose of the withdrawal of blood and to monitor the patient's condition before, during, and after the withdrawal of blood.
- 7.7.3.2 **Licensed Practical Nurses** bear the responsibility and accountability for their nursing practice under the license granted by the Board of Nursing and are permitted to perform the following for peripheral lines:
 - 7.7.3.2.1 Acceptance and confirmation of intravascular therapy order(s).
 - 7.7.3.2.2 Calculation of medication dosage and infusion rate of intravascular medications prescribed. This does not include titration.
 - 7.7.3.2.3 Confirmation of medication dosage and infusion rate for intravascular therapy administration.
 - 7.7.3.2.4 Addition of medications in intravascular solutions, label and document appropriately.
 - 7.7.3.2.5 Venipuncture with needle device to establish access to the peripheral vascular system.
 - 7.7.3.2.6 Start initial solution or add replacement fluids to an existing infusion as prescribed.
 - 7.7.3.2.7 Intravascular therapy maintenance including the flushing of peripheral lines with Heparin and/or saline solution.
 - 7.7.3.2.8 Termination of peripheral intravascular therapy.
 - 7.7.3.2.9 Performance of venipuncture for the purpose of the withdrawal of blood and to monitor the patient's condition before, during and after the withdrawal of blood.
- 7.7.3.3 The **Licensed Practical Nurse** is permitted to perform the following procedures for central lines:
 - 7.7.3.3.1 Acceptance of intravascular therapy order(s).
 - 7.7.3.3.2 Calculation of medication dosage and infusion rate of intravascular medications prescribed. This does not include titration.
 - 7.7.3.3.3 Confirmation of medication dosage and infusion rate for intravascular therapy administration.
 - 7.7.3.3.4 Addition of medications in intravascular solutions, label and document appropriately.
 - 7.7.3.3.5 Intravascular therapy maintenance, including the flushing of central lines with Heparin and/or saline solution.
 - 7.7.3.3.6 Dressing and tubing changes, including PICC lines.
 - 7.7.3.3.7 Addition of replacement fluids to an existing infusion as prescribed.
- 7.7.3.4 The **Licensed Practical Nurse** is permitted to perform the following procedures for subcutaneous infusions after documented instruction and competency demonstration:
 - 7.7.3.4.1 Accept subcutaneous infusion therapy order(s).

7.7.3.4.2 Insert and remove subcutaneous needle or catheter to initiate/discontinue therapy or rotate sites.

7.7.3.4.3 Confirm medication dosage and infusion rate.

7.7.3.4.4 Calculate and adjust flow rates on subcutaneous infusion including pumps. This does not include titration nor administration of medications via the “push” route.

7.7.3.4.5 Perform dressing and tubing changes.

7.7.3.4.6 Maintain subcutaneous infusion therapy.

7.7.3.4.7 Change the administration set and convert a continuous infusion to an intermittent infusion and vice versa.

7.7.3.4.8 Observe, document, and report on insertion site and signs of complications such as infection, phlebitis, etc.

7.7.4 Special Infusion Therapy Procedures by Registered Nurses

7.7.4.1 Chemotherapy - Only intravascular routes are addressed in these rules. Review of the Oncology Nursing Society’s current guidelines is recommended before the administration of anti-neoplastic agents.

7.7.4.1.1 Definition of Terms

7.7.4.1.1.1 Cancer Chemotherapy - is the broad term including the administration of anti-neoplastic agents into an individual's vascular system.

7.7.4.1.1.2 Anti-neoplastic agents - are those drugs which are administered with the intent to control neoplastic cell growth.

7.7.4.1.2 The Registered Nurse who administers cancer chemotherapy by the intravascular route must have documented educational preparation according to the employing agency's policies and procedures.

7.7.4.1.3 The Registered Nurse must have documented evidence of knowledge and skill in the following:

7.7.4.1.3.1 Pharmacology of anti-neoplastic agents

7.7.4.1.3.2 Principles of drug handling and preparation

7.7.4.1.3.3 Principles of administration

7.7.4.1.3.4 Vascular access

7.7.4.1.3.5 Side effects of chemotherapy on the nurse, patient, and family

7.7.4.2 Central Venous Access Via Peripheral Veins

7.7.4.2.1 Definition of Terms

7.7.4.2.1.1 Central venous access - is that entry into an individual's vascular system via the insertion of a catheter into a peripheral vein threaded through to the superior vena cava with placement confirmed by x-ray.

7.7.4.2.2 The Registered Nurse who performs central venous access via peripheral veins must have documented educational preparation according to the employing agency's policies and procedures.

7.7.4.2.3 Documented evidence must include, but is not limited to, evidence of both theoretical instruction and clinical proficiency in performance of the task.

7.7.4.2.3.1 Theoretical instruction must include, but is not limited to, anatomy and physiology, pharmacology, nursing management, and education of patients as they relate to central venous access via peripheral veins.

7.7.4.2.3.2 A preceptor must supervise the learning experience and must document the Registered Nurse's competency in the performance of the procedure.

7.7.4.2.4 Specially trained PICC nurses may determine the location of the distal tip of a peripherally inserted central catheter by initial or repeat chest radiograph studies prior to administration of the prescribed therapy.

7.7.4.3 Pain Management via Epidural Catheter

7.7.4.3.1 It is within the scope of practice of a Registered Nurse to instill analgesics (opiates)/low dose anesthetics at analgesic levels into an existing catheter under the following conditions/exceptions:

7.7.4.3.1.1 The epidural catheter is in place.

7.7.4.3.1.2 The position of the epidural catheter was verified as correct by a physician at the time of insertion.

7.7.4.3.1.3 Bolus doses and/or continuous infusions, as pre-mixed by anesthesiologists, C.R.N.A.s, or pharmacists, of epidural analgesics/low dose anesthetics at analgesic levels can be administered by the Registered Nurse only after the initial dose has been administered. Changes in medication and/or dosage of the same medication are not defined as the initial dose.

