El Paso Community College

The Best Place to Start and Finish!

Nursing Student Handbook 2025-2026

Effective from Fall 2025 to Summer 2026

The El Paso County Community College District does not discriminate on the basis of race, color, national origin, religion, sex, age, disability, or veteran status.

EPCC Nursing Student Handbook 2025-2026

INTRODUCTION TO THE HANDBOOK

The Nursing Division at El Paso Community College offers three programs designed to meet the healthcare needs of our community. By joining one of these programs, you are now a vital part of the healthcare team.

This handbook outlines policies and procedures related to the Nursing Programs. It does not replace applicable laws, nor does it substitute for official college policies found in the College Catalog or the EPCC Student Handbook. Unless otherwise noted, all policies and procedures in this handbook apply exclusively to nursing students and programs.

We hope this handbook serves as a helpful resource as you begin your journey toward a rewarding nursing career.

EPCC MISSION AND VISION

MISSION

The mission of El Paso Community College is to provide access to educational opportunities and experiences leading to the social and economic advancement of those it serves.

VISION

El Paso Community College will empower students' success by providing dynamic and purposeful learning opportunities.

STUDENT SUCCESS STATEMENT

Recognizing that there are obstacles for students in attaining academic goals, EPCC's focus on success strives to achieve fairness through inclusion of all students and active removal of barriers by supporting student progress, degree completion, academic transfer and/or gainful employment. EPCC is committed to success for all students as a basis for creating opportunities and providing resources and support for the success of all members of its college community.

NURSING PROGRAMS' MISSION AND VISION

MISSION

The El Paso Community College Nursing Program shall be the progressive leader in high-quality innovative nursing education opportunities in response to the health care needs of the border community.

VISION

The mission of the nursing discipline is to improve health care by providing qualified nurses who are prepared to work in the border community.

ACCREDITATION

El Paso County Community College District is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate degrees. Degree-granting institutions also may offer credentials such as certificates and diplomas of approved degree levels. Questions about the accreditation of El Paso County Community College District may be directed to the:

Southern Association of Colleges and Schools Commission on Colleges (SACSCOC)
> 1866 Southern Lane, Decatur, GA 30033-4097
> Phone: (404) 679-4500
> or by using information available on SACSCOC's website (www.sacscoc.org).

Texas Education Agency (TEA)
> 1701 North Congress Avenue, Austin, Texas 78701-14940
> Phone: 512-463-9734
> Website: www.tea.texas.gov

The Texas Higher Education Coordinating Board (THECB) has developed the basic nursing courses and course descriptions that are utilized by the nursing programs. The THECB can be contacted at:
> 1801 Congress Ave, suite 12-200, Austin, TX 78701
> Phone: 512-427-6101
> Fax: 512-427-6127
> Website: www.highered.texas.gov

The EPCC nursing programs are fully approved by the Texas Board of Nursing (BON). The EPCC nursing programs follow and comply with the most current Texas Board of Nursing (BON) guidelines and regulations. The BON sets and enforces the minimum standards for nursing practice and nursing education programs, issues licenses, and ensures that each person holding a nursing license is competent to practice safely.

The BON may be contacted at:
> Texas Board of Nursing (BON):
> George H. W. Bush State Office Building
> 1801 Congress Avenue, Suite 10-200, Austin, Texas 78701
> Phone: 512-305-7400
> Fax: 512-305-7401
> Toll-Free complaint line: 1-800-821-3205
> Email: webmaster@bon.texas.gov
> Website: www.bon.texas.gov

The Associate in Applied Science in Nursing program at El Paso Community College at the Rio Grande Campus, located in El Paso, Texas, is accredited by the Accreditation Commission for Education in Nursing (ACEN).
> 3390 Peachtree Road NE, Suite 1400 Atlanta, GA 30326
> (404) 975-5000

The most recent accreditation decision made by the ACEN Board of Commissioners for the Associate of Applied Science in Nursing program is Continuing Accreditation.

View the public information disclosed by the ACEN regarding this program on
https://www.acenursing.org

NURSING PROGRAMS' PHILOSOPHY

The nursing faculty of the Career Ladder Nursing Program agrees with the mission, vision, and core values of a learning college ascribed by the El Paso County Community College District. We must provide an

opportunity and support services that prepare individuals to improve their personal quality of life and to contribute to their community.

The nursing faculty believes that nursing education can be improved through the implementation of a Career Ladder concept, which allows individuals to progress in the educational system by providing multiple educational pathways leading to an entry-level license to practice as a vocational or associate degree nurse. Inherent in our philosophy are our beliefs about the individual, nursing, health, the environment, teaching, learning, nursing education, the roles of the associate degree nurse, and the roles of the vocational nurse within the scope of nursing practice.

Individual

Every individual is unique, of infinite value, and worthy of respect. Each individual is a composite of interrelated biological, psychological, sociological, cultural, and communicating needs that influence the individual's perception of their health. The individual is autonomous and has the right to make decisions about their own health care. The individual and family are the recipients of nursing care that focuses on meeting their needs.

Nursing

Nursing is a humanistic and professional healthcare discipline founded on knowledge from the sciences, humanities, and human experience.   It is a scholarly profession that utilizes theories from nursing and other disciplines.   Nursing employs integrity, accountability, clinical judgment, and caring behaviors to guide its practice for health promotion and disease prevention, health maintenance, and health restoration. Nursing advocates for the individual and family throughout the life span and in the final stages of life. Through the use of the nursing process, critical thinking, clinical judgment, and therapeutic interventions, which are supported by current evidence-based research, the nurse is able to provide holistic nursing care for the patient and family across the life span. The nurse must have the ability to utilize a variety of current technologies and nursing informatics to provide safe and effective patient-centered care in a variety of health settings.

Health

Health is a dynamic state that is influenced by each individual's inherited characteristics and life experiences. It is an individual's perception of satisfaction with their own state of well-being. It may or may not be related to the presence or absence of disease, but rather the patient's perception. Humans perceive themselves as healthy or ill as a consequence of the relationship between themselves and their environments.   At any given time, a person's health status is seen as being at a point on a continuum that extends from wellness to the cessation of life.

Environment

The environment is the domain in which individuals and families exist. The interaction between the environment and people affects health, well-being, growth and development, and the degree to which individual needs are met throughout the life cycle. The reciprocal relationship between the person and the environment is influenced by both internal and external factors. Internal factors include the biological, psychological, and spiritual attributes of the person. External factors are comprised of physical, chemical, sociocultural, economic, political, legal, and ethical elements.

Teaching

Teaching is a process aimed at facilitating the achievement of learning. It is an intentional interaction between the teacher and the learner, requiring a focus on mutual goals. It involves logical, strategic, and instructional activities to facilitate changes in interest, motivation, perception, insights, and behavior in the learner. Teaching should include a variety of instructional methods to meet individual students' learning needs. It is most effective when outcomes are stated in measurable behavioral terms so that the student knows how learning is to be evaluated. The teaching process and the learning process cannot be separated.

Teaching is also a dynamic process that is used by nurses to assist in the education of patients, families, and significant others.   The nurse is expected to assess the learning needs and to develop, implement, evaluate, and modify teaching plans designed to expand the knowledge base and skills of the patient.

Learning

Learning is an active, internal, and continuing process by which an individual acquires new knowledge through the integration and evaluation of concepts and skills. It is enhanced when the learner assumes responsibility for learning. It is further enhanced by direct application, readiness to learn, relevance to the learner, reinforcement of desired behaviors, use of all the senses, and the learner's prior life and work experience. Learning progresses from simple to complex, from general to specific, and from concrete to abstract.

Nursing Education

The faculty believes that education is based on humanistic approaches that foster critical thinking and promote awareness of differences among individuals. The faculty cares for each student as a unique individual with special talents, abilities, needs, and goals. Varying backgrounds, life experiences, and changing socioeconomic factors affect each student differently. To this end, faculty endeavors to provide an environment that assists students to realize their full potential. The acquisition of professional knowledge, communication skills, clinical competence, and clinical judgment occur through the active involvement of the student in the teaching and learning process. Students assume primary responsibility for learning, while faculty provides educational opportunities for knowledge acquisition and professional role development. The faculty mentors, facilitates, motivates, guides, and directs the learning experience.

The synergistic exchange between student and mentor encourages a learning environment that embraces excellence. Faculty believes that technology and nursing informatics is imperative in academic teaching and professional/vocational practice. Education is seen as a continuous, life-long process through which individuals expand learning, enhance practice ability, or qualify for employment positions.

The graduates of both the Vocational Nursing Program and the Associate Degree Nursing Program are prepared to function within the roles of the nurse developed by the Texas Board of Nursing (BON DEC, 2021). These roles incorporate concepts from current literature, national standards, and research. These competencies provide the foundation for nursing education and practice. The four roles are: Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.

Roles of The Nurse

Upon program completion, the student is expected to exhibit behaviors specified in each role of the nurse, as stated by the Texas Board of Nursing in the Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs.

As a Member of the Profession, exhibits behaviors that reflect a commitment to the growth and development of the role and function of nursing consistent with state and national regulations and with ethical and professional standards; aspires to improve the discipline of nursing and its contribution to society; and values self-assessment and the need for lifelong learning.

As a Provider of Patient-Centered Care, based on educational preparation and scope of practice, accepts responsibility for the quality of nursing care and provides safe, compassionate nursing care using a systematic process of assessment, analysis, planning, intervention, and evaluation that focuses on the needs and preferences of patients and their families. The nurse incorporates professional values and ethical principles into nursing practice. The patients for LVNs and for the ADN-educated RNs include individual patients and their families.

As a Patient Safety Advocate, promotes safety in the patient and family environment by: following scope and standards of nursing practice, practicing within the parameters of individual knowledge, skills, and abilities; identifying and reporting actual and potential unsafe practices; and implementing measures to prevent harm.

As a Member of the Health Care Team, provides patient-centered care by collaborating, coordinating, and/or facilitating comprehensive care with an interdisciplinary/multidisciplinary health care team to determine and implement best practices for the patients and their families.

Vocational nursing represents the beginning level of the nursing practice continuum in the roles of the Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.   The entry-level graduate of a vocational nursing program provides nursing care within a directed scope of practice under appropriate supervision. The vocational nurse uses a systematic problem-solving process in the care of multiple patients with predictable healthcare needs to provide individualized goal-directed nursing care. The vocational nurse contributes to the plan of care by collaborating with interdisciplinary team members and the patient's family. The new graduate can readily integrate technical skills and the use of computers and equipment into practice.

The primary role of the entry-level graduate of an ADN program is to provide direct nursing care or to coordinate care for a limited number of patients in various healthcare settings. Such patients may have complex multiple needs with predictable or unpredictable outcomes. The entry-level competencies reflect the scope of nursing practice for which the student is being prepared.

Revised: January 2025

NURSING PROGRAMS CONCEPTUAL FRAMEWORK

The EPCC Nursing Program student learning outcomes are derived from the philosophy and mission and are reflective of the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgment and Behaviors mandated by the Texas Board of Nursing (2021). The Differentiated Essential Competencies (DECs) demonstrate the progression of expectations across the types of nursing programs based upon educational preparation. These competencies were developed using current literature, national standards, and research (e.g., the Quality and Safety Education for Nursing for Nurses Competencies, the Institute of Medicine Reports, the Carnegie Report). Safety, advocacy, compassionate patient-centered care, caring, teaching, learning, communication, evidence-based practice, and informatics are incorporated in the DECs and are evidenced throughout the curriculum.

The curriculum is designed so that students are provided the necessary experiences to develop the knowledge, behaviors, and skills expected of practicing nurses in order to meet the biological, psychological, sociological, cultural, communicating needs of the patient and family. In addition, the clinical judgments of the nurse are guided by personal and professional values. Therefore, ethical principles and cultural aspects are integrated throughout the curriculum as well. Legal concepts are integrated to include Texas Board of Nursing (TBON) rules and regulations and the Texas Nursing Practice Act. The nurse uses a systematic process to assess, analyze, plan, intervene, and evaluate nursing care while collaborating with the interdisciplinary/ multidisciplinary health care team. This process is referred to as the nursing process and is integrated throughout the curriculum.

Each course in the nursing program incorporates the four roles of the Associate Nurse which are required by the TBON: Provider of Patient Centered Care, Member of the Health Care Team, Member of the Profession, and Patient Safety Advocate. The objectives for both the theory and the clinical courses are related and demonstrate increasing complexity as the student progresses in the program. In addition, course objectives relate to the student learning outcomes appropriate for each level.

