Nursing Student Handbook 2015-2016

Chandler-Gilbert Community College
Estrella Mountain Community College
GateWay Community College
Glendale Community College
Mesa Community College
Paradise Valley Community College
Phoenix College
Scottsdale Community College
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NOTE: This Handbook prescribes standards of conduct for students enrolled in the MaricopaNursing Program. The standards are in addition to those detailed under Maricopa Community College’s Policies and Administrative Regulations. Violation of any such standard may serve as grounds for program dismissal, suspension, or other discipline. The Nursing Leadership Council (NLC) reserves the right to make program changes as needed, and to change without previous notice any information requirements and regulations published in this document.
I. PROGRAM INFORMATION

A. DESCRIPTION

MaricopaNursing is a consortium of nursing programs at eight of the Maricopa Community Colleges. Chandler-Gilbert Community College, Estrella Mountain Community College, GateWay Community College, Glendale Community College, Mesa Community College, Paradise Valley Community College, Phoenix College, and Scottsdale Community College are the colleges within the MaricopaNursing consortium. In 2010, the Maricopa Community College District Nursing Program became the consortium of MaricopaNursing. The consortium shares a common outcome-based integrated curriculum culminating in an Associate of Applied Science degree in nursing; shared agreements for academic standards including admission criteria, progress and graduation standards; shared agreements for development and implementation of student procedures and guidelines as delineated in the Nursing Student Handbook; and a shared governance model which supports the Nursing Leadership Council as the responsible party for decisions regarding nursing at Maricopa. Clinical experiences are provided in a variety of healthcare settings. Completion of the nursing courses and general education degree requirements and subsequent posting of the degree provides eligibility for students to apply for licensure as registered nurses. Licensing requirements are the exclusive responsibility of the State Boards of Nursing.

Each MaricopaNursing college is nationally accredited by the Accreditation Commission for Education in Nursing (ACEN), address: 3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326. MaricopaNursing programs are approved by the Arizona State Board of Nursing (AZBN) at 4747 N. 7th St. Suite 200, Phoenix, AZ 85014, 602.771.7800.

B. OCCUPATIONAL INFORMATION

Graduates receiving an Associate in Applied Science in Nursing degree are eligible to apply for licensure as a Registered Nurse (R.N.). The R.N. is educated as a generalist who delivers health care to clients and family groups and has competencies related to the art and science of nursing. The R.N. may be employed in a variety of acute, long-term, and community-based health care settings. Registered Nurses function within the legal scope of practice and use professional standards of care when caring for clients and families across the life span. The degree provides the graduate with an educational foundation for articulation into the university setting.

C. ELIGIBILITY FOR LICENSURE

Students completing graduation requirements for the Associate in Applied Science degree in Nursing are eligible to apply for licensure as registered nurses. Applicants for licensure in Arizona must provide evidence of citizenship or nationality. Licensing fees and requirements are determined by and are the sole responsibility of the State Boards of Nursing. For all questions about eligibility for licensure and the documents required showing eligibility, contact the Arizona State Board of Nursing. For further information, go to https://www.azbn.gov or call 602-771-7800.

D. VISION

MaricopaNursing is committed to empowering novice nurses with knowledge, skills and attitudes to assume nursing roles across the healthcare system.

E. MISSION

Congruent with the mission of Maricopa Community Colleges, MaricopaNursing provides accessible, affordable quality nursing education that prepares graduates to serve in diverse communities.

F. PHILOSOPHY

MaricopaNursing is aligned with Nurse of the Future Competencies: Patient-Centered Care, Professionalism, Leadership, Systems-Based Practice, Informatics and Technology, Communication, Teamwork and Collaboration, Safety, Quality Improvement, and Evidence-Based Practice.
Demonstration of the competencies signifies preparation for successful transition into nursing practice and further professional development. MaricopaNursing has adopted a constructivist framework which guides delivery of educational experiences, acknowledging the uniqueness and complexity of the individual learner and the importance of active learning and personal engagement in the process of learning.

II. PROGRAM COMPETENCIES

1. Provide advocacy and individualized care for diverse populations. (NUR152, NUR172, NUR252, NUR283)
2. Demonstrate accountability for legal and ethical behaviors that reflect standards of professional nursing practice. (NUR152, NUR172, NUR252, NUR283)
3. Coordinate nursing care for multiple patients in collaboration with health team members for the acquisition/achievement of shared outcomes. (NUR152, NUR172, NUR252, NUR283)
4. Discuss healthcare micro and macro systems and their impact on patient care. (NUR152, NUR172, NUR252, NUR283)
5. Integrate technology to provide safe quality care and improve patient outcomes, managing information confidentially and effectively. (NUR152, NUR172, NUR252, NUR283)
6. Demonstrate effective communication skills while fostering mutual respect and shared decision making with patients, families and colleagues. (NUR152, NUR172, NUR252, NUR283)
7. Function effectively within interdisciplinary teams fostering open communication, shared decision- making and team development. (NUR152, NUR172, NUR252, NUR283)
8. Provide safe, quality care while minimizing risk of harm to patients and providers. (NUR152, NUR172, NUR252, NUR283)
9. Demonstrate accountability for quality improvement of personal performance, patient care and health care systems. (NUR152, NUR172, NUR252, NUR283)
10. Utilize evidence-based practice to meet individualized needs across the health care continuum. (NUR152, NUR172, NUR252, NUR283)
### III. PROGRAM OF STUDY – ADMISSION BEGINNING JULY 2015

<table>
<thead>
<tr>
<th>General Education Prerequisite Courses</th>
<th>BLOCK 1</th>
<th>BLOCK 2</th>
<th>BLOCK 3</th>
<th>BLOCK 4</th>
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</thead>
<tbody>
<tr>
<td>MAT140, 141, or 142 College Math</td>
<td>NUR152</td>
<td>NUR172</td>
<td>NUR252</td>
<td>NUR283</td>
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<tr>
<td>3-5 Credits</td>
<td></td>
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<tr>
<td>BIO156/181 or 1 yr. HS BIO Biology 201</td>
<td>Nursing Theory &amp; Science I</td>
<td>Nursing Theory &amp; Science II</td>
<td>Nursing Theory &amp; Science III</td>
<td>Nursing Theory &amp; Science IV</td>
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<td>0-4 credits</td>
<td>9 credits</td>
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<tr>
<td>Human Anatomy &amp; Physiology I</td>
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<td>CHM130/130LL or 1 yr. HS CHM Chemistry</td>
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<tr>
<td>0-4 Credits</td>
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<tr>
<td>ENG 101 or 107</td>
<td>BIO202 Human Anatomy &amp; Physiology II</td>
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<tr>
<td>First Year Composition</td>
<td>(Pre-req to NUR172)</td>
<td>PSY101 Introduction to Psychology</td>
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<tr>
<td>3 Credits</td>
<td>4 Credits</td>
<td>(Pre-req to NUR252)</td>
<td>3 Credits</td>
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<tr>
<td></td>
<td></td>
<td>(Pre-req to NUR283)</td>
<td>4 credits</td>
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<td>2 credits</td>
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<td></td>
<td>CRE101 Critical &amp; Evaluative Reading</td>
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<tr>
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<td>0-3 Credits</td>
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<tr>
<td>TOTAL 13 credits</td>
<td>TOTAL 12-15 credits</td>
<td>TOTAL 13 credits</td>
<td>TOTAL 14 credits</td>
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</tbody>
</table>

**Prerequisite Credits = 10-12**

**Total Nursing Core Credits = 36**

**General Education Co-requisite Credits = 16-19**

**Total Credits for AAS in Nursing Degree = 62-75**
IV. GENERAL INFORMATION

A. Advisement – Academic advisement is available at each campus.

B. Sequence of Courses
1. The nursing courses are sequential and the successful completion of each course is a pre-requirement for admission to the next level or successive courses within the same Block.
2. A student admitted into a Block must enroll in each nursing course at the college of admission. Students may take a nursing course at another college only with written notification of the Nursing Director and completion of the transfer form.

C. Attendance Guidelines
1. Students must be registered for the class in order to attend.
2. It is the responsibility of the student to notify the Office of Admissions and Records for withdrawals to discontinue studies in a course or at the college.
3. Students will be held to Maricopa Community College District (MCCD) policies and procedures related to attendance (see College Catalog, Administrative Regulations, 2.3.2). "Attendance requirements are determined by the course instructor. Students who do not meet the attendance requirement as determined by the course instructor may be withdrawn… Students who fail to attend the first scheduled class meeting, or who fail to contact the instructor regarding absence before the first scheduled class meeting may, at the option of the instructor, be withdrawn."
4. Nursing classes prepare students for safe client care, and faculty expect students to attend each class, laboratory, and clinical session to develop the theoretical and practice components of the professional nursing role. It is the responsibility of the student to notify the instructor prior to absence or anticipated late arrival. Laboratory and clinical hours are often not possible to make-up and students must not expect make-up time to be available. When an absence results in the inability of the student to develop and demonstrate clinical practice objectives and meet the required hours of the course necessary for credit, the student cannot receive a passing grade.
5. In the event that an absence is necessary for serious illness of the student or family member, the absence policy of the nursing program includes:
   a. Theory/didactic sections: Students are expected to attend all classes necessary to meet criteria of the course. If an absence occurs, the student is responsible to obtain class notes and assignments. Students may not arrive late or leave early as these behaviors disrupt the learning environment. A faculty member has the right to deny entrance to the class if students arrive after the start of class and to initiate disciplinary actions for students leaving class early.
   b. Practice Laboratory Sessions: Students must attend all laboratory sessions. Makeup time for skills taught in lab may not be possible. Students will be graded on successful demonstration of skills and procedures learned in the laboratory session and must review skills prior to client care. All students are encouraged to spend time in the nursing practice laboratory in addition to the scheduled time to gain experience in nursing skills and procedures required for safe client care.
   c. Clinical Sessions: Students are expected to attend all clinical sessions necessary to meet the objectives and hourly requirements of the course.
      1) Clinical hours include pre-clinical laboratory practice, pre- and post-conferences, all scheduled clinical days, alternative clinical learning activities, and simulation.
      2) All students must complete the Online Clinical Orientation (OCO) requirements and attend the agency-specific orientation prior to all clinical
rotations. Any student who fails to complete the OCO requirements, or is absent on a day of orientation without prior instructor approval, may not continue in the rotation.

3) Late arrival or leaving early from the clinical experience may result in a student conference form and place the student at risk for failing to achieve the course competencies.

4) Clinical experiences scheduled in psychiatric/mental health, obstetrical, and pediatric rotations are assigned to meet the minimum course requirements.

5) In case of serious illness or emergency situations, a student may find an absence unavoidable. When an absence occurs, the student must notify the clinical instructor in advance of the clinical hours. Any absence can jeopardize successful achievement of course competencies. Consequences of any absences will be determined at the time of the clinical evaluation.

6) The nursing program does not routinely provide “make-up” clinical hours.

6. Special Circumstances: There are no provisions for an “excused absence” outside the following list as described in the college policies (see college catalog). All requests for an excused absence must meet the college policy and the request is to be sent directly to the nursing department director and the primary course instructor. Official Absences, as described in the college catalog, are those that occur when students are involved in an official activity of the college. Students must present the official absence verification form to the instructor before the absence. Prior arrangements must be made with each instructor for makeup work. If an absence is prolonged and too much content is missed an incomplete may need to be given. Appropriate documentation is required.

- Jury duty and subpoenas.
- Event of death of an immediate family member.
- Religious holidays - Student must provide a written statement including the date of the holiday and a reason why class attendance is impossible.

V. CHANNELS OF COMMUNICATION

There is an expectation of mutual respect between faculty and students. If an issue should arise, the student should request a meeting with the faculty member to discuss the issue. Issues are often resolved by direct communication between the faculty member and the student.

A. Instructional Grievance Process (from the Maricopa Community Colleges Common pages: https://chancellor.maricopa.edu/public-stewardship/governance/administrative-regulations/appendices/students/s-6-instructional-grievance-process)

A student who feels that he or she has been treated unfairly or unjustly by a faculty member with regard to an academic process such as grading, testing, or assignments, has the right to appeal according to the approved procedures. The grievance process for grades must be initiated no later than sixty (60) calendar days from the date the grade was issued.

Steps for students to follow:

1. If, within ten (10) working days of the request for the conference with faculty member, the problem is not resolved or the faculty member has been unable to meet with the student, the student may continue the process by filing a written grievance with the Department/Division Chairperson and appropriate administrative officer at the college/center. This written grievance must be filed within ten working days following the previous deadline. The written grievance will be given to the faculty member five days before any official meetings are convened.