7.7.4.3.1.4 Only analgesics (opiates)/low dose anesthetics at analgesic levels will be administered via this route for acute and chronic pain management.

7.7.4.3.1.5 The Registered Nurse must complete a course that includes, but is not limited to, a) anatomy, physiology, pharmacology, nursing management, assessment, and education of patients as they relate to epidural administration of opiates/low dose anesthetics at analgesic levels; b) a credentialed preceptor must supervise the learning experience and must document the Registered Nurse's clinical competency in the performance of the procedure.

7.7.4.3.1.6 The Registered Nurse may not insert or remove epidural catheters.

7.7.4.4 Vascular Access via the Intraosseous Route

7.7.4.4.1 Definition of Terms

7.7.4.4.1.1 Intraosseous- within the bone marrow.

7.7.4.4.1.2 Intraosseous infusions- a method of obtaining immediate vascular access, especially in children, by percutaneous insertion of an intraosseous needle into the bone marrow cavity of a long bone where substances may be injected or infused and are readily absorbed into the general circulation.

7.7.4.4.2 The Registered Nurse who performs intraosseous access, infusions, or removal must have documented educational preparation according to the employing agency's policies and procedures.

7.7.4.4.3 Documented evidence must include, but is not limited to, evidence of both theoretical instruction and clinical proficiency in performance of the task.

7.7.4.4.3.1 Theoretical instruction must include, but is not limited to, anatomy and physiology, pharmacology, nursing management, and education of patients as they relate to intraosseous access, infusions, or removal.

7.7.4.4.3.2 A preceptor must supervise the learning experience and must document the Registered Nurse's competency in the performance of the procedures.

7.7.4.5 The Registered Nurse may perform the following procedures for subcutaneous infusions after documented instruction and competency demonstration:

7.7.4.5.1 Accept subcutaneous infusion therapy order(s).

7.7.4.5.2 Insert and remove subcutaneous needle or catheter to initiate/discontinue therapy or rotate sites.

7.7.4.5.3 Confirm medication dosage and infusion rate.

7.7.4.5.4 Calculate and adjust flow rates on subcutaneous infusion including pumps, including titration and administration of medications via the “push” route.

7.7.4.5.5 Perform dressing and tubing changes.

7.7.4.5.6 Maintain subcutaneous infusion therapy.

7.7.4.5.7 Change the administration set and convert a continuous infusion to an intermittent infusion and vice versa.

7.7.4.5.8 Assess insertion site for signs of complications, document, and perform appropriate interventions as ordered.

7.7.4.6 Pain Management Via Perineural Route

7.7.4.6.1 It is within the role of the RN to manage care for patients receiving analgesia by catheter techniques by the perineural route of administration to alleviate pain. This does not include the epidural route.

7.7.4.6.2 A RN who has received the proper additional education and training may re-inject medication (bolus dose) following establishment of an appropriate therapeutic range and adjust drug infusion rate, intervene with side effects and complications, replace empty drug reservoirs, refill implanted drug reservoirs, trouble shoot infusion devices, change infusion device batteries, tubings, and dressings, discontinue therapy, and remove catheters in compliance with a licensed healthcare provider’s orders.

7.7.4.6.3 The RN must:

7.7.4.6.3.1 Demonstrate the acquired knowledge of anatomy, physiology, pharmacology, side effects, and complications related to the analgesia technique and medication(s) being administered.

7.7.4.6.3.2 Assess the patient’s total care needs (physiological, emotional) while receiving analgesia

7.7.4.6.3.3 Utilize monitoring modalities, interpret physiological responses, and initiate nursing interventions to ensure optimal patient care.

7.7.4.6.3.4 Anticipate and recognize potential complications of the analgesia technique in relation to the type of catheter, infusion device, and medication(s) being utilized.

7.7.4.6.3.5 Recognize emergency situations and institute nursing interventions in compliance with established institution/healthcare facility policies, procedures, and guidelines and licensed healthcare provider orders.

7.7.4.6.3.6 Demonstrate the cognitive and psychomotor skills necessary for use and removal of the analgesic catheter and infusion device when analgesia is delivered by such a device.

7.7.4.6.3.7 Demonstrate knowledge of the legal ramifications of the management and monitoring of analgesia by catheter techniques, including the RN’s responsibility and liability in the event of untoward reactions or life-threatening complications.

7.7.4.6.3.8 Identify patient/family educational needs and limitations and provide the patient/family with patient-focused information/education regarding the specific catheter analgesia/infusion device using appropriate teaching methods.

7.8 Exclusions of Health Care Acts pursuant to 24 Del.C. §1921(a)(19)

7.8.1 Health care acts that shall not be delegated by a competent individual who does not reside in a medical facility or a facility regulated pursuant to Chapter 11 of Title 16 include the following:

7.8.1.1 original intravenous insertion

7.8.1.2 original suprapubic catheter insertion or removal

7.8.1.3 newly established gastrostomy or jejunostomy tube feeding

7.8.1.4 original nasogastric and gastrostomy tube insertion or removal

7.8.1.5 any jejunostomy tube insertion or removal

7.8.1.6 sterile invasive procedures not normally taught to patients and caregivers by licensed health care professionals

1 DE Reg. 1888 (06/01/98)

6 DE Reg. 1195 (03/01/03)

8 DE Reg. 864 (12/01/04)

8 DE Reg. 1683 (6/01/05)

15 DE Reg. 685 (11/01/11)

15 DE Reg. 1622 (05/01/12)

17 DE Reg. 1095 (05/01/14)

21 DE Reg. 735 (03/01/18)

23 DE Reg. 682 (02/01/20)

NAPNES Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs

These standards and competencies are intended to better define the range of capabilities, responsibilities, rights and relationship to other health care providers for scope and content of practical/vocational nursing education programs. The guidelines will assist:

- _ Educators in development, implementation, and evaluation of practical, vocational nursing curricula.
- _ Students in understanding expectations of their competencies upon completion of the educational program.
- _ Prospective employers in appropriate utilization of the practical/vocational nurse.
- _ Consumers in understanding the scope of practice and level of responsibility of the practical/vocational nurse.