ORGANIZING FRAMEWORK: OPERATIONAL DEFINITIONS

COMPETENCE	The quality of being competent or capable of performing an allotted or required function; the ability of having knowledge, skills, experience, qualification and judgment necessary to meet professional nursing responsibilities.
COORDINATION OF CARE	Two or more people providing services to an individual or group and keeping all participants informed of their activities.
CRITICAL THINKING	The ability to reason out, in a purposeful and goal-directed manner, the accuracy and logic of information in order to transform that information into applicable knowledge. The nurse's attitudes, knowledge base, and skills determine the level of critical thinking.
CULTURE	The totality of socially transmitted behavior patterns, beliefs, values, customs, lifeways, arts, and all other products of human work and thought characteristics of a population of people that guide their worldview and decision-making.
CULTURAL DIVERSITY	In relation to patient care refers to the fact or state of being different. Diversity accounts for many factors: sex, age, culture, ethnicity, socioeconomic status, educational attainment, and religious affiliation. Diversity occurs between and within cultural groups.
CULTURAL NEEDS	Requirements of the family unit and of the patient's lifestyle, language, sexual, spiritual, and religious beliefs.
DELEGATION	The assignment of authority and responsibility to another person (normally from a manager to a subordinate) to carry out specific activities. However, the person who delegated the work remains accountable for the outcome of the delegated work. Delegation empowers a subordinate to make decisions.
DISASTER PLANNING	A disaster plan is a scheme or method of acting, doing, or proceeding that is developed in advance of a calamitous event, especially one occurring suddenly and causing great loss of life, damage, or hardship, such as a flood, airplane crash, or business failure.
DISEASE PREVENTION	Involves activities aimed at identifying risk factors for disease and measures that prevent disease. Includes environmental programs that can reduce the incidence of disease or disability.
ENVIRONMENTAL SAFETY	Environment is the social and cultural forces that shape the life of a person or a population; Safety minimizes risk of harm, injury, danger, or risk to patients and providers through both system effectiveness and individual performance; careful to avoid danger or controversy.
EVIDENCED-BASED PRACTICE	Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care (QSEN); the practice of evidence-based nursing means integrating individual clinical expertise with the best available external clinical evidence from systematic research.
FACILITATE	To make easier or less difficult; help forward an action, a process; to assist in the progress of something or someone

FAMILY	Social unit which is comprised of two or more persons who interact in a system of roles and relationships; may or may not be a relative or spouse (at times may be referred to as a significant other).
HEALTH CARE SETTINGS	Various health care environments in which the nurse assumes patient care responsibilities. This includes, but is not limited to, acute care facilities, long-term care agencies, outpatient/inpatient clinics, and community-based agencies, schools.
HEALTH MAINTENANCE	It is the ability to sustain and preserve the present physical, mental, and social well-being of an individual.
HEALTH PROMOTION	An active process that assists a person to develop those resources that will maintain or enhance well-being or improve the quality of life.
HEALTH RESTORATION	The process of restoring an individual to a former state of health after any disease or injury that causes mental or physical impairment.
HOLISTIC	Holistic nursing care is defined as a practice that focuses on healing the whole person through the unity of body, mind, emotion, spirit, and environment.
INDIVIDUAL	An Individual is an interrelated biological, psychological, sociological, cultural, and communicating being who is a recipient of nursing care that focuses on meeting their needs.
LIFE-LONG LEARNING	Process oriented and relates to acquiring knowledge and developing abilities which lead to a permanent change in behavior over time.
NEEDS	Stimuli are based on a perceived or actual lack of internal constancy or harmony with the environment and a desire for an improved sense of well-being. It can be described in terms of actual and potential health problems.
NURSE	An Associate Degree or Vocational Nurse
NURSING INFORMATICS	Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making. (QSEN)
NURSING PROCESS	A method of critical thinking in which the nurse uses assessment, analysis, planning, interventions/ implementation, and evaluation (to include reassessment) in the delivery of patient care. This process is also referred to as a systematic problem-solving process, a systematic process, a systematic approach, and a systematic problem-solving approach.
PATIENT	Recipient of health care services and an active participant in health promotion and disease prevention, health maintenance, and health restoration to meet their bio-psycho-social-cultural and communicating needs. The Associate Degree Nurse defines the patient as the individual and family, whereas the Vocational Nurse defines the patient as an individual in the context of their family.
PATIENT-CENTERED CARE	Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for the patient's preferences, values, and needs.

PERCEPTION OF HEALTH	Immediate or intuitive recognition, insight, or discernment of the general condition of the body or mind with reference to soundness and vigor with freedom from disease or ailment.
PROFESSIONAL NURSE	Professional Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations. The professional nurse ensures that he/she stays well educated in the field he/she is working in, that he/she does not cross nurse-patient boundaries, and must display empathy without becoming personally involved with patients.
PROMOTING PROFESSIONAL NURSING	To encourage acceptance of Professional Nursing especially through advertising or other publicity; to help or encourage to exist or flourish.
PROFESSIONAL STANDARDS	Standards are professionally developed expressions of the range of acceptable variations from a norm or criterion; that are pre-determined elements against which aspects of the quality of medical service may be compared. Standards may be defined as "Benchmark of achievement which is based on a desired level of excellence; all standards of practice provide a guide to the knowledge, skills, judgment & attitudes that are needed to practice safely.
PROFESSIONAL VALUES	Professional values represent the foundational beliefs from which standards of ethical practice are derived.
PSYCHOLOGICAL NEEDS	Requirements to maintain the integrity of the patient's psyche and emotional needs include Maslow's hierarchy and Erickson's developmental tasks.
ROLE	Set of expected behaviors that relate to a specific position being held.
SAFETY	Minimizes risk of harm to patients and providers through both system effectiveness and individual performance."
SCOPE OF NURSING PRACTICE	The term "scope of practice" is used to define the actions, procedures, etc. that are permitted by law for a specific profession. It is restricted to what the law permits based on specific experience and educational qualifications
SOCIOLOGICAL NEEDS	Dealing with social questions or problems, especially focusing on cultural and environmental factors rather than on psychological or personal characteristics; financial and support system concerns of the patient.
TEACHING PLANS	A nursing patient teaching plan should be centered around the patient and inclusive of the family; patient education improves patient outcomes and quality of life; educating the patient is an integral part of the nurse's role. The student learns that effective patient-centered teaching requires effective communication skills, knowledge of the teaching-learning process and mastery of knowledge to be imparted to patients and families.
TEACHING AND LEARNING	Teaching strategies guide the instructional process toward achieving individual student learning outcomes and expected student outcomes.

	Learning serves as one component of the educational process which involves an intentional act of communicating information to the learner.
TECHNOLOGY	Involves rapidly developing methods for collecting and communicating information and for treatment of disease. Constant change in technology assures that continuous learning is an integral part of nursing
THERAPEUTIC INTERVENTIONS	Nursing actions that provide effective treatment and education to facilitate health promotion and disease prevention, health maintenance, and health restoration.
VOCATIONAL NURSE (V.N.)	A graduate of a one-year nursing program who assists the Registered Nurse in the delivery of health care as a Provider of Patient-Centered Care, Member of the Health Care Team Member of the Profession, and Patient Safety Advocate. The Vocational Nurse assists the patient in meeting bio-psycho-socio-cultural and communicating needs.

Revised: January 2025

PROGRAM OPTIONS

NURSING

Associate of Applied Science Degree (*AAS-RNSG*) Certificate of Completion (*C2-RNVN*)
Prepares students to become eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN); program graduates provide professional nursing care, patient teaching, effective communication, and management of patient care. Successful completion of the first semester of courses shows students applying to take the examination for Certified Nursing Aides through the Texas Nurse Aide Registry. Successful completion of the AAS program allows graduates to take the NCLEX-RN exam.
For more information, including ranking dates, pre/post admissions requirements, and program contact information, view the Program Information Guide at https://www.epcc.edu/academics/health/nursing

NURSING- LVN TO RN TRANSITION TRACK

Associate of Applied Science Degree (AAS-LVRN)
Prepares students to become eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). Program graduates provide professional nursing care, patient teaching, effective communication, and management of patient care. Students who have previously completed a vocational nursing program will be able to transfer their vocational nursing courses to this program under the Texas Nursing Articulation Plan. Students must have current state licensure (from Texas or a Compact State) as a Licensed Vocational/Practical Nurse. These students will receive credit for the first two semesters of the Associate of Applied Science Degree in Nursing (AAS).
For more information, including ranking dates, pre/post admissions requirements, and program contact information, view the Program Information Guide at https://www.epcc.edu/academics/health/nursing

VOCATIONAL NURSING- LVN TRADITIONAL TRACK AND EVENING/WEEKEND TRACK

Certificate of Completion (c2-vnsg) Certificate of Completion (C2-VCNA)
prepares students to become eligible to take the Licensure Examination for Practical (Vocational) Nurses (NCLEX-PN). Vocational Nurses perform routine nursing procedures under the supervision of a Registered Nurse or physicians. These procedures include observation, reporting, and the environmental and physical

management of patients. Successful completion of the first semester of VNSG courses allows students to apply to test for Certified Nursing Aide through the Texas Nurse Aide Registry.

For more information including ranking dates, pre/post admissions requirements, and program contact information, view the Program Information Guide at https://www.epcc.edu/academics/health/nursing

PROGRAM OUTCOMES

ASSOCIATE DEGREE IN NURSING OUTCOMES

Performance On Licensure Exam
For each program option, the three-year mean for the licensure exam pass rate will be at or above the national mean for the same three-year period.

Graduate Program Satisfaction
80% of graduates, twelve months post-graduation, indicate that they are "Completely Satisfied" or "Satisfied" with the preparation they received in each program option to perform the Student Learning Outcomes specified on the Graduate Satisfaction Survey as an entry-level nurse.

Job Placement Rates
90% of program graduates are employed or pursuing additional education within one year of graduation, as reported by the Texas Higher Education Coordinating Board.

Employer Program Satisfaction
80% of employers indicate that they are "Completely Satisfied" or "Satisfied" with the graduate's preparation as an entry-level nurse to perform each of the Student Learning Outcomes specified on the Employer Satisfaction Survey twelve months post-graduation.

Program Completion
1. Generic: At least 70% of the generic students complete the ADN program on time of program admission and reflect the demographics of the group admitted by at least 70%. (Student demographics: age, gender, and ethnicity.)
2. LVN to RN and Paramedic to RN: At least 70% of the LVN to RN students complete the ADN program within eighteen (18) months of program admission and reflect the demographics of the group admitted by at least 70%. (Student demographics: age, gender, and ethnicity.)

Last reviewed: May 2024

VOCATIONAL NURSING OUTCOMES

The graduate of the El Paso Community College Vocational Nursing (VN) Program is prepared to function in various healthcare settings as a creative, critical-thinking, and self-directed individual. The graduate is able to function in accordance with the Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs, Evidenced by Knowledge, Clinical Judgments, and Behaviors (2021). Twenty-five core competencies are categorized under four (4) main nursing roles:
- Member of the Profession
- Provider of Patient-Centered Care
- Patient Safety Advocate
- Member of the Health Care Team

Vocational Nursing Program outcomes are as follows:
1. NCLEX-VN* annual pass rate will be at or above the national mean.
2. 75% of students graduate within 1 year of program admission (on time).
3. 80% of employers are "satisfied with EPCC graduates" to be evaluated annually, using the EPCC Program Review Report.

4. 80% of graduates are satisfied with the program (class availability, the course helped in an occupational area, technology, and curriculum) to be evaluated annually, using the EPCC Program Review Report.
5. 90% of program graduates are employed, in the military, or pursuing additional education within one year of graduation, as reported on the EPCC Program Review Report.

Last reviewed: August 2024

END-OF-PROGRAM LEARNING OUTCOMES: ASSOCIATE DEGREE NURSING

Nursing Program Student Learning Outcomes (SLOs) assess the knowledge, skills/abilities, and/or attitudes that display behavioral evidence that the students have attained from their educational experiences. The ongoing assessment of Student Learning Outcomes is specifically linked to the El Paso Community College Mission Statement, Institutional Strategic Goals, Program Review, and the Nursing Mission and Vision statement. Nursing Program Student Learning Outcomes specifically describe the end result of the Nursing program.

Student Learning Outcomes – SLO's
1.   Integrate teaching-learning principles by developing, presenting, evaluating and modifying teaching plans to meet the needs of patients and their families.
2.   Utilize nursing clinical judgment, communication skills and a systematic process when advocating for safe caring and compassionate patient-centered care to culturally diverse patients and their families across the lifespan in a variety of health care settings.
3.   Assume accountability for the quality of patient-centered nursing care within the legal scope of nursing practice consistent with ethical principles and professional values and standards.
4.   Provide evidence-based nursing care that promotes safety for the patient, family and their environment, while utilizing current technologies and nursing informatics.
5.   Collaborate and co-ordinate with patients, their families and the interdisciplinary/multidisciplinary health care team to implement best practices and to address health promotion and disease prevention, health maintenance and health restoration based on the individual's perception of their health needs.

Last reviewed: May 2024

END-OF-PROGRAM LEARNING OUTCOMES: VOCATIONAL NURSING

Nursing Program Student Learning Outcomes (SLOs) assess the knowledge, skills/abilities, and/or attitudes that display behavioral evidence that the students have attained from their educational experiences. The ongoing assessment of Student Learning Outcomes is specifically linked to the El Paso Community College Mission Statement, Institutional Strategic Goals, Program Review, and the Nursing Mission and Vision statement. Nursing Program Student Learning Outcomes specifically describe the end result of the Nursing program.

Student Learning Outcomes – SLO's
1.   Integrate teaching-learning principles by developing, presenting, evaluating and modifying teaching plans to meet the needs of patients and their families.

2. Utilize nursing clinical judgment, communication skills and a systematic process when advocating for safe caring and compassionate patient-centered care to culturally diverse patients and their families across the lifespan in a variety of health care settings.
3. Assume accountability for the quality of patient-centered nursing care within the legal scope of nursing practice consistent with ethical principles and professional values and standards.
4. Provide evidence-based nursing care that promotes safety for the patient, family and their environment,   while utilizing current technologies and nursing informatics.
5. Collaborate and co-ordinate with patients, their families and the interdisciplinary/multidisciplinary health care team to implement best practices and to address health promotion and disease prevention, health maintenance and health restoration based on the individual's perception of their health needs.

Last reviewed: May 2024

PROGRAM ADMISSIONS

1. EPCC Admission: Students interested in any of the nurisng programs should first be admitted to EPCC. For more information, go to https://www.epcc.edu/Admissions
2. Nursing Counseling Session: Make an appointment with a designated nursing counselor to plan your path.
3. Nursing Program Ranking: Students seeking to enter any of the nursing programs go under a Specialized Admission process referred to as "ranking." Ranking occurs twice a year for all three programs. Students ranking in October start the program in the spring semester, and students ranking in June start the program in the fall semester. To rank for a program, follow the following steps.
   a) Complete Specialized Admissions Orientation
   b) Complete pre-admission clinical clearance/requirements
   c) Attend New Nursing Student Orientation
   d) Complete post-ranking clinical clearance/requirements

For more detailed information, including program requirements, review the most current Program Information Guides at https://www.epcc.edu/Academics/Health

PROGRAM-RELATED EXPENSES

Students are responsible for all expenses related to admission, progression, and re-entry, as applicable, into the nursing programs. In addition to standard college tuition and fees, the following program-specific costs apply:

Liability Insurance – Included as part of college fees.
Medical Insurance – Students must maintain personal medical insurance that covers Emergency Room (ER) services. They are financially responsible for any emergency care received while assigned to a clinical site.
Supply Kits – Required for courses that include hands-on components; associated fees are included with course registration.
ATI Resources – Fees for ATI learning materials and standardized testing are charged during registration and vary by semester and program.
NCLEX Live Review Course – A fee is included with registration for RNSG 2130 (Professional Nursing Review and Measure Preparation) and VNSG 1219 (Leadership and Professional Development).