2. Upon receipt of a written grievance, the Department/Division Chair or appropriate college
administrative officer will work with the parties in an attempt to resolve the conflict. The faculty may ask that the College Faculty Senate President be in attendance. Every attempt will be made to maintain confidentiality during this process. A faculty member will not be required to respond to a grievance which is not in writing and which, when appropriate, did not have specific documentation including dates, times, materials, etc. The written grievance will be made available to the faculty member.

3. If the grievance is not resolved at this level within ten working days, the student should forward to vice president of academic affairs or designee, a copy of the original written grievance with an explanation regarding action taken at each prior level. The dean of instruction or appropriate college/center administrative officer will meet with the student, faculty member, the College Faculty Senate President if requested by the faculty member, and Department/Division Chair and attempt to resolve the issues. This level will be the final step in any grievance process regarding grades.

4. If the grievance, other than those concerning grades, is not resolved by the vice president of academic affairs or designee, it may be forwarded in writing by the student to the college president for final resolution. The college president or designee will issue a final written determination in the grievance process.

5. Instructional grievances are resolved at the college level. The district office is not an avenue of appeal for the instructional grievance process.

B. Non-Instructional Complaints

Students who have non-instructional complaints have the right to file a formal and written complaint according to approved procedures. Refer to the MCCD S-8 Non-Instructional Complaint Resolution Process (https://chancellor.maricopa.edu/public-stewardship/governance/administrative-regulations-appendices/students/s-8-non-instructional-complaint-resolution-process) for additional information. Unresolved student-specific policy matters may be reviewed by the Nursing Leadership Council, the administrative body of MaricopaNursing.

Students who believe they have been adversely affected by illegal or prohibited discrimination based on race, religion, color, national origin, citizenship status, sex, sexual orientation, gender identity, age, veteran status, physical or mental disability, or genetic information may submit a complaint. For further information regarding informal and formal resolution options, see Discrimination Complaint Procedures for Students (https://legal.maricopa.edu/harassment/discrimination-complaint-procedures-for-students). Information related to MCCCD's Discrimination Complaint Procedure for Students is also available from the Office of General Counsel's Office of Public Stewardship at 480-731-8880.

VI. STUDENT REPRESENTATION

All students are encouraged to provide input on decisions including admission standards, curriculum, student services, and the teaching/learning process. Students are invited to become active in student government and nursing student associations and organizations, both on campus and in the community.

The following list includes examples of ways that students can become involved in governance:

- Participate in End of Block, End of Program, and Alumni surveys.
- Provide honest and fair feedback to your instructor when asked to complete instructor and course evaluations at the end of a course.
- Participate in student forum activities.
- Volunteer for committee membership by informing the Director of your Nursing Program in writing that you would like to serve on the Curriculum, Advisory, and/or Student Affairs Committees.
- Provide input when your peers are representing your issues at committee meetings and student forums.
VII. PROFESSIONAL APPEARANCE

The following guidelines are mandatory for students to remain in compliance with the dress code:

- Students must present themselves in a professional manner at all times while enrolled in the nursing program. Students must be in compliance with the professional dress code guidelines at all times to remain in the clinical setting. If there are exceptions, alternate style of dress will be described by the faculty member involved. A student may be dismissed from the program and receive a failing grade in the course based on the inability to place the student in a clinical facility due to noncompliance with the professional appearance policies.
- Students are to wear the official nursing program uniform in all clinical settings unless setting or agency requires other clinical attire. Students in preceptorship are required to wear the official nursing program uniform unless otherwise required by the agency.
- Uniforms should fit so that when the student bends forward, the bottom hem of the uniform top covers the pants’ waistband in the back. Visible chest cleavage is not permitted.
- Pant hems should be tailored as to not drag on the floor when walking or standing.
- Students may wear a plain white or black t-shirt under the uniform. No other colors are permitted. The t-shirt may be sleeveless, short or long-sleeve. Turtlenecks are permitted. The official student uniform jacket or a plain white lab coat may be worn over the uniform. Sweaters, hoodies, or other types of similar apparel are not permitted in the clinical setting.
- Picture ID badge must be worn at all times above the waist with the picture facing forward while in the clinical agency.
- White or black socks or neutral nylons must be worn with the uniform. Other color socks are not permitted.
- Uniform style shoes are to be white or black with low heels. No open toes, backless shoes or sandals. White or black clogs (no other colors are permitted) with a back strap are permitted. All shoes must have a non-porous top. Shoes and laces must be clean.
- The uniform must be clean and wrinkle-free. Undergarments must be worn at all times, be of neutral color, and cannot be visible.
- The only jewelry that may be worn with the uniform is a wedding/engagement ring, one pair of small post earrings in earlobes only, and a wristwatch. No other body piercing jewelry is allowed. If necessary, a small skin toned bandage is permitted to cover a visible piercing. Necklaces must be kept under clothing and not visible. In certain clinical rotations, it may be advisable to not wear any jewelry at all.
- Earlobe gauges must be filled or covered in flesh tones.
- No objects of any type may be worn in the tongue. In all cases, the student must be in compliance with the professional appearance policy of the clinical agency. No accommodation will be made to change location of clinical experiences.
- Tattoos must be covered if possible. Tattoos which cannot be covered must not convey a message that is contrary to MaricopaNursing professional standards and must not pose a potential customer relations issue.
- Hair must be clean, combed, natural color (not pink, blue, purple, etc.), worn up/off the collar, and worn back from face while in uniform to meet health and safety standards. Unconventional hair styles (such as a Mohawk) are not permissible in lab or clinical settings. Closely trimmed beards, sideburns, and mustaches are permitted, but must meet facility policy for client safety. No hair adornments may be worn in the hair to the clinical/lab setting (i.e. artificial flowers, scarves, or jewels).
- Makeup should be minimal and in good taste.
- No chewing gum while in the nursing laboratory or in the clinical setting.
• Students will maintain personal hygiene, including oral care. Students will be free of offensive body odor and/or cigarette odor. No cologne, after-shave, scented lotions, and/or perfumes are permitted.

• Fingernails must be clean, short with clear, neutral or pale polish, if any. Artificial nails, gel polish nail wraps, or extenders are not permitted in the clinical setting.

Unacceptable Attire in the Clinical and/or Laboratory Setting and College-Sponsored Events: No thin or see-through clothes, sleeveless tops, sun dresses, halter tops, tank tops, T-shirts, shorts, mini dresses, sweat tops or pants, jogging suits, or open toe shoes. When in clinical and lab settings, students are required to wear the complete MaricopaNursing uniform with name badge as outlined above.

VIII. INFORMATION TECHNOLOGY

Courses within the nursing program of study use online resources as a learning and communication tool between instructors and students. Students will need access to a computer and network connection.

Criteria for Use of Electronic Devices in Clinical and Classroom Settings:

Mobile devices can be a valuable tool for healthcare education when used appropriately. The following guidelines apply:

• Professional behavior and proper technology etiquette should be observed at all times when using cell phones, iPads, iPods, mobile devices, laptops or other electronic devices.

• These may be used only when authorized by faculty and for clinical activities, not personal use.

• Cell phones and all mobile devices must be on “silent” mode or turned off during class, lab, and clinical experiences.

• No photos may be taken by students in the clinical agency or lab environments. The exception to taking photos or videos in the laboratory environment is when it is a course assignment.

• No personal phone conversations or texting allowed at any time while in lab, class, or clinical.

• A clinical probation will be given for the first violation of using the mobile device for socializing during clinical time. A second violation may result in course failure.

• For combined cell phone/mobile device appliances, students are expected to have the equipment turned off if agency policy requires it and go to an area designated for cell phone use when accessing information on their mobile device.

• Be respectful to the client at all times and ensure that your entire attention is focused on the client when you are in the client’s room. If you are using any type of mobile device at the bedside be sure to apologize for the interruption in care and explain how this will help in their care.

• Faculty or hospital staff may ask to see what programs you are using at any time. Use of facility computers for personal use is prohibited.

• Students must protect the confidentiality of patient information at all times in accordance with HIPAA. Students may not take any photographs of clients or client records, nor make Xerox copies of client records.

• Students who fail to comply with HIPAA may be subject to clinical agency, civil, and criminal penalties and may be subject to disciplinary action by the college.

• Just as other medical equipment may act as a reservoir for microorganisms and contribute to the transfer of pathogens, so may mobile devices. Be sure to disinfect/decontaminate them as needed.

• Social networking sites: When contributing to a social networking site, it is important to remember that everyone can see and read what is placed on the site even if “privacy” options are selected. Keep your interactions professional and err on the conservative side when placing
written communication or posting pictures. Always remember that your online presence reflects you as a professional. Be aware that your actions captured via images, posts, or comments can reflect on you and many recruiters now routinely search the social networking venues when considering persons for employment. **It is never appropriate to post patient photos or information.** Social network postings can be subject to disciplinary action from the nursing program.

For additional information on the prudent use of social media to prevent professional or personal repercussions, see NCSBN Social Media Guidelines [https://www.ncsbn.org/347.htm](https://www.ncsbn.org/347.htm)

**IX. PROGRESSION AND RETENTION IN THE NURSING PROGRAM**

**A. Methods of Evaluation - Grading Guidelines**

1. Nursing courses in the Program of Study (core courses) utilize the following grading scale: **GRADE SCALE** (cumulative):

   - 92—100 = A
   - 84—91 = B
   - 76—83 = C
   - 68—75 = D
   - 67 and below = F

2. To receive a passing grade (C or better) the student must:
   - Achieve an average score of 76% or better on proctored examinations. No rounding will occur with the calculation of the final course grade to achieve a passing score of 76%.
   - Obtain a satisfactory rating on each laboratory practicum.
   - Consistently function at “Satisfactory” level for each of the clinical competencies on the evaluation form. The final formative evaluation may not contain “Needs Improvement” or “Unsatisfactory” ratings.
   - Achieve an average score of 76% or greater of all course points.
   - Meet all course requirements as described in the course syllabus.

3. Nursing courses are not graded on a curve; grades are earned without regard to the scores of other students.

4. No test or remediation examinations can be retaken or given to improve a score.

5. All nursing courses will include a comprehensive final exam of all essential nursing theory and lab/clinical content appropriate to determine student achievement of course competencies.

6. Failing the clinical component of a course will result in a grade of “D” or “F” for the course.

7. Final exams are not available for review; however, an instructor may review content areas with the student and/or discuss areas of concern to focus future study.

8. A student may be dismissed from the program and receive a failing grade in the course based on the inability to place the student in a clinical facility.

**B. Course Requirement: Exit Testing and Remediation**

Near the end of each Block, the student will take a computerized Elsevier Evolve Block Exit Examination. The score is included as proctored exam points and is a part of the course grade. The primary purpose of these examinations is to assess the student’s achievement of nursing knowledge at his/her current level. The assessment will determine specific, individualized remediation materials that contribute to the student’s success in progressing to the next Block and completion of the nursing program.
Immediately after the assessment each student receives an overview with the raw test score, conversion score, and comparison scores. After completing the exam, each student will receive an email from Elsevier Evolve with individualized remediation and suggested study materials.

C. Progression

To qualify for enrollment through the subsequent Blocks of the nursing program the following must be achieved:

1. Pass all components of the current nursing course.
2. Maintain compliance with the Health and Safety Requirements of the nursing program throughout the semester of enrollment.
3. It is the responsibility of the student to comply (provide transcript documentation) with all pre and co-requisite requirements for progression and graduation (see Appendix, General Education Course Requirements.)
4. In order to qualify for the NCLEX-PN examination following completion of Blocks 2 or 3, the student must successfully complete NUR191, Practical Nursing Transition.

D. Graduation Requirements

1. Block 4 students must complete an application for the degree through the Admissions and Records department prior to the due date noted in the college catalog.
2. Students must meet the general education course and nursing course requirements for the Associate in Applied Science (AAS) degree in Nursing. The AAS degree is awarded according to the policies, procedures, and requirements described in the college catalog.
3. The AAS degree must be posted on the student’s transcripts before authorization is given to the State Board of Nursing to take the licensing exam.
4. Authorization (Certificate of Program Completion) is mailed to the Arizona State Board by the college Admissions & Registration office.
5. Eligibility to take the National Examination for Licensure as a Registered Nurse (NCLEX): Students must have a high school diploma or GED certificate and proof of graduation from an accredited/approved nursing program. Completion of the nursing program and graduation from a college does not guarantee passage of the licensing exam. Application for and passage of the exam is the sole responsibility of the student.