A. Professional Behaviors

Professional behaviors, within the scope of nursing practice for a practical/vocational nurse, are characterized by adherence to standards of care, accountability for one's own actions and behaviors, and use of legal and ethical principles in nursing practice. Professionalism includes a commitment to nursing and a concern for others demonstrated by an attitude of caring. Professionalism also involves participation in lifelong self-development activities to enhance and maintain current knowledge and skills for continuing competency in the practice of nursing for the LP/VN, as well as individual, group, community and societal endeavors to improve health

care. Upon completion of the practical/vocational nursing program the graduate will display the following program outcome:

Demonstrate professional behaviors of accountability and professionalism according to the legal and ethical standards for a competent licensed practical/vocational nurse.

Competencies which demonstrate this outcome has been attained:

1. Comply with the ethical, legal, and regulatory frameworks of nursing and the scope of practice as outlined in the LP/VN nurse practice act of the specific state in which licensed.
2. Utilize educational opportunities for lifelong learning and maintenance of competence.
3. Identify personal capabilities and consider career mobility options.
4. Identify own LP/VN strengths and limitations for the purpose of improving nursing performance.
5. Demonstrate accountability for nursing care provided by self and/or directed to others.
6. Function as an advocate for the health care consumer, maintaining confidentiality as required.
7. Identify the impact of economic, political, social, cultural, spiritual, and demographic forces on the role of the licensed practical/vocational nurse in the delivery of health care.
8. Serve as a positive role model within healthcare settings and the community.
9. Participate as a member of a practical/vocational nursing organization.

B. Communication

Communication is defined as the process by which information is exchanged between individuals verbally, non-verbally and/or in writing or through information technology.

Communication abilities are integral and essential to the nursing process. Those who are included in the nursing process are the licensed practical/vocational nurse and other members of the nursing and healthcare team, client, and significant support person(s). Effective communication demonstrates caring, compassion, and cultural awareness, and is directed toward promoting positive outcomes and establishing a trusting relationship. Upon completion of the practical/vocational nursing program the graduate will display the following program outcome:

Effectively communicate with patients, significant support person(s), and members of the interdisciplinary health care team incorporating interpersonal and therapeutic communication skills.

Competencies which demonstrate this outcome has been attained:

1. Utilize effective communication skills when interacting with clients, significant others, and members of the interdisciplinary health care team.
2. Communicate relevant, accurate, and complete information.
3. Report to appropriate health care personnel and document assessments, interventions, and progress or impediments toward achieving client outcomes.
4. Maintain organizational and client confidentiality.
5. Utilize information technology to support and communicate the planning and provision of client care.
6. Utilize appropriate channels of communication.

C. Assessment

Assessment is the collection and processing of relevant data for the purposes of appraising the client's health status. Assessment provides a holistic view of the client which includes physical, developmental, emotional, psychosocial, cultural, spiritual, and functional status. Assessment involves the collection of information from multiple sources to provide the foundation for

nursing care. Initial assessment provides the baseline for future comparisons in order to individualize client care. Ongoing assessment is required to meet the client's changing needs. Upon completion of the practical/vocational nursing program the graduate will display the following program outcome:

Collect holistic assessment data from multiple sources, communicate the data to appropriate health care providers, and evaluate client responses to interventions.

Competencies which demonstrate this outcome has been attained:

1. Assess data related to basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of the client.
2. Collect data within established protocols and guidelines from various sources including client interviews, observations/measurements, health care team members, family, significant other(s), and review of health records.
3. Assess data related to the client's health status, identify impediments to client progress and evaluate response to interventions.
4. Document data collection, assessment, and communicate findings to appropriate member/s of the healthcare team.

D. Planning

Planning encompasses the collection of health status information, the use of multiple methods to access information, and the analysis and integration of knowledge and information to formulate nursing care plans and care actions. The nursing care plan provides direction for individualized care, and assures the delivery of accurate, safe care through a definitive pathway that promotes the clients and support person's(s') progress toward positive outcomes.

Upon completion of the practical/vocational nursing program the graduate will display the following program outcome:

Collaborate with the registered nurse or other members' of the health care team to organize and incorporate assessment data to plan/revise patient care and actions based on established nursing diagnoses, nursing protocols, and assessment and evaluation data.

Competencies which demonstrate this outcome has been attained:

1. Utilize knowledge of normal values to identify deviation in health status to plan care.
2. Contribute to formulation of a nursing care plan for clients with non-complex conditions and in a stable state, in consultation with the registered nurse and as appropriate in collaboration with the client or support person(s) as well as members of the interdisciplinary health care team using established nursing diagnoses and nursing protocols.
3. Prioritize nursing care needs of clients.
4. Assist in the review and revision of nursing care plans with the registered nurse to meet the changing needs of clients.
5. Modify client care as indicated by the evaluation of stated outcomes.
6. Provide information to client about aspects of the care plan within the LP/VN scope of practice
7. Refer client as appropriate to other members of the health care team about care outside the scope of practice of the LP/VN.