Link: Estimated program costs sheets
https://www.epcc.edu/Academics/Health/Nursing/documents

STUDENT EMPLOYMENT OR VOLUNTEER WORK GUIDELINES

The Nursing Program supports the mandatory Nursing Practice Act of the State of Texas and is committed to excellence in nursing by nurses appropriately prepared for the services they are rendering. Therefore, the position of the Nursing Program regarding undergraduate nursing students (who are unlicensed in the State of Texas either as Registered Professional nurses or as Licensed Vocational Nurses) accepting employment in hospitals or health agencies, is as follows:

1. It is recommended that a student's combined employment and semester-hour load not exceed 40 contact hours per week in either long-session or summer terms.
2. Undergraduate nursing students who accept positions for which they receive compensation for client care do so as unlicensed individuals and will not wear the school uniform, laboratory coat with insignia, or other indications of their student status, in as much as they are not functioning as nursing students but as paid employees.
3. Students are advised to familiarize themselves with the State of Texas Nursing Practice Act so that they will recognize the full scope and responsibility of nursing as being more than just a collection of skills. Nursing students who accept a position for a pay as a nurse aide, nursing assistant, or nurse tech must recognize that they may be held legally liable for their actions and therefore, should not accept responsibilities - nor perform nursing interventions beyond their knowledge and skills, nor those within the responsibilities of the professional nurse or vocational nurse as defined in the Nursing Practice Act and the Rules on Delegation of Nursing Duties.
4. The student is responsible for maintaining the required grade point average and should consider the demands of full or part-time employment upon the student's time and energy.
5. The professional practice insurance that is connected with the clinical course only covers students while in their student role and will not cover students in an employee position.
6. Students should be aware that: (1) El Paso Community College assumes no responsibility for their activities as volunteers or employees of agencies; (2) they are personally responsible and liable for any activity in which they participate while employed or as a volunteer; (3) professional liability insurance purchased by students through EPCC is valid only in their student role, not their employment or volunteer role; (4) in nursing, individuals who practice illegally may jeopardize their futures, since persons who are convicted of crimes may not be eligible to take their licensure or certification exam.
7. Students who are employed or volunteer in agencies have a personal and professional responsibility to engage only in those activities that fall within their job descriptions as non-licensed workers. They have a responsibility to refuse to participate in activities that they have not legally authorized to do.
8. Students who are employed or working as volunteers should seek information regarding liability coverage, laws governing volunteers, etc., from their employer(s).

Last reviewed: August 2024

HEALTH INSURANCE COVERAGE

All nursing students must provide proof of current health insurance that includes Emergency Room (ER) coverage. Wellness insurance plans are not accepted. Health insurance coverage must remain active for the duration of the nursing program. Students who do not provide proof of current health insurance will not be eligible for program ranking, course enrollment, or clinical placement.

Clinical facilities do not provide health or workers' compensation coverage for students. If a student becomes ill or injured during a clinical rotation, they are solely responsible for all related medical expenses and must use their personal health insurance for any costs incurred.

CLINICAL ROTATIONS

Students may be required to do clinical rotations on weekends, evenings, or nights upon occasion, which is off-cycle from the regular clinical schedule of Monday and Tuesday. The off-cycle clinical rotations may be necessary to optimize student learning and facilitate faculty and clinical site availability.

Clinical days are usually Monday and Tuesday, but it could be any other day of the week depending on the health care facility.   Clinical can be days, evenings, nights, or weekends.   Clinicals are at times extended into the winter break or into the summer break, depending on the number of students and Clinical Affiliations available for use during the semester.

TRANSPORTATION

Students are responsible for transportation to and from the college and health care agencies used for clinical experiences including clinics, community agencies, and schools. It is important that each student make their own transportation arrangements, as carpool assignments are not guaranteed.

The student is responsible for providing reliable transportation to clinical education settings. Transportation difficulties cannot be used as an excuse for absence or tardiness problems.

MILITARY

If students are called to active military service, the administration and faculty will evaluate each student's academic status in meeting and maintaining the course objectives.

Verification in the form of official orders or a letter from the supervisor or commander will be required, with documentation that is signed and on official letterhead. It must be presented to the Dean of Nursing and/or the Nursing Program Coordinator.

GUIDELINES FOR STUDENTS WITH DISABILITIES

Students with permanent or temporary verified disabilities are invited to register with the Center for Students with Disabilities, where counseling, registration assistance, adaptive equipment, and a variety of support services are available. Support services can be arranged for all campus locations. For more information, refer to the College Catalog.

If accommodations are needed to complete program competencies, a plan will be developed to assist students in meeting course/program competencies whenever possible. An individualized learning plan will be jointly developed between the student, the faculty member, and a representative from the Center for Students with Disabilities. To initiate this process, please contact any of the following individuals: a Health Occupations Counselor, the Instructional/Program Coordinator, a representative of the Center for Students with Disabilities, or the Dean for Nursing. You must initiate the request for accommodations. Accommodations requested and approved must allow you to meet the same course outcomes as students with no accommodations.

Link: EPCC Procedure, FB8 - Physical and Technical Standards for Students in Health Occupations Programs
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-8.pdf#search=physical

ACCOMMODATIONS FOR LICENSING, CERTIFICATION, OR REGISTRY EXAMINATIONS

Most agencies that license, certify, or register health care professionals also have established guidelines for the examinations for graduates of health occupations programs. These guidelines usually describe testing modifications during the licensing examination for candidates with disabilities. A candidate must be accommodated in the Nursing Program to be allowed accommodation to take the licensure exam. The following outlines a typical guideline:

1. The candidate must submit a request for testing modification directly to the appropriate licensing, certification, or registry agency. Examples of supporting documentation would include:
   o Letter from candidate
   o Letter from medical professional documenting disability and requested modification
   o Letter from the program coordinator identifying modifications granted by the program
2. The agency will review the request and supporting documentation for completeness, fairness, security, and impact. Information will also be provided to the testing service.
3. An approval letter will be mailed to the candidate from the agency and will include:
   o The accommodations were approved.
   o The test center was notified of the request for the accommodations.
   o Information for the candidate if changes are needed in the test center location.
4. The cost of accommodations will be the responsibility of the testing service.
5. If assistive personnel (e.g. readers, recorders, signers) are needed at the testing site, an approved list of readers will have previously been identified by the agency. The testing service will identify the reader.

For more information, contact the specific agency that will issue your license, certification, or registry.

Link: EPCC Procedure FB-8 Physical and Technical Standards for Students in Health Career Programs
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-8.pdf

BACKGROUND CHECK AND SUBSTANCE ABUSE TESTING

To comply with accreditation standards and clinical facility requirements, all nursing students must complete a criminal background check and substance abuse screening prior to admission and clinical placement. A substance abuse test must be completed no earlier than 90 days before registration for the student's first semester. Students should confirm timelines with Clinical Clearance to avoid unnecessary retesting. These requirements must be met before registration.

Students who withdraw from health-related coursework for one semester or longer are required to repeat background checks and/or drug screenings upon re-enrollment. All costs related to these screenings, including retests, are the responsibility of the student.

Certain findings on background checks, including placement on ineligible persons lists, criminal convictions listed in affiliate Exclusion Guidelines, or felony convictions, may prevent admission to the nursing program or participation in clinical rotations, as healthcare facilities typically prohibit clinical access to individuals with felonies.
The Nursing Program reserves the right to require a Random Drug Screen for Cause if there is reasonable suspicion of impairment during academic or clinical activities.

Graduates of the Associate Degree Nursing (ADN) and Vocational Nursing (VN) programs may apply to take the NCLEX-RN or NCLEX-PN licensing exams. However, program completion does **not guarantee** eligibility to sit for the exam or obtain licensure, particularly for students with a criminal history or positive drug screen.

The Texas Board of Nursing (BON) reviews conduct and criminal history to determine licensure eligibility. Behaviors that may disqualify an applicant are detailed in the Nursing Student Handbook and discussed during New Student Orientation.

Students with any criminal history or positive substance abuse screening are strongly encouraged to:
- Contact the Nursing Clearance Office
- Consult the Texas BON directly
- Consider submitting a Declaratory Order to the BON clarify licensure eligibility before starting the program

After all screenings and reviews, students will receive a letter of clearance (blue card) or non-clearance, which must be uploaded to Complio.

For questions, contact the Nursing Clearance Office at nursingclearance@epcc.edu

CRIMINAL BACKGROUND CHECKS

A prior conviction or positive drug screen may prevent a student from enrolling and/or progressing in the program. In most cases, students with a felony conviction will not be admitted, as clinical facilities typically prohibit individuals with felonies from participating in clinical rotations.

1st Background Check & Drug Screen
State regulations require background checks and drug screenings for all individuals working or training in settings such as daycare centers, public schools, nursing homes, mental health facilities, and other healthcare environments. The Joint Commission also mandates that participating healthcare facilities receive current background checks and drug screen results for all students.

Once accepted into the nursing program, students must complete both a background check and drug screen through American Data Bank (Complio) by the established due date. The results may impact a student's ability to:
- Register for nursing courses
- Participate in clinical rotations
- Meet course and clinical objectives

2nd Background Check
Upon admission to the program, students must complete fingerprinting, which will be submitted to the Texas Board of Nursing (BON) and forwarded to the FBI for a criminal background check.

If the background check is **clear**, the BON will issue a **blue card**, which must be uploaded to Complio by the end of the first semester for registration in the 2nd semester.

If the background check reveals a criminal history, the student will be notified by the Clinical Clearance and/or the BON and given instructions on how to proceed. Students must submit copies of all court documents and BON communications to Clinical Clearance for review and placement in the student's file.

TX BON DECLARATORY ORDER

Students with any criminal history or a positive drug screen are strongly encouraged to submit a Declaratory Order to the Texas Board of Nurisng (BON) before starting the program. This process determines eligibility to take the state licensing exam. Failure to complete the Declaratory Order may result in ineligibility for licensure upon program completion.

BON Policy For Individuals With Convictions
1) Staff are authorized to propose denial of licensure eligibility for an applicant or a petitioner who:
   a) has been convicted of a felony.
   b) has been convicted of a misdemeanor involving moral turpitude in which the crime was against a person(s) or was a crime of violence.
   c) has been convicted of a misdemeanor involving moral turpitude in which the crime was non-violent, involving property, if less than 10 years from the date all court conditions were met.
2) Staff members of the BON are authorized to propose the denial of licensure eligibility of an individual who has had action by another health care licensing authority when:
   a) their licensure was revoked and not reinstated,
   b) board action was related to a felony conviction,
   c) board action was related to a misdemeanor conviction (see 1b and 1c)
3) The Executive Director of the BON is authorized to recommend approval of an individual convicted of a misdemeanor involving moral turpitude in which the crime was non-violent, involving property, who has met all conditions of the court, such as probation, 10 or more years prior to the application or petition, with no further conviction(s).

For further information on how to apply for a Declaratory Order, contact:
    Texas Board of Nursing
    1801 Congress Avenue, Suite 10-200
    Austin, TX 78701
    Phone: (512) 305-7400
    Website: https://www.bon.texas.gov
    Declaratory Order Information and Forms:
    https://www.bon.texas.gov/forms_declaratory_order.asp

LINK: FB-9 Substance Abuse Testing for Health Occupations Students
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-9.pdf#search=Substance%20abuse

Link: DHA-1 Clearance Investigations and Substance Abuse Testing for Students and Faculty in Instructional Programs
https://www.epcc.edu/administration/institutionaleffectuveness/policiesandprocedures/DHA-2.pdf#search=clearance%20investigations

PROCEDURE FOR DECLARATORY ORDERS FOR INDIVIDUALS WITH W PRIOR CRIMINAL HISTORY, MENTAL ILLNESS, OR CHEMICAL DEPENDENCY

Students applying to or enrolled in the nursing program who have a history of (1) conviction of a crime (felony or misdemeanor) other than a minor traffic violation, (2) hospitalization or treatment for mental illness, (3) hospitalization or treatment for chemical dependency, or disciplinary action by another licensing agency, are encouraged to have their situation Last reviewed by the Nursing Coordinator, Nursing Dean or the Board of Nursing prior to entering the program.

In addition, students with a current or past history of psychiatric conditions or drug/alcohol use should discuss their current health status with their healthcare provider. This information should be documented on the physical examination form on file with the College. Current drug or alcohol use may result in disciplinary action by the College in accordance with existing student disciplinary procedures. Refer to the College Catalog and/or the College Student Handbook for more information.

The Board of Nursing can issue declaratory orders to individuals stating their eligibility to write the licensure examination prior to entering or completing the nursing program. Students should request advice from the Board of Nursing regarding the need for a declaratory order if they:

1.   Have been convicted of a crime other than a minor traffic violation.
2.   Have been hospitalized or treated for mental illness and/or chemical dependency.
3.   Have had disciplinary action taken against you by a licensing authority.

The Board of Nursing requires that the individual student request this clearance. The school cannot complete this process for students. If the student has not received clearance from the Board of Nursing prior to graduation, the Board of Nursing will not be able to release a graduate permit to you until you have been cleared. Therefore, the student must complete this process prior to the end of the 1st semester (Foundations) to proceed to the 2nd semester.