E. Investigative and/or Disciplinary Actions of Regulatory Boards

1. All students enrolled in nursing courses requiring or receiving a certificate as a Nurse Assistant and/or license as a Practical Nurse must remain in good standing with the Board of Nursing. Students with certification and/or licensure from allied health regulatory boards are included under this provision.
2. Students receiving any investigative or disciplinary actions against their certificate or license must notify the Nursing Director within five (5) school days. Failure to notify the Nursing Director may result in restriction or withdrawal from nursing courses.
3. Once admitted, any student who becomes sanctioned, excluded, or has the fingerprint clearance card suspended or revoked while enrolled in the program will not be permitted to continue.

F. Transfer within MaricopaNursing

A student in good standing who successfully completes nursing courses may transfer between campuses on a space available basis by following the steps listed below:

1. Obtain the transfer form from the Division/Department office or faculty member and complete all parts of the transfer form.
2. Inform and obtain signature from the Nursing Director/designee of the home campus.
3. Send the form (fax, email or in person) to the Nursing Director of receiving campus.

4. A transfer is confirmed upon student acceptance. It is the responsibility of the student to notify both nursing departments in a timely manner if a transfer is no longer desired. Placement is not guaranteed until the student is officially registered.

G. Readmission Guidelines

1. A student exiting the nursing program for any reason must complete an Exit Interview Form with the Director or designee to be eligible for readmission or transfer. The Exit Interview Form should include the scores on admission and exit tests.

2. **No student is guaranteed readmission.** A student may be granted ONE readmission if there is space available and the student has had no previous readmissions. If the student wishes to attend another MaricopaNursing campus, the student must provide the Director of the nursing program at the desired site a copy of his/her Exit Interview Form and request readmission.

3. A readmission may be granted for the next available traditional semester. The final determination for readmission is made by the Nursing Director.

4. All readmissions are subject to space availability and approval of the Nursing Director. Factors which may be considered for readmission include but are not limited to final nursing course grades, HESI scores and course evaluations.

5. The Nursing Director and/or designee may specify certain required or recommended criteria for readmission. Criteria may include repeating academic courses, work experience, remediation, counseling, or other activities to promote success of the student.

6. The Nursing Director and/or the Nursing Leadership Council reserves the right to deny a request for readmission if the student was dismissed for issues relating to academic integrity, unsafe patient care, or inappropriate conduct.

7. The Nursing Director and/or the Nursing Leadership Council reserves the right to approve an admission or readmission for a student in good standing who has to defer or withdraw for an unexpected event such as illness/injury, military deployment, or other unforeseen event.

8. All students requesting readmission must meet all program admission requirements, including HESI A2, HESI PN, and health and safety documentation. The Nursing Director may offer the student placement based on space available into the appropriate block. No readmission is guaranteed.

H. Block-Specific Policies for Readmission:

**Block 1:** A student exiting for a withdrawal or a failure must file an application for new student admission and meet current admission requirements.

**Block 2:** A student exiting for a withdrawal or a failure may request readmission into the next available traditional semester. The maximum amount of time a student may be out of the program is not to exceed two semesters. If more than two semesters, the student must apply as a new student, and meet the current admission criteria and repeat all nursing courses.

**Block 3:** A student exiting for a withdrawal or a failure may request readmission into the next available traditional semester. If longer than two semesters, the student must apply as an advanced placement student and meet current admission requirements.

**Block 4:** A student exiting for a withdrawal or a failure may request readmission into the next available traditional semester. If longer than two semesters, the student must apply as advanced placement into block 2 or 3 and meet current admission requirements.
If a student has had two withdrawals/failures or any combination of the two from the nursing program for any reason, the student is required to reapply to the nursing program (withdrawals/failures in blocks 1 and/or 2) or to complete an advanced placement packet (2nd withdrawal/failure in block 3 and/or 4).

X. HEALTH AND SAFETY GUIDELINES

A. Health Declaration

It is essential that nursing students be able to perform a number of physical activities in the laboratory and clinical portions of the program. At a minimum, students will be required to lift patients, stand for several hours at a time and perform bending activities. Students must be able to provide direct patient care with no restrictions. The clinical nursing experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients’ lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions to remain in the program. Individuals should give careful consideration to the mental and physical demands of the program prior to making application.

B. Health and Safety Requirements*

1. All students entering nursing courses must meet all health and safety requirements to remain enrolled in the nursing course. Students will provide documentation of all immunizations, laboratory testing, certifications, a completed and signed Health and Safety Documentation Checklist, and other documents as directed.

2. Students unable or unwilling to provide documentation of compliance with the health and safety requirements will not be registered or allowed to continue in nursing courses. Due to the need to protect patient safety, a licensed health care provider’s note or other documentation will not negate the need to complete all health and safety documentation requirements.

3. A variance from this policy is available due to religious or medical reasons. The Nursing Director must be informed of the need for an immunization variance prior to the student’s formal acceptance into the program. Every attempt will be made to place the student in clinical rotations to meet the competencies of the course; however, if a clinical placement cannot be obtained the student may be given an incomplete, may not move forward with his/her cohort, and, in some circumstances, may not be able to complete the program of study. In all instances, confirmation of TB status is required, and verification of immune status is required by proof of titers for all required elements. For a medical variance, appropriate documentation from a licensed health care provider is required. Some facilities require an influenza vaccination and a waiver is not accepted. In those instances a student with no immunization will not be able to attend clinical in that facility.

4. In circumstances of student illness, injury, or other health limitations, both the clinical agency and the college health policies must be upheld. The faculty member and/or clinical agency representative will determine a student’s ability to provide nursing care, regardless of a physician’s approval for return. Under no circumstance will a student with restrictions (such as non-weight bearing, in a cast, orthopedic boot, or other health care restrictions) be allowed to participate in clinical activities.

5. Level One Fingerprint Clearance Card (FCC): A Level One DPS FCC is required for enrollment in nursing courses. Students unable to maintain a current fingerprint clearance card will be withdrawn from nursing courses. If the FCC is suspended or revoked at any time during the nursing program, the student has the duty to report the change in status of the FCC to the Nursing Director within five (5) school days and will be unable to continue in the program until the FCC is reinstated. The student must be able to show his or her FCC during the clinical rotations upon request.
* Health and Safety requirements are subject to change without notice depending on clinical agency requirements.

C. Disabilities

1. Students are expected to participate fully in activities required by the program. See the Essential Skills and Functional Abilities for Nursing Students.

2. Any student having a temporary medical condition inhibiting/restricting their activities must supply a written explanation from their physician. Should a student become unable to participate fully in the program’s activities, he/she may be given an incomplete or withdrawn.

3. Should the student require any type of special accommodation, the student must notify the Disability Services and Resources (DSR) Office. The DSR office should be contacted before the first class meeting. Special accommodations for testing will be given only with appropriate documentation of special needs.

4. Official documentation of disability is required for any accommodation, including, but not limited to, additional time for testing, alternative environments, or reference materials.

D. Essential Skills and Functional Abilities for Nursing Students

Individuals enrolled in MaricopaNursing must be able to perform essential skills. If a student believes that he/she cannot meet the standards without accommodations, the nursing program must determine, on an individual basis, whether reasonable accommodation can be made. The ultimate determination regarding reasonable accommodations will be based upon the preservation of patient safety.
## Essential Skills and Functional Abilities for Nursing Students

<table>
<thead>
<tr>
<th>Functional Ability</th>
<th>Standard</th>
<th>Examples Of Required Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Motor Abilities</strong></td>
<td>Physical abilities and mobility sufficient to execute gross motor skills, physical endurance, and strength, to provide patient care.</td>
<td>Mobility sufficient to carry out patient care procedures such as assisting with ambulation of clients, administering CPR, assisting with turning and lifting patients, providing care in confined spaces such as treatment room or operating suite.</td>
</tr>
<tr>
<td><strong>Manual Dexterity</strong></td>
<td>Demonstrate fine motor skills sufficient for providing safe nursing care.</td>
<td>Motor skills sufficient to handle small equipment such as insulin syringe and administer medications by all routes, perform tracheotomy succioning, insert urinary catheter.</td>
</tr>
<tr>
<td><strong>Perceptual/ Sensory Ability</strong></td>
<td>Sensory/perceptual ability to monitor and assess clients.</td>
<td>Sensory abilities sufficient to hear alarms, auscultatory sounds, cries for help, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Visual acuity to read calibrations on syringe, assess color (cyanosis, pallor)</td>
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<tr>
<td></td>
<td></td>
<td>Tactile ability to feel pulses, temperature, palpate veins, etc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Olfactory ability to detect smoke, odor.</td>
</tr>
<tr>
<td><strong>Behavioral/ Interpersonal/ Emotional</strong></td>
<td>Ability to relate to colleagues, staff and patients with honesty, civility, integrity and nondiscrimination. Capacity for development of mature, sensitive and effective therapeutic relationships.</td>
<td>Establish rapport with patients/clients and colleagues.</td>
</tr>
<tr>
<td></td>
<td>Interpersonal abilities sufficient for interaction with individuals, families and groups from various social, emotional, cultural and intellectual backgrounds.</td>
<td>Work with teams and workgroups.</td>
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<tr>
<td></td>
<td>Ability to work constructively in stressful and changing environments with the ability to modify behavior in response to constructive criticism.</td>
<td>Emotional skills sufficient to remain calm in an emergency situation.</td>
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<td></td>
<td>Negotiate interpersonal conflict.</td>
<td>Behavioral skills sufficient to demonstrate the exercise of good judgment and prompt completion of all responsibilities attendant to the diagnosis and care of patients.</td>
</tr>
<tr>
<td></td>
<td>Capacity to demonstrate ethical behavior, including adherence to the professional nursing and student honor codes.</td>
<td>Adapt rapidly to environmental changes and multiple task demands.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Maintain behavioral decorum in stressful situations.</td>
</tr>
<tr>
<td>Functional Ability</td>
<td>Standard</td>
<td>Examples Of Required Activities</td>
</tr>
<tr>
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</tr>
</tbody>
</table>
| Safe environment for patients, families and co-workers | Ability to accurately identify patients.  
Ability to effectively communicate with other caregivers.  
Ability to administer medications safely and accurately.  
Ability to operate equipment safely in the clinical area.  
Ability to recognize and minimize hazards that could increase healthcare associated infections.  
Ability to recognize and minimize accident hazards in the clinical setting including hazards that contribute to patient, family and co-worker falls. | Prioritizes tasks to ensure patient safety and standard of care.  
Maintains adequate concentration and attention in patient care settings.  
Seeks assistance when clinical situation requires a higher level or expertise/experience.  
Responds to monitor alarms, emergency signals, call bells from patients, and orders in a rapid and effective manner. |
| Communication | Ability to communicate in English with accuracy, clarity and efficiency with patients, their families and other members of the health care team (including spoken and non-verbal communication, such as interpretation of facial expressions, affect and body language).  
Required communication abilities, including speech, hearing, reading, writing, language skills and computer literacy  
Communicate professionally and civilly to the healthcare team including peers, instructors, and preceptors. | Gives verbal directions to or follows verbal directions from other members of the healthcare team and participates in health care team discussions of patient care.  
Elicits and records information about health history, current health state and responses to treatment from patients or family members.  
Conveys information to clients and others to teach, direct and counsel individuals in an accurate, effective and timely manner.  
Establishes and maintain effective working relations with patients and co-workers.  
Recognizes and reports critical patient information to other caregivers. |
<table>
<thead>
<tr>
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<th>Standard</th>
<th>Examples Of Required Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognitive/Conceptual/Quantitative Abilities</td>
<td>Ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis. Ability to gather data, to develop a plan of action, establish priorities and monitor and evaluate treatment plans and modalities. Ability to comprehend three-dimensional and spatial relationships. Ability to react effectively in an emergency situation.</td>
<td>Calculates appropriate medication dosage given specific patient parameters. Analyze and synthesize data and develop an appropriate plan of care. Collects data, prioritize needs and anticipate reactions. Comprehend spatial relationships adequate to properly administer injections, start intravenous lines or assess wounds of varying depths. Recognizes an emergency situation and responds effectively to safeguard the patient and other caregivers. Transfers knowledge from one situation to another. Accurately processes information on medication container, physicians’ orders, and monitor and equipment calibrations, printed documents, flow sheets, graphic sheets, medication administration records, other medical records and policy and procedure manuals.</td>
</tr>
<tr>
<td>Punctuality/work habits</td>
<td>Ability to adhere to MaricopaNursing policies, procedures and requirements as described in the Student Nurse Handbook, college catalog and Student Handbook and course syllabus. Ability to complete classroom and clinical assignments and submit assignments at the required time. Ability to adhere to classroom and clinical schedules.</td>
<td>Attends class and clinical punctually. Reads, understands and adheres to all policies related to classroom and clinical experiences. Contacts instructor in advance of any absence or late arrival. Understands and completes classroom and clinical assignments by due date and time.</td>
</tr>
<tr>
<td>Environment</td>
<td>Recognize the personal risk for exposure to health hazards. Use equipment in laboratory or clinical settings needed to provide patient care. Tolerate exposure to allergens (latex, chemical, etc.) Tolerate wearing protective equipment (e.g. mask, gown, gloves).</td>
<td>Takes appropriate precautions for possible exposures such as communicable disease, blood borne pathogens, and latex. Uses person protective equipment (PPE) appropriately.</td>
</tr>
</tbody>
</table>
E. Pregnancy

Pregnant students may want to take special precautions due to the physical requirements and possible exposure to harmful diseases or substances. If the student has complications during the pregnancy which may interfere with course completion, documentation from the licensed care provider will be required for the student to continue in the course. Students will be expected to meet all program objectives/expectations. Accommodations will be made if reasonable and possible. Following delivery, return to class, laboratory and clinical requires an unrestricted licensed health care provider clearance.