E. Caring Interventions

Caring interventions are those nursing behaviors and actions that assist clients and significant others in meeting their needs and the identified outcomes of the plan of care. These interventions are based on knowledge of the natural sciences, behavioral sciences, and past nursing experiences. Caring is the “being with” and “doing for” that assists clients to achieve the desired outcomes. Caring behaviors are nurturing, protective, compassionate, and person-centered. Caring creates an environment of hope and trust where client choices related to cultural, religious, and spiritual values, beliefs, and lifestyles are respected.

Upon completion of the practical/vocational nursing program the graduate will display the following program outcome:

Demonstrate a caring and empathic approach to the safe, therapeutic, and individualized care of each client.

Competencies which demonstrate this outcome has been attained:

1. Provide and promote the client’s dignity.
2. Identify and honor the emotional, cultural, religious, and spiritual influences on the client’s health.
3. Demonstrate caring behaviors toward the client and significant support person(s).
4. Provide competent, safe, therapeutic and individualized nursing care in a variety of settings.
5. Provide a safe physical and psychosocial environment for the client and significant other(s).
6. Implement the prescribed care regimen within the legal, ethical, and regulatory framework of practical / vocational nursing practice.
7. Assist the client and significant support person(s) to cope with and adapt to stressful events and changes in health status.
8. Assist the client and significant other(s) to achieve optimum comfort and functioning.
9. Instruct client regarding individualized health needs in keeping with the licensed practical/vocational nurse’s knowledge, competence, and scope of practice.
10. Recognize client’s right to access information and refer requests to appropriate person(s).
11. Act in an advocacy role to protect client rights.

F. Managing

Managing care is the effective use of human, physical, financial, and technological resources to achieve the client identified outcomes while supporting organizational outcomes. The LP/VN manages care through the processes of planning, organizing and directing.

Upon completion of the practical/vocational nursing program, the graduate will display the following program outcome:

Implement patient care, at the direction of a registered nurse, licensed physician or dentist through performance of nursing interventions or directing aspects of care, as appropriate, to unlicensed assistive personnel (UAP).

Competencies which demonstrate this outcome has been attained:

1. Assist in the coordination and implementation of an individualized plan of care for clients and significant support person(s)
2. Direct aspects of client care to qualified UAPs commensurate with abilities and level of preparation and consistent with the state’s legal and regulatory framework for the scope of practice for the LP/VN.
3. Supervise and evaluate the activities of UAPs and other personnel as appropriate within the state’s legal, and regulatory framework for the scope of practice for the LP/VN as well as facility policy.

4. Maintain accountability for outcomes of care directed to qualified UAPs.
5. Organize nursing activities in a meaningful and cost effective manner when providing nursing care for individuals or groups.
6. Assist the client and significant support person(s) to access available resources and services.
7. Demonstrate competence with current technologies.
8. Function within the defined scope of practice for the LP/VN in the health care delivery system at the direction of a registered nurse, licensed physician, or dentist.

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National Federation of Licensed Practical Nurses

Nursing Practice Standards for the Licensed Practical/ Vocational Nurse

"Nursing Practice Standards" is one of the ways that NFLPN meets the objective of its bylaws to address principles and ethics and also to meet another Article II objective, "To interpret the standards of practical (vocational) nursing."

In recent years, LPNs and LVNs have practiced in a changing environment. As LPNs and LVNs practice in expanding roles in the health care system, *"Nursing Practice Standards"* is essential reading for LPNs, LVNs, PN and VN students and their educators, and all who practice with LPNs and LVNs.

PREFACE

The Standards were developed and adopted by NFLPN to provide a basic model whereby the quality of health service and nursing service and nursing care given by LP/VNs may be measured and evaluated.

These nursing practice standards are applicable in any practice setting. The degree to which individual standards are applied will vary according to the individual needs of the patient, the type of health care agency or

services and the community resources.

The scope of licensed practical nursing has extended into specialized nursing services. Therefore, specialized fields of nursing are included in this document.

THE CODE FOR LICENSED PRACTICAL/VOCATIONAL NURSES

The Code, adopted by NFLPN in 1961 and revised in 1979, provides a motivation for establishing, maintaining and elevating professional standards. Each LP/VN, upon entering the profession, inherits the responsibility to adhere to the standards of ethical practice and conduct as set forth in this Code.

1. Know the scope of maximum utilization of the LP/VN as specified by the nursing practice act and function within this scope.
2. Safeguard the confidential information acquired from any source about the patient.
3. Provide health care to all patients regardless of race, creed, cultural background, disease, or lifestyle.

4. Uphold the highest standards in personal appearance, language, dress, and demeanor.

5. Stay informed about issues affecting the practice of nursing and delivery of health care and, where appropriate, participate in government and policy decisions.

6. Accept the responsibility for safe nursing by keeping oneself mentally and physically fit and educationally prepared to practice.

7. Accept responsibility for membership in NFLPN and participate in its efforts to maintain the established standards of nursing practice and employment policies which lead to quality patient care.

INTRODUCTORY STATEMENT

Definition

Practical/Vocational nursing means the performance for compensation of authorized acts of nursing which utilize specialized knowledge and skills and which meet the health needs of people in a variety of settings under the direction of qualified health professionals.

Scope

Licensed Practical/Vocational nurses represent the established entry into the nursing profession and include specialized fields of nursing practice.

Opportunities exist for practicing in a milieu where different professions unite their particular skills in a team effort: to preserve or improve an individual patient's functioning and to protect health and safety of patients.