PROGRESSION IN THE NURSING PROGRAM PROCEDURE

1. All generic students entering the Associate Degree Nursing Program or the Vocational Nursing Program are admitted via EPCC procedure FB-7, "Specialized Admission Requirements for Programs in Health Careers and Nursing."
2. Ranking for students admitted for the Summer (VN Evening/Weekend track only), Spring, and Fall semester will be done according to the ranking procedure listed above.
3. Students on Academic Suspension with the college cannot be ranked for a nursing program. Students with an incomplete (I) for a ranking or required course cannot be ranked for a nursing program.
4. Students must have a 2.5 GPA to rank in a Nursing Program.
5. Generic students will follow the catalog degree plan for the year under which they were admitted. The catalog degree plan for the Associate Degree Nursing Student and/or the Vocational Nursing Student will be followed in sequential order. Re-entry students: See re-entry policy Reentry into a Nursing Program is by space availability (FB-10).
6. Non-generic students that are defined as advanced placement, transfer, transferring program students, foreign students, nurses with Board orders, or reentry students will follow the catalog degree plan in sequential order for the year under which they were admitted/readmitted.
7. All nursing students must adhere to a Nursing degree plan as specified in the EPCC College Catalog for the semester/year that entry/reentry is sought. If a degree plan is different than the original one under

which the student was admitted or if it comes from another institution, it is the student's responsibility to meet the new requirements, if any, and initiate a revised degree plan with a nursing counselor.

8. If a student is unsuccessful in the nursing program or withdraws from the program, it is the student's responsibility to initiate the reentry process. All students desiring to reenter a nursing program are referred to EPCC policy "Student Reentry into the Nursing Program" (FB-10)

9. All nursing students are expected to follow the policies and procedures as listed in the EL Paso Community College Catalog and Nursing Student Handbook.

10. All nursing students are expected to follow the policies and procedures in the Nursing Student Handbook.

Revised: August 2018

EPCC PROCEDURE FB-10 STUDENT RE-ENTRY INTO THE NURSING PROGRAM

This procedure provides a system for re-entry into a Nursing program for a student whose program of study has been interrupted. The current procedure can be accessed on the EPCC website.

Link: FB-10 Student Re-entry into the Nursing Program
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-10.pdf

STUDENT DISMISSAL FROM THE NURSING PROGRAM

Students may be dismissed from the Nursing Program based on failure to meet academic, clinical, professional, or ethical standards, in accordance with EPCC college and EPCC Nursing Program procedures and Texas Board of Nursing regulations.

Dismissal may occur for, but is not limited to:
- Patterns of unsatisfactory performance in theory, clinical, or lab, as outlined in the Procedure for Students Not Meeting Course Expectations and College Procedure FB-10 Student Re-Entry into the Nursing Program.
- Behavior causing or posing risk of harm to patients, colleagues, or the public, as detailed in the Rules, Guidelines, and Criteria for Unsafe Practice.
- Criminal conduct that may affect licensure eligibility, per §213.28 of the Texas Administrative Code.
- Inability to meet current fitness to practice standards, as defined in §213.29 of the Texas Administrative Code (e.g., physical, mental, or emotional impairment).
- Failure to demonstrate good professional character, including violations of the EPCC Code of Ethics for Nursing Students, Professional Boundaries Policy, and EPCC Nursing Programs Policy for Social Media and Networking, as well as academic dishonesty or unprofessional behavior (see §213.27 of the Texas Administrative Code).

Dismissal may result from ongoing issues or a single, serious violation of academic, clinical, professional, or ethical standards. Students facing dismissal from the program will be allowed a reasonable time to respond and will be notified in writing of the final decision by the Office of the Dean of Nursing.

For dismissal decisions related to Unsafe Practice, the Dean of Nursing has final authority. Such decisions may only be appealed on the basis of procedural error. Other dismissal decisions may be appealed in writing

to the Vice President of Instruction and Workforce Education following established institutional procedure as outlined in College Procedure FB-10 Student Re-Entry into the Nursing Program.

Implemented: July 2025

GRADUATION PROCEDURE

Graduation from the Nursing Program follows the EPCC college policy EGC-1 Timely Graduation Processing. Students must adhere to all college requirements and deadlines for graduation.
Students are encouraged to meet regularly with a designated Nursing or Vocational Nursing Counselor and to use the Degree Works tool to monitor their progress and ensure all degree requirements are met. This proactive approach helps avoid delays in graduation after program completion.

Before submission of the Affidavit of Graduation to the Texas Board of Nursing, the Office of Clinical Clearance will review all requests to verify program completion and the accuracy of the information in the application. Upon satisfactory review, requests will be forwarded to the Dean of Nursing for final approval.

Students planning to test for licensure outside of Texas are responsible for learning the licensure application process in their chosen state and must communicate directly with the Office of Clinical Clearance regarding any specific requirements.

Implemented: July 2025

NURSING STUDENT SHARED GOVERNANCE POLICY

The Nursing Division has one standing committee with student involvement: the Student Committee. This committee provides a formal avenue for students to offer feedback, share concerns, and contribute to ongoing improvement of the program.

Student Representation: One representative from the Student Nurses Association (SNA) and one from the Vocational Student Nurses Association (VSNA) serve as non-voting members.

Participation in Faculty Meetings: SNA and VSNA representatives are invited to attend faculty meetings to provide student input. Before doing so, they must present the topics they wish to discuss to their respective organization advisor (SNA or VSNA Advisor) for approval. Representatives are not required to stay for the full meeting. Faculty are not obligated to respond immediately but will listen and may ask clarifying questions. Feedback will be reviewed and considered as appropriate.

Reviewed: July 2025

STUDENT NURSE ASSOCIATION (SNA) AND VOCATIONAL NURSE STUDENT ASSOCIATION (VSNA)

The EPCC Student Nurse Association (SNA) and Vocational Student Nurse Association (VSNA) are Student Government Association (SGA) recognized clubs for pre-nursing and nurisng students attending EPCC. This club provides students with opportunities to participate in scholarly and community charitable events (health fairs, fundraising, etc.) and provides nursing administration with constructive feedback about the nursing program. These opportunities enhance the students' acquisition of nursing knowledge, skills, leadership, and a

sense of professional accountability. SNA board members, elected by current EPCC nursing students and supported by faculty advisor (s), schedule and run the weekly meetings. It is a great way to meet other nursing students in the nursing program. All nursing students are encouraged to be active participants in the club.

Reviewed: June 2025

NURSING STUDENT DRESS CODE

As nursing students, you must develop a professional image as nursing representatives of the EPCC Nursing Program. A professional image positively influences our nursing community for our clients and healthcare partners. The approved uniform/attire will be worn in clinical and non-clinical care settings. Nursing students are accountable for being knowledgeable and compliant with the EPCC Nursing Program Student Dress Code. Each student's appearance should be appropriate to convey professionalism, hygiene, and grooming in both clinical and non-clinical areas.

Exceptions to the uniform/dress code may be stated in individual course syllabi or clinical facility requirements. Clinical facilities may require additional conformance to their policies. Faculty will assess students' compliance. Students not complying with this Dress Code may be sent home to change and/or be subject to further disciplinary action.

The table below outlines the professional dress standards for both clinical and non-clinical areas. Clinical healthcare sites may have additional standards to follow.

Clinical Facilities	
Scrubs Uniform	EPCC Scrubs consists of a teal top and black pants. EPCC Scrubs must be clean, neat, and pressed. The uniform may not be overly snug or tight and must allow free mobility without any skin exposure when sitting or bending down. The bottoms must be straight leg, not tapered, and extended to cover the entire ankle. Scrubs consist of a scrub V-neck style with half sleeves and scrub pants. There should be no undergarments or cleavage exposed. Other attire based on religious practices or other situations needs prior approval. A black scrub jacket with an EPCC patch-may be worn over the uniform. Primarily white or black, non-porous material for clinical footwear. Footwear must be neat, clean, and well-kept. The enclosed shoe must cover the entire foot and heel area. *Attire for Mental Health may be different and at the direction of the faculty and healthcare facility.
School Patch	The school patch must be permanently affixed to the upper left side of the sleeve of all uniforms and scrub jackets.
Socks and Hosiery	Socks and hosiery must be white, black, or natural colored and clean. Hosiery may be worn with uniform skirts or dresses.

Hair and Facial Hair	Hair and facial hair must be clean and neat. Hair that extends past the chin must be pulled back and secured so as not to obstruct peripheral vision or contaminate a sterile field. Hair colors (e.g., pink/blue/purple) may not be ornamental. Beards must be clean and neatly trimmed and not hang beneath the chin. Facial hair must not interfere with the N95 mask seal. No excessive ornaments or unapproved head coverings may be worn.
Makeup	Makeup must be used in moderation to promote a professional image. Only neutral-colored face and eye makeup is allowed. Neither false eyelashes nor eyelash extensions of any kind are permitted.
Body Art	Body art, such as Tattoos and Henna, that are not concealed by scrubs may be visible and do not need to be covered unless they are deemed offensive, as determined by faculty or clinical affiliates.
Nails	Nails must be clean and well-groomed (fine motor skills should not be limited by nail length). No nail polish is permitted—no artificial nails. Fingernails cannot extend more than 1/4 inch past the tip of the finger.
Identification Badges	Students must visibly wear (above the waist, at the chest area, and always facing forward) the official EPCC identification picture ID badge as well as their name badge identifying them as an EPCC nursing student.
Jewelry	Jewelry must be worn in moderation. Only three stud earrings per ear lobe are allowed. Clear or skin-toned studs or disks must be used for additional ear piercings. Multiple rings, high gem mounting, and/or dangling bracelets, necklaces, and earrings are not permitted - single-band rings are recommended. Ear gauges - colored disks must be removed, but ear gauges that are clear in color are permitted. Piercings – piercings, which include any piercing, in areas other than ears, as addressed above, must be non-visible or removed.
EPCC Facilities	
Nursing Skills and Simulation Laboratory Attire	All requirements for the "Clinical Facilities" section listed above will be followed, with the following exceptions: Scrubs can be of other colors than those of the EPCC uniform, and the EPCC patch is not needed. However, students should wear matching scrubs sets. Students may wear school-branded and nursing student club-sponsored t-shirts with scrub pants.

Classroom Attire	Business casual, uniform/dress that is reflective of a professional image, and that is neat and clean. Denim material (i.e., jeans) is permitted but may not be torn in any way or overly tight.
	If worn, scrubs can be of other colors than those of the EPCC uniform, and the EPCC patch is not needed. Students may wear school-branded and nursing student club-sponsored t-shirts with scrub pants.
	Shorts, sweats, athletic wear, spaghetti straps, miniskirts, bare chest or midriffs, low-cut tops/blouses, and any similar clothing are not allowed. Footwear must be neat and clean. Completely enclosed shoes should be worn (e.g., no flip flops or slippers).

Implemented: August 25, 2025

PROCEDURE ON ROUNDING OF NURSING GRADES

The process of rounding course grades to be used throughout the Nursing Program will follow common mathematical convention:
1. Scores on each examination, assignment, or clinical evaluation <u>will be rounded and recorded to the closest whole number.</u>
2. Rounding rule: All grades except for the Final Course grade will be rounded.
3. **Final Course grades will NOT be rounded to the closest whole number.** A 78.00% is needed to pass the course with no rounding (i.e., 77.7 would be recorded as 77.7 and not rounded up to 78; 89.9 stays 89.9 and would not be rounded up to 90).
4. Grading Scale
   A = 90 – 100
   B = 80 – 89
   C = 78 – 79
   D = 70 – 77
   F = 69 and below

   D is **not** a passing grade in all Nursing Programs (VN, RN, LVN to RN). **A minimum passing grade in all Nursing or Vocational Nursing courses is a C = 78.**
Last reviewed: May 2024

PROCEDURES FOR WRITTEN EXAMINATIONS, QUIZZES, AND CLINICAL

1. Unit examinations will be given at announced dates and times.
2. There will be NO retake examinations.
3. The unit examination grade, which may be computed on a percentage basis, will be averaged into the final grade for the course according to the published course grading scale. The ATI exam in each course will be averaged into the unit exam grade.
4. If a comprehensive examination is part of the course, the comprehensive examination grade will be a percent of the final grade for the course according to the published course grading scale.
5. The student must notify the instructor of an absence PRIOR to the time of the scheduled examination. If the student does not contact the instructor PRIOR to the time of the scheduled examination, a grade of zero (0) will be assigned.
6. Five points will be deducted from examinations not taken on the scheduled date and time. The student must take the examination within one week (7 days) unless special arrangements have been coordinated

and approved with the instructor. Failure to follow this procedure or failure to take the examination at the designated time established by the instructor will result in a grade of zero (0) for the examination. It is the student's responsibility to contact the instructor and to keep the lines of communication open.

7. If a student is late to an exam, the student must notify the instructor giving the exam or the course coordinator prior to the exam. If a student is more than (15) minutes late to take the exam, there will be a (5) point deduction from the exam grade.

8. Students arriving late (online and/or face to face) to take an examination will have to complete the examination in the time left.

9. Extensions in time for exams must be done with a directive received from the counselor with the Center for Students with Disabilities (CSD). Requests must be sent through the CSD or as directed in the syllabus.

10. Online Testing- with Respondus or Proctorio

11. All online testing a Proctored Assessments will be completed synchronously on the prescheduled date/time via Blackboard using Respondus Lock Down Browser or using Proctorio.

12. Exam Grades are not final until the instructor conducts a review of the Respondus Exam. If the review of the Respondus report or Proctorio report raises concerns of potential academic dishonesty (See EPCC Nursing Student Handbook) the concerns will be reported to the dean of nursing. Concerns related to Proctorio will also be reported to the program's ATI liaison.

13. Tardiness for exams on Proctorio or Respondus Exams. If difficulty signing into the exam, notify the instructor within 10 minutes of the difficulty encountered by course message and by phone let the instructor know that a problem exists.

14. The student cannot have earphones, headset, or earbuds. The student can have a mirror as indicated in the syllabus.

15. Once an individual finishes the exam, no student will be admitted to the exam.

16. The student must have a final grade of 78% or higher to pass the course; this is necessary to progress to the next course, based on the EPCC catalog nursing degree plan to which the student is currently aligned.

17. At the instructor's discretion according to course syllabi, the lowest quiz grade may be dropped in the calculation of the course grade.   There will be no exam grades dropped in the calculation of the course grade.

18. The instructor has the option of specifying seating arrangement, movement, what articles to bring to the exam and leaving the room during classes and examinations.

19. All books, notebooks, and personal belongings will be placed at the front of the classroom or other designated area, i.e., left in the car before entering a testing situation.

20. All individual nursing clinical courses must have a final grade of 78% or higher to pass the individual nursing clinical course. This standard is required before the student is allowed to continue on to the next individual nursing clinical course. This standard is based on the EPCC catalog nursing degree plan to which the student is currently aligned.

21. See individual course syllabi for other requirements related to Written Examinations, Quizzes, Clinical, and other graded materials.

Revised: August 2024

PROCEDURE ON NURSING STANDARDIZED TESTING

The nursing program will utilize the "Comprehensive Assessment and Review Program" (CARP) offered by Assessment Technologies Institute, LLC (ATI). CARP prepares students for the NCLEX and their career by strengthening their knowledge base through focused remediation. It is a comprehensive learning solution that goes beyond testing by offering unique and proprietary remediation on each test, practice or proctored, and it

ties directly back to the NCLEX. To address diverse learning styles, CARP includes multiple remediation sources such as online and traditional reading materials, videos, practice assessments and internet sources.

The CARP package includes the following:

Entrance/Orientation
- Self-Assessment Inventory
- Critical Thinking Entrance Assessment
- Quest for Academic Success Review Guide
- Nurse Logic

Content Mastery Series
- Proctored Assessments
- Specialty-Specific Review Modules
- Learning System—Practice tests and Finals
- Skills Modules

NCLEX Preparation/Exit
- Comprehensive Predictor Assessments
- Online Practice Comprehensive Assessments
- Ready-Set RN/PN Review Guides
- Critical Thinking Exit Assessment

Students must create an account at the ATI website (www.atitesting.com) at the start of the semester and keep a record of their user ID/password.

Each nursing course may have one or more proctored ATI assessments scheduled for completion during the course. These Proctored Assessments are identified in the Nursing Program's Standardized Testing Plan, with the exception of RNSG 2130 and VNSG 1219, students are required for course completion to take the Proctored ATI Assessment as scheduled, or they will receive a grade of "I", incomplete for the course. It is mandatory to take the Proctored ATI Assessment at the end of the specific courses. It will be counted as a unit exam grade in all courses except RNSG 1115, 1301, 1208, and VNSG 1227, 1323, and all clinical courses.

The Proctored Assessment must be taken as scheduled. If not taken as scheduled, zero points will be awarded. For students enrolled in RNSG 2130 in the 4th semester of the ADN program and in the VNSG 1219 in the 3rd semester of the VN Program; the ATI Comprehensive Predictor Assessment may be taken 2 times for course completion.

Prior to taking the Proctored Assessments, the student must score at least 90% on the practice assessments. The practice test may be taken on any computer at any time and may be retaken until the student scores at least 90% (although 24 hours must pass prior to retesting).
The student must submit proof of an online-focused review, quiz, and a score of 90% on the practice test to the instructor to be allowed to take the Proctored ATI Examination. If the student fails to do the online-focused review for course completion, the student will receive an "I" (incomplete) until the focused review is done.

However, students must complete a focused review on the practice assessments on any items missed prior to retesting and before taking the Proctored Assessment. Students will receive an "incomplete" in the course if the Proctored Assessment is not taken at the scheduled time.
The Proctored Assessment may be taken only once, with the exception of the Comprehensive Predictor Assessment which can be taken twice.

Students who do not take the ATI assessment at the scheduled time/date or have not completed the required remediation will receive an incomplete grade for the class.

A Practice Assessment cannot be repeated until the course instructor has received the documentation of remediation for the previous Practice Assessment. In order to complete the remediation, students must print out the completed ATI individual Performance Profile (results), following completion of the Practice Assessment. On the ATI individual performance Profile, students must refer to the content areas and topics for review as identified on the profile. They must create and complete a focused review for the practice assessment. Then the completed proof of the remediation and course requirements must be submitted to the course instructor as stated above.

Students will receive an Exam Grade according to their achievement levels on the Fundamentals, Pharmacology, Mental Health, Adult Medical Surgical, Nursing Care of Children, Maternal Newborn, Leadership, Nutrition, Gerontology, and Community Proctored Assessments. An average Level of 3 will be 90, an average level 2 will be 85, an average level 1 will be 77, and an average level below 1 will be 69. ATI exams will total only 10% of the course grade

TOTAL TESTING PROGRAM – ASSOCIATE DEGREE

Course Name	Proctored ATI Assessment
Dosage Calculations for Nursing RNSG 1208	n/a
Foundations for Nursing Practice RNSG 1413	RN Fundamentals 2023 with NGN
Common Concepts of Adult Health RNSG 1441	RN Fundamentals 2023 with NGN
Mental Health Nursing RNSG 2213	RN Mental Health 2023 with NGN
Care of Children and Families RNSG 2201	RN Nursing Care of Children 2023 with NGN
Maternal/Newborn Nursing and Women's Health RNSG 2308	RN Maternal Newborn 2023 with NGN
Concepts of Clinical Decision-Making RNSG 1347	Medical-Surgical I (1MS1) 2023 with NGN
Transition to Professional Nursing RNSG 1327	RN Nursing Care of Children 2023 with NGN RN Maternal Newborn 2023 with NGN RN Mental Health 2023 with NGN
Complex Concepts of Adult Health RNSG 1343	RN Adult Medical Surgical 2023 with NGN
Professional Nursing: Leadership and Management RNSG 2221	RN Leadership 2023 with NGN
Professional Nursing Review and Licensure Preparation RNSG 2130	RN Comprehensive Predictor 2023 with NGN RN Community Health Nursing 2023 with NGN RN Pharmacology 2023 with NGN

	RN Nutrition 2023 with NGN

Revised: December 2024

TOTAL TESTING PROGRAM – VOCATIONAL NURSING

Course Name	Proctored ATI Assessment
Basic Nursing Skills VNSG 1323	n/a
Applied Nursing Skills I VNSG 1402	PN Fundamentals 2023 with NGN
Applied Nursing Skills II VNSG 2413	PN Mental Health 2023 with NGN PN Pharmacology 2023 with NGN
Applied Nursing Skills III VNSG 2214	PN Adult Medical-Surgical 2023 with NGN
Pediatric Nursing VNSG 1234	PN Nursing Care of Children 2023 with NGN
Maternal-Neonatal Nursing VNSG 1230	PN Maternal Newborn 2023 with NGN
Leadership and Professional Development VNSG 1219	PN Management 2023 with NGN PN Comprehensive Predictor 2023 with NGN

Revised: August 2024

CLINICAL ASSIGNMENTS PROCEDURE

Unless otherwise stated in the Course Syllabus, students must adhere to the following guidelines for successful completion of the clinical components:
1) The student is required to select the clients the day before the clinical experience and prepare a plan of care unless otherwise instructed by the clinical instructor.
2) Each student must be prepared with the daily care plan and/or paperwork the first thing in the morning of each clinical day, or as directed by the instructor.
3) Students who are unprepared for the clinical day (no daily care plan, inappropriate dress, etc.) may be sent home for the day at the clinical instructor's discretion. An unexcused absence will be recorded for that day, and a student counseling form will be completed. There will be a 10-point loss from the clinical rotation evaluation for an unexcused absence. (See Clinical Absence Policy). Each day the student has not passed the math exam to pass meds in clinical, there will be a 10-point deduction for each clinical day medications are not passed. (See the procedure on Math Assessment Examination [drug calculations])
4) Students should follow the guidelines listed below for visits to the clinical area for the client section:
   a) Lab coat with EPCC patch and appropriate attire are required i.e., uniform, or khaki pants & black polo. Wear EPCC student ID with picture, student nurse name tag (teal), and hospital-specific name tag (if appropriate). (See Dress Code).
   b) When arriving on the unit, identify yourself as nurse manager or charge nurse and state your business.
   c) Use common courtesy when requesting and using charts and computer printouts. DO NOT remove them from the unit.
   d) Review the charts/computer printouts for data to select a client. The nurse manager or charge nurse may be able to help you with this selection. Some hints include:
      i) Select a diagnosis that meets the clinical criteria for the course.
      ii) Assess the nursing care required by the client.

       iii) Select a client with skills that you have completed or skills that you will be learning this semester. Remember that the only way to learn is with a challenge. Please select a client that provides a good learning experience for you.

       iv) Verify your selection with a nurse who is familiar with the client.

       v) Write your client selection on the clinical assignment form as directed by your clinical instructor.

       vi) Obtain permission from the client or family for care

       vii) Do not record the patient's name on any student data forms. Only patient initials may be used.

       viii) Do not remove any hospital computer printouts from the premises.

  e) Client selection is subject to review and change by the clinical faculty and /or the charge nurse.

  f) Do not provide patient care when making client selections. Students are expected to select patients during designated times from the instructor and/or as instructed by the facility.

  g) Students may not go to the clinical site to select clients after 11:00 p.m. or before 5:00 a.m. or at the change of shift.

5) Clinical Absence – See specific policy in the Nursing Student Handbook.

6) Tardy to Clinical – See course syllabus for specific tardy policies.

7) Students are accountable for previously learned skills. Students must have completed, by check-off or practiced skills, basic skills for client care and medication administration (including Procedure on MATH Assessment Examination [drug calculation] see policy) as stated in the course syllabus and packet, and/or Nursing Policy prior to being allowed to perform the skills) in clinical. Courses specifically affected are Foundations, Common Concepts, and Complex Concepts in the ADN program and Basic Skills and Applied Skills I, II, and III in the VN program.

Last reviewed: August 2024

PROCEDURE FOR CHARTING/DOCUMENTATION

I.   Statement of Purpose:

    A.   To establish guidelines for students and faculty to follow in regard to charting patient's data and patient care rendered.

    B.   To establish guidelines for students and faculty to follow in regard to making notations on narcotic records.

II.   Statement of Policy:

    A.   Special hospital policies regarding charting/documentation override the EPCC Policy. Special policies will be noted on the agency protocol sheet.

    B.   Students in nursing may chart under the supervision of their clinical instructor, preceptor, or RN responsible for the patient, if applicable at the institution.

        1.   First semester (Foundation) students must have charting approved by clinical instructor prior to charting in the patient's chart.

        2.   Except for the Admission Nursing Assessment, notations made into a patient's chart need not be co-signed if using paper/pen charting. Signature should include SN/SVN or student nurse/student vocational nurse.

        3.   The Admission Nursing Assessment must be completed by an RN. The student will be allowed to do the assessment with the RN or independently after it is completed. The nursing instructor is available to work with the student and complete an admission assessment on a client after an RN has completed the assessment.

        4.   Students may not witness the signing of permits or other legal documents.

           ▪ Electronic charting will be done as hospitals give their permission and/or students

> > are trained.
> > - Electronic charting will be done by the 4th semester; preceptor students when possible.

C. The student's signature on the narcotic record need not be co-signed unless the narcotic is wasted. If the agency utilizes an automated medication dispensing system, agency policy and procedures are to be utilized in retrieval, dispensing, and documentation of medications. When an automated dispensing system is not used, the following guideline is to be used.

1. When a narcotic is wasted, the student's signature must be co-signed by the clinical instructor or staff nurse (RN or LVN) observing the wastage. (This is in accordance with procedures set forth by federal, state and hospital standards).

D. **STUDENTS MAY NOT TAKE VERBAL ORDERS**. The exception is leadership management students in conjunction with their preceptor. The licensed preceptor will add the order to the medical record.

Students are not allowed to transcribe or verify orders. Students in the RNSG 2261, clinical portion of Professional Nursing: Leadership and Management course may transcribe and verify orders only in conjunction with the Registered Nurse Preceptor.

Last reviewed: 2024

PROCEDURE FOR MATH ASSESSMENT EXAMINATION

1. **Drug Calculations (Math) are a Nursing Competency.** Mastery of drug calculations must be demonstrated for all nursing clinical courses, Associate Degree Nursing, Vocational Nursing and LVN-RN Transition Nursing. A score of 90% or higher on a drug calculation assessment examination (math exam) must be received. Students must receive the 90% score prior to administering medications in the clinical setting. This applies to all students enrolled in a theory and/or a clinical course to include the first semester. The exception is RNSG 1115, RNSG 1301, RNSG 1208, RNSG 2130, VNSG 1227, and VNSG 1219.
2. All students taking or auditing the theory course with a clinical course as requisite must also take the math assessment examination (drug calculation), even if not enrolled in the clinical course. This will validate their knowledge and skills as they prepare to advance to the next course and provide an opportunity for remediation, if appropriate. The first attempt at the math assessment examination (drug calculations) will be counted as a theory quiz grade for students enrolled in theory. Auditing students will not receive grades in theory.
3. Students who do not receive a 90% on the math assessment examination (drug calculations) **will not** administer medications in the clinical area if direct patient care is involved. Simulation can also have points taken off if practice on the scenarios has been given before the graded scenario. Points will be deducted in all applicable areas of the ADN/VN/LVN-RN Competencies (clinical evaluation) and an additional 10-point deduction from the ADN/VN/LVN-RN Competencies (clinical evaluation) for each day that medications cannot be administered.
4. Math Assessment Examination (drug calculations) exam will be offered once weekly for **a maximum of three (3) attempts.** If the student does not pass the Math Assessment Examination on the (3) third attempt, the student will be dropped from the from the course(s) they are enrolled in, theory and/or clinical. Courses are co-requisites.

5. Any student making less than 90% on the math assessment examination (drug calculations will receive a written student counseling form and will be expected to comply with remediation recommendations prior to re-testing.
6. Starting with the first semester of nursing courses, each unit math assessment examination and the comprehensive final math assessment examination for the theory nursing courses will contain medication administration and drug calculation (math)questions to equal ten percent (10%) of each examination.
7. Students will be deducted 10 points per clinical day missed. Since they are not eligible to pass medications until they achieve 90% on the math calculation examination.
8. Students that may have clinical starting the 2nd week of the course will have two (2) opportunities to take the math assessment examination before clinical begins.
9. Not passing the Math Assessment Examination (drug calculations) is unsafe practice. The student violates <u>previously mastered principles, learning and objectives</u> in carrying out patient care and/or delegated medical functions from previous and/or current semesters. Failure to demonstrate or explain patient care, assessment, planning, interventions and evaluations listed in previous course objectives that have been completed. (See syllabus and evaluation tool)

Note: Only generic (basic) calculators can be used for the calculation examinations. No calculators with programming will be allowed for the test.

Last revised: August 2024

PROCEDURE FOR DRUG DOSAGE CALCULATIONS

PURPOSE: The following procedures will be utilized in the EPCC Nursing Program during theory and clinical instruction, including testing. The procedures were established to avoid confusion among students and instructors in the indicated areas. These guidelines are an adjunct to the math competency statements previously established.

1. Instruction in theory, clinical, and lab classes will be based upon dimensional analysis. Ratio and proportion may be used, but will not be taught.
    a. Students who have previously learned another method of drug dosage calculations may continue to use that method; however, they are responsible for being able to meet all of the math competencies regardless of method of calculation.
    b. Individualized tutoring using other methods may be obtained by individual or small group appointments with nursing instructors or Academic Resource tutors.
2. Students are expected to have the following as entry level skills:
    a. Basic math skills in addition, subtraction, multiplication and division with whole numbers, decimal numbers, and fractions.
    b. Utilization and interpretation of percentages.
    c. Utilization and interpretation of ratio & proportion.
    d. Utilization and interpretation of roman numerals.
    e. Ability to set up and solve basic equations solving for X (an unknown).
3. Remediation in math skills may be obtained from Academic Resource tutors, the Retention Action Program tutors, or through enrollment in selected math courses.
4. The "Instruction Sheet for all Drug Calculation Exams" will be adhered to when taking Drug Calculation Exams.

Last reviewed: July 2024

PROCEDURES FOR TESTING DRUG DOSAGE CALCULATION COMPETENCIES

The following procedures will be used for testing drug dosage calculation competencies in the nursing program:

Dosage Calculations for Nursing (RNSG 1208) or Essentials of Medication Administration (VNSG 1227):
1. The drug dosage competencies will be tested on unit exams and a comprehensive final examination.
2. Content includes (but is not limited to) conversions, oral and parenteral calculations, dosages based on body weight, solutions, intravenous infusions, body surface area, and kilocalories.

Foundations for Nursing (RNSG 1413-1260) or Basic Nursing Skills (VNSG 1323-1160) and Applied Nursing Skills I (VNSG 1402-1260).
1. Drug dosage calculation questions will be limited to specific objectives within each of the course modules.
2. Students will be expected to perform the calculations necessary to meet the medication administration procedures for Foundations or Basic Nursing Skills and Applied Nursing Skills I. (See Medication Administration Procedure).

ALL OTHER NURSING COURSES
1. A written diagnostic examination will be given in theory and/or clinical at the beginning of the course. It will also be given in theory only courses that have no clinical. Students will be counseled and/or referred for appropriate remediation.
2. Students will be evaluated in clinical administration of medications and appropriate drug dosage calculations on the basis of the clinical competencies and unsafe clinical practice procedures.
3. Students will be tested on drug dosage calculations on each unit exam and on the final exam with questions relating to medications associated with patient conditions being tested.

Last reviewed: August 2024

PROCEDURE ON MEDICATION ADMINISTRATION

- Special affiliate policies and procedures regarding medication administration override the El Paso Community College Nursing Program Procedure.
- ANY insulin injections, anticoagulants, or controlled substances must be verified with the instructor or another Registered Nurse prior to administration or per instructor instructions.
- In addition to the above, the following guidelines are specific to each listed course:

First Semester:
Foundations for Nursing Practice (RNSG 1413-1260) or Basic Nursing Skills (1323-1160) and Applied Nursing Skills I (VNSG 1402-1260)
   a) Students shall not administer any medication, in any form, via any route EXCEPT as specifically directed by the instructor. Selected wound and skin care products under direct supervision of a licensed nurse or Instructor is permitted.
   b) Students shall monitor IV flow rates.
   c) With supervision, students may discontinue heparin locks and IVs.
Foundations for Nursing Practice (RNSG 1413-1260) and Applied Skills I (1402-1260)
   d) With supervision, students shall administer oral, topical, and parenteral medications.
   e) With supervision, students may change IV site dressings (peripheral only)

Second Semester ADN:
Common Concepts of Adult Health (RNSG 1441-1261) AND
Mental Health Nursing (RNSG 2213-2260)

Second and Third Semester at MDP and LVN Spin Off at RG:
Applied Nursing Skills II (VNSG 2413-1161)
Applied Nursing Skills III (VNSG 2214-1163)
Practicum or field experience LVN Training VNSG 1166
Pediatrics (VNSG 1234-1262) Maternal-Neonatal Nursing (VNSG 1230-1263)
   a) With supervision, students shall administer oral, topical, and parenteral medications.
   b) Students shall operate infusion devices, such as controllers and pumps.
   c) With supervision, students shall change main line peripheral IV tubing and IV piggyback tubing.
   d) With R.N. Supervision, student may change the IV site dressings (peripheral).
   e) With R.N. Supervision, students shall flush heparin locks and hang:
      i) Primary IV fluid bags
      ii) Piggybacks
      iii) Hyperalimentation
      iv) Lipids
   f) In nursery ALL medication administration shall be supervised by the Instructor or another R.N.
   g) Students SHALL NOT:
      i) Administer IV push medications
      ii) Hang blood, blood products, or plasma expanders
      iii) Hang IV solutions which contain anti-coagulants
      iv) Hang IV solutions which contain medications to regulate blood pressure or cardiac arrhythmias
      v) Administer chemotherapeutic or experimental drugs
      vi) No medication via epidural catheter.

Third Semester ADN:
Care of Children and Families (RNSG 2201-2262) and
Maternal/Newborn Nursing and Women's Health (RNSG 2308-2263)
      Transition to Professional Nursing (RNSG 1327-1262)

Students shall be responsible for all previous skills listed above and additionally:
   a) With R.N. supervision, students shall monitor IV administration of Pitocin, Magnesium Sulfate, other medications, and may decrease the flow rate of these medications.

In the nursery, ALL medication administration shall be supervised by the Instructor or another R.N. With R.N. supervision, students may administer IM, PO, IV, SubQ, Interdermal (ID), topicals and medications to neonates.

Fourth Semester ADN:

Complex Concepts of Adult Health (RNSG 1343-2162) and
Professional Nursing:
Leadership and Management (RNSG 2221-2261)

Students shall be responsible for all previous skills listed above and additionally:

a) With R.N. supervision, students SHALL:
   i) Administer IV push medications
   ii) Hang blood, blood products, and plasma expanders (or per hospital policy)
   iii) Hang IV solutions that contain anti-coagulants or medications to regulate blood pressures and cardiac arrhythmias.
   iv) With R.N. supervision, students may administer IV push narcotics
b) Students SHALL NOT:
   i) Administer chemotherapeutic or experimental drugs
   ii) Adjust or Titrate IV medications used to regulate blood pressure or cardiac arrhythmias.

Instruction Sheet for All Drug Calculation Exams

- <u>Simple calculators may be used during exams. Conversion charts, cell phone calculators, and programmable calculators may not be used during examinations.</u>
- The rules for rounding follow mathematical convention. Calculate only to one decimal place beyond the final answer, and then round to the final answer (except in 3rd semester where special instructions will be given.)
- Final answers should be rounded as follows:

Calculation considerations:
1. Do not round conversions within the same measurement system.
2. Round calories to whole numbers.
3. Round intravenous rates to whole numbers. There may be exceptions to this policy in specialty areas.

Administration considerations:
1. Solid Medications
   - Tablets should be rounded to the nearest whole number unless they are scored.
   - Scored tablets may be rounded to the half or quarter tablet.

2. Liquid Medications
   - Household measurements should be left in realistic amounts. (For example ¼ teaspoon)
   - Liquids less than 1 milliliter should be measured in a 1 milliliter syringe and rounded to the nearest 100th
   - Liquids from 1 to 3 milliliter should be measured in a 3 milliliter syringe and rounded to the nearest 10th
   - For infants all medications should be measured in a syringe of the appropriate size.
   - For adults if the dosage equals 5 milliliter, 10 milliliters, 15 milliliter, 20 milliliter, 25 milliliter, or 25 milliliter a medication cup may be used.
   - Dosages for oral liquids that are between the 5mL intervals on the medication cup should always be measured in an appropriate syringe. (For example 7 milliliter, 12.5 milliliter)

Dosage Considerations
Therapeutic dosage or dosage range refers to the amount of drug and should be in the same decimal given.
   - If the therapeutic dose is in whole numbers, then the dosage answer should be rounded to whole numbers. (For example 50 milligrams/kilogram /day)
   - If the therapeutic dose is in tenths, then the dosage answer should be in tenths. (For example 3 to 4 milligrams/kilogram/day)

- If the therapeutic dose is in hundredths, then the dosage answer should be in hundredths. (For example 0.01 to 0.02 milligram/kilogram/day)
-

Examples of Drug Calculation Rounding

Explanation	Example
Do not round conversions in the same system.	252 milliliter = 0.252 L 2857 grams = 2.857 kilogram
Round calories to whole numbers	1483.45 kilo calories = 1483 kilo calories [not 1484 kilo calories]
Round IV rates to whole numbers [the exceptions may be in the specialty areas see below] **	14 drops/minute [not 13.7 drops/minute] 83 milliliter/hour [not 83.33 milliliters/hour]

** IV Rate For Specialty Areas
When the total amount of milliliters to be administered is small the milliliter per hours should not be rounded. (For example when using a syringe pump]

EXAMPLE: 3.5 milliliter of medication in a syringe pump is to infuse in 20 minutes. In this case the nurse inputs 3.5 milliliter and 20 minutes into the pump which will automatically set the rate. Thus:
3.5 milliliter X 60 minutes (1 hour)
　　　20 minutes (Time to infuse) = 3.5 milliliter X 3 = 10.5 milliliter/hour [Not 11   milliliter/hour]
The syringe pump automatically calculates and sets this rate not the nurse. Therefore, rounding IV rates applies to most non-specialty areas. [For example 83.33 milliliter should be rounded to 83 milliliters for main IV's and IVPBS] In specialty areas where the volume to administer is small not rounding is most appropriate. [For example 10.5 milliliter]

Administration Considerations
Solid medications
　　a.　　Tablets - half tablets may be answered in fractions (1 ½) or decimals (1.5)
　　b.　　If applicable, tablets may be rounded to 1/4 tablet
　　c.　　Capsules cannot be split in half.
Liquid medications
　　a.　　Household measurements may be left as ½ teaspoon and 1/4 teaspoon
　　b.　　Less than 1cc should be rounded to hundredths.

　　　　　Example:　　Ordered: .75 milligrams Available: 1 milligrams=1 milliliter Give 0.75 milliliter
　　　　　　　　　　DO NOT ROUND -   (Leave as hundredths because it is less than 1milliliter)
　　c.　　Liquids from 1 milliliter to 3 milliliter should be rounded to tenths, if applicable
　　　　　Example: 3.0 milliliter can be written as 3 milliliter

　　　　　Example: 1.4 milliliter is not rounded
　　　　　Example: 1.75 milliliter is rounded to 1.8 milliliter

　　(**Note**: For administration purposes, injections that are 3 milliliter may be drawn up in a 5 milliliter syringe for ease of aspiration. This is not required for oral medications)

Dosage Considerations

Therapeutic dosages and dosage ranges refer to the amount of drug to be administered. The medication itself may be administered in a liquid, solid or other form. These rounding rules apply to the dosages - not the administration amount.

Ordered: 15 milligram every 6 hours

Therapeutic: 5-7 milligram per kilogram per day in 4 doses, 24 pounds

Pt. weighs: 24 pounds

Amt ordered per day:
$$\frac{milligrams}{day} = \frac{15\,milligrams}{1\,dose} \text{ x } \frac{4\,doses}{1\,day} = 60$$

Therapeutic: LO
$$\frac{milligrams}{day} = \frac{5\,milligrams}{kilogram\,day} \text{ x } \frac{1\,kilogram}{2.2\,pounds} \text{ x } \frac{24\,pounds}{1} = 54,5454*$$

HI
$$\frac{milligrams}{day} = \frac{7\,milligrams}{kilogram\,day} \text{ x } \frac{1\,kilogram}{2.2\,pounds} \text{ x } \frac{24\,pounds}{1} = 76,3636*$$

CORRECT ROUNDED ANSWER: 55-76 milligram/day.

Since the therapeutic amount is in whole numbers, the answer must be in whole numbers. However, other times, need to round to tenths or hundredths depending on the Therapeutic amounts. If the therapeutic amount is listed as .1-.2 milligram per kilogram per dose (.1-.2 milligram/kilogram/dose), then for a 12 kilogram person the answer stays in tenths (1.2 milligram - 2.4 milligram). If the therapeutic amount is tested as .06 - .12 milligram/kilogram/day, then for a 43.8 kilogram (2.63-5.26) person the answer stays in hundredths (2.63 - 5.26)

Definitions for IV and IV Push Medications

1. IV Piggy-back: Or Intermittent administration of an intravenous drug by drip method through an existing intravenous infusion. The drug is mixed in a specified volume and administered in a specified period of time.

2. IV Drip: Or Continuous administration by infusion in a large volume (greater than 100 milliliters). A drug is mixed in a specific amount of fluid and administered over a specified period of time.

3. IV Push: The medication is administered diluted or undiluted at a specific rate directly into the vein by direct venipuncture or through an administration site of an existing intravenous infusion.

4. IV Retrograde: The medication is injected into the intravenous tubing by displacing IV fluid into an empty syringe. This method is useful when the child is small and/or has a slow drip rate.

5. IV Bolus: Medication put in a solution e.g. 50 or 100 milliliters and administered over a period of 30 minutes to 2 hours or as per physician orders.

The above routes may be used for administration by the Intermediate/Advanced Level Nursing students starting in Common Concepts Clinical RNSG 1261, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR OR RN DESIGNEE. At the Instructor's discretion, selected licensed personnel may supervise those students who have previously demonstrated competency. Only those medications approved by the hospital administration as safe for a Registered Nurse to give may be administered by the student. (excludes

chemotherapy, experimental drugs, and adjust or titrate medications used to regulate blood pressure or cardiac arrhythmias.)

Medication Error Guidelines
The Nursing Program medication error policy is as follows:
1. The student must immediately inform their RN assigned and the Charge Nurse of the medication error.
2. The student must complete an incident report for the Nurse Manager of the unit, Nursing Faculty.
3. The student must submit a drug card on the medication in question to the Nursing Faculty member.
4. A student counseling form will be completed by the Nursing Instructor with recommendations for follow-up.
5. A counseling form and the drug card will become a part of the student's permanent record.
6. A serious medication error <u>may</u> result in immediate course failure and/or dismissal from the Program for unsafe clinical practice.

Last reviewed: August 2024

LABORATORY CONDUCT AND SAFETY PROCEDURE

In an effort to maintain the health and welfare of all persons entering the nursing labs, all nursing faculty, laboratory personnel and students will be expected to adhere to the established guidelines at Rio Grande and Mission Del Paso.

When exposure to blood or other body fluids exists, the Needle, Blood and Body Substance Precautions procedure must be followed. This procedure is posted in each nursing lab and can also be found in the Nursing Student Handbook.

1) Broken glass must be placed in the SHARPS container. If the pieces are too large for the SHARPS container, Housekeeping should be notified for disposal. Broken glass should never be disposed of in the regular trash containers.
2) All non-hazardous spills should be wiped up immediately.
3) Before wiping up any type of chemical spill, including mercury, you should:

   a) Review the Material Safety Data Sheet (MSDS) on the chemical involved. (The MSDS's on all chemicals used in the nursing labs are located in the red Safety Notebooks located by the fire extinguishers in each lab.)
   b) Determine both the physical and health hazards of the chemical and take appropriate precautions to avoid exposure.
   c) If exposure occurs, first aid must be administered as specified on the MSDS and the EPCC Police Department must be contacted. In addition, The Dean of Nursing and the Nursing Coordinator must be notified. An incident report must be completed by the EPCC Police Department and recorded. An incident report is also completed by the student and faculty then placed in the students file. (See policy CGC-2 communicable diseases; forms attached)
   d) Adhere to the precautions listed for the clean up of the chemical. For mercury spills, follow the Emergency Action Procedure for Mercury Spills that is posted in all labs and contact the Police Department for clean- up.
   e) Contact the Nursing Lab Assistant and/or the EPCC Police Department if there are any questions or concerns.

    f) All hazardous chemical spills must be reported to the Nursing Office, the EPCC Police Department, the Nursing Coordinator and the Nursing Lab Assistant.

4) When needles, lancets and IV cannulas are being used in the nursing labs, the Needle, Blood and Body Substance Precautions procedure must be followed. This procedure is posted in each nursing lab and can also be found in the Nursing Student Handbook.

5) Students will not be allowed to use the labs without a staff or faculty person present.

6) Children will not be allowed in the nursing labs unless they are participating in an approved activity.

7) When a piece of equipment or furniture is found not to be safe, the Nursing Lab Assistant must be notified immediately.

8) The Nursing Lab Assistant will be responsible for the following activities at both the Rio Grande and Mission del Paso Campuses:

    a) Inspecting the nursing lab equipment and furniture for functional safety at least annually. Inspection will be documented on an Equipment Safety Inventory.

    b) Labeling unsafe equipment and furniture and requesting that safety repairs be completed before it is again used.

    c) Validating, semi-annually, that the fire extinguishers in each lab have been checked by the EPCC Safety Department and/or the El Paso Fire Department.

    d) Maintaining First Aid Kits in the nursing labs.

    e) Assessing semi-annually that the eye wash stations function properly.

    f) Notifying the Nursing Coordinator of injuries that occur in the nursing labs.

    g) Keeping needles, syringes and IV cannulas in locked storage cabinets when not being used by students who are being directly supervised by an instructor.

    h) Contracting with a hazardous materials disposal company for the disposal of the SHARPS containers and other contaminated materials placed in the Bio-Hazard containers.

    i) Obtaining/maintaining the MSDS on all chemicals in the nursing labs.

    j) Validating that all containers are accurately labeled.

Revised: July 2023

PROCEDURE FOR NEEDLE, BLOOD, AND BODY SUBSTANCE PRECAUTIONS

RATIONALE

The procedure reflects concerns regarding exposure to all communicable diseases. This nursing discipline procedure is developed to address needle, blood, and body substance precautions to be followed by students and faculty in both health care facilities (Rio Grande and Mission Del Paso) and the EPCC nursing laboratory.

OBJECTIVE OF PROCEDURE

A. Protection of students, faculty, laboratory assistants and work-study students from preventable exposure to infectious diseases in the EPCC nursing laboratory.

B. Protection of students, faculty, other health care personnel and clients from preventable exposure to infectious diseases in a health care facility.

PROCEDURE STATEMENTS

A. Students, faculty, laboratory assistants and work-study students will be required to follow the guidelines established in this procedure while in the nursing laboratory setting.

B. When the infection control policies of a health care facility are at least as stringent as the guidelines established by this procedure, the institutional policies will take precedence over this procedure; otherwise, students and faculty will follow these guidelines while in a health care facility.

C. Specific Guidelines:

    1. All people, whether a fellow student or faculty member in the lab or a client in a health care facility, will be treated as though they could transmit an infectious disease.

    2. Protective apparel such as gloves, mask, gown and eye goggles will be worn when the potential for exposure to blood or other body substances is present.

    3. Needles, lancets, IV cannulas and all other instruments used to penetrate soft tissue must never be reused. This guideline applies to practice sessions in the nursing lab.

    4. Needles must not be recapped after contamination.

    5. Needles, lancets, IV cannulas and all other instruments used to penetrate soft tissue must be discarded immediately after use, in a puncture-resistant container (SHARPS).

    6. Puncture-resistant containers must be replaced before becoming full or as indicated by the container.

    7. Injection vials that become contaminated must be discarded. If the vial is a Practi-Vial from the EPCC nursing lab, it may be discarded in the plastic trash containers in the lab. Broken vials must be discarded in the SHARPS containers. If a vial becomes contaminated while in the clinical setting, the facility's policy for disposal of the vial must be followed.

    8. Any material contaminated with blood or body substances must be placed in a plastic bag and then placed in a Bio-Hazard container.

    9. Surfaces contaminated with blood or body substances must be cleaned with a solution of Lysol IC Phenolic Disinfectant Cleaner or an equivalent cleaning solution.

    10. In the event a person is pricked with a needle, the needle must be discarded immediately in a puncture-resistant container, the nursing instructor must be notified, and an incident report must be completed. If the incident occurs in the nursing lab, an EPCC police officer must be contacted to complete the report. In addition, the Nursing Coordinator must be contacted so that the incident can be documented. If the incident occurs while in a health care facility, the facility procedure for completion of the incident report will be followed. An incident report is also completed by the student and faculty then placed in the students file. (See policy CGC-2 Communicable Diseases, to fill out forms)

    11. After removing contaminated gloves, hands must be washed with an antibacterial soap.

    12. Students and faculty in high-risk groups should not be allowed to care for clients with an infectious disease. Such groups include those who are pregnant, have a depressed immune system or who have an active infection.

Revised: July 2023

EPCC CODE OF ETHICS FOR NURSING STUDENTS

Students are involved in the clinical and academic environments. It is believed that ethical principles are a necessary guide to professional development.

1) Advocate for the rights of all clients/patients.
2) Maintain client confidentiality at all times.
3) Ensure the safety of clients, self, and others at all times.
4) Care for the client/patient in a timely, compassionate, and professional manner.
5) Communicate client care in a truthful, timely, and accurate manner to all caregivers.

6) Promote a high level of moral and ethical principles and accept responsibility for your own actions.
7) Encourage lifelong learning and professional development.
8) Treat others with Respect and promote an environment that respects human rights, values, and choice of cultural and spiritual beliefs.
9) Work together in a reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client/patient care
10) Utilize opportunities to improve faculty and clinical staff's understanding of the learning needs of nursing students.
11) Encourage mentoring of nursing students.
12) Ensure that the student has been adequately trained on a procedure or technique asked to perform.
13) Do not omit care in the clinical setting that creates unnecessary risk of injury to the client/patient, self, or others.
14) Do not use alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
15) Endeavor to achieve and maintain an optimal level of personal health.
16) Support school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

LINK: Student Code of Conduct Policy FLB - 1
https://www.epcc.edu/Administration/InstitutionEffectiveness/PoliciesandProcedures/FLB-1.pdf#search=Student%20Code%20of20%Conduct

PROFESSIONAL BOUNDARIES POLICY

As defined by the Texas Board of Nursing (BON) and the National Council of State Boards of Nursing (NCSBN), professional boundaries refer to the limits that protect the space between a nurse's professional role and the patient's vulnerability.

Nursing students must always understand and uphold these boundaries during clinical experiences. Students must avoid personal gain at the patient's expense and refrain from any inappropriate involvement with patients or their families.

It is the responsibility of every nursing student to know, recognize, and maintain professional boundaries in all interactions with patients to ensure a safe, ethical, and respectful nurse-patient relationship. Failure to maintain professional boundaries can result in disciplinary action.

Last reviewed: June 2025

HIPAA CONFIDENTIALITY

The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that protects patients' rights to privacy and control over their health information. It requires healthcare providers to safeguard this information and limits access to authorized individuals only.

Key Guidelines for Students:
- Protected Health Information (PHI) is confidential and must not be accessed, used, or disclosed without proper authorization.

- Unauthorized access or use of PHI—whether intentional or accidental—may result in disciplinary action, up to and including dismissal from the program.
- Patient identifiers such as names, hospital ID numbers, and Social Security numbers must never be written, shared, or taken outside the clinical facility. Use only initials when documenting.
- Do not discuss patients in public areas or with anyone outside the healthcare team.
- Use of phones or cameras to photograph or copy PHI is strictly prohibited.
- Students are responsible for understanding and following all HIPAA-related regulations.
- HIPAA Training Requirement: All students must complete the required HIPAA training module online prior to registration. Additional training may be required by specific clinical sites.

PROCEDURE FOR STUDENTS NOT MEETING COURSE EXPECTATIONS

1) A student must consistently meet course/program expectations (i.e., attendance, professional ethics, safe practice, etc.). Any student who does not meet course/program expectations may be counseled either verbally or in writing by a nursing faculty member, nursing coordinator, or Dean.
2) If a student repeatedly does not meet course/program expectations, a written contract will be outlined specifying the expectation, recommendations for improvement, and a deadline by which the recommendations should be met.
3) Failure to adhere to the specified required criteria in the contract may result in one of the following:
   a) Students could get a grade of (0) or F if the student fails to complete the required Assignment/Quiz/Test
   b) Student could be dismissed from the course with a (0) or F
   c) Student could be dismissed from the program with a (0) or F.
4) Students who have exited due to documented incidents of unsafe practice may not be considered for readmission, regardless of the level of the course. This statement is included in the document "Student Reentry into the Nursing Program."

Last reviewed: August 2024

SCHOLASTIC DISHONESTY PROCEDURES

The College has established procedures for addressing suspected academic dishonesty. For detailed information, please refer to the links provided below. In addition, the Nursing Honesty Policy for Testing, Exams, and Quizzes offers specific guidance relevant to nursing students.

Link: EPCC FLB-1 Student Code of Conduct:
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FLB-1.pdf

Link: EPCC FMA-1 Student Disciplinary Procedure
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FMA-1.pdf

HONESTY POLICY FOR TESTING, EXAMS, AND QUIZZES

To assure quality education and equality to all students, the following special conditions will apply during any testing situation in the laboratory or clinical:

1. The instructor(s) controls the option of seating arrangement, movement, leaving the room, and stopping an exam for violation of the honesty policy.
2. All books, papers, notebooks, and personal belongings will be placed at the front of the classroom or other designated area before entering a testing situation. (i.e., left in your car.)
3. Any information found on, or in the immediate vicinity of the individual during a testing situation will be grounds for termination of the testing. A grade of zero will be recorded and averaged into the final grade.
4. Any verbal or nonverbal communication between students during a testing situation will be grounds for termination of the testing. A grade of zero will be recorded and averaged into the final grade.
5. Should a student need to communicate with the instructor, he/she should remain seated and raise their hand.
6. Infractions of the honesty policy will be grounds for dismissal from the course or the program for Quizzes and Exams

Last reviewed: July 2024

PROCEDURE STUDENT ABSENTEEISM

I. **Clinical**
Lack of attendance in clinical, didactic, and/or laboratory can have consequences. In all nursing clinical rotations, ten (10) points will be deducted (taken off) for each clinical absence from the A.D.N. or V.N. Competencies Clinical Evaluation for that rotation where the absence occurred. The points will be deducted from the rotation if the absence occurred, not off the final grade. Points will also be taken off if the student is unprepared for clinical and is sent home. The student may be sent home or kept in the clinical area at the instructor's discretion with lack of clinical preparation. Exceptions are as follows:

A. Student Illness
Points will not be subtracted from the student's grade if ALL the following conditions are met:
1. Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's clinical expectations or by cell phone or message left on office telephone.
2. The student must notify the clinical site of the absence as instructed by the clinical instructor and/or clinical site.
3. The student must present a health care provider licensed in the United States (HCP) to the clinical instructor or the course-responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first.
4. The physician's note must be on the health care provider's letterhead stationery or specific prescription pad and must include the date of treatment and the date the student is cleared to return to theory and/or clinical. It must be by an American Licensed Physician, Advanced Practice Nurse, or Assistant.
B. Illness of a Child
Regarding the care of an ill child; points will not be subtracted from the student's grade or the rotation in which the absence occurred or the final grade if ALL of the following conditions are met.
1 Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's clinical expectations/course syllabus by audio message on the office or cell phone or as instructed by the faculty.

2. The student must notify the clinical site by the time required by the agency as set forth

in the agency's human resource manual for agency employees.

3.   The student must present a health care provider's note to the clinical instructor or the course-responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first. It must be by an American Licensed Physician, Nurse Practitioner or Physician's Assistant.

4.   The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment. The note must also state the reason for the child's treatment is due to illness and <u>not</u> well-child care.

C.   Death in the Immediate Family.

Immediate family includes the student's spouse, parents, brothers, sisters, grandparents, and children, or anyone of like relationship by marriage. Up to <u>three (3) consecutive days</u> of bereavement leave will be granted to the student with no points subtracted from the student's grade <u>if</u> the following conditions are met:

1.   In the event of an absence due to death in the family, the student must submit, in writing, a statement of the relationship to the deceased and provide at least <u>one</u> of the following documents:
        a.   Obituary with student listed as survivor.
        b.   Mortuary note specifying the date of death and student's relation to the deceased. This note must be on letterhead stationery and must be dated.
        c.   Note from the deceased's physician on the physician's letterhead or prescription pad with the date of death and student's relation to the deceased.

2.   <u>Prior</u> to the absence and taking the bereavement leave, the student must notify the clinical instructor as set forth in the instructor's clinical expectations.

3.   The student must present the documentation to the clinical instructor or the course-responsible faculty member either prior to the absence or on the first day that the student returns to either clinical or theory, whichever comes first.

4.   The student must make arrangements with the instructor for any missed assignments or clinical days.

I.   **Theory and/or Laboratory**
In all nursing theory and laboratory classes, points will be deducted from the theory and/or laboratory grade if a student is absent for tests, quizzes, assignments, projects, scheduled laboratory sessions/check-offs according to the course syllabi and/or Nursing Program Policies and Procedures. Exceptions are as follows:

A.   Student Illness
Points will not be subtracted from the student's grade if ALL of the following conditions are met:
1.   Prior to the absence, the student must notify the instructor as set forth in the instructor's course syllabus or by telephone, leaving a message on the audio message system that records the date and time of the phone call.

2. The student must present a physician's note to the instructor or the course-responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first.

3. The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment and the date the student is cleared to return to theory and/or clinical. It must be by an American Licensed Physician, Nurse Practitioner or Physician's Assistant.

B. Illness of a Child

When it is impossible to make other arrangements for the care of an ill child, points will not be subtracted from the student's grade if ALL of the following conditions are met.

1. Prior to the absence, the student must notify the clinical instructor as set forth in the instructor's course syllabus or by audio message on the office phone or by cell phone.

2. The student must present a physician's note to the clinical instructor or the course-responsible faculty member on the first day that the student returns to either clinical or theory, whichever comes first. It must be by an American Licensed Physician, Nurse Practitioner or Physician's Assistant.

3. The physician's note must be on the physician's letterhead stationery or specific prescription pad and must include the date of treatment. The note must also state the reason for the child's treatment to be due to illness and not well-child care.

C. Death in the Immediate Family.

Immediate family includes the student's spouse, parents, brothers, sisters, grandparents, and children, or anyone of like relationship by marriage. Up to three (3) consecutive days of bereavement leave will be granted to the student with no points subtracted from the student's grade if the following conditions are met:

1. In the event of an absence due to death in the family, the student must submit, in writing, a statement of the relationship to the deceased and provide at least one of the following documents:
    a. Obituary with student listed as survivor.
    b. Mortuary note specifying date of death and student's relation to the deceased. This note must be on letterhead stationery and must be dated.
    c. Note from the deceased's physician on the physician's letterhead or prescription pad with the date of death and student's relation to the deceased.

2. Prior to the absence, the student must notify the theory instructor as set forth in the instructor's course syllabus.

3. The student must present the documentation to the instructor or the course-responsible faculty member either prior to the absence or on the first day that the student returns to either clinical or theory, whichever comes first.

4. The student must make arrangements with the theory instructor for any missed assignments.

RULES, GUIDELINES, AND CRITERIA FOR UNSAFE PRACTICE

Unsafe Practice conduct rules, guidelines, and criteria are intended to protect patients/clients and the public from incompetent, unethical, or illegal conduct of students. The purpose of these rules for students is to identify behaviors in the practice of nursing that are likely to deceive, defraud, or injure patients/clients, a family member or substitute familial member, another student, a faculty member, or other healthcare provider. Students' behaviors are reflected in attitudes, actions, and behaviors that influence the student's ability to develop a safe milieu for client care. The right of patients and the public to safety is paramount and supersedes students' learning and skill acquisition needs. Student behaviors must not violate the American Nurses Association (ANA) Standards of Practice, violate the Standards of Nursing Practice set by the Texas Board of Nursing (BON), violate the Texas BON Nurse Practice Act, or call into question the professional accountability of the student.

Students in the Nursing Programs are assigned responsibilities for patient/client care at various healthcare facilities and sites for clinical in the community. Each clinical course specifies the criteria for successful completion of the course. There may, however, be situations where the students' behaviors in the practice of nursing are likely to deceive, defraud, or injure clients or the public that placing a patient in actual or potential physical, emotional, mental, or environmental safety of the patient/client, a family member or substitute familial member, another student, a faculty member, or other healthcare provider.

Texas Administrative Code; Title 22, Part11, chapter 215.6 for Registered Nurse (RN) and 214.6 for Vocational Nurse (VN)
A qualified individual who is accountable for the planning, implementation, and evaluation of the professional nursing education program shall administer each professional nursing education program.

The dean or director shall:
(j) have the authority to direct the professional nursing education program in all its phases, including approval of teaching staff, selection of appropriate clinical sites, admission, progression, probation, dismissal of students, and enforcement of student policies.

The Dean of Nursing is responsible for the decisions of unsafe practice and for clinical behaviors per the Texas Board of Nursing Policy. Thus, students cannot file a grade grievance when it is in the purview of the Dean of Nursing for the decisions of unsafe practice and for clinical behaviors and grades. When the Dean of Nursing is not available, another Masters prepared professional Nurse may handle the situation with prior arrangements by the Dean of Nursing.

If necessary, the Vice President of Instruction and Workforce Education and/or Vice President of Student and Enrollment Services will be consulted.

What action is taken by the instructor/coordinator and/or Dean of Nursing is contingent upon the severity of the incident(s), the number of incidents, or the type of unsafe practice. In ALL instances of unsafe clinical practice, the instructor will initiate verbal and written counseling. The counseling form(s) and recommendations will be maintained in the student records that are maintained by the program throughout the student's enrollment in the program.
A failure in the course will cause the student to be removed from the course or program and the student must complete the process for readmission into the Nursing Program, if appropriate. (See procedure 7.02.01.26:

Student Re-entry into the Nursing Program)

In the case of a student who performs in an unsafe manner, the student may:
1. Be verbally counseled - A memo for record will be written by the faculty for insertion into the student record. (A copy is sent to the nursing coordinator, Dean, and applicant review file.)
2. Receive written counseling – A copy will go into the student's records. (A copy is sent to the nursing coordinator, Dean, and Applicant Review File.)
3. Be dismissed from clinical with an unexcused absence – The Program Coordinator and/or Dean of Nursing will be notified. (A copy goes to the student file.)
4. Be immediately removed from the course with a failing grade – Documentation of the seriousness of the situation will be documented and the Program Coordinator and/or Dean of Nursing will be notified. (A copy is sent to the nursing coordinator, Dean, Applicant Review File, and a copy to the student file.)
5. Be immediately removed from the nursing program – The situation must be documented and the Program Coordinator or Dean of Nursing must be notified immediately. The Dean has the final decision concerning the outcome(s) for the student. (A copy is sent to the nursing coordinator, Dean, Applicant Review File, and copy to the student file)

Certain circumstances may render a student not qualified to enter or reenter a program.

1. Unsafe Practice
   a. A student who has been released from a health or nursing program for unsafe practice may or may not be allowed to enter or re-enter a program.
   b. The student may or may not be allowed to apply or compete in any specialized admissions pool depending on the seriousness of the offense.
   c. The student may also be barred from future enrollment in competitive or non-competitive health programs whether credit or non-credit.
   d. The Program Coordinator and the Dean will make the determination for the above circumstances.

2. Additional Circumstances
   a. Students under disciplinary action may not be permitted to continue pursuit of the nursing program and are ineligible for entry into other health programs.
   b. Students who have previously been unsuccessful or dropped from a health program for unsafe practice may be ineligible to apply for ranking into the nursing program. It may be for a set period based on the nursing program-specific procedures. The Dean will make the final decision. See procedure 7.02.01.26: Student Re-entry into the Nursing Program.

See the Nursing Student Handbook for guidelines on readmission. Students who have failed a course due to documented incidents of unsafe practice may not be eligible for readmission, regardless of the level of the course. Any negative consequence of unsafe practice due to students' poor performance may not be appealed to under the FB-10 Student Re-entry into the Nursing Program: The Dean of Nursing's decision is final. Students are legally responsible for their own acts, commissions, and omissions. Instructors are responsible for their students in the clinical setting. It is, therefore, necessary for the student And The Faculty To Conscientiously Evaluate Unsafe Behaviors.

DETERMINING UNSAFE PRACTICE

Unsafe Practice is the inability to practice safely. It is a demonstration of actual or potential inability to practice nursing with reasonable skill and safety to patients/clients because of illness, use of alcohol, drugs, chemicals, or any other mood-altering substances, or as a result of any mental or physical condition. It is an act or behavior that threatens or has the potential to threaten the physical, emotional, mental, or environmental safety of the patient/client, a family member or substitute familial member, another student, a faculty member, or another healthcare provider.

Actual injury to a client need not be established. (Texas Board of Nursing –BON; Texas Administrative Code, Title 22, Part 11, Chapter 217, Rule 217.12, Unprofessional Conduct)

These behaviors include, but are not limited to, the chart below:

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
1. Violates or threatens the patient's/client's safety.	A. Comes unprepared to clinical – Does not have all or part of the daily preps, does not know medications. B. Failure to use side rails, restraints, and/or call bells when appropriate. C. Failure to report or chart abnormal vital signs and/or tests (e.g. lab data, x-rays) or any significant findings in patient/client status. D. Fails to give the rationale for patient/client care interventions. E. Fails to report to the staff nurse or the instructor any deviation from normal in assigned patient's/client's diagnosis/observations. F. Failure to identify the appropriate nursing diagnosis based on the patient's/client's assessment. G. Failure to report malfunction of equipment. H. Failure to consult with staff member or instructor for assistance in new procedures or use of new equipment or on patient care issues. I. Improper use of equipment (e.g. wheelchair, stretcher, monitors). J. Failure to report a change in patient/client conditions. K. Failure to report any patient lab changes to include glucose levels. L. Gives medication without consulting the instructor. M. Gives medication out of scope of course/semester enrolled in. N. Gives medication without being checked off in lab first. O. Conduct that may endanger a patient's/ client's life, health, or safety.
2. Violates or threatens the microbiological safety of the patient/client.	A. Unrecognized violation of aseptic technique. B. Comes to clinical sick (e.g. Temperature of 100 or higher, diarrhea, vomiting, rash, cold sores, etc.)

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
	C. Failure to maintain both medical and/or surgical principles of asepsis at all times. D. Failure to identify lab reports indicating infections. E. Failure to implement measures to prevent exposure to infectious pathogens and communicable conditions

3. Violates or threatens the chemical safety of the patient/client.	A. Failure to calculate the appropriate dosage of medication.
	B. Violates the 10 Rights in administering medication.
	C. Fails to monitor IV infusions.
	D. Failure to state drug information:
	    1. Classification of drug
	    2. Indication for use in assigned patient
	    3. Side effects
	    4. Appropriateness of dose
	    5. Patient/Client care implications
	    6. Patient/Client response to drugs
	    7. Interaction with other drugs the patient is receiving.
	E. Failure to give medications safely.

4. Violates or threatens the safety and well-being of the patient.	A. Improper use of heat (hot packs, heating lamps, etc.) resulting in hyperthermia, burns, or potential tissue injury. B. Fails to observe safety precautions during oxygen therapy. C. Failure to report a malfunction of equipment, which could place the patient/client in jeopardy of electric shock. D. Improper use of electrical equipment. E. Failure to report the abnormal temperature of the patient. F. Improper use of cold (ice packs, K-pad, etc.) resulting in hypothermia or potential tissue injury. G. Failure to maintain adequate body warmth resulting in hypothermia (e.g., dry sheets with diaphoresis, wet bed, elderly, newborn, etc.).
5. Violates previously mastered principles, learning and objectives in carrying our patient/client care and/or delegated medical functions from previous and current semesters.	Failure to demonstrate or explain patient/client care, assessment, planning, interventions, and evaluations listed in previous course objectives that have been completed. (See syllabus and evaluation tools).

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
6. Inadequately and/or inaccurately utilizes the nursing process.	A. Fails to observe and/or report critical data for patient/client charge nurse or instructor. B. Makes repeated faulty judgments and decisions in nursing situations. C. Fails to obtain assistance or ask questions of staff or instructor when appropriate.
7. Assumes inappropriate independence in action or decisions.	A. Performs skills or competencies not yet evaluated. B. Fails to seek help in an emergency situation. C. Continually seeks assistance or validation in areas previously mastered. D. Fails to seek out an instructor when asked to do skills, tasks, and patient care not yet taught or evaluated.
8. Fails to recognize own limitations, incompetence, and/or legal responsibilities.	A. Refuses to admit or