F. Insurance: Health and Accident

1. Students are strongly advised and may be required by some clinical facilities to carry their own health and accident insurance. In situations where insurance is required to attend a specific clinical rotation, the student will not be permitted to attend without proof of insurance and may have to withdraw from the course if uninsured. Each student is personally liable for any illness or accident during or outside of school activities.

2. Students participating in a college-related activity have limited coverage by the Student Accident Insurance Plan provided by Maricopa Community Colleges: https://business.maricopa.edu/risk-management/insurance/student-insurance-plans. The cost of this policy is covered in the student activity fee. Student accident insurance coverage is secondary to the student’s primary coverage.

3. If a student is injured during clinical, a Maricopa Community Colleges accident insurance form and verification of other insurance coverage must be completed. Claim forms may be obtained from the Dean of Students or Student Service’s office. Completed forms are submitted to the Nursing Director for signature and then forwarded according to campus procedure.

4. Students are responsible for their own transportation and vehicle insurance to and from clinical. No coverage is provided for any motorized vehicle not supervised and provided by the colleges.

5. Maricopa Community Colleges provides malpractice insurance coverage for students enrolled in the Nursing Program as part of the registration fees.

G. Guidelines Regarding Exposure to Body Fluids

All nursing personnel and nursing students are professionally and ethically obligated to provide client care with compassion and respect for human dignity. Hence, they may not ethically refuse to care for clients solely because the client is at risk of contracting, or has, an infectious disease such as HIV, AIDS, or HBV. All rules of confidentiality and HIPAA compliance are followed when working with clients.

1. Standard Precautions - All blood and body fluids are considered potentially infectious and are treated as if known to be infectious for HIV, HBV, and other blood-borne pathogens.
   a. Contaminated sharps shall not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited.
   b. Contaminated sharps must be placed in appropriate container as soon as possible.
   c. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in the work area where there is a likelihood of occupational exposure. Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
   d. When exposure is possible, personal protective equipment shall be used. Personal protective equipment includes:
      1) Gloves shall be worn when it can be reasonably anticipated that the individual
may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, when performing vascular access procedures, and when touching contaminated items or surfaces.

2) Masks, eye protection, and face shields shall be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

3) Gowns, aprons, and other protective body clothing shall be worn in occupational exposure situations and will depend upon the task and the degree of exposure anticipated.

4) Surgical caps or hoods and shoe covers shall be worn in instances when gross contamination can be reasonably anticipated.

e. Wash hands immediately after removal of gloves or other personal protective equipment.

(Excerpts from OSHA Blood-borne Pathogens Section 1910.1030)

2. Exposure Guidelines

a. Students must wear appropriate protective clothing/equipment when performing any task(s) that may involve exposure to body fluids.

b. Any direct exposure to body fluids occurring while functioning as a nursing student must be reported immediately to the clinical instructor.

c. Students exposed to body fluids shall follow this protocol:

1) Wash the area immediately with a disinfectant agent; for eye splashes rinse the area with clean water.

2) Report the incident to the clinical instructor.

3) The student should immediately go to an Emergency Department, Employee Health (if available), or Urgent Care to seek triage and treatment. The student is responsible for all costs related to exposure, triage, and treatment.

4) The clinical instructor and student will notify the agency department supervisor and Nursing Program Director.

5) The student will complete an agency site incident report.

6) The student will complete the college student accident report.

7) Information from the U.S Department of Labor, Occupational Safety & Health Administration (OSHA) is available at:


XI. DRUG SCREENING

All students participating in the Nursing Program will be required to complete a urine drug screen at the student’s expense.

A. Drug Screening Guidelines

1. All newly admitted students are required to submit to a random urine drug screen as a condition of enrollment in the nursing program.

2. Students will receive an information sheet and a chain of custody form requiring they go to a designated lab where they will pay and submit a urine specimen. The student will be informed by the school of the 48 hour window of time they must submit their urine sample at the lab.

3. Private health insurance will not pay for this screening. The lab will provide the student with a receipt.

4. Students should NOT take a prescription to the lab to be evaluated, but may list prescription drugs they are currently taking.
5. The selected laboratory will conduct the urine screening and results will be obtained by the Nursing Director or designee indicated by the program account number.

6. If the drug screen is positive, the sample will automatically be submitted for Medical Review Officer (MRO) evaluation. The student will be contacted to ascertain any prescriptive drug usage and the Nursing Director or designee will review the report after the MRO review is completed.

7. If a student provides a dilute sample which tests positive, the result is considered positive and pending MRO review, the student will be withdrawn. A dilute specimen with no determined result will require a retest at an additional cost to the student.

8. If a student challenges a positive result, only the original sample can be retested. The student must request an order for a re-test of the sample through MRO. All positive samples are frozen and retained for one year. The student is responsible for the cost of this test.

9. Only students receiving negative drug screens can remain enrolled in nursing courses. Reports from the MRO of safety sensitive issues/concerns related to the drug profile will require further evaluation. Students may be on temporary exclusion from the program until evaluation is complete. Students testing positive for drugs that are illegal substances, non-prescribed legal substances, or deemed unsafe for the clinical setting by the MRO will not be permitted to attend the nursing courses. All positive results resulting in dismissal are reported to the Arizona State Board of Nursing.

10. Students will not be allowed to use previous drug screens requested by any person or agency outside of MaricopaNursing.

11. Students failing to test during the designated date and time do not meet the requirement for drug testing and will be withdrawn from all nursing courses.

B. “For Cause” Drug Screening

This policy refers to the use/misuse of, or being under the influence of: alcoholic beverages, illegal drugs or drugs which impair judgment while on duty in any health care facility, school, institution or other work location as a representative of the Nursing Program.

When a faculty/clinical instructor perceives the odor of alcohol or observes behaviors such as, but not limited to, slurred speech, unsteady gait, or confusion, and these behaviors cause the faculty or clinical instructor to suspect the student is impaired by alcohol or drugs, the following steps are taken:

1. The instructor will remove the student from the patient care or assigned work area and notify the clinical agency supervising personnel.

2. Upon student’s oral consent, the instructor will contact a transportation service and arrange for student transport to a designated medical service facility contracted by Maricopa Community Colleges.

3. The student is to have a picture ID in his/her possession.

4. After testing, the student may call the transportation service contracted by Maricopa Community Colleges for transport home.

5. If the student admits to alcohol or drug use, he/she will still require drug screening. If the results of the test(s) are negative for alcohol, illegal substances, or non-prescribed legal substances, the student shall meet with the Nursing Director within 24 hours of the test results to discuss the circumstances surrounding the impaired clinical behavior.

6. If the indicator was the odor of alcohol, the student will be mandated to discontinue the use of whatever may have caused the alcohol-like odor before being allowed to return to the clinical setting.

7. If the indicator was behavioral, consideration must be given to a possible medical condition being responsible for the symptoms. A medical referral for evaluation may be
indicated.

8. Based on the information provided and further medical evaluations if warranted, the Nursing Director will make a decision regarding return to the clinical setting.

9. If the results of the test(s) are positive for alcohol, illegal substances, or for non-prescribed legal substances, the Nursing Director will withdraw the student from all nursing courses.

10. The student will pay for all costs associated with the for-cause drug-screening test.

11. The results of the positive screening test will be reported to the State Board of Nursing.

If a student refuses “For Cause” Testing:

1. The instructor will remove the student from the clinical setting pending a full investigation.

2. The instructor will contact the transportation service contracted by Maricopa Community Colleges to request that the student be transported home. If the student refuses transportation, the student should be informed that security/law enforcement will be notified.

3. Failure to comply with any aspect of this policy will result in withdrawal from the program.

C. Readmission Guidelines Related to Positive “For Cause” Testing

Students withdrawn from nursing courses for reasons related to positive “for cause” testing will:

1. Submit a letter requesting readmission to the Nursing Program and, in addition, may be required to:
   a. Include documentation from a therapist specializing in addiction behaviors indicating status of abuse, addiction, or recovery and/or documented rehabilitation related to the alcohol/drug illness.
   b. Include documentation of compliance in a treatment program as identified by the therapist including a statement that the student will be able to function effectively and provide safe and therapeutic care for clients in a clinical setting.
   c. Repeat a random urine drug screen for alcohol/drugs as instructed prior to readmission and may be subject to random drug screening during the program of study.

2. If a student, after being re-admitted to the nursing program, has positive results on an alcohol/drug screen, the student will receive permanent dismissal from the Nursing Program and notification will be sent to Arizona State Board of Nursing.

D. Medical Marijuana Policy

Maricopa Community Colleges prohibit the possession and use of marijuana on all campuses and in all off campus student activities, including internships and clinical learning experiences in health programs. This policy is dictated by Arizona Revised Statutes § 15-108 which prohibits any person, including a medical marijuana cardholder, from possessing or using marijuana on the campus of any public university, college, community college or post-secondary education institution. Federal legislation prohibits any institution of higher education that receives federal funding from allowing the possession and use of marijuana. Maricopa Community Colleges receive federal funds through grants and financial aid.

Maricopa Community Colleges continue to enforce current policies regarding controlled substances and any student or employee who violate university policy prohibiting the use or possession of illegal drugs on campus or in student activities - including educational internships - will be subject to disciplinary action and criminal prosecution.

Urine drug screens are required of students prior to attending a clinical learning experience. Medical marijuana, or its metabolite, is not an accepted substance in urine drug screens and will result in a positive urine drug screen. Students with a prescription for medical
marijuana would not be considered exempt from urine drug screening.

XII. MEDICATION ADMINISTRATION GUIDELINES

Students are expected to function at the level of education and experience according to Block competencies. Students are accountable to demonstrate competencies of previously learned content. All students must review the agency’s medication policies prior to administering medications in the unit.

A. General Guidelines:
- All students must follow the principles of safe medication administration.
- All students must follow the agency’s policies and procedures for medication administration.
- All students must demonstrate competency in calculating medication dosages prior to administering medications. Students unable to calculate accurate doses may receive clinical warning/probation related to unsafe clinical practice.
- All students must report all medication errors to the instructor immediately.
- All medications given to infants and children must be approved by the instructor.
- The instructor reserves the right to limit a student’s medication administration experience.
- Some clinical agencies may require that the students only administer medication with their clinical instructor.

B. Block Related Medication Guidelines:

Block 1: Students may administer medications under the direct supervision of clinical faculty. Once the student has demonstrated consistently safe medication administration procedures, the student may receive permission to administer medications under the supervision of staff registered nurses. Either the clinical instructor or the supervising RN must be physically present during the entire medication administration procedure. **Students may not administer medications under the direct supervision of a licensed practical nurse.** Students will not initiate IV access, flush IV ports, nor administer IV medications.

Block 2: Students must have direct clinical faculty supervision when administering enteral or parenteral medications including PO, IM, SQ, ID, rectal, topical, otic, optic, transdermal, and inhaled medications. Once the student has demonstrated consistent safe and competent medication administration, the student may receive permission to administer some or all of these medication types under the supervision of staff registered nurses. Students must have direct clinical faculty supervision for all procedures relating to intravenous access including dressing changes, initiating and discontinuing a peripheral IV, flushing IVs with saline, or hanging **unmedicated** IV solutions. Once the student has demonstrated consistently safe and competent administration procedures related to intravenous access, the student may receive permission to perform some or all of these procedures under the supervision of staff registered nurses. Students will not give IV medications, or manage care for PICC lines, central lines or ports.