Opportunities also exist for career advancement within the profession through academic education and for lateral expansion of knowledge and expertise through both academic/continuing education and certification.

STANDARDS

Education

The Licensed Practical/Vocational Nurse

1. Shall complete a formal education program in practical nursing approved by the appropriate nursing authority in a state.
2. Shall successfully pass the National Council Licensure Examination for Practical Nurses.
3. Shall participate in initial orientation within the employing institution.

Legal/Ethical Status

The Licensed Practical/Vocational Nurse

1. Shall hold a current license to practice nursing as an LP/VN in accordance with the law of the state wherein employed.
2. Shall know the scope of nursing practice authorized by the Nursing

Practice Act in the state wherein employed.

3. Shall have a personal commitment to fulfill the legal responsibilities inherent in good nursing practice.
4. Shall take responsible actions in situations wherein there is unprofessional conduct by a peer or other health care provider.
5. Shall recognize and have a commitment to meet the ethical and moral obligations of the practice of nursing.
6. Shall not accept or perform professional responsibilities which the individual knows (s)he is not competent to perform.

Practice

The Licensed Practical/Vocational Nurse

1. Shall accept assigned responsibilities as an accountable member of the health care team.
2. Shall function within the limits of educational preparation and experience as related to the assigned duties.
3. Shall function with other members of the health care team in promoting and maintaining health, preventing disease and disability, caring for and rehabilitating individuals who are experiencing an altered health state, and contributing to the ultimate quality of life until death.
4. Shall know and utilize the nursing process in planning, implementing, and evaluating health services and nursing care

for the individual patient or group.

a. Planning: The planning of nursing includes:

- 1) assessment/data collection of health status of the individual patient, the family and community groups
- 2) reporting information gained from assessment/data collection
- 3) the identification of health goals.

b. Implementation: The plan for nursing care is put into practice to achieve the stated goals and includes:

- 1) observing, recording and reporting significant changes which require intervention or different goals
- 2) applying nursing knowledge and skills to promote and maintain health, to prevent disease and disability and to optimize functional capabilities of an individual patient
- 3) assisting the patient and family with activities of daily living and encouraging self-care as appropriate
- 4) carrying out therapeutic regimens and protocols prescribed by personnel pursuant to authorized state law.

c. Evaluations: The plan for nursing care and its implementations are evaluated to measure the progress toward the stated goals and will include appropriate person and/or groups to determine:

- 1) the relevancy of current goals in relation to the progress of the individual patient.
- 2) the involvement of the recipients of care in the evaluation process.

3) the quality of the nursing action in the implementation of the plan.

4) a re-ordering of priorities or new goal setting in the care plan.

5. Shall participate in peer review and other evaluation processes.

6. Shall participate in the development of policies concerning the health and nursing needs of society and in the roles and functions of the LP/VN.

Continuing Education

The Licensed Practical/Vocational Nurse

1. Shall be responsible for maintaining the highest possible level of professional competence at all times.

2. Shall periodically reassess career goals and select continuing education activities which will help to achieve these goals.

3. Shall take advantage of continuing education and certification opportunities which will lead to personal growth and professional development.

4. Shall seek and participate in continuing education activities which are approved for credit by appropriate organizations,

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such as the NFLPN.

Specialized Nursing Practice

The Licensed Practical/Vocational Nurse

1. Shall have had at least one year's experience in nursing at the staff level.

2. Shall present personal qualifications that are indicative of potential abilities for practice in the chosen specialized nursing area.

3. Shall present evidence of completion of a program or course that is approved by an appropriate agency to provide the knowledge and skills necessary for effective nursing services in the specialized field.

4. Shall meet all of the standards of practice as set forth in this document.

GLOSSARY

Authorized (acts of Nursing)

Those nursing activities made legal through State Nurse Practice Acts.

Lateral Expansion of Knowledge

An extension of the basic core of information

learned in the school of practical nursing.

Peer Review

A formal evaluation of performance on the job by other LP/VNs.

Specialized Nursing Practice

A restricted field of nursing in which a person is particularly skilled and has specific knowledge.

Therapeutic Regimens

Regulated plans designed to bring about effective treatment of disease.

Career Advancement

A change of career goal.

LP/VN

A combined abbreviation for Licensed Practical Nurse and Licensed Vocational Nurse. The LVN is title used in California and Texas for the nurses who are called LPNs in other states.

Milieu

One's environment and surroundings.

Protocols

Courses of treatment which include specific steps to be performed in a stated order.

Appendix A

Grading Rubric for ATI Content Mastery Series

Practice Assessment	
Complete Practice Assessment A <i>Remediation:</i> <ul style="list-style-type: none"> • Focused activity will be assigned by instructor 	Complete Practice Assessment B <i>Remediation:</i> <ul style="list-style-type: none"> • Focused activity will be assigned by instructor



Standardized Proctored Assessment			
Level 3	Level 2	Level 1	Below Level 1
<i>Remediation:</i> <ul style="list-style-type: none"> • Instructor-defined 	<i>Remediation:</i> <ul style="list-style-type: none"> • Instructor-defined. 	<i>Remediation:</i> <ul style="list-style-type: none"> • Instructor-defined 	<i>Remediation:</i> <ul style="list-style-type: none"> • Instructor-defined
Proctored Assessment Retake*			
No Retake (optional)	No Retake (optional)	Retake required	Retake required

ATI score for each course is 15% of the total grade and is based on work completion
and performance on proctored exam.

