

**The University of West Alabama
Division of Nursing
Livingston, Alabama**

Accredited by:

**The National League for Nursing Accrediting Commission
3343 Peachtree Road, NE
Suite 500
Atlanta, GA 30326**

and

Approved by:

**The Alabama Board of Nursing
RSA Plaza Suite 250
770 Washington Avenue
P.O. Box 303900
Montgomery, AL 36130**

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THE UNIVERSITY OF WEST ALABAMA

IRA D. PRUITT DIVISION OF NURSING

PHILOSOPHY

The Ira D. Pruitt Division of Nursing accepts and functions within the mission, purpose, and expected outcomes of the University of West Alabama. The philosophy of the Division of Nursing guides the program of study. The philosophy articulates the faculty's beliefs about the concepts of patient, health, nursing, environment, learner, and nursing education.

Patient

Patients consist of diverse individuals, families, and groups of people who are integrated biopsychosocial cultural beings in constant interaction with the total environment. Patients gradually change and develop in predictable patterns as they interact within the environment to meet physiological and psychosocial needs. Through utilization of adaptive processes, patients respond to constant change caused by stressors to maintain a state of homeostasis or optimum wellness.

Health

Health is a dynamic process, which occurs on a continuum from optimal wellness to illness. If adaptive processes become ineffective in maintaining homeostasis, then illness ensues.

Nursing

Nursing is a therapeutic and caring discipline that encompasses cognitive, affective, and psychomotor skills guided by scientific principles, nursing research, knowledge from natural and social sciences, and the established regulatory standards. Within a variety of roles and varied health care settings, nurses collaborate and interact with patients, families, and members of the health care team to provide high quality, effective care in promoting adaptation to illness and life-threatening wellness stressors.

Environment

The environment is all internal and external conditions that affect the patient and is essential to health. It influences the growth, development, and behavior of the patient and is integral to

adaptation to stress. The nurse interacts with patients to maintain and/or modify the environment to support optimal wellness.

Learner

Learners are unique individuals from diverse backgrounds who are in the process of continuous discovery that influences their cognitive, affective, and psychomotor abilities.

Nursing Education

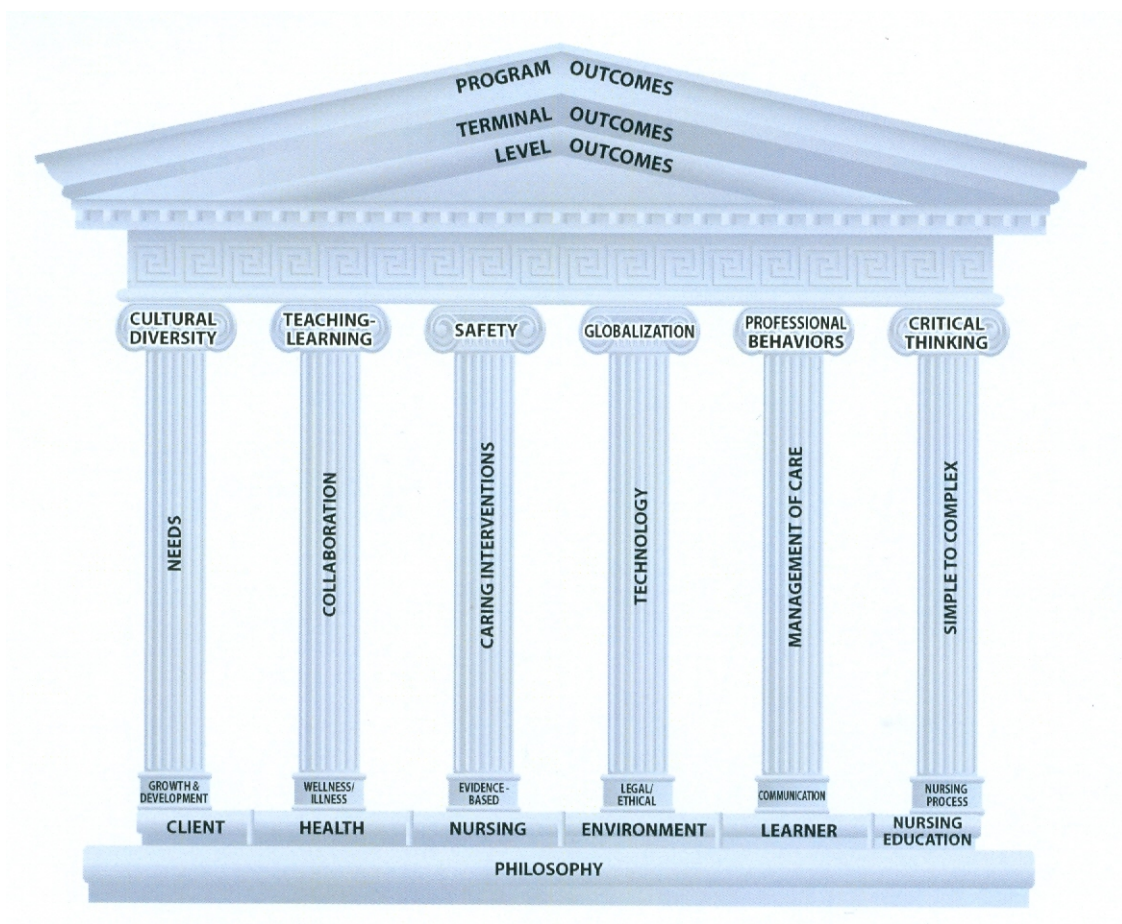
Nursing education is a planned, systematic direction towards development of the learner's cognitive, psychomotor, and communication skills relevant to knowledge and values of the nursing profession. Nursing education utilizes realistic measurable goals and outcomes to assure that the graduate possesses the necessary qualifications for entry into nursing practice. The curriculum fosters utilization of the nursing process as the foundation for development of sound judgment, effective critical thinking, clinical skills, and respect for ideas of others necessary to meet the wellness needs of patients.

The associate degree faculty is committed to promoting excellence in nursing education. The faculty is accountable for the educational process and dedicated to the preparation of the graduate as provider of care, manager of care, and collaborative member of a dynamic health care system. The faculty believes that learning is a continuous process to fulfill a quest for a philosophy of life and self-fulfillment.

Program of Study: Conceptual/Organizing Framework

The organizational framework of the curriculum provides a rationale for the program of study in nursing and serves as a blueprint for the course content. Key concepts derived from faculty beliefs and established standards of practice underpin the curriculum framework and are interwoven throughout the program of study, outcomes, and course objectives. These concepts include roles of the associate degree nurse, the nursing process, evidence-based practice, clinical decision making, patient needs, caring interventions, professional behaviors, growth and development, communication, interpersonal skills, teaching and learning process, collaboration, technology, cultural diversity, management of care, and self learning. Integration of faculty beliefs, established practice standards and key concepts culminate in a curriculum process that emphasizes assimilation of knowledge, skills, personal integrity, active learning, values of the individual, communities of interest and profession of nursing. To this end, the program of study endeavors to promote innovative teaching, collaborative learning, mutual respect, empowerment and professional development in an environment that fosters excellence.

**The University of West Alabama
Ira D. Pruitt Division of Nursing
Conceptual/Organizing Framework**



The University of West Alabama
Ira D. Pruitt Division of Nursing
Mission Statement

The mission of the Ira D. Pruitt Division of Nursing is to provide a quality educational program which prepares competent, caring and culturally sensitive graduates who have the knowledge and ability to meet the diverse and changing health care needs of a global society. The Division of Nursing strives to fulfill the mission by valuing the development of independent thinking, respecting the ideas of others, promoting the development of personal integrity and character as well as the pursuit of knowledge.

THE UNIVERSITY OF WEST ALABAMA

IRA D. PRUITT DIVISION OF NURSING

Level I Learner Outcomes

Upon completion of Level I, the learner should have the knowledge, skills, and values to

1. Function as a provider of care for a patient experiencing common, recurrent wellness stressors.
2. Demonstrate critical thinking in implementing the nursing process.
3. Identify principles from science, humanities, and nursing in developing an evidence-based plan of care.
4. Recognize professional behaviors, legal, ethical and regulatory standards essential to the practice of nursing.
5. Implement caring interventions safely in providing care to patients.
6. Use effective communication and interpersonal skills in demonstrating caring behaviors with patients, significant others and the health care team.
7. Apply teaching and learning principles in providing culturally sensitive care to patients across the life span.
8. Collaborate with patients, significant others, and the health care team to establish a plan of care for patients from diverse backgrounds.
9. Identify resources and technologies essential in the delivery of nursing care.
10. Recognize the significance of active involvement in the learning process.