Block 3: Students may administer medications including all methods of intravenous medication administration (IVPB, IVP medications, medicated and unmedicated IV solutions, and saline flushes), via peripheral and central venous access sites, under the direct supervision of clinical faculty. Once the student demonstrates consistently safe and competent medication administration, faculty may delegate specific supervisory responsibilities to RN staff. A student may not administer any intravenous medications, or medicated or unmedicated IV solutions, without direct supervision by a registered nurse. Some clinical agencies may require that students only administer medications with their clinical instructor present.

During the pediatric and obstetric clinical rotations, all medications must be administered under the direct supervision of the clinical faculty. Once the student demonstrates consistently safe and
competent medication administration, faculty may delegate specific supervisory responsibilities to RN staff.

**Block 4.** Students may administer medications including all methods of intravenous medication administration (IVPB, PPN/TPN solutions, IVP medications, medication IV bags, and saline flushes) under the direct supervision of clinical faculty. Once the student demonstrates consistently safe and competent medication administration, faculty may delegate specific supervisory responsibilities to RN staff. A student may not administer any intravenous medication without direct supervision by a registered nurse. Direct clinical faculty observation is required to administer blood and blood products. Students may independently hang unmedicated IV solutions and administer medications, with the exception of IV medications, with instructor permission after demonstrating consistently safe medication administration procedures. Specific guidelines for medication administration during the preceptor rotation in NUR291 are found in the Preceptor Handbook.

### XIII. GUIDELINES FOR STUDENT CONDUCT

#### A. Standards of Professional Conduct

The nursing faculty believes that standards of professional conduct are an inherent part of professional socialization and expects students enrolled in the nursing program to adhere to the standards. Students practice within the boundaries of the Arizona State Board Nurse Practice Act, the ANA Code of Ethics for Nurses, the guidelines of the MaricopaNursing Student Handbook, and the policies and regulations of the healthcare agency where they are assigned for clinical learning (Nursing scope and standards of practice: American Nurses Association Publications, ANA Code of Ethics: http://nursingworld.org/MainMenuCategories/EthicsStandards.aspx ).

The use of abusive language or disruptive behavior directed toward peers, staff, faculty, or hospital personnel will not be tolerated and may result in disciplinary action up to and including dismissal from the program. Such behavior is inconsistent with professional standards and inappropriate for students aspiring to a career in nursing. The Director and/or instructor will complete a Student Conference Form describing behavior and documenting the planned corrective actions to be taken.

Standards of Professional Conduct include:

- Confidentiality: Respects the privacy of clients and respects privileged information.
- Accountability: Is answerable for one’s action; answers to self, the client, the profession and the institution.
- Responsibility: Executes duties associated with the nurse’s particular role.
- Agency’s Policies and Procedures: Reads and adheres to the agency policies and procedures.
- Veracity: Truthfulness; adherence to precision and honesty.
- Punctuality and Promptness: Is on time for all classroom and clinical assignments.
- Dependability: Is trustworthy and reliable.
- Respect: Treats others with consideration and courtesy.
- Professional Appearance: Adheres to established dress code in all clinical and professional activities.
- Ethical: Adheres to the American Nurses Association Code of Ethics for Nurses (2011), which establishes the ethical standard for the nursing profession. These standards can be viewed at: http://www.nursingworld.org/Mobile/Code-of-Ethics
- Legal: Operates within the scope of practice and standards of care related to the student nurse role.
- Safety: Prevents or minimizes risks for physical, psychological, or emotional jeopardy, injury, or damage.
- Civility: All students in the nursing program are expected to contribute to a positive learning environment. Nursing students are expected to be reflective, courteous, respectful, and empathetic to classmates, instructors, and college and clinical staff.

#### B. Student Expectation in Reporting Unprofessional Conduct
During the course of study in the nursing program, a student may observe behaviors in others that appear to violate the standards of academic and/or professional integrity or actions that have a potential to harm another individual. Each student has the responsibility to report any questionable activity to the instructor and/or Nursing Director.

C. Professional Boundaries

Nursing students must learn to establish and maintain professional boundaries. Professional boundaries exist between the student and the instructor and between the student and the patient. Boundary violations occur when professional lines of behavior are crossed. Violations may be inadvertent, purposeful, or thoughtless, and may occur when there is misunderstanding of the needs of the nurse and student and/or the patient. Professional boundary violations occur when there is role reversal, secrecy, or excessive disclosure of personal information. Students who have questions regarding professional boundaries should consult the instructor for guidance.

Student/Faculty Boundaries
1. Faculty and students will maintain a professional relationship.
2. Students should not expect an instructor to act as personal counselor or therapist. Students should seek assistance from professional and/or college counselors as needed.
3. Students should not ask or expect the instructor to join an individual, group, or class in any social situations while the course is in progress.
4. Students should not offer the instructor gifts or money as gratitude for instruction. Instructors may accept cards or notes when students wish to thank the instructor.

Student/Patient Boundaries
1. Students should maintain a professional nurse-patient relationship.
2. Students must treat all patients, as well as other health care providers, professionally and should work within the zone of patient-centered care.
3. Students should abstain from obtaining personal gain at the patient’s expense and refrain from inappropriate involvement in the patient’s personal relationships.


D. Health Insurance Portability and Accountability Act (HIPAA)

All verbal, electronic, and written information relating to patients/clients and contracted agencies is considered confidential and is not to be copied or discussed with anyone. Information may be disclosed only as defined in HIPAA guidelines for educational purposes. A breach of confidentiality will result in disciplinary action, up to and including possible dismissal from the program and/or course. All students are required to complete a HIPAA tutorial each semester of the nursing program, either according to the orientation requirements of the clinical agency or online at www.nursing.maricopa.edu.

XIV. DISCIPLINARY ACTION GUIDELINES

When a nursing student is in violation of any requirement contained in this Nursing Student Handbook, he/she is subject to disciplinary action or immediate dismissal. All students should carefully review the Maricopa Community Colleges’ Student Handbook section on Academic Misconduct and Disciplinary Standards. Those standards typically can be found in each college’s catalog or student handbook. Dismissals and suspensions for reasons based on academic misconduct and student discipline, as well as reasons based on the Nursing Student Handbook, will proceed according to the Judicial Policies section of the Student Discipline Code.

A. Zero Tolerance Policy:

The Nursing Program supports a Zero Tolerance Policy for the following behaviors:
1. Intentionally or recklessly causing physical harm to any person on the campus or at a clinical site, or intentionally or recklessly causing reasonable apprehension of such harm.

2. Unauthorized use or possession of any weapon or explosive device on the campus or at a clinical site.

3. Unauthorized use, distribution, or possession for purposes of distribution of any controlled substance or illegal drug on the campus or at a clinical site.

4. Bullying and incivility: any verbal, non-verbal, and/or written actions which are deemed threatening or bullying will not be tolerated.

Nursing students engaging in this misconduct are subject to immediate dismissal from nursing classes and disciplinary action as described in the Student Handbook of the college.

B. Academic Misconduct:

Cheating on an examination, laboratory work, written work (plagiarism); falsifying, forging or altering college records. Cheating includes, but is not limited to:

1. Copying from others during an examination.

2. Communicating exam answers with another student during or after the completion of an examination.

3. Offering another person’s work as one’s own (plagiarism). Taking an examination for another student or having someone take an examination for you.

4. Sharing answers for a take-home examination or assignment unless specifically authorized by the instructor.

5. Tampering with an examination after it has been corrected, then returning it for more credit.

6. Using unauthorized materials, prepared answers, written notes or information concealed in an exam or blue book or elsewhere during an examination.

7. Acquiring, without permission, tests or other academic material belonging to a member of the college faculty or staff.

8. Removing tests from the classroom or duplicating, writing down, or copying questions or answers on any copying, photography or recording device during testing or test review sessions.

9. Any student who knowingly or intentionally helps another student perform any of the above acts of cheating or plagiarism is subject to discipline for academic dishonesty.

10. Plagiarism - includes, but is not limited to, the use of paraphrase or direct quotation of the published or unpublished work of another person without full and clear acknowledgment. It also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials.

11. Any preparation of written material that is fraudulent and/or untruthful.

12. Sharing logins or passwords to access online platforms.

C. Clinical Misconduct:

1. A student may be dismissed from the program and receive a failing grade in the course based on the inability to place the student in a clinical facility.

2. A student may be dismissed and receive a failing grade in the course for violation of Standards of Professional Conduct.

D. Student Practice Regulations:

Students practice within the boundaries of the Arizona State Board Nurse Practice Act, the ANA Code of Ethics for Nurses, the guidelines of the MaricopaNursing Student Handbook, and the policies and regulations of the healthcare agency where they are assigned for clinical learning. Examples of unsafe practice include, but are not limited to:

- Refuses an assignment based on client’s race, culture, religious preference or medical diagnoses.
- Denies, conceals, covers-up or does not report own errors in clinical practice.
- Ignores and fails to report dishonest or unethical behavior in others.
- Practices invasive skills on any live subject (human or animal)
- Practices skills that have not yet been assigned/taught, or are intended to be checked off prior to independent performance.
- Lacks information processing ability necessary for making appropriate clinical judgments or decisions.
- Interacts inappropriately with agency staff, co-workers, peers, patients/clients, families, and/or faculty resulting in miscommunication, disruption of the learning and/or patient care environment.
- Violates principles of confidentiality (HIPAA).
- Lack of preparation for clinical practice.
- Fails to respect client rights and dignity.
- Solicits, borrows, or removes property or money from a client or client’s family.
- Assumes client care tasks for which the student lacks the education or competence to perform.
- Removes drugs, supplies, equipment, or medical records from the clinical setting.
- Abandonment: Leaves clinical agency or patient assignment without notification.

E. **Unusual Occurrence Guidelines:**

An unusual occurrence is any event that has potential for harm to any person while in the nursing program classes, laboratories, or clinical agencies.

1. Upon notification the faculty and student will meet to determine the nature of the occurrence. The faculty member will determine the necessary actions required for follow-up of the occurrence.

2. A nursing program “Student Conference Form” must be completed to document any unusual occurrence.

3. Any student failing to notify the instructor immediately upon discovery of an unusual occurrence as defined will be subject to disciplinary actions including course failure and program withdrawal.

4. When a behavior occurs that could jeopardize life, impede recovery, or interfere with the maintenance of the patient’s current health status, a conference will be held as soon as possible with the nursing student, nursing instructor, and the Nursing Director.

5. Any student unable to demonstrate safe and competent patient care, fails to maintain compliance with the health and safety requirements, violates the code of conduct, or has excessive absences from the clinical experience will be removed from the clinical assignment and will receive a failing grade in the course.
APPENDIX
RECEIPT OF HANDBOOK

This Handbook prescribes standards of conduct for students enrolled in the Nursing Program. The standards are in addition to those prescribed for students under Maricopa Community Colleges policies and administrative regulations. Violation of any such standard may serve as grounds for program dismissal, suspension, or other discipline.

Every student is expected to know and comply with all current policies, rules, and regulations as printed in the college catalog, class schedule, and the student handbook. Copies are available at many sites throughout the college.

I have received a copy of the Nursing Student Handbook. I understand this Handbook contains information about the guidelines and procedures of the Nursing Program. I also understand that I can find information about the general college policies in the College Catalog and in the College Student Handbook. I can find information specific to each course in the course syllabus.
RELEASE OF INFORMATION

I hereby give permission to faculty, staff and administrative officials of the Nursing Program to release to the Arizona State Board of Nursing education records maintained in connection with my participation in the Program, including but not limited to, grades, admission records, transcripts, student formative/summative clinical evaluation tools, student handbook signature acknowledgment forms, health and safety documentation forms, application forms, and any and all records pertaining to discipline, including alleged violations of the provisions of the nursing program student handbook, student discipline code violations, academic misconduct, and all other forms of discipline. The purpose of such disclosure is to provide the records to the Arizona State Board of Nursing in support of that agency’s certification, licensure, and disciplinary activities.

I give permission for the nursing faculty and/or the nursing program administration to share my personal information, including name, date of birth, and documentation of the health and safety requirements to clinical agencies requesting this information.

I understand that my personal identifying information may be shared with health care agencies needing this information to enter me in their security system, in their computer system, and/or in their medication administration system.
GENERAL EDUCATION COURSE REQUIREMENTS

Students must meet all general education course and nursing course requirements to be eligible to be awarded the Associate in Applied Science (AAS) degree in Nursing. The AAS degree is awarded according to the policies, procedures, and requirements described in the college catalog. The AAS degree must be posted on the student’s transcripts before authorization is given to the State Board of Nursing to take the NCLEX-RN exam.