Comprehensive Predictor | Grading Rubric

Practice Assessment	
Practice assessment A Remediation: <ul style="list-style-type: none"> Focused activity will be assigned by instructor 	Practice assessment B Remediation: <ul style="list-style-type: none"> Focused activity will be assigned by instructor



Standardized Proctored Assessment			
95% or above Passing predictability	90% or above Passing predictability	85% or above Passing predictability	84% or below Passing predictability
Remediation: <ul style="list-style-type: none"> Instructor-defined 	Remediation: <ul style="list-style-type: none"> Instructor-defined 	Remediation: <ul style="list-style-type: none"> Instructor-defined 	Remediation: <ul style="list-style-type: none"> Instructor-defined
Proctored Assessment Retake (approximately 7-10 days following initial Proctored Assessment)			
No Retake (optional)	No Retake (optional)	Retake recommended	Retake recommended



Comprehensive Predictor Exam



Virtual ATI



Green light



NCLEX-PN

Appendix B

BULLYING, CYBERBULLYING, HARASSMENT OR INTIMIDATION REPORTING FORM

Directions: Bullying, cyberbullying, harassment, or intimidation are serious behaviors and will not be tolerated. This is a form to report alleged bullying, cyberbullying, harassment, or intimidation that occurred on school property; at a school-sponsored activity or event off school property; or at any clinical site. If you are a student victim, or a close adult relative of a student victim, or a faculty or staff member and wish to report an incident of alleged bullying, cyberbullying, harassment, or intimidation, complete this form and return it to the Director, POLYTECH Adult Education Practical Nursing Program or an Adult Education Administrator.

Bullying, cyberbullying, harassment, or intimidation means intentional conduct, including verbal, physical, or written conduct, or an intentional electronic communication, that: (1) creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, or performance, or with a student's physical or psychological well-being and is: motivated by an actual or a perceived personal characteristic including race, national origin, marital status, sex, sexual orientation, gender identity, religion, ancestry, physical attribute, socioeconomic status, familial status, or physical or mental ability or disability; or threatening or seriously intimidating; and (2) occurs on school property, at a school activity or event off school property; or at any clinical site. Electronic communication means a communication transmitted by means of an electronic device, including but not limited to, a telephone, cellular phone, computer, or pager.

Today's date: / /
 Day Month Year

Name of person reporting incident: _____

Telephone number:

E-mail:

Place an **X** in the appropriate box: Student Student (Witness/Bystander) Adult relative

1. Name of student victim: _____
(Please print)

2. Age of student: _____

3. Name of alleged offender(s): (Please print)

3. On what date(s) did the incident happen?
_____/_____/_____
_____/_____/_____
_____/_____/_____

4. Place an **X** next to the statement(s) that best describes what happened. (choose all that apply)

- Any bullying, cyberbullying, harassment, or intimidation that involves physical aggression
- Getting another person to hit or harm the student
- Teasing, name-calling, making critical remarks, or threatening, in person or by other means
- Demeaning and making jokes about the victim
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting
- Spreading harmful rumors or gossip
- Electronic Communication (specify)
- Other (specify)

5. Where did the incident happen? (choose all that apply)

- On school property
- At a school-sponsored activity or event off school property
- At a clinical site:
specify _____

6. What did the alleged offender(s) say or do?

(Attach a separate sheet if necessary)

7. Why did the bullying, cyberbullying, harassment or intimidation occur?

(Attach a separate sheet if necessary)

8. Did a physical injury result from this incident? Place an **X** next to one of the following:

- No
- Yes, but it did not require medical attention
- Yes, and it required medical attention

9. Was the student victim absent from school as a result of the incident? Yes No

10. Is there any additional information you would like to provide?

(Attach a separate sheet if necessary)

Signature:

Date:

Appendix C

Substance Abuse Policy and Procedure

Health and safety concerns dictate that nurses and nursing students must conduct health care and educational activities fully in control of their manual dexterity and skills, mental faculties, and judgment. The presence or use of drugs, marijuana or alcohol, lawful or otherwise, which interferes with the judgment, cognition or motor coordination of nursing students in a health care setting or classroom, poses an unacceptable risk for patients, colleagues, POLYTECH Adult Education Practical Nursing Program (PAEPNP), and affiliating clinical agencies. The nursing program recognizes its responsibility to endeavor to provide a safe, conducive, academic environment for students and to cooperate with clinical agencies in providing for the safe and effective care of their patients.

Drug screens are required for admission to the nursing program. If an applicant is found to have a positive drug test result, they will not be considered for admission.

For students enrolled in the program, drug screens are required before participation at some clinical sites. If the student's screen result is positive, the student shall meet with the Coordinator of the program and/or one of the other administrators of the Adult Education Division. If the medication in question is a prescription medication that the student is on, the student must present a copy of the prescription or the actual pharmacy-prepared medication with appropriate label within 24 hours, along with a written, signed statement as to why the test result is positive. Student must also provide a doctor's note stating they are safe to practice if taking the medication(s) as prescribed. Student must be able to perform to the level of expectation for all students. If, despite this, they are prohibited from attending the clinical site(s), the student must withdraw from the program.

If a student tests positive for one or more *illicit* drugs in an initial drug screen and the student affirms illicit drug use, the student will be dismissed from the program. If the student denies having used an illicit drug, the student will be given the option of re-testing at his/her expense within the 24 hours following notification – the student must provide proof of the date and time of the drug screen re-test to the Program Coordinator. HOWEVER, A STUDENT WILL NOT BE ALLOWED TO PARTICIPATE IN CLINICALS AT ANY TIME A DRUG SCREEN RESULT IS POSITIVE. If the second screen is positive, the student must withdraw from the program. If the second (re-test) screen is negative, the student will be allowed to continue in the nursing program, but the student will be required to have at least one random drug screen at his/her own expense during the time he/she continues in the nursing program and will continue to be monitored for signs of impairment. If this random drug screen is positive, the student must withdraw from the program, and he/she will not be eligible for readmission to the program in the future.