THE UNIVERSITY OF WEST ALABAMA

IRA D. PRUITT DIVISION OF NURSING

Level II Learner Outcomes

Upon completion of Level II, the learner should have the knowledge, skills, and values to:

1. Function as a member of the health care team in organizing care for patients with complex wellness stressors.
2. Apply the nursing process and critical thinking in providing care for patients and/or groups of patients.
3. Relate principles from the sciences, humanities, and nursing in implementing an evidence-based plan of care.
4. Exhibit professional behaviors essential to effectively manage the delivery of nursing care.
5. Implement caring interventions safely and competently.
6. Apply effective communication, interpersonal skills and caring behaviors with patients, significant others and the health care team.
7. Establish individualized teaching plans based on the patient's needs, developmental level and cultural orientation.
8. Collaborate with patients, significant others, and the health care team to effectively manage and delegate care.
9. Apply the use of resources and technology in the delivery of nursing care.
10. Apply the principles of the learning process to the acquisition of self knowledge.

The University of West Alabama
Family Educational Rights and Privacy Act

The Family Educational Rights and Privacy Act (FERPA), sometimes referred to as the Buckley Amendment, is a federal law that protects the privacy and handling of student educational records. All students and former students of the University are covered by FERPA. This does not apply to any information submitted prior to January 1, 1975, or to applicants who applied, but did not attend. FERPA rights begin on the first day the student begins attending class.

Students have the following rights under FERPA:

- The right to inspect and review their educational records.
- The right to have their records amended if they are inaccurate or misleading.
- The right to restrict the disclosure of directory information.
- The right to file a complaint with the U.S. Department of Education if they feel that any of their rights have been violated.

Students do not have the right to review financial information submitted by parents or educational records containing information about more than one student.

An educational record is any record that is directly related to a student that is maintained by The University of West Alabama in any media form (handwriting, print, type, electronic, etc.).

Directory information is information that can be released without the student's written consent. A student who wishes to restrict the disclosure of directory information may do so by informing the Registrar in writing. Directory information includes the following:

1. Name, address, telephone listing
2. Date and place of birth
3. Major and minor fields of study
4. Participation in officially recognized athletics and other activities, including weight and height of members of athletic teams
5. Dates of attendance
6. Degrees and awards received
7. The most recent previous educational institution attended

The student, UWA officials who have legitimate educational interests, parents of a legal dependent (as determined by the Internal Revenue Code), parents whose child has signed a Consent to Release Information Form, and any outside service provider performing institutional services who have legitimate educational interests may access student information. Parents and other appropriate individuals may also have access to a student's records if it is necessary to protect the health or safety of the student or other individuals.

The spouse of a student has no rights under FERPA to access the student's educational record without the student's written consent.

UNIVERSITY OF WEST ALABAMA
IRA D. PRUITT DIVISION OF NURSING

CRITERIA FOR ADMISSION, PROGRESSION AND READMISSION

The following criteria for admission to the major in nursing, progression, and readmission have been identified by nursing faculty and approved by the University:

I. ADMISSION TO THE PROGRAM

A. GENERAL ADMISSION

Criteria for admission to the associate degree program in nursing are:

Applicants for admission to the nursing program, in addition to meeting all requirements for admission to the University must:

1. Have acceptable credit for secondary or post-secondary biology.
2. Have a minimum ACT composite score of 21 for unconditional admission. A student with an ACT composite score of 19 or 20 **OR** a grade-point average of at least 3.0 in required general education courses may be considered for conditional admission. Applicants who meet the requirements for unconditional admission will be admitted upon receipt of ACT scores and transcripts of courses completed at other institutions. Applicants who meet the requirements for conditional admission will not be considered for admission until after March 1.
3. In addition to ACT scores, all applicants are evaluated according to grade point average in required general education courses completed prior to application for admission.
4. Applicants who hold a baccalaureate degree from an accredited post-secondary institution may be considered for exemption of the ACT requirement.

B. ADMISSION OF TRANSFER STUDENTS

All transfer students must meet the admission criteria of the nursing program. Students may transfer credit from an accredited institution for general education course requirements for which a minimum grade of C was achieved. Students may also transfer credit from another NLNAC accredited nursing program for nursing courses comparable to NS 101, NS 102 and NS 103 if such courses have been completed within three years prior to the date of application to the Ira D. Pruitt Division of Nursing.

Transfer students who failed to successfully complete a nursing program or programs elsewhere will be placed into one of the following categories in terms of admission status:

1. A student who has failed to successfully complete a nursing program at another institution with such failure occurring at least five years prior to application to the Division of Nursing will be held to the same admission standards as an applicant without previous failure.
2. A student who has failed to successfully complete a nursing program at another institution with such failure occurring within five years of application to the Division of Nursing will be considered for conditional admission. The applicant must present a letter from the nursing program in which he/she was enrolled validating eligibility for readmission. If the applicant is admitted to but fails to successfully complete the curriculum requirements of the Ira D. Pruitt Division of Nursing, he/she will be ineligible for readmission.
3. A student who has twice failed a nursing course prior to applying to the Ira D. Pruitt Division of Nursing will be ineligible for admission.

C. CRITERIA FOR ADMISSION TO CLINICAL NURSING COURSES ARE:

1. a minimum quality point average of 2.0 (on a 4.0 scale) in all general education courses required for the nursing major.
2. current certification of instruction in cardiopulmonary resuscitation.
3. medical verification that the student is free of tuberculosis (skin test or chest x-ray).
4. verification of immunization for hepatitis B or signed waiver.
5. verification of a negative drug screen.
6. completed Essential Functions form.
7. evidence of criminal background screen.
8. liability insurance.

II. PROGRESSION IN THE PROGRAM

In order to progress in the nursing program, students must:

1. achieve of a minimum grade of C (80%) in each nursing course attempted.
2. achieve of a minimum grade of C in each general education course.
3. maintain of a cumulative quality point ratio of 2.0 in all general education course requirements.
4. achieve of a clinical laboratory grade of “satisfactory” in each nursing course.
5. maintain current CPR certification, negative TB skin test or chest x-ray, and negative drug screen.

The student’s enrollment in the nursing program may be terminated if in the judgement of the nursing faculty, the student’s health or behavior jeopardizes or may potentially jeopardize the safety of patients, peers, faculty or self. In addition, The Division of Nursing reserves the right to require a student to submit to: (1) drug screening and/or other professional evaluation for chemical addiction*; (2) psychological testing and/or counseling; (3) physical examination by a licensed physician at the student’s expense and to submit a report of the outcome to the Division of Nursing. Results of such reports will be reviewed by the nursing

faculty to determine the progression status of the student. Progression in the nursing program may also be terminated if the student has falsified information submitted on the application for admission to the University and/or the Division of Nursing. Dismissal for misconduct will be handled according to the Code of Student Conduct as outlined in the University of West Alabama Student Handbook, *Tiger Paw*, at <http://tigerpaw.uwa.edu/>.

Successful completion of all curriculum requirements as outlined in the University Catalogue is required for graduation. This includes a minimum of one academic year in residence with at least 28 semester hours in nursing courses earned at this institution.

*Guidelines established by the Alabama Board of Nursing and guidelines established in the chemical abuse policies of affiliating clinical agencies are utilized by faculty in determining probable cause for requiring professional evaluation for substance abuse. Drug screening is required by health agencies prior to students' participating in clinical experiences.

III. READMISSION

If a student withdraws from the program for personal reasons or is required to withdraw because he/she does not meet the established requirements, a written request for readmission must be submitted to the Chairperson of the nursing program. Readmission will be considered according to the following criteria:

1. withdrawals in good standing are considered prior to misconduct and academic dismissals;
2. students who are dismissed due to failure to meet the requirements of a nursing course prior to the last semester of the curriculum will be allowed one readmission, excluding NS 101. Students who fail to meet the requirements of a nursing course during the last semester of the curriculum will be allowed one readmission regardless of prior dismissals;
3. students who withdraw from a nursing course with a course average below a C will be allowed only one readmission prior to the last semester of the program.;
4. students who were dismissed for academic reasons at least five years prior to application for readmission will be considered as initial applicants.
5. Students who were dismissed due to failure of NS 201 or NS 202 must validate retention of the knowledge required in the co-requisite course. Students who were dismissed due to failure of NS 203 or NS 204 must validate retention of theoretical and clinical knowledge required in pre-requisite fall semester nursing courses as well as the co-requisite course. Validation is achieved by auditing the theoretical component of the course(s) with an 80 average and receiving a satisfactory clinical evaluation;
6. applicants for readmission will be considered if space is available following admission of all first-time applicants.