All pre-requisite and co-requisite general education courses are required for graduation. All courses must be complete by the end of Block 4 and all transcripts must be on file at the college conferring the degree.

The following courses are pre-requisites to nursing block courses. Only students with transcript evidence of satisfactory completion of the co requisites for each block will be permitted to enroll.

<table>
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<th>2008 Curriculum</th>
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| Block 1 Prerequisites | MAT120 Intermediate Algebra  
|                   | BIO156/181 Biology  
|                   | CHM130/130LL Fundamental Chemistry/Lab  
|                   | BIO201 Human Anatomy and Physiology I  
|                   | PSY101 Introduction to Psychology  |
| Block 2 Prerequisites | BIO202 Human Anatomy and Physiology II  |
| Block 3 Prerequisites | BIO205 Microbiology  |
| Block 4 Prerequisites | ENG101 First Year Composition  
|                   | Humanities Elective* (2 credits)  |
| Graduation Requirements | CRE101 Critical and Evaluative Reading (or test exempt)  
|                   | ENG102 First Year Composition  |

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<th>2015 Curriculum</th>
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| Block 1 Prerequisites | MAT140, 141, or 142 College Mathematics  
|                   | BIO156/181 Biology  
|                   | CHM130/130LL Fundamental Chemistry/Lab  
|                   | BIO201 Human Anatomy and Physiology I  
|                   | ENG101 or ENG107 First Year Composition  |
| Block 2 Prerequisites | BIO202 Human Anatomy and Physiology II  |
| Block 3 Prerequisites | PSY101 Introduction to Psychology  
|                   | CRE101 Critical and Evaluative Reading (or test exempt)  |
| Block 4 Prerequisites | BIO205 Microbiology  |
| Graduation Requirements | CRE101 Critical and Evaluative Reading (or test exempt)  
|                   | ENG102 First Year Composition  
|                   | Humanities Elective* (2 credits)  |

*Verify requirements in the current college catalog. Associate in Applied Science (AAS) degree, General Education Distribution Areas, Humanities and Fine Arts

Printed Name ____________________________ Date: ________________
Signature: ______________________________
VOLUNTARY ASSUMPTION OF RISK AND RELEASE OF LIABILITY

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND IT BEFORE SIGNING.

Maricopa Community Colleges are non-profit educational institutions. References to Maricopa Community Colleges include its officers, officials, employees, volunteers, students, agents, and assigns.

I (print your name) ____________________________________________, hereby choose to participate in the MaricopaNursing program. In consideration of my voluntary participation in this Program, I agree as follows:

RISKS INVOLVED IN PROGRAM: I understand that the clinical training environment for this Program in which I am enrolled through Maricopa Community Colleges contains exposures to risks inherent in activities of the Program such as but not limited to bodily injury, communicable and infectious diseases, and property damage.

HEALTH AND SAFETY: I have been advised to consult with a medical doctor regarding my personal medical needs. I state that there are no health-related reasons or problems that preclude or restrict my participation in this Program. I have obtained the required immunizations. I recognize that Maricopa Community Colleges are not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore. In case of a medical emergency occurring during my participation in this Program, I authorize in advance the representative of Maricopa Community Colleges to secure whatever treatment is necessary, including the administration of anesthetic and surgery. Maricopa Community Colleges may (but is not obligated to) take any actions it considers to be warranted under the circumstances regarding my health and safety. I agree to pay all expenses relating thereto and release Maricopa Community Colleges from any liability for any actions.

ASSUMPTION OF RISK AND RELEASE OF LIABILITY: Knowing the risks described above, and in voluntary consideration of being permitted to participate in the Program, I hereby knowingly assume all risks inherent in this activity and connected activities. I agree to release, indemnify, and defend Maricopa Community Colleges and their officials, employees, agents, and volunteers from and against any and all claims, of whatsoever kind or nature, which I, the participant, my parents or legal guardian or any other person may have for any losses, damages or injuries arising out of or in connection with my participation in this Program.

SIGNATURE: I indicate that by my signature below that I have read the terms and conditions of participation in this Program and agree to abide by them. I have carefully read this Voluntary Assumption of Risk and Release of Liability and acknowledge that I understand it. No representation, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This Voluntary Assumption of Risk and Release of Liability shall be governed by the laws of the State of Arizona that shall be the forum for any lawsuits filed under or incident to this Form or to the Program. If any portion of this Form is held invalid, the rest of the document shall continue in full force and effect.

Printed Name ____________________________________________ Date: ____________

Signature: ________________________________________________
ZERO TOLERANCE POLICY: The Nursing Program supports a Zero Tolerance Policy for the following behaviors:

1. Intentionally or recklessly causing physical harm to any person on the campus or at a clinical site, or intentionally or recklessly causing reasonable apprehension of such harm.
2. Unauthorized use or possession of any weapon or explosive device on campus or at a clinical site.
3. Unauthorized use, distribution, or possession for purposes of distribution of any controlled substance or illegal drug on the campus or at a clinical site.
4. Bullying and incivility: any verbal, non-verbal, and/or written actions which are deemed threatening or bullying will not be tolerated.

Nursing students engaging in this misconduct are subject to immediate dismissal from nursing classes and disciplinary action as described in the Student Handbook of the college.

HEALTH DECLARATION: It is essential that nursing students be able to perform a number of physical activities in the clinical portion of the program. At a minimum, students will be required to lift patients, stand for several hours at a time and perform bending activities. Students who have a chronic illness or condition must be maintained on current treatment and be able to implement direct patient care. The clinical nursing experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients’ lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions. Individuals should give careful consideration to the mental and physical demands of the program prior to making application. All must provide documentation of compliance with all health and safety requirements required to protect patient safety. Only students in compliance are permitted to enroll in nursing courses. Students will meet these requirements by providing the required documentation for the Health/Safety Requirements Documentation Checklist and the signed Health Declaration Form.

DRUG SCREENING: All students are required to complete the urine drug screening procedure under the program account number, within the specified timeframe, and according to directions given at the time of notification. Only students in compliance with the screening guidelines and receiving a negative drug screen, as reported by the Medical Review Officer (MRO), will be permitted to continue their enrollment in nursing courses.

DUTY TO REPORT: All students enrolled in nursing courses holding or receiving a certificate as a Nursing Assisting and/or license as a Practical Nurse must remain in good standing with the Board of Nursing. Students with certification and/or licensure from allied health regulatory boards are included under this provision. Students receiving any disciplinary actions against their certificate or license must notify the Nursing Director within five (5) school days. The Nursing Director reserves the right to restrict the student’s participation in clinical experiences and involvement in patient care until the certificate and/or license is valid and unrestricted and terms of the action are met and the action dismissed.

BACKGROUND CLEARANCES: The Fingerprint Clearance Card must be a Level One and must remain, current and valid throughout enrollment in the program. All nursing students must undergo a background check to verify identity, social security number, and to show proof that they do not appear on the List of Excluded Individuals/Entities (LEIE) database. Any student who becomes sanctioned or excluded while enrolled in the program will not be permitted to continue in nursing courses.

A Background Check is required for all nursing students who seek to begin MaricopaNursing or other campus nursing programs on or after September 1, 2011. Additionally, students will be required to sign an MCCCD Criminal Background Check Disclosure Acknowledgement form. These changes are necessary due to the fact that six of eleven of MCCCD’s largest clinical experience hospital partners have established stringent background check standards that preclude MCCCD from assigning students to those sites who cannot meet those standards. In order for MCCCD students to be able to continue to complete clinical experiences at local hospitals, students must meet these new standards. A student may be dismissed from the program and may receive a failing grade in the course based on the inability to place the student in a clinical facility.

This Handbook prescribes admission and readmission requirements and standards of conduct for students enrolled in MaricopaNursing. The standards are in addition to those detailed under MCCCD policies and Administrative regulations. Violation of any such standard may serve as grounds for non-admission to a program or other discipline, program...
suspension or dismissal. MaricopaNursing programs reserve the right to make program changes as needed, and to change without previous notice any information requirements and regulations published in this document.

**WAIVER OF LICENSURE/CERTIFICATION GUARANTEE:** Admission or graduation from the Nursing Program does not guarantee obtaining a license to practice nursing. Licensure and subsequent procedures are the exclusive right and responsibility of the State Boards of Nursing. Students must satisfy the requirements of the Nurse Practice Act: Statutes, Rules and Regulations, independently of any college or school requirements for graduation.

Pursuant to A.R.S. § 32-1606(B)(17), an applicant for professional or practical nurse license by examination is not eligible for licensure if the applicant has any felony convictions and has not received an absolute discharge from the sentences for all felony convictions. The absolute discharge must be received five or more years before submitting this application. If you cannot prove that the absolute discharge date is five or more years, the Board cannot consider your application.

All nurse applicants for licensure will be fingerprinted to permit the Department of Public Safety to obtain state and federal criminal history information. The Fingerprint Clearance Card required for application to the nursing program will not meet the requirements for certification or licensure through the State Board of Nursing.

Applicants for licensure in Arizona must provide evidence of citizenship or nationality. If there are any questions about eligibility for licensure and the documents required showing eligibility to apply for licensure, contact the Arizona State Board of Nursing http://www.azbn.gov or 602.889.5150.

I have read and I understand the information presented on this form.

Printed Name ________________________________ Date ________________

Signature ________________________________
The discussions, uses, and disclosures addressed by this agreement mean any written, verbal, or electronic communications. I understand that I am never to discuss or review any information regarding a patient at a clinical site unless the discussion or review is part of my assignment to the site. I understand that I am obligated to know and adhere to the privacy policies and procedures of the clinical site to which I am assigned. I acknowledge that medical records, accounting information, patient information, and conversations between or among healthcare professionals about patients are confidential under law and this agreement.

I understand that, while in the clinical setting, I may not disclose any information about a patient during the clinical portion of my clinical assignment to anyone other than the medical staff of the clinical site.

I understand that I may not remove any record from the clinical site without the written authorization of the site. Additionally, I understand that, before I use or disclose patient information in a learning experience, classroom, case presentation, class assignment, or research, I must attempt to exclude as much of the following information as possible:

- Names
- Geographical subdivisions smaller than a state
- Dates of birth, admission, discharge, and death
- Telephone numbers
- Fax numbers
- Email addresses
- Social security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account numbers
- Certificate/license numbers
- Vehicle identifiers
- Device identifiers
- Web locators (URLs)
- Internet protocol addresses
- Biometric identifiers
- Full face photographs
- Any other unique identifying number, characteristic, or code
- All ages over 89 years

Additionally, I acknowledge that any patient information, whether or not it excludes some or all of those identifiers, may only be used or disclosed for health care training and educational purposes at MCCCD, and must otherwise remain confidential.

I understand that I must promptly report any violation of the clinical site’s privacy policies and procedures, applicable law, or this confidentiality agreement, by me, or an MCCCD student or faculty member to the appropriate MCCCD clinical coordinator or program director.

I understand that, if I violate the privacy policies and procedures of the clinical site, applicable law, or this agreement, I will be subject to disciplinary action that may include dismissal from the program.

By signing this agreement, I certify that I have read and understand its terms, and will comply with them.

Printed Name _____________________________ Signature ______________________________

Date __________________________
Overview of the Requirements
In order for students to be admitted to or maintain enrollment in good standing in Maricopa County Community College District’s (“MCCCD”) Allied Health and Nursing programs (“Programs”), students must provide with their application to a Program all of the following:

- A copy of an Arizona Department of Public Safety Level-One Fingerprint Clearance Card (“Card”). Students are required to pay the cost of applying for the Card. Cards that are NOT Level-One status will not be accepted.
- An original version of the “Criminal Background Check Disclosure Acknowledgement” form attached to this Summary signed by the student.
- A document from MCCCD’s authorized vendor for background checks demonstrating that the student has passed the background check. Students are required to pay the cost of obtaining the background check. Students whose background checks on the date of actual admission to a Program that are more than 6 months old or students who have been in a Program for more than 12 months may be requested to obtain an updated background check. The addition of this criminal background check is due to the fact that some of MCCCD’s largest clinical experience partners have established standards that are more stringent than those for obtaining a Card.

At all times during enrollment in a Program, students must obtain and maintain BOTH a valid Level-One Fingerprint Clearance Card and passing disposition on supplemental background check performed by MCCCD authorized vendor. Admission requirements related to background checks are subject to change as mandated by clinical experience partners.