Student failure to submit to a drug screen, attempting to tamper with, contaminate, or switch a sample will result in the student not meeting program requirements, therefore, necessitating dismissal from the program.

If a student appears to be chemically impaired at any time while participating in clinicals, lab or the classroom, the Coordinator of the program or an administrator of POLYTECH Adult Education must be notified immediately and the behavior indicating that a student may be

under the influence of drugs or alcohol must be validated and documented by two professional persons (faculty, nurses, physicians, etc.). Suspect behaviors include, but are not limited to:

- ✓ Observable phenomena, such as direct observation of drug use and/or physical symptoms or manifestations of being under the influence of a drug, alcohol or marijuana
- ✓ Erratic behavior, slurred speech, odor of alcohol on the breath, staggered gait, decreased motor coordination, flushed face, dilated/pinpoint pupils, wide mood swings, or deterioration of work or academic performance
- ✓ Substance abuse-related conviction by a court, or being found guilty of a substance abuse-related offense in another administrative or legal proceeding

Any nursing student who demonstrates behaviors reasonably suspected to be related to substance abuse will be required to submit to drug testing immediately, at his/her own expense, and to have a report sent to the Coordinator of the program as soon as possible (within 24 hours). Transportation of the student to home or a testing site must be arranged to ensure their safety. If the student insists on leaving the facility unattended, (s)he will be asked to sign a waiver stating it is against the PAEPNP policy and is an unsafe action. The person will not participate in any school activities until the issue is resolved. If the drug screen is negative the fact will be noted in the student's record. The preliminary investigation will cease and the student will be released to return to the course or clinical experience without penalty. If the drug screen is positive for any illicit drugs, the student will be dismissed from the program.

**Student's Consent to Drug/Alcohol Testing and
Student's Consent to Release Test Results to
POLYTECH Adult Education Practical Nursing Program (PAEPNP)**

I, _____, having read the Substance Abuse and Drug/Alcohol Testing Policy, understand that as a precondition to entering the clinical component of the program and participating in any clinical experience at an affiliating clinical agency that requires pre-placement drug testing, I am subject to the PAEPNP's policies and those of the affiliating clinical agencies, including but not limited to any requirement to submit to pre-clinical placement drug testing, random drug testing, or drug testing when there is reasonable suspicion to believe that I may be impaired or engaged in substance abuse as defined by the applicable policies. I understand that the cost of any drug testing required by any affiliating clinical agency with which I may be placed shall be borne by me. By my signature below, I hereby give my complete and voluntary consent to submit to any such drug test(s) at a designated laboratory or other location as required by the PAEPNP and/or any affiliating clinical agency at which I am placed for nursing school requirements.

I understand that a positive drug test or other violation of the PAEPNP Substance Abuse and Drug/Alcohol Testing Policy, or that of any affiliating clinical agency, will result in disciplinary action, up to and including dismissal from the program, and/or other potential consequences as more fully explained in the applicable policies.

I further understand that the affiliating clinical agency and PAEPNP have a legitimate need to receive the results of my drug tests performed in accordance with the applicable policies. I give my consent to, and hereby authorize any drug testing facility and its physicians, employees, and representatives (collectively hereinafter referred to as "drug testing entity"), that conducted drug testing pursuant to the drug testing policies of the affiliating clinical agency or PAEPNP, and that has control over any documents, records, or other information pertaining to any drug testing of me, to furnish originals or copies of any such documents, records, or other information to the affiliating clinical agency requesting the test and/or to the PAEPNP and/or its authorized officers, employees and representatives. I further consent to and hereby authorize any drug testing entity to answer the questions and inquiries of the PAENP concerning me and disclose to its authorized officers, employees and representatives whatever documents, records, and other information, including, without limitation, drug testing results, medical records, medical reports, analyses, questionnaires, and other materials which may have been made or prepared pursuant to or in connection with my drug test(s).

I waive, release, and discharge forever the drug testing entity that conducted drug testing pursuant to the applicable policies of the PAEPNP, or that of any affiliating clinical agency, and every other person, firm and institution (including without limitation the PAEPNP and its affiliated entities) which shall comply in good faith with this authorization and consent, from any and all liability or claims of whatsoever kind and nature, known or unknown, arising out of or relating to the drug testing, disclosing, inspection, releasing and furnishing of such documents, records, or other information.

Student's printed name

Student's signature

Date _____

This form will be maintained by the nursing program and will be disclosed to appropriate clinical agencies upon their request.

Report of Reasonable Suspicion of Drug/Alcohol Use

To be completed by the faculty member supervising the nursing student to be tested.

1. Name of student suspected of substance abuse as defined in policy.

2. Date, time, and location of incident.

3. Reasons why you suspect the student of substance abuse. (Be as specific as possible, including times and dates when incidents occurred or unusual behavior was observed, the identity of any particular substance suspected of abuse, if known, and the names and whereabouts of those witnessing the incidents/behavior.) [Staple additional comments/observations to this document].

Note: Some types of information that should be documented if observed or known includes: speech (normal, incoherent, confused, change in speech, slurred, rambling, shouting, using profanity, slow); coordination (normal, swaying, staggering, lack of coordination, grasping for support); performance (unfair practices, unsatisfactory work); alertness (change in alertness, sleepy, confused); demeanor (change in personality, fighting, excited, combative, aggressive, violent, argumentative, indifferent, threatening, antagonistic); eyes (bloodshot, dilated); clothing (dirty, disheveled); odor of alcohol on breath); other observed actions or behaviors; unexplained absences or tardiness.