Students must abide by all policies in effect at the time of readmission as stated in the *Student Handbook*.

IV. NON-READMISSION

The student may be refused readmission to the nursing program for any of the following reasons:

1. Failure to successfully complete the progression requirements of a nursing program at another institution prior to enrolling in the nursing program at UWA.
2. Failure to successfully audit the course required for readmission.
3. Patterns of behavior inappropriate to nursing practice; i.e. unsafe practice, consistent tardiness; difficulties in interpersonal relations with peers, faculty, patients or health agency staff; evidence of chemical abuse, falsification of applications for admission to the University and/or the Division of Nursing, conviction of a felony, or any other behaviors incongruent with professional nursing practice.
4. Lack of space available in the program.

V. GRADUATION

Candidates for graduation must meet all University graduation requirements as outlined in the *General Catalogue*.

Revised June, 2009

Reviewed annually through July, 2012

The University of West Alabama
Division of Nursing

Background Screening Policy

As stipulated by the health care agencies with which The University of West Alabama Division of Nursing contracts for clinical experience, students must abide by the policies established by these agencies relative to background screening. This includes a pre-clinical background screening. Fees for all background screening must be paid by the student.

1. All students will receive notice of the background screening requirement prior to admission and will receive a copy of the policy upon admission to the program.
2. Failure to submit to the background screening by the published deadline will prohibit the student from completing the clinical component of the required nursing courses which will result in a failing clinical grade.
3. A positive background screen will be addressed on an individual basis.

Procedure:

1. Background screening may include the following:

Criminal History: Reveals felony and misdemeanor convictions, and pending cases usually including date, nature of offense, sentencing date, disposition and current status.

Sex Offender Check: Is a search of the state or county repository for known sexual offenders.

Social Security Number Trace: Is a verification that the number provided by the individual was issued by the Social Security Administration, and is not listed in the files of the deceased.

Office of Inspector General: Identifies those individuals who may no longer be capable of being provided with Medicare benefits.

2. The student will be notified of positive findings by mail from the Mississippi State Department of Health and verbally by the Chairperson of the Division of Nursing.
3. The student will be required to submit the rap sheet of positive findings to the appropriate designee in the HR at the agency to which he/she has been assigned for clinical. The HR will report to the Chairperson the decision regarding acceptance of the student for clinical experience within the agency.

4. Background screens which would render a student ineligible for placement include, but are not limited to, certain convictions or criminal charges which could jeopardize the health and safety of patients and sanctions or debarment.

Confidentiality:

The Chairperson of the Division of Nursing will receive all screening results which will be maintained in a locked file in the Chairperson's office. Confidentiality of results will be maintained with only the Chairperson, faculty and the student having access to the results with the exception of legal actions that require access to test results.

Developed August, 2006

Revised May, 2009

Reviewed annually through July, 2012

Exit Examination Policy

The priority goal of the Division of Nursing is to prepare graduates for success on the NCLEX-RN®. To take the first exit exam, students must have completed the Evolve Practice Exams (Versions A & B) in all 10 subject areas and have achieved a minimum score of 75% on each exam. Students who fail to meet this requirement will not be allowed to take the first scheduled exit exam. All students will be required to take two exit exams. Students not taking two exit exams will receive an incomplete for NS 204. The student will be required to purchase any exams that are rescheduled. Students will be counseled regarding deficiencies prior to subsequent tests. Students who have not achieved a passing score of 850 after the second exam will be encouraged to attend a faculty-recommended NCLEX review course, which will be scheduled immediately following graduation. Prior to taking the third exam, a scheduled remediation will be required, including course theory, computer-assisted testing, or other activities as determined by the faculty. The cost of the third exam and any other additional expense will be the student's responsibility. Student transcripts will be released to the Board of Nursing when exit exam requirements have been completed.

Student's Signature

Date

Witness

Date

Developed December, 2000
Revised July, 2012
Reviewed annually through July, 2012

Ira D. Pruitt Division of Nursing
The University of West Alabama

Progression Contract

Faculty of the Ira D. Pruitt Division of Nursing will approve for progression only those students who satisfy the requirements of health, conduct, and scholastic achievement as outlined in the (1) Criteria for Admission, Progression, Graduation, and Readmission, (2) *General_Catalogue*, (3) Standards of Conduct Statement, (4) Drug Screen Policy, (5) Course Overview, (6) Critical Skills Policy, and (7) Clinical Evaluation Tools. Failure to demonstrate good moral character as evidenced by any of the following merits immediate dismissal from the program: (1) conviction of a felony, (2) addiction to drugs and/or alcohol, (3) theft of drugs, (4) disciplinary action against a nursing license in any state.

I have read and understand the progression criteria stated above. I understand that they apply to me and I will comply with them.

Student's Signature

Date

Witness

Date

Revised August, 1995
Reviewed annually through July, 2012

STANDARDS OF CONDUCT AND LIMITS OF LICENSURE STATEMENT

The nursing student shall comply with legal, moral, and legislative standards which determine unacceptable behavior of the nurse and which may be cause for denial of license to practice as a registered nurse as stated in the *Alabama Board of Nursing Administrative Code*.

Grounds for denial of a registered nurse license by examination include but are not limited to the following: conviction of a felony; conviction of a misdemeanor or felony involving moral turpitude or gross immorality; conviction of a state or federal law related to controlled substances (may be either a misdemeanor or a felony); failure to show good moral character as pertaining to nursing; abuse of, or addiction to alcohol or other drugs.

FAILURE TO COMPLY WITH ANY OF THE ABOVE STIPULATIONS WHILE IN THE NURSING PROGRAM CONSTITUTES GROUNDS FOR DISMISSAL FROM THE PROGRAM.

It is important for nursing students to know about the Alabama Board of Nursing's regulations on the review of candidates for eligibility for initial and continuing licensure. The following questions are included on the Application for Licensure as a Registered Nurse by Examination:

- Have you ever been arrested for, been charged with, been convicted of, entered a plea of guilty to, entered a plea of nolo contendere or no contest for, received deferred prosecution or adjudication for, had judgment withheld for, received pretrial diversion for, or pleaded not guilty by reason of insanity or mental defect to any crime other than a minor traffic violation in any state, territory, or country? A crime related to driving while impaired or while under the influence of any substance is not a "minor traffic violation."
- In the past five years, have you abused alcohol, drugs (whether legal or illegal, prescribed or unauthorized), and/or other chemical substances or received treatment or been recommended for treatment for dependency to alcohol, drugs (whether legal or illegal, prescribed or unauthorized), and/or other chemical substances?
- Have you ever been arrested or convicted for driving under the influence of drugs/alcohol?
- In the past five years, have you had, or do you now have, a physical or mental health problem that may impair your ability to provide safe nursing care?
- Has the licensing authority of any state, territory, or country denied, revoked, suspended, reprimanded, fined, accepted your surrender of, restricted, limited, placed on probation, or in any other way disciplined your nursing and/or any other occupational license, registration, certification, or approval?
- Is the Board of Nursing or other licensing authority of any state, territory, or country, including but not limited to the Alabama Board of Nursing, currently investigating you?
- Is disciplinary action pending against you with the Board of Nursing or other licensing authority of any state, territory, or country, including but not limited to the Alabama Board of Nursing?
- Have you ever been placed on a state and/or federal abuse registry?
- Has any branch of the armed services ever administratively discharged you with any characterization of service besides "Honorable" and/or court-martialed you?

Application to write the examination may be denied on the basis of this review. Although these policies refer specifically to Alabama, other states have similar stipulations regarding licensure.

I have read and understand the Standards of Conduct statement.

Students Signature

Date

Witness

Date

Revised July, 2000
Reviewed annually through July, 2012

THE UNIVERSITY OF WEST ALABAMA
IRA D. PRUITT DIVISION OF NURSING

Release of University and Clinical Health Agency From Legal Responsibility
for Student Safety and Exposure to Health Hazards

As a student enrolled in the Ira D. Pruitt Division of Nursing, University of West Alabama, Livingston, Alabama, I understand that at times I may be assigned or request to remain in a clinical health agency after daylight hours in order to fulfill the requirements of a nursing course. I further understand the necessity for obtaining the protection of a security person employed by the health agency at any time I am in transit from the confines of the health agency building to my transportation after daylight hours.