Implementation of the Requirements
1. Students that are denied issuance of a Card may be eligible for a good cause exception through the Arizona Department of Public Safety. It is the student’s responsibility to seek that exception directly with the department. Until the student obtains a Card and meets the other requirements for admission, he or she will not be admitted to a Program.

2. Students admitted to a Program whose Card is revoked or suspended must notify the Program Director immediately and the student will be removed from the Program in which they have been admitted or are enrolled. Any refund of funds would be made per MCCCD policy.

3. The Criminal Background Check Disclosure Acknowledgement directs students to disclose on the data collection form of the MCCCD authorized background check vendor all of the requested information as well as any information that the background check may discover. Honesty is important as it demonstrates character. Lack of honesty will be the basis for denial of admission or removal from a Program if the information that should have been disclosed but was not would have resulted in denial of admission. Failure to disclose other types of information constitutes a violation of the Student Code of Conduct and may be subject to sanctions under that Code. Students have a duty to update the information requested on the [background check vendor] data collection form promptly during enrollment in a Program. The background check vendor data collection form may ask for the following information but the form may change from time to time:
   - Legal Name
   - Maiden Name
   - Other names used
   - Social Security Number
   - Date of Birth
   - Arrests, charges or convictions of any criminal offenses, even if dismissed or expunged, including dates and details.
   - Pending criminal charges that have been filed against you including dates and details. Participation in a first offender, deferred adjudication or pretrial diversion or other probation program or arrangement where judgment or conviction has been withheld.

The authorized MCCCD background check vendor will be asked to pass or fail each student based on the standards of MCCCD’s clinical experience partners that have established the most stringent requirements. The sole recourse of any student who fails the background check and believes that failure may have been in error is with the background check vendor and not MCCCD.
ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK REQUIREMENTS

In applying for admission to a Nursing or Allied Health program (“Program”) at the Maricopa County Community College District, you are required to disclose on the Arizona Department of Public Safety (DPS) form all required information and on the MCCCD authorized background check vendor data collection form any arrests, convictions, or charges (even if the arrest, conviction or charge has been dismissed or expunged), or participation in first offender, deferred adjudication, pretrial diversion or other probation program on this form. Additionally, you must disclose anything that is likely to be discovered in the MCCCD supplemental background check that will be conducted on you.

Please complete the DPS form, the MCCCD authorized background check vendor form and any clinical agency background check form honestly and completely. This means that your answers must be truthful, accurate, and complete. If you know of certain information yet are unsure of whether to disclose it, you must disclose the information, including any arrest or criminal charge. Additionally,

By signing this acknowledgement, you acknowledge the following:

1. I understand that I must submit to and pay any costs required to obtain a Level-One Fingerprint Clearance Card and an MCCCD supplemental criminal background check.
2. I understand that failure to obtain a Level-One Fingerprint Clearance Card will result in a denial of admission to a Program or removal from it if I have been conditionally admitted.
3. I understand that I must submit to and pay any costs required to obtain an MCCCD supplemental background check.
4. I understand that failure to obtain a “pass” as a result of the MCCCD supplemental criminal background check will result in a denial of admission to a Program or removal from it if I have been conditionally admitted.
5. I understand that, if my Level-One Fingerprint Clearance Card is revoked or suspended at any time during the admission process or my enrollment in a Program, I am responsible to notify the Program Director immediately and that I will be removed from the Program.
6. I understand that a clinical agency may require an additional criminal background check to screen for barrier offenses other than those required by MCCCD, as well as a drug screening. I understand that I am required to pay for any and all criminal background checks and drug screens required by a clinical agency to which I am assigned.
7. I understand that both the MCCCD supplemental and the clinical agency background check may include but are not limited to the following:
   - Nationwide Federal Healthcare Fraud and Abuse Databases
   - Social Security Verification
   - Residency History
   - Arizona Statewide Criminal Records
   - Nationwide Criminal Database
   - Nationwide Sexual Offender Registry
   - Homeland Security Search
8. By virtue of the MCCCD supplemental background check, I understand that I will be disqualified for admission or continued enrollment in a Program based on my criminal offenses, the inability to verify my Social Security number, or my being listed in an exclusionary database of a Federal Agency. The criminal offenses for disqualification may include but are not limited to any or all of the following:
   - Social Security Search-Social Security number does not belong to applicant
   - Any inclusion on any registered sex offender database
   - Any inclusion on any of the feral exclusion lists or Homeland Security watch list
   - Any conviction of felony no matter what the age of the conviction
   - Any misdemeanor controlled substance conviction within the last 7 years
   - Any other misdemeanor convictions within last 3 years
   - Exceptions: Any misdemeanor traffic (DUI is not considered Traffic)
   - Any warrant, any state
Any misdemeanor conviction for the following, no matter age of crime:

- Violent crimes
- Aggravated DUI
- Murder, attempted murder
- Abduction
- Assault
- Illegal drugs
- Sex crime of any kind including non-consensual sex crimes and sexual assault
- Arson
- Burglary
- Extortion
- Any abuse or neglect
- Pandering
- Robbery
- Any fraud
- Any crime against minors, children, vulnerable adults, including abuse, neglect, exploitation

9. I understand that I must disclose on all background check data collection forms (DPS, MCCCD background check vendor and a clinical agency background check vendor) all required information including any arrests, convictions, or charges (even if the arrest, conviction or charge has been dismissed or expunged), or participation in first offender, deferred adjudication, pretrial diversion or other probation program. That includes any misdemeanors or felonies in Arizona, any other State, or other jurisdiction. I also understand that I must disclose any other relevant information on the forms. I further understand that non-disclosure of relevant information on the forms that would have resulted in failing the background check will result in denial of admission to or removal from a Program. Finally, I understand that my failure to disclose other types of information on the forms will result in a violation of the Student Code of Conduct and may be subject to sanctions under that Code.

10. I understand that, if a clinical agency to which I have been assigned does not accept me based on my criminal background check it may result in my inability to complete the Program. I also understand that MCCCD may, within its discretion, disclose to a clinical agency that I have been rejected by another clinical agency. I further understand that MCCCD has no obligation to place me when the reason for lack of placement is my criminal background check. Since clinical agency assignments are critical requirements for completion of the Program, I acknowledge that my inability to complete required clinical experience due to my criminal background check will result in removal from the Program.

11. I understand the Programs reserve the authority to determine my eligibility to be admitted to the Program or to continue in the Program and admission requirements or background check requirements can change without notice.

12. I understand that I have a duty to immediately report to the Program Director any arrests, convictions, placement on exclusion databases, suspension, removal of my DPS Fingerprint Clearance Card or removal or discipline imposed on any professional license or certificate at any time during my enrollment in a Program.

Printed Name _____________________________ Signature _____________________________

Date ___________________________
TALENT RELEASE FORM

I authorize the Maricopa County Community College District, and those acting within its authority, to, at no charge:

- Record my participation, appearance or performance on videotape, audiotape, film, photography or any other medium.
- Use my name, likeness, voice and biographical material in connection with these recordings.
- Copy and distribute the recording in whole or in part solely for education related purposes by the Maricopa County Community College District, and those acting under its authority, as they deem appropriate.

Name: ________________________________________________________________

Date: __________________________ Signature: ________________________________

Phone number: __________________________ Email: ______________________________

Parent/Guardian

Signature (if under 18): __________________________ Witness: __________________________
(Signature Copy)

RECEIPT OF HANDBOOK

This Handbook prescribes standards of conduct for students enrolled in the Nursing Program. The standards are in addition to those prescribed for students under Maricopa Community Colleges policies and administrative regulations. Violation of any such standard may serve as grounds for program dismissal, suspension, or other discipline.

Every student is expected to know and comply with all current policies, rules, and regulations as printed in the college catalog, class schedule, and the student handbook. Copies are available at many sites throughout the college.

I have received a copy of the Nursing Student Handbook. I understand this handbook contains information about the guidelines and procedures of the Nursing Program. I also understand that I can find information about the general college policies in the College Catalog and the College Student Handbook. I can find information specific to each course in the course syllabus.

Printed Name ____________________________ Signature ________________________________

Date __________________
(Signature Copy)

RELEASE OF INFORMATION

I hereby give permission to faculty, staff and administrative officials of the Nursing Program to release to the Arizona State Board of Nursing education records maintained in connection with my participation in the Program, including but not limited to, grades, admission records, transcripts, student formative/summative clinical evaluation tools, student handbook signature acknowledgment forms, health and safety documentation forms, application forms, and any and all records pertaining to discipline, including alleged violations of the provisions of the nursing program student handbook, student discipline code violations, academic misconduct, and all other forms of discipline. The purpose of such disclosure is to provide the records to the Arizona State Board of Nursing in support of that agency’s certification, licensure, and disciplinary activities.

I give permission for the nursing faculty and/or the nursing program administration to share my personal information; including name, date of birth, and documentation of the health and safety requirements to clinical agencies requesting this information.

I understand that my personal identifying information may be shared with health care agencies needing this information to enter me in their security system, in their computer system, and/or in their medication administration system.

Printed Name ____________________________  Signature ____________________________

Date ________________
GENERAL EDUCATION COURSE REQUIREMENTS

Students must meet all general education course and nursing course requirements to be eligible to be awarded the Associate in Applied Science (AAS) degree in Nursing. The AAS degree is awarded according to the policies, procedures, and requirements described in the college catalog. The AAS degree must be posted on the student’s transcripts before authorization is given to the State Board of Nursing to take the NCLEX-RN exam.

All pre-requisite and co-requisite general education courses are required for graduation. All courses must be complete by the end of Block 4 and all transcripts must be on file at the college conferring the degree.

The following courses are pre-requisites to nursing block courses. Only students with transcript evidence of satisfactory completion of the co requisites for each block will be permitted to enroll.

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<th>2008 Curriculum</th>
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<td>Block 1 Prerequisites</td>
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<td>Graduation Requirements</td>
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*Verify requirements in the current college catalog. Associate in Applied Science (AAS) degree, General Education Distribution Areas, Humanities and Fine Arts

Printed Name ___________________________ Date ________________

Signature _______________________________
VOLUNTARY ASSUMPTION OF RISK AND RELEASE OF LIABILITY

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND IT BEFORE SIGNING.

Maricopa Community Colleges are non-profit educational institutions. References to Maricopa Community Colleges include its officers, officials, employees, volunteers, students, agents, and assigns.

I (print your name)__________________________, freely choose to participate in the MaricopaNursing program. In consideration of my voluntary participation in this Program, I agree as follows:

RISKS INVOLVED IN PROGRAM: I understand that the clinical training environment for this Program in which I am enrolled through Maricopa Community Colleges contains exposures to risks inherent in activities of the Program such as but not limited to bodily injury, communicable and infectious diseases, and property damage.

HEALTH AND SAFETY: I have been advised to consult with a medical doctor regarding my personal medical needs. I state that there are no health-related reasons or problems that preclude or restrict my participation in this Program. I have obtained the required immunizations. I recognize that Maricopa Community Colleges are not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore. In case of a medical emergency occurring during my participation in this Program, I authorize in advance the representative of Maricopa Community Colleges to secure whatever treatment is necessary, including the administration of anesthetic and surgery. Maricopa Community Colleges may (but is not obligated to) take any actions it considers to be warranted under the circumstances regarding my health and safety. I agree to pay all expenses relating thereto and release Maricopa Community Colleges from any liability for any actions.

ASSUMPTION OF RISK AND RELEASE OF LIABILITY: Knowing the risks described above, and in voluntary consideration of being permitted to participate in the Program, I hereby knowingly assume all risks inherent in this activity and connected activities. I agree to release, indemnify, and defend Maricopa Community Colleges and their officials, officers, employees, agents, and volunteers from and against any and all claims, of whatsoever kind or nature, which I, the participant, my parents or legal guardian or any other person may have for any losses, damages or injuries arising out of or in connection with my participation in this Program.

SIGNATURE: I indicate that by my signature below that I have read the terms and conditions of participation in this Program and agree to abide by them. I have carefully read this Voluntary Assumption of Risk and Release of Liability and acknowledge that I understand it. No representation, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This Voluntary Assumption of Risk and Release of Liability shall be governed by the laws of the State of Arizona that shall be the forum for any lawsuits filed under or incident to this Form or to the Program. If any portion of this Form is held invalid, the rest of the document shall continue in full force and effect.