4. Did the student admit to use of drugs/alcohol? Yes ___ No ___

Comments:

5. Was student found using or in possession of any illicit drugs/alcohol? Yes ___ No ___

6. Have any other students or personnel witnessed or complained of the student's behavior? If so, please provide a list of witnesses to the behavior.

7. Based on the information above, it is my opinion that there is reasonable suspicion to believe that this student has engaged in substance abuse as defined in the POLYTECH Adult Education Practical Nursing Program Substance Abuse & Drug/Alcohol Testing Policy:

Signature of Faculty Member Approving Drug Test

Date/time

Printed Name of Faculty Member: _____ Title: _____

2nd Faculty Member witnessing suspect behavior of student: _____

Title: _____

The original of this form should be given to the Coordinator, POLYTECH Adult Education Practical Nursing Program for inclusion in the student's confidential records. It may be disclosed on a "need to know" basis to clinical agencies and/or testing facilities.

Drug Screen Rubric

Admission Drug Screen	Screening Result	Student/Applicant	Faculty/Administration	Notes
Admission to program/initial clinical rotation	Positive for illicit drug	Not eligible for admission	Applicant to be notified of drug test results/reason for disqualification	Applicant eligible to re-apply with documentation of successful rehabilitation. May be subjected to random drug screening
Admission to program/initial clinical rotation	Positive for prescribed medication	Submit supportive documentation, physician notes	May weigh related documentation in determining eligibility for admission to program	Faculty may need to query clinical sites on whether medication would disqualify applicant from clinical
Routine Drug Screen	Screening Result	Student/Applicant	Faculty/Administration	Notes
Routine, during program: Pre-Rotation: completed as requested by clinical facility	Positive for illicit drug, acknowledged	Dismissal from program		
	Positive for illicit drug, disputed	Withheld from further rotations. Must re-test within 24 hours at student expense and submit results	For <i>Positive</i> screen: Student dismissed from program. For <i>Negative</i> screen: Student permitted to continue. Follow up random screen at student expense and faculty direction is required	Any follow up drug screen with a positive result for illicit drug(s) will result in student dismissal from the program
	Positive for prescribed medication	Withheld from further rotations. Submit supportive documentation, physician notes	May weigh related documentation in determining eligibility to continue in program	Failure to maintain eligibility for clinical site participation will result in dismissal from program

Reasonable Suspicion	Screening Result	Student/Applicant	Faculty/Administration	Notes
Reasonable suspicion by Instructor, Clinical Staff, of student being chemically impaired while in the clinical setting	Positive for illicit drug	Dismissal from program	Adult Ed Admin notification required. 2 professional persons required to validate suspicion prior to screening	Screening done immediately, at expense of student. Faculty must ensure safety of student; arrange for transportation or obtain signed waiver from student
Reasonable suspicion of chemical impairment by Instructor, Clinical Staff	Drug screen is refused	Dismissal from program		
Reasonable suspicion of chemical impairment by Instructor, Clinical Staff	Negative for illicit drug	Student allowed to continue without penalty		
Reasonable suspicion of chemical impairment by Instructor, Clinical Staff	Positive for prescribed medication.	Withheld from further rotations. Submit supportive documentation, physician notes	May weigh related documentation and other relevant factors in determining eligibility to continue in program	Failure to maintain eligibility for clinical site participation will result in dismissal from program

Definition: Prescribed Medication- medication lawfully and therapeutically utilized under the direction of a licensed health care provider.

Tips for Success

Time Management:

- ✓ Create a realistic schedule that balances school, work and home commitments.
- ✓ Set deadlines and plan weeks ahead of time.
- ✓ Take advantage of “waiting” time. (for example: review notes between classes and read during lunch)
- ✓ Schedule high priority blocks of time first. (for example: class and work)
- ✓ Allow for flexibility—unexpected events cannot always be avoided.

Study Skills:

- ✓ Keep your mind clear. Concentrate on one task at a time.
- ✓ Take a 10-minute break for each hour of studying.
- ✓ Organize reading and note taking; rewrite and study class notes.
- ✓ Allow ample time to study for exams; avoid “cramming.”
- ✓ Dedicate your best time of day to studying.

Study Environment:

- ✓ Find a quiet place to study.
- ✓ Avoid clutter; a cluttered space can contribute to lost study time.
- ✓ Have more than one place identified in which you can study.

Success in your Class:

- ✓ Attend every class; ask questions.
- ✓ Get to know your instructor.
- ✓ Get to know your fellow students.
- ✓ Stay current with the reading and class assignments.
- ✓ Reread textbook assignments and lecture notes.

Test Taking Skills:

- ✓ Get enough sleep the night before the test.
- ✓ Don’t take a test on an empty stomach.
- ✓ Do something relaxing prior to taking a test. Avoid cramming.
- ✓ Choose a seat where you will minimize distractions.
- ✓ Quickly look over the test and get an overall feel for the questions on the test. Begin the test, reading each question slowly and carefully. Underline key words and phrases.
- ✓ Answer unknown multiple choice questions by process of elimination.

After the test is over:

- ✓ When you receive your graded exam back, make sure you understand why your answers are right or wrong.
- ✓ Determine how to improve your study habits for better performance in the future.
- ✓ Discuss your performance on the exam with your instructor.

9/21/2020

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF HANDBOOK

I, _____, have received and read the Practical Nursing Student Handbook. I understand all policies, requirements and expectations contained within the handbook.

Print Name

My signature signifies my agreement to adhere to the written policies, requirements and expectations and I fully understand that ***not*** doing so may result in my dismissal from the program.

Signature

Date