I also understand that as a nursing student I may be exposed to potential health hazards such as communicable disease and radiation. I understand that it is my responsibility to follow the clinical agency safety policies regarding the care of patients with a communicable disease, patients receiving radiation therapy, or other potential health hazards. I understand that it is my responsibility to notify faculty should I become pregnant in order to avoid the risk of fetal exposure to potential health hazards.

I am in agreement that failure to adhere to the security and safety policies outlined above releases the clinical health agency to which I am assigned and/or The University of West Alabama from any legal responsibility for the safety of my person.

Student's Signature

Date

Witness

Date

Developed March, 1985
Revised June, 2010
Reviewed annually through July, 2012

TRAVEL RELEASE FORM

Release executed on _____, 20____, by _____
(address) _____ Livingston, Alabama, herein referred to as
"Releasor," to The University of West Alabama, herein referred to as "UWA."

The UWA Division of Nursing requires travel to health agencies for clinical experience. Arrangements for travel to and from health agencies is the responsibility of the student. Travel for clinical experiences is an extension of The University of West Alabama, and all rules and regulations apply.

In consideration of UWA's clinical experience opportunities, being permitted to participate in clinical experiences at designated health agencies and other valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Releasor voluntarily and knowingly executes this Release with the express intention of effecting the extinguishment of obligations as herein designated.

The Releasor, with the intention of binding himself/herself, the Releasor's parents, spouse, heirs, legal representatives, and assigns, does hereby expressly release, relieve, discharge and agree to hold harmless UWA, its officers, trustees, employees, representatives, and agents from any and all liability, claims, cost, demands, judgements, and executions, whether for personal injury, property damage, or otherwise, the Releasor, his/her heirs, legal representatives, or agent ever had, now has, or may have, whether known or unknown, against UWA, its officers, trustees, employees, representatives, and agents, created by arising out of, or in connection with the above named travel for clinical experiences.

Releasor hereby assumes full responsibility for the risk of bodily injury, death or property damage due to his/her participation in the above named travel for clinical experiences.

Releasor expressly agrees that this release is intended to be as broad and inclusive as permitted by the laws of the State of Alabama, and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect. Releasor understands and agrees that the voluntary consent to be bound by the terms and conditions set herein is a material consideration for UWA agreeing to offer to the Releasor and for such agreement no such program would be made to Releasor by UWA.

By signing below, Releasor acknowledges that he/she has read and understands this Release of liability.

THE RELEASOR REPRESENTS AND WARRANTS THAT HE/SHE IS AT LEAST 18 YEARS OF AGE. IF THE RELEASOR IS NOT 18 YEARS OF AGE, THIS RELEASE MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN OR THE RELEASOR.

In witness thereof, this Release has been executed at the time and place above written.

Witness

Releasor

Reviewed annually through July, 2012

The University of West Alabama
Division of Nursing
Notice Regarding the Alabama Infected Health Care Worker Act

In order to be in compliance with the Alabama Infected Health Care Worker Act, students will be made aware of this law. The Act mandates that any health care worker infected with the human immunodeficiency virus (HIV) or hepatitis B virus (HBV) who performs an invasive procedure or any physician providing care to an infected health care worker shall notify the State Health Officer, or his designee, of the infection.

The purpose of the Act is to prevent transmission of HIV and HBV to patients during invasive procedures. For clarification and continuity purposes, the following words have been defined.

1. **Health Care Worker** – Physicians, dentists, nurses, respiratory therapists, phlebotomists, surgical technicians, physician assistants, podiatrists, dialysis technicians, emergency medical technicians, paramedics, ambulance drivers, dental assistants, students in the healing arts, or any other individual who provides or assists in the provision of medical, dental, or nursing services.
2. **Infected Health Care Worker** – A health care worker infected with HIV or HBV as defined herein.
3. **Hepatitis B Virus (HBV) Infection** – The presence of the HBV as determined by the presence of hepatitis B antigen for six months or longer or by other means as determined by the State Board of Health.
4. **Human Immunodeficiency Virus (HIV) Infection** – The presence of antibodies to Human Immunodeficiency Virus as determined by enzyme immunoassay and Western Blot or the presence of the HIV infection as determined by viral culture, or by other means as determined by the State Board of Health.
5. **Invasive Procedures** – Those medical or surgical procedures characterized by the digital palpation of a needle tip in a body cavity or by the simultaneous presence of the health care worker's finger and a needle or other sharp instrument or object in a poorly visualized or highly confined anatomic site.

Those procedures shall not include physical examinations; blood pressure checks; eye examinations; phlebotomy; administering intramuscular, intradermal, or subcutaneous injections; needle aspirations; lumbar punctures; angiographic procedures; vaginal, oral, or rectal exams; endoscopic or bronchoscopic procedures; or lines, nasogastric tubes, endotracheal tubes, rectal tubes, and urinary catheters.

All Associate Degree Nursing Students who meet the definition of health care worker will be informed of this Act during orientation or by the first day of class. **It will then be the individual student's responsibility to report himself/herself to the State Health Officer as mandated by law.**

Further information concerning the Infected Health Care Worker Management Act can be obtained from the Infection Control Section at 334-206-2984. One can also contact Marsha Cannon, Chairperson, for questions concerning the information presented herein.

My signature indicates that I have been given information on the Infected Health Care Worker Management Act and that I am aware that it is my responsibility to report to the state Health Officer if I am infected with the HBV or HIV virus.

Student Signature

Date

Witness

Revised June, 2010
Reviewed annually through July, 2012

IRA D. PRUITT
DIVISION OF NURSING

THE UNIVERSITY OF WEST ALABAMA

HEPATITIS-B VACCINATION POLICY FOR STUDENTS

The Centers for Disease Control recommends that students in health professions be vaccinated with the hepatitis-B vaccine. As a nursing student, it is important that you be aware of the risks involved in exposure to hepatitis-B and the benefits of hepatitis-B vaccination. The following consent to receive the hepatitis-B vaccination or consent waiver must be submitted upon enrollment in the nursing program. If you choose to receive the hepatitis-B vaccine series, you must complete and submit the attached validation form within six months following enrollment in the first nursing course (NS 101). If the vaccine series is not completed within six months, you will be required to sign a consent waiver at that time. Failure to complete the vaccine series or sign a consent waiver will result in dismissal from the nursing program.

I have read the attached Informed Consent Statement regarding hepatitis-B and the hepatitis-B vaccine. I understand that I have the option of receiving the vaccine or refusing it.

Check only one option.

_____ I CONSENT TO RECEIVE THE HEPATITIS-B VACCINE and will assume the responsibility for making the arrangements at my own expense. In consideration of my admission to the Ira D. Pruitt Division of Nursing, the undersigned, on behalf of myself and my heirs, executors, administrators, and assigns, hereby releases the University of West Alabama, its trustees, officers, administrators, employees, agents, and contractors, individually and in their official capacities, and the clinical agencies at which the undersigned is assigned for clinical instruction, from any and all liability, damages, costs, and compensation, in law or equity, known or unknown, which occurs, or may in the future occur, in the event the undersigned should contract hepatitis-B or experience any side effects from having received the hepatitis-B vaccine. This release is not to be construed as a waiver of immunity from damages vested in the University of West Alabama, its trustees, officers, administrators, employees, agents, and contractors pursuant to Article I, Section 14, Alabama Constitution (1901).

_____ I DO NOT CONSENT to receive the Hepatitis-B vaccine. In consideration of my admission to the Ira D. Pruitt Division of Nursing, the undersigned, on behalf of myself and my heirs, executors, administrators, and assigns, hereby releases the University of West Alabama, its trustees, officers, administrators, employees, agents, and contractors, individually and in their official capacities, and the clinical agencies at which the undersigned is assigned for clinical instruction, from any and all liability, damages, costs, and compensation, in law or equity, known or unknown, which occurs, or may in the future occur, in the event the undersigned should contract hepatitis-B. This release is not to be construed as a waiver of immunity from damages vested in the University of West Alabama, its trustees, officers, administrators, employees, agents, and contractors pursuant to Article I, Section 14, Alabama Constitution (1901).

Student's Signature

Date

Witness

Date

Revised June, 2010
Reviewed annually through July, 2012

INFORMED CONSENT STATEMENT
HEPATITIS-B VACCINE

Hepatitis-B	Hepatitis-B is a viral infection of the liver, usually transmitted by blood or blood products.
The Disease, Employee Health:	Hepatitis caused by hepatitis-B virus (HBV) is an unpredictable disease with a variety of symptoms and outcomes. More than 50% of the people who are infected exhibit no symptoms. In this circumstance, prior infection can only be detected by a presence of antibody in the blood. However, acute symptomatic-hepatitis-B infection may result in serious illness which may incapacitate a person for months with approximately 5-10% of people with hepatitis becoming chronic carriers of the virus. Death occurs in 1-2% of infected patients either as a result of acute liver failure or chronic disease. HBV also appears to be a causative factor in the development of liver cancer. To date, there is no effective treatment for hepatitis-B disease.
Hepatitis-B Vaccine: (Recombivax HB)	Hepatitis-B vaccine is produced from recombinant yeast cultures. A high percentage of people who receive three doses of the vaccine are afforded protection against hepatitis-B. This vaccine will not prevent hepatitis caused by other agents, such as hepatitis-A, non-A, non-B hepatitis viruses, or other viruses known to infect the liver. Persons who have been infected with HB prior to receiving the vaccine may go on to develop clinical hepatitis in spite of immunization. Full immunization requires three doses of vaccine over a six-month period although some persons may not develop protective immunity even after three doses. There is no evidence that the vaccine has ever caused hepatitis-B. The duration of immunity is unknown at this time. The vaccine may be obtained through you physician at a cost of approximately \$150.
Who Should Consider the Vaccine:	Hepatitis-B vaccine is indicated for individuals at risk for contracting hepatitis-B infection. The Centers for Disease Control recommends that all health professionals and students be vaccinated with the hepatitis-B vaccine.
Who Should Probable Not Take the Vaccine:	The vaccine is contraindicated in persons who are hypersensitive to yeast. Pregnant or nursing mothers should check with their physicians before taking the vaccine.
Possible Vaccine Side Effects	The incidence of side effects is very low. No serious side effects have been reported with the vaccine. A few persons experience tenderness and redness at the site of injection. Nausea, rash, and joint pain have been reported. A low grade fever may also occur. The possibility exists that more serious side effects may be identified with more extensive use.

Revised June, 2010
Reviewed annually through July, 2012

IRA D. PRUITT
DIVISION OF NURSING
THE UNIVERSITY OF WEST ALABAMA

VALIDATION OF HEPATITIS-B VACCINATIONS

Name _____

[] I HAVE RECEIVED THE VACCINE SERIES ON:

Date Vaccinated

Provider (Nurse, Doctor) signature

(1) _____

(2) _____

(3) _____

and tested immune on _____ at _____ by _____
Date Agency Signature of Provider

Submitted to the Ira D. Pruitt Division of Nursing on _____

Date

BLOODBORNE PATHOGENS POST-EXPOSURE MANAGEMENT PROTOCOL FOR FACULTY AND STUDENTS

Introduction

The purpose of this protocol is to inform students regarding the risk of exposure to bloodborne pathogens and the required procedure to follow if an accidental exposure occurs. It is the student's responsibility to utilize standard precautions during all clinical activities.

Definitions

1. **A Significant Occupational Exposure** is defined as:
 - a. A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids.
 - b. A mucous membrane (i.e., splash to the eye or mouth) exposure to blood or body fluids.
 - c. A cutaneous exposure involving large amounts of blood or prolonged contact with blood-especially when the exposed skin was chapped, abraded, or afflicted with dermatitis.
2. **Blood** – human blood, human blood components, and products made from human blood.
3. **Bloodborne pathogens** – pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis-B virus (HBV) and human immunodeficiency virus (HIV).
4. **Contaminated** – the presence or the reasonably anticipated presence of blood or other potential infectious material on an item or surface such as sharps, dressings, equipment or other materials which have been soiled with blood or other potential infectious material or may contain sharps.
5. **Sharps** – any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, torn metal, weapons, exposed ends of wires, paper cutter blades, or scissors.
6. **Decontamination** – the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.
7. **Exposure** – a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from the performance of student's or faculty's duties (clinical related).
8. **HBV** – Hepatitis-B virus
9. **HIV** – Human Immunodeficiency Virus

10. **Other Potentially Infectious Materials** – all human body fluids, especially saliva where oral trauma is a potential, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Note: This definition would universally apply at trauma scenes involving body fluids, or any unfixed tissue from a human.
11. **Parenteral** – piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.
12. **Specialized clothing** – lab coats, aprons, gowns worn for protection against a hazard.
13. **Source individual** – any individual whose blood or other potentially infectious materials may be a source of exposure to the student/faculty.
14. **Standard Precautions** – the concept that all human blood and certain body fluids are treated as if known to be infectious.

The following standard precautions for preventing HIV transmission in health care settings are recommended by the Centers for Disease Control (MMWR 1987 Aug. 21; 36: 1-18S; MMWR 1988, June 24; 37:377-382, 387-388; MMWR, 1991, July 23; 40:1-9):

- Use of standard precautions for blood, for body fluids containing visible blood, and for certain other body fluids** for all patients, since medical history and examination cannot reliably identify all patients infected by HIV and other fluid or blood-borne pathogens.
- Use of appropriate barrier precautions for handling items or surfaces soiled with blood or body fluids containing visible blood, and certain body fluids to which standard precautions apply**, or performing venipuncture and other vascular access procedures.
- Gloves should be worn when in contact with blood, body fluids containing visible blood, body fluids to which standard precautions apply, tissues, and mucous membranes and for handling items or surfaces soiled with the above, or for performing venipuncture or other vascular access.
- Masks and protective eyewear or face shields should be worn during procedures that are likely to generate air-borne droplets of blood or body fluids to which standard precautions apply to prevent exposure of the mucous membranes of the mouth, nose, and eyes.
- Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or the body fluids to which standard precautions apply.
- Resuscitation bags, mouthpieces, and ventilation devices should be available in areas where the need is predictable.
- Used equipment should be disposed of in a manner to prevent transmission of disease and to prevent injury to personnel with potential contact with the equipment, i.e., health care workers, housekeeping, and laundry personnel.
- Particular attention should be given to prevent injuries caused by needles, scalpels, and other sharp instruments. To prevent needle-sticks, needles should not be recapped or purposely bent or broken by hand. In particularly high-risk situations, such as during resuscitation, prevention of needle-stick injury to oneself

and/or other health care workers from exposed needles or sharps requires special attention regarding the use and safe disposal of needles and sharps.

Risk reduction to prevent sharp injuries include the use of engineering controls such as needle-free intravenous access systems, needle disposal containers as near as is practical to the point of use, and self-sheathing needle/syringe units. When recapping is necessary due to the lack of a readily accessible disposal container or due to the nature of the task (e.g., some situations for drawing arterial blood gases), the use of work practice modifications such as a one-handed scoop method or a passive recapping device is recommended. Recapping of needles using two hands is prohibited by the Occupational Safety and Health Administration (OSHA) and will not be permitted where students are assigned for clinical rotations.

** Standard precautions apply to blood, semen, vaginal secretions, as well as tissues, cerebral spinal fluid, synovial fluid, pleural fluid, pericardial fluid, and amniotic fluid. These body fluids have been epidemiologically associated with transmission of HIV and/or HBV.

Exposure Protocol

If an exposure occurs, the student should implement the following protocol:

1. Immediately cleanse the affected area with soap and water.
2. If skin is punctured, bleeding should be encouraged if not excessive.
3. Provide first aid measures if applicable.
4. Students will immediately report an exposure to the clinical instructor. If a clinical instructor is exposed, he/she will immediately report the exposure to the head nurse and the Division Chairperson. The clinical instructor will complete an exposure report which will be forwarded to the Chairperson of the Division of Nursing. Confidentiality will be maintained and all records will be kept in the Chairperson's file.
5. The exposure report should include the following information:
 - a. name of the individual exposed with date, time, and location of exposure.
 - b. route(s) and description of the circumstances leading to and including the exposure.
 - c. immediate first aid procedures implemented and/or medical interventions.
6. The clinical instructor/student will also follow the exposure procedures of the agency in which the exposure occurs.

Post-Exposure Prophylaxis

It is the responsibility of the student to arrange and finance post-exposure medical follow-up and care. However, the Chairperson of the Division of Nursing will advise the student/faculty of the following Center for Disease Control recommendations.

1. OSHA Guidelines direct the clinical facility's infection control officer to attempt to determine the infectious status of the source individual. In the event that the infectivity status is determined, the exposed individual will be notified. If the infectivity status of the source individual cannot be determined, then the exposed individual should proceed with the following post-exposure recommendations:
2. The student should be clinically and serologically evaluated as soon as possible.

3. If the exposed student initially tests negative for Human Immunodeficiency Virus (HIV), he/she should be periodically retested for six months after exposure. (HIV seroconversion generally occurs 6-12 weeks after exposure).
4. If the student does not have Hepatitis B immunity, the administration of Hepatitis B Immune globulin (HBIG) appears to be highly effective in preventing HBV infection. The incubation period for HBV is 40-180 days, but HBIG should be administered within 7 days following exposure.

IRA D. PRUITT DIVISION OF NURSING
BLOODBORNE PATHOGENS EXPOSURE REPORT

NAME _____ **Identification #** _____

Date of Incident/Accident _____

Exact Location of Incident/Accident _____

Was there a witness to the incident/accident ____YES ____NO

If YES, print name, title/position _____

Describe the circumstances in which the incident/accident occurred including protective precautions (Specialized clothing, gloves, etc.) being observed at the time of exposure and contaminated or potentially infectious material(s) to which the student was exposed:

Describe follow-up care (decontamination, clean-up, etc.):

Exposure reported
to: _____

Agency exposure protocol implemented:

A. ____YES ____NO

B. If no, explain why

Student comments:

Faculty Comments:

Signatures:

Student _____

Date _____

Faculty _____

Date _____

Division Chairperson _____

Date _____

Developed August, 1995

Revised July, 2011

Reviewed annually through July, 2012

Student Drug Screen Guidelines

As stipulated by the health agencies with which the Division of Nursing contracts for clinical experience, students must abide by the substance abuse control policy of the agency and any subsequent revisions to the policy in order to participate in clinical experiences at the agency. This includes pre-clinical drug screening and random drug screening should the student exhibit behaviors indicative of substance abuse during a clinical experience. Drug screening is conducted according to the guidelines established by the Marengo Drug Screening Center or the laboratory approved by the Division of Nursing for drug screening.

I. Pre-Clinical Screening

- All students will receive notice of the drug screening prior to admission or readmission to the Division of Nursing.
- The Division of Nursing will maintain on file a signed consent to drug screening from each student.
- Drug screening will be scheduled and conducted by Marengo Drug Screening Center of Demopolis, Alabama. Students must pay the fee in effect at the time of the screening as established by the screening agency. The fee for testing is included in the course fees for NS 101.
- Any student failing to report for screening at the designated time must complete testing with Marengo Drug Screening Center within 24 hours.
- Failure to complete drug screening as required by clinical agencies will prohibit the student from completing the clinical component of required nursing courses.
- Positive drug screen related to prescription drugs will be reviewed by the Medical Review Officer with determination of the student's ability to perform safely in the clinical area.
- Positive drug screens are confirmed by Gas Chromatography/Mass Spectrometry (GCMS). No sample is reported as positive before it has been tested at least three times.
- Students who have a positive drug screen for an illicit drug or who are deemed unsafe to practice by the Medical Review Officer will be dismissed from the nursing program immediately. The student may apply for readmission the following year.

II. Reasonable-Suspicion Screening

Students may also be required to submit to reasonable suspicion testing as stipulated in the drug screen policy of the clinical agency while participating in clinical experiences. Reasonable suspicion is defined by the substance abuse policies of the clinical agencies as follows:

1. Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug;
2. Abnormal conduct or erratic behavior while on the clinical unit, absenteeism, tardiness or deterioration in performance; Students demonstrating behavior that would be potentially harmful to self or others will be referred for drug screening at their expense;
3. A report of drug use provided by reliable and credible sources which has been independently corroborated;
4. Evidence of tampering with a drug test;
5. Information that the individual has caused or contributed to an incident in the clinical agency;
6. Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs while on the clinical agency premise.

III. Drug Screen Procedure

1. Students must submit a photo I.D. and social security number.
2. The laboratory technician will explain the collection procedure.
3. The laboratory technician will ask the student if he/she is currently taking any medications. If the drug screen is positive, students must bring prescription medications to the chairperson for verification.
4. The laboratory technician will collect a monitored urine specimen.
5. Students must remove unnecessary outer garments (coats, sweaters, etc.) and remove items from pockets when entering the collection site.
6. NIDA-5 Drug Screening will be performed. If the test is negative the technician will mark the negative results on the form.
7. If the drug screen is positive, the technician will explain in the presence of the student, the laboratory technician will seal the urine specimen with a tamper proof security seal and affix an identification label with code number.
8. The student will verify the information on the identification label, initial the security seal, read and sign the Chain of Custody Form.
9. The laboratory technician will sign the Chain of Custody Form and give the student the appropriate copy.

10. The laboratory technician will forward the sealed urine specimen and Chain of Custody Form to the laboratory for testing.
11. Specimens will be screened for six (6) classes of drugs:
 1. Amphetamines
 2. Benzodiazepines
 3. Cocaine
 4. Tetrahydrocannabinol (THC)
 5. Opiates
 6. Phencyclidine (PCP)
12. Positive screens will be confirmed by GS Mass Spectrophotometry. The student will be informed of the screening results by the Chairperson of the Division of Nursing within seven (7) days of testing.

IV. Confidentiality

The Chairperson of the Division of Nursing will receive all test results which will be maintained in a locked file in the Chairperson's office. Confidentiality of test results will be maintained with only the Chairperson and the student having access to the results with the exception of legal actions which require access to test results.

V. Readmission

To be considered for readmission, students who withdraw from the nursing program due to a positive drug screen must:

1. submit a letter from a treatment agency verifying completion of a substance abuse treatment program.
2. submit to an unannounced drug screen at the student's expense prior to readmission. A positive screen will result in ineligibility for readmission.

I have read, understand, and agree to the above drug screen guidelines.

I hereby release Marengo Drug Screening Center and its Director, The University of West Alabama, and faculty of the Division of Nursing from any claim in connection with the Drug Screening Guidelines.

I understand that should any legal action be taken as a result of the Drug Screening Guidelines, that confidentiality can no longer be maintained.

Student Signature

Date

Witness

Date

Revised August, 2011 Reviewed annually through July, 2012

ACKNOWLEDGEMENT OF PARTICIPATION IN NURSING PROGRAM

Drug Screen Consent Form

I understand that the University of West Alabama’s Nursing Program (“the University”) has a required component of clinical rotations and that the current locations for those clinical rotations are at health agencies in Mississippi and Alabama.

I also understand that the health agencies require that, because I am participating in the clinical rotation at these facilities, I will be subject to the same rules as the employees. I understand that these agencies require all employees to have a substance screen. Because of this, I understand that prior to participation in the clinical rotations; I must submit to a drug screen at a certified laboratory and provide a certified negative result from that screen to the Chairperson of the Division of Nursing.

I further understand that if I fail to provide such a certified negative drug result I will be unable to participate in the clinical portion of the University’s Nursing Program.

BY SIGNING THIS DOCUMENT, I AM INDICATING THAT I HAVE READ, UNDERSTAND AND VOLUNTARILY AGREE TO THE CLINICAL AGENCY’S REQUIREMENT TO SUBMIT TO A DRUG SCREEN AND TO PROVIDE A CERTIFIED NEGATIVE DRUG RESULT PRIOR TO PARTICIPATION IN THE CLINICAL COMPONENT OF THE NURSING PROGRAM.

A COPY OF THIS SIGNED AND DATED DOCUMENT WILL CONSTITUTE MY CONSENT FOR THE CERTIFIED LABORATORY PERFORMING THE DRUG SCREEN TO RELEASE THE ORIGINAL RESULTS OF ANY DRUG SCREEN TO THE UNIVERSITY. I DIRECT THAT THE CERTIFIED LABORATORY HEREBY RELEASE THE RESULTS TO THE UNIVERSITY.

I further understand that my continued participation in the University’s Nursing Program is conditional upon satisfaction of the requirements of the clinical agencies providing clinical and other components for the University’s Nursing Program as it presently exists or as hereinafter required.

Signature Printed Name Date

Witness’ Signature Printed Name Date

Revised May, 2009
Reviewed annually through July, 2012

The University of West Alabama – Associate Degree Nursing

List of Essential Registered Nurse Functions

Students enrolled in the Division of Nursing must be able to:

1. maintain balance.
2. lift heavy objects with assistance.
3. hear high and low frequency sounds produced by the body and the environment.
4. see changes in or around patient.
5. feel body changes or vibrations. Example: Palpate pulse or nodule.
6. smell body and environmental odors. Example: Electrical equipment burning or infected wounds.
7. coordinate eye and hand movements. Example: Releasing a blood pressure cuff valve while observing the blood pressure gauge.
8. coordinate fine and gross motor movements with hands. Example: Able to give injections or start IV's
9. see different colors in the spectrum. Example: Bright red drainage as opposed to serous drainage.
10. comprehend readings and write legibly when documenting notes on patients.
11. send familiar message(s) to the receiver and interpret the feedback appropriately.
12. correctly perform mathematical computations for administering drugs within a specific time frame.
13. demonstrate a mentally healthy attitude which is age-appropriate and congruent with the local and cultural norms.
14. work in a group.
15. work independently to perform assigned tasks.
16. stand and walk for six (6) hours or more in a clinical setting.
17. manipulate small objects.
18. complete tasks within appropriate time frame.

The instructor reserves the right to amend and augment this listing if, in his/her professional judgment, the safety of the student or of others in the instructional setting is in jeopardy.

Every effort is made to create a learning environment similar to the actual workplace. However, The University of West Alabama cannot predict the essential functions as identified by various employers. The skills identified on this essential functions form are those that the faculty believes are necessary for participation in the program. No representation regarding industry standard is implied.

Similarly, any reasonable accommodations made for the student are determined by The University of West Alabama for student participation in this program of study. Business/industry standard may vary.

Revised May, 2009

Reviewed annually through July, 2012

Ira D. Pruitt Division of Nursing
The University of West Alabama
Absence Policy

A. Classroom Examinations:

1. Due to the large amount of material covered in nursing courses and frequent testing, it is imperative that the student be present for all scheduled exams. Make-up exams will be allowed only in instances of illness documented by a physician, death of an immediate family member, childbirth, and acute non-elective hospitalization of self or child. Make-up exams will be given within the last week of the semester only. The type of make-up exam will be at the discretion of the professor. Students absent from scheduled exams will not be allowed to attend class for the remainder of the day following the exam. Documentation must be given to the DON Secretary on return to class.
2. No extra time will be given to the student who arrives late for an examination.

B. Clinical Laboratory:

1. Clinical laboratory sessions are mandatory. Clinical absences will be allowed only in instances of acute illness documented by a physician, death of an immediate family member, childbirth, and non-elective hospitalization of self or child. Further consideration must be approved by the chairperson.

Clinical absences may not exceed two days per course regardless of circumstances. The first absence will require the student to meet with the chairperson to provide written documentation of reason for absence. Students will not be allowed to return to the clinical setting until documentation is provided. Upon the second absence, the student will be placed on contract recognizing that further absence will result in a clinical rating of unsatisfactory and incur immediate dismissal from the program.

2. Students must arrive prepared for each clinical experience with an appropriately written plan of care which he/she can verbalize. If the student is unprepared, he/she will be dismissed from the clinical experience, which will be counted as an absence. Refer to Guidelines for Warning and Critical Incident Policy in Student Handbook.
3. Students must be prompt in attending all clinical experiences. If tardy for a clinical experience, the student will be counseled related to tardiness and a clinical warning will be issued. Refer to Guidelines for Warning and Critical Incident Policy in Student Handbook. If tardy by more than 15 minutes, the student will be dismissed from the clinical experience. The dismissal will be counted as an absence.
4. If a student must be absent from clinical laboratory, he/she must notify the clinical agency a minimum of one hour prior to the beginning of the clinical experience.

I have read and understand the Absence Policy of the Ira D. Pruitt Division of Nursing.

Student Signature

Date

Witness

Date

Developed August, 1989
Revised May, 2012
Reviewed annually through July, 2012

THE UNIVERSITY OF WEST ALABAMA
ACADEMIC GRIEVANCE PROCEDURE

ACADEMIC GRIEVANCES

This policy can be accessed from *The Tiger Paw Student Handbook* at
<http://tigerpaw.uwa.edu/admin13a.asp>

THE UNIVERSITY OF WEST ALABAMA
IRA D. PRUITT DIVISION OF NURSING

Dress Code for Students in the Clinical Laboratory

As a potential member of the nursing profession following graduation from the program, the student must always be cognizant of his/her professional image before various publics (peers, other members of the nursing team, patients, etc.) Therefore, it is important that the student nurse conform to the dress code of the health agency in which he/she is functioning for laboratory experience. The following guidelines for student dress in the clinical laboratory have been formulated and adopted by faculty and students.

I. Hair, Nails and Miscellaneous

1. Hair that is shoulder length or longer must be pulled back, tied or pinned away from the face. Large, brightly colored or ornate bows, ribbons or clips are not to be worn. Students with hair dyed any color other than that natural to humans will not be allowed to participate in clinical experiences. Hair style must be appropriate to the professional role of the nurse.
2. Students must be clean-shaven or have a well-groomed beard. Sideburns and mustaches must be neatly trimmed (No handlebar mustaches allowed)
3. Nails must be short (tip no longer than ¼ inch), clean and neatly filed. No artificial nails are allowed.
4. Clear nail polish is permitted if it is not chipped or cracked.
5. A wedding band, one pair of stud earrings of gold, silver, diamond, or pearl in ear lobe only may be worn. A watch with a second hand must be worn. No other jewelry is allowed
6. No colognes, perfumes, or scented lotions are allowed.
7. Chewing gum is not to be used in any clinical laboratory experience.
8. Tattoos must be covered.
9. No visible body piercing other than the ear lobe.
10. No cell phones are allowed in the clinical agency!

II. Uniform

1. Students must be in complete required nursing student uniform with black sleeve patch one inch below left shoulder seam, name badge, and watch with a second hand) when administering nursing care, unless otherwise specified.
2. Students may wear a white laboratory coat with a sleeve patch during the following clinical laboratory experiences:
 - a. When the policy of the institution does not specify a particular uniform.
 - b. Those clinical laboratory experiences in which the nursing instructor and the health agency agree a full uniform is not necessary.
3. Uniforms must be clean, neat, pressed, and reasonably well fitted.
4. Solid surfaced black or white nursing shoes or all leather tennis shoes may be worn for clinical experiences. Shoes must be clean, in good repair, polished and worn only for clinical experiences. Shoes with holes on top are not allowed.

5. Identification badges, when required, must be worn in plain view on the shoulder/chest area at all times.
6. No visible undergarments including thongs, bikinis, or colored/printed undergarments.

III. Assessment and Observation Labs

1. Appropriate dress for assessment includes dresses or skirts no more than 2 inches above the knee, dress pants or slacks and clean, closed toe shoes.
2. Not allowed are:
 - a. flip-flop shoes or beach sandals.
 - b. jeans, leggings, stirrup pants, sweat suits, jogging suits, denim, overalls, T-shirts, hats.
 - c. garments with slogans or advertisements.
 - d. knit or tight-fitting garments.
 - e. garments that expose the back, bust, midriff, or buttocks
3. Lightweight or low-neck tops must be worn with an undershirt or turtleneck.
4. A white laboratory coat with a sleeve patch and name badge is required.

Failure to abide by the dress code policy will result in the student being dismissed from clinical, which will be counted as an absence for the clinical experience.

Developed June, 1985

Revised July, 2012

Reviewed annually through July, 2012

The University of West Alabama
Ira D. Pruitt Division of Nursing

Student Employment Policy

Students shall not represent themselves as nursing students or engage in patient/patient care as nursing students except as part of an assigned, planned learning activity in a practice setting integral to the curriculum. Wearing the official UWA student uniform is prohibited when students are employed as nursing assistants in a clinical health agency.

Developed February, 1998
Reviewed annually through July, 2012

The University of West Alabama
Ira D. Pruitt Division of Nursing

Critical Skills Policy

All critical skills included in selected modules of clinical nursing courses must be mastered in order to successfully fulfill the requirements of the course. Each module in which mastery of a critical skill(s) is required includes a performance checklist(s) for the skill(s). The performance checklist includes the critical components by which the evaluator determines if the student passes or fails the demonstration of the critical skill. The performance checklist may also be utilized by the student as a guide in preparing for demonstration of the skill.

At the beginning of each clinical nursing course, students receive a written schedule of critical skills, which includes the instructor demonstration date and the final date for student return demonstration. If a student is absent on the scheduled date for instructor demonstration of the skill, it is his/her responsibility to obtain this information. Instructor demonstrations will not be repeated. However, the nursing skills laboratory will be open from 8:00 a.m. to 5:00 p.m. Monday through Friday for practice, and an appointment may be made with available faculty for assistance if needed.

An appointment schedule for student return demonstration will be posted. It is the responsibility of the student to select an appointment time for return demonstration of critical skills. *Prior to the return demonstration, the student will view the skill on Tegrity® and practice skill in the skills lab. During the student demonstration testing session, the student will be allowed to complete the demonstration without interruption. Following the testing session, the evaluator will review the student's performance in relation to the performance checklist criteria.

In order to receive an evaluation of pass the student must successfully demonstrate the skill including all critical components. An evaluation of fail is given if the student incorrectly demonstrates one or more critical components of the skill. However, if the student recognizes at any point in the procedure that he/she has incorrectly demonstrated a critical component of the skill and verbalizes to the evaluator that he/she could rectify the error in the actual clinical setting, the student will be allowed to repeat the demonstration at that time. But, if the evaluator recognizes an error that could not be rectified in the actual clinical setting, the evaluator will then notify the student that he/she has failed the demonstration.

If the student fails to demonstrate a critical skill correctly, it is the student's responsibility to make an appointment for the second return demonstration session within the scheduled time frame. The student must have a different evaluator for the second return demonstration. In order to provide ample opportunity for further study and practice, the student MAY NOT schedule the

second demonstration session within 24 hours of the first return demonstration session. If a student fails to demonstrate a critical skill correctly during the second session, he/she will be required to sign a contract which specifies the criteria the student must meet in order to achieve an evaluation of pass on the critical skill. Failure to meet the criteria within the specified time frame will result in an evaluation of fail and a clinical rating of unsatisfactory for the course.

Developed October, 1985

Revised July, 2012

Reviewed annually through July, 2011

Guidelines for Clinical Warning and Critical Incident Reports

The following critical behaviors have been established as guidelines for safe practice in the clinical area.

1. Demonstrates professional behavior in clinical settings as outlined in the ANA Code of Ethics
2. Abides by policies and procedures of the health agency and Division of Nursing
3. Demonstrates preparation by developing a written care plan for a patient based on nursing assessment and evidence based practice principles.
4. Provides a consistent climate to promote emotional and physiological safety
5. Communicates effectively with patient's, family and members of the health team.
6. Demonstrates increasing proficiency in performing all skills required to implement the nursing process in a safe and proficient manner
7. Performs vital signs accurately
8. Adheres to medical and surgical aseptic technique
9. Administers medications safely and correctly (oral, IM, Subq., IV, IVP, IVPB)
10. Performs urinary catheterization safely and correctly
11. Administers intravenous therapy safely and correctly
12. Document pertinent information and report changes in patient status to the appropriate health care agency staff
13. Maintains patient confidentiality
14. Organizes and implements care within the appropriate time-frame
15. Achieve minimum grade of 80% on each care plan excluding NS 102
16. Performs venipuncture safely and correctly
17. Demonstrates safety with all nursing care
18. Verbalizes critical information on all prescribed medications and performs relevant nursing interventions
19. Performs psychomotor skills in a safe and appropriate manner.
20. Documents all entries in the medical record (written and/or electronic) according to agency policy
21. Demonstrate correct use of electronic devices and technology
22. Recognize and function within the role of provider and manager of care
23. Discriminate self-learning needs and accountability necessary to enhance continuous learning.

Any student who fails to meet all critical behaviors in the clinical setting will be notified according to the following guidelines:

1. Clinical Warning: A student will receive a written clinical warning for any first-time error in a critical behavior that does not unduly jeopardize the safety of a patient.
2. Critical incident:
 - A. If a student has previously received a clinical warning for violation of a critical behavior during the semester, a critical incident report will be issued for the

second violation of the same behavior. A third violation of the same behavior will constitute a clinical rating of unsatisfactory for the semester.

- B. If a student demonstrates a pattern of unsafe performance by violating different critical behaviors, a clinical warning and critical incident report in three different critical behaviors will constitute a clinical rating of unsatisfactory for the semester.
- C. A critical incident **WITHOUT** a clinical warning will be given for any violation of a critical behavior that unduly jeopardizes the safety of a patient.

Two formative U's on any one critical behavior or a total of three U's on different critical behaviors during the semester will result in a clinical grade of unsatisfactory and failure to progress in the program.

Any student who unduly compromises the safety of a patient will automatically receive a clinical grade of unsatisfactory for the semester and cannot progress in the program.

The student will receive a verbal clinical warning or incident during the clinical experience in which the violation occurred. The student will receive the written warning or incident during the first week following the clinical experience at which the incident occurred.

Revised July, 2012

Reviewed annually through July, 2012

Clinical Warning

The University of West Alabama
Ira D. Pruitt Division of Nursing

Date _____

Student's Name _____

Location of Incident

Critical Behavior Involved

Instructor's Description of Incident:

Student's Explanation and/or Comments:

I understand that the above incident constitutes a warning in an identified area of weakness in a critical clinical behavior. I understand that if this weakness is not corrected, I will receive a critical incident in the identified clinical behavior.

Student's Signature

Developed August, 1990
Reviewed annually through July, 2012

Instructor's Signature

Critical Incident Report

The University of West Alabama
Ira D. Pruitt Division of Nursing

Date _____

Student's Name _____

Location of Incident

Instructor's Description of Incident:

Student's Explanation and/or Comments:

I understand that this incident constitutes one rating of U on a critical clinical behavior. I understand that if I receive one more U in this behavior or 3 U's on different behaviors, I will receive a clinical rating of unsatisfactory for the course.

Student's Signature

Developed August, 1990
Reviewed annually through July, 2012

Instructor's Signature

THE UNIVERSITY OF WEST ALABAMA
IRA D. PRUITT DIVISION OF NURSING

Learning Resource Center Policies

The Learning Resource Center includes the Audiovisual Laboratory, Nursing Skills Laboratory, and the Computer Laboratories.

1. The Learning Resource Center will be open from 8:00 a.m. to 5:00 p.m., Monday thru Friday. The laboratories will be open only when faculty and/or the secretary is available.
2. No eating or drinking in the Learning Resource Center.
3. All hardware and software must remain in the Learning Resource Center.
4. All materials used in the Learning Resource Center must be returned to the place designated by the faculty after use. Please leave the center clean and neat.
5. After using audiovisuals, please rewind them for the next viewer's convenience and return them to the designated place.
6. If any equipment is defective, notify the secretary of the Division of Nursing.

Developed July, 1985

Revised July, 2012

Reviewed annually through July, 2012

UNIVERSITY OF WEST ALABAMA
 IRA D. PRUITT DIVISION OF NURSING
 CURRICULUM FOR ASSOCIATE IN SCIENCE IN NURSING DEGREE

First Year – Level I

SUMMER SEMESTER..... CR

EH 101 Written English I..... 3
 PY 100 General Psychology 3
 BY 231 Anatomy & Physiology I 4
 Total 10

FALL SEMESTER

BY 233 Applied Nutrition 3
 PY 310 Developmental Psychology 3
 BY 232 Anatomy & Physiology II..... 4
 *NS 101 Introduction to Nursing 2
 Total 12

SPRING SEMESTER

BY 240 Applied Microbiology..... 4
 EH 102 Written English II 3
 * NS 102 Foundations of Nursing Practice I 6
 Total 13

SUMMER SEMESTER

 Humanities Elective 3
 * NS 103 Foundations of Nursing Practice II 6
 Total 9

Second Year – Level II

FALL SEMESTER

NS 201 Maternal-Child Nursing 7
 NS 202 Adult Health Nursing 7
 Total 14

SPRING SEMESTER

NS 203 Mental Health Nursing..... 5
NS 204 Advanced Adult and Critical Care Nursing 9
Total 14

Summary of Credits..... CR

Biological Sciences..... 15
Social Sciences..... 6
English 6
Humanities 3
Nursing 42
Total Credit Hours 72

Revised July 2012

Reviewed annually through July 2012

The University of West Alabama
Ira D. Pruitt Division of Nursing
Health Insurance Portability and Accountability Act of 1996 (HIPAA) Policy

The HIPAA Privacy rule, also referred to as the Standards for Privacy of Individually Identifiable Health Information, provides federal protection for personal health information. The Enforcement Rule sets civil money penalties for violating HIPAA rules and establishes procedures for investigations and hearings. A person who knowingly obtains or discloses individually identifiable health information is subject to a criminal monies penalty and imprisonment. Criminal penalties increase if the wrongful conduct involves false pretenses with the use or transfer of identifiable health information for personal gain or malicious harm. The privacy rule protects individually identifiable health information in any form or media. This health information is information that relates to the individual's past, present or even future mental or physical condition of health, and the provision of health care to an individual. Identifiable health information identifies the individual or there is a reasonable basis to believe it can be used to identify the individual.

The Division of Nursing is affiliated with a variety of health care institutions that provide clinical experiences for nursing students. As an affiliate, the Division of Nursing is held to the same standards and regulations related to the privacy of health care information as the institution. Violation of the HIPAA policy will result in the failure of the clinical component of the nursing course.

Developed July 2011

Notes