Printed Name ____________________________ Date _______________

Signature ________________________________
ESSENTIAL INFORMATION FOR NURSING STUDENTS

ZERO TOLERANCE POLICY: The Nursing Program supports a Zero Tolerance Policy for the following behaviors:

1. Intentionally or recklessly causing physical harm to any person on the campus or at a clinical site, or intentionally or recklessly causing reasonable apprehension of such harm.

2. Unauthorized use or possession of any weapon or explosive device on campus or at a clinical site.

3. Unauthorized use, distribution, or possession for purposes of distribution of any controlled substance or illegal drug on the campus or at a clinical site.

4. Bullying and incivility: any verbal, non-verbal, and/or written actions which are deemed threatening or bullying will not be tolerated.

Nursing students engaging in this misconduct are subject to immediate dismissal from nursing classes and disciplinary action as described in the Student Handbook of the college.

HEALTH DECLARATION: It is essential that nursing students be able to perform a number of physical activities in the clinical portion of the program. At a minimum, students will be required to lift patients, stand for several hours at a time and perform bending activities. Students who have a chronic illness or condition must be maintained on current treatment and be able to implement direct patient care. The clinical nursing experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients’ lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions. Individuals should give careful consideration to the mental and physical demands of the program prior to making application. All must provide documentation of compliance with all health and safety requirements required to protect patient safety. Only students in compliance are permitted to enroll in nursing courses. Students will meet these requirements by providing the required documentation for the Health/Safety Requirements Documentation Checklist and the signed Health Declaration Form.

DRUG SCREENING: All students are required to complete the urine drug screening procedure under the program account number, within the specified timeframe, and according to directions given at the time of notification. Only students in compliance with the screening guidelines and receiving a negative drug screen, as reported by the Medical Review Officer (MRO), will be permitted to continue their enrollment in nursing courses.

DUTY TO REPORT: All students enrolled in nursing courses holding or receiving a certificate as a Nursing Assisting and/or license as a Practical Nurse must remain in good standing with the Board of Nursing. Students with certification and/or licensure from allied health regulatory boards are included under this provision. Students receiving any disciplinary actions against their certificate or license must notify the Nursing Director within five (5) school days. The Nursing Director reserves the right to restrict the student’s participation in clinical experiences and involvement in patient care until the certificate and/or license is valid and unrestricted and terms of the action are met and the action dismissed.

BACKGROUND CLEARANCES: The Fingerprint Clearance Card must be a Level One and must remain, current and valid throughout enrollment in the program. All nursing students must undergo a background check to verify identity, social security number, and to show proof that they do not appear on the List of Excluded Individuals/Entities (LEIE) database. Any student who becomes sanctioned or excluded while enrolled in the program will not be permitted to continue in nursing courses.

A Background Check is required for all nursing students. Additionally, students will be required to sign an MCCC Criminal Background Check Disclosure Acknowledgement form. This is required due to the fact that six of eleven of MCCC’s largest clinical experience hospital partners have established stringent background check standards that preclude MCCC from assigning students to those sites who cannot meet those standards. In order for MCCC students to be able to continue to complete clinical experiences at local hospitals, students must meet these new standards. A student may be dismissed from the program and may receive a failing grade in the course based on the inability to place the student in a clinical facility.
This Handbook prescribes admission and readmission requirements and standards of conduct for students enrolled in MaricopaNursing. The standards are in addition to those detailed under MCCCD policies and Administrative regulations. Violation of any such standard may serve as grounds for non-admission to a program or other discipline, program suspension or dismissal. MaricopaNursing programs reserve the right to make program changes as needed, and to change without previous notice any information requirements and regulations published in this document.

WAIVER OF LICENSURE/CERTIFICATION GUARANTEE: Admission or graduation from the Nursing Program does not guarantee obtaining a license to practice nursing. Licensure and subsequent procedures are the exclusive right and responsibility of the State Boards of Nursing. Students must satisfy the requirements of the Nurse Practice Act: Statutes, Rules and Regulations, independently of any college or school requirements for graduation.

Pursuant to A.R.S. § 32-1606(B)(17), an applicant for professional or practical nurse license by examination is not eligible for licensure if the applicant has any felony convictions and has not received an absolute discharge from the sentences for all felony convictions. The absolute discharge must be received five or more years before submitting this application. If you cannot prove that the absolute discharge date is five or more years, the Board cannot consider your application.

All nurse applicants for licensure will be fingerprinted to permit the Department of Public Safety to obtain state and federal criminal history information. The Fingerprint Clearance Card required for application to the nursing program will not meet the requirements for certification or licensure through the State Board of Nursing.

Applicants for licensure in Arizona must provide evidence of citizenship or nationality. If there are any questions about eligibility for licensure and the documents required showing eligibility to apply for licensure, contact the Arizona State Board of Nursing http://www.azbn.gov or 602.889.5150.

I have read and I understand the information presented on this form.

Printed Name ___________________________________________ Date ___________

Signature ___________________________________________
NURSING STUDENT HANDBOOK

(Signature Copy)

MARICOPA COUNTY COMMUNITY COLLEGE DISTRICT
STUDENT CONFIDENTIALITY AGREEMENT

The discussions, uses, and disclosures addressed by this agreement mean any written, verbal, or electronic communications. I understand that I am never to discuss or review any information regarding a patient at a clinical site unless the discussion or review is part of my assignment to the site. I understand that I am obligated to know and adhere to the privacy policies and procedures of the clinical site to which I am assigned. I acknowledge that medical records, accounting information, patient information, and conversations between or among healthcare professionals about patients are confidential under law and this agreement.

I understand that, while in the clinical setting, I may not disclose any information about a patient during the clinical portion of my clinical assignment to anyone other than the medical staff of the clinical site.

I understand that I may not remove any record from the clinical site without the written authorization of the site. Additionally, I understand that, before I use or disclose patient information in a learning experience, classroom, case presentation, class assignment, or research, I must attempt to exclude as much of the following information as possible:

- Names
- Geographical subdivisions smaller than a state
- Dates of birth, admission, discharge, and death
- Telephone numbers
- Fax numbers
- Email addresses
- Social security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account numbers
- Certificate/license numbers
- Vehicle identifiers
- Device identifiers
- Web locators (URLs)
- Internet protocol addresses
- Biometric identifiers
- Full face photographs
- Any other unique identifying number, characteristic, or code
- All ages over 89 years

Additionally, I acknowledge that any patient information, whether or not it excludes some or all of those identifiers, may only be used or disclosed for health care training and educational purposes at MxCCD, and must otherwise remain confidential.

I understand that I must promptly report any violation of the clinical site’s privacy policies and procedures, applicable law, or this confidentiality agreement, by me, or an MxCCD student or faculty member to the appropriate MxCCD clinical coordinator or program director.

I understand that, if I violate the privacy policies and procedures of the clinical site, applicable law, or this agreement, I will be subject to disciplinary action that may include dismissal from the program.

By signing this agreement, I certify that I have read and understand its terms, and will comply with them.

Printed Name ______________________________ Signature ______________________________

Date __________________
MARICOPA COUNTY COMMUNITY COLLEGE DISTRICT

ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK REQUIREMENTS

In applying for admission to a Nursing or Allied Health program ("Program") at the Maricopa County Community College District, you are required to disclose on the Arizona Department of Public Safety (DPS) form all required information and on the MCCCD authorized background check vendor data collection form any arrests, convictions, or charges (even if the arrest, conviction or charge has been dismissed or expunged), or participation in first offender, deferred adjudication, pretrial diversion or other probation program on this form. Additionally, you must disclose anything that is likely to be discovered in the MCCCD supplemental background check that will be conducted on you.

Please complete the DPS form, the MCCCD authorized background check vendor form and any clinical agency background check form honestly and completely. This means that your answers must be truthful, accurate, and complete. If you know of certain information yet are unsure of whether to disclose it, you must disclose the information, including any arrest or criminal charge. Additionally,

By signing this acknowledgement, you acknowledge the following:

1. I understand that I must submit to and pay any costs required to obtain a Level-One Fingerprint Clearance Card and an MCCCD supplemental criminal background check.

2. I understand that failure to obtain a Level-One Fingerprint Clearance Card will result in a denial of admission to a Program or removal from it if I have been conditionally admitted.

3. I understand that I must submit to and pay any costs required to obtain an MCCCD supplemental background check.

4. I understand that failure to obtain a “pass” as a result of the MCCCD supplemental criminal background check will result in a denial of admission to a Program or removal from it if I have been conditionally admitted.

5. I understand that, if my Level-One Fingerprint Clearance Card is revoked or suspended at any time during the admission process or my enrollment in a Program, I am responsible to notify the Program Director immediately and that I will be removed from the Program.

6. I understand that a clinical agency may require an additional criminal background check to screen for barrier offenses other than those required by MCCCD, as well as a drug screening. I understand that I am required to pay for any and all criminal background checks and drug screens required by a clinical agency to which I am assigned.

7. I understand that both the MCCCD supplemental and the clinical agency background check may include but are not limited to the following:
   - Nationwide Federal Healthcare Fraud and Abuse Databases
   - Social Security Verification
   - Residency History
   - Arizona Statewide Criminal Records
   - Nationwide Criminal Database
   - Nationwide Sexual Offender Registry
   - Homeland Security Search

8. By virtue of the MCCCD supplemental background check, I understand that I will be disqualified for admission or continued enrollment in a Program based on my criminal offenses, the inability to verify my Social Security number, or my being listed in an exclusionary database of a Federal Agency. The criminal offenses for disqualification may include but are not limited to any or all of the following:
   - Social Security Search-Social Security number does not belong to applicant
   - Any inclusion on any registered sex offender database
   - Any inclusion on any of the feral exclusion lists or Homeland Security watch list
   - Any conviction of felony no matter what the age of the conviction
   - Any misdemeanor controlled substance conviction within the last 7 years
   - Any other misdemeanor convictions within last 3 years
   - Exceptions: Any misdemeanor traffic (DUI is not considered Traffic)
   - Any warrant, any state
• Any misdemeanor conviction for the following, no matter age of crime:
  • Violent crimes
  • Sex crime of any kind including non-consensual sex crimes and sexual assault
  • Murder, attempted murder
  • Abduction
  • Assault
  • Illegal drugs
  • Arson
  • Aggravated DUI
  • Burglary
  • Any crime against minors, children, vulnerable adults, including abuse, neglect, exploitation
  • Any abuse or neglect
  • Pandering
  • Robbery
  • Any fraud
  • Extortion

9. I understand that I must disclose on all background check data collection forms (DPS, MCCCD background check vendor and a clinical agency background check vendor) all required information including any arrests, convictions, or charges (even if the arrest, conviction or charge has been dismissed or expunged), or participation in first offender, deferred adjudication, pretrial diversion or other probation program. That includes any misdemeanors or felonies in Arizona, any other State, or other jurisdiction. I also understand that I must disclose any other relevant information on the forms. I further understand that non-disclosure of relevant information on the forms that would have resulted in failing the background check will result in denial of admission to or removal from a Program. Finally, I understand that my failure to disclose other types of information of the forms will result in a violation of the Student Code of Conduct and may be subject to sanctions under that Code.

10. I understand that, if a clinical agency to which I have been assigned does not accept me based on my criminal background check it may result in my inability to complete the Program. I also understand that MCCCD may, within its discretion, disclose to a clinical agency that I have been rejected by another clinical agency. I further understand that MCCCD has no obligation to place me when the reason for lack of placement is my criminal background check. Since clinical agency assignments are critical requirements for completion of the Program, I acknowledge that my inability to complete required clinical experience due to my criminal background check will result in removal from the Program.

11. I understand the Programs reserve the authority to determine my eligibility to be admitted to the Program or to continue in the Program and admission requirements or background check requirements can change without notice.

12. I understand that I have a duty to immediately report to the Program Director any arrests, convictions, placement on exclusion databases, suspension, removal of my DPS Fingerprint Clearance Card or removal or discipline imposed on any professional license or certificate at any time during my enrollment in a Program.

Printed Name __________________________ Signature __________________________

Date ________________
TALENT RELEASE FORM

I authorize the Maricopa County Community College District, and those acting within its authority, to, at no charge:

- Record my participation, appearance or performance on videotape, audiotape, film, photography or any other medium.
- Use my name, likeness, voice and biographical material in connection with these recordings.
- Copy and distribute the recording in whole or in part solely for education related purposes by the Maricopa County Community College District, and those acting under its authority, as they deem appropriate.

Name: ____________________________________________________________

Date: ____________________________ Signature: __________________________

Phone number: ___________________ Email: ____________________________

Parent/Guardian

Signature (if under 18): ____________________________ Witness: ____________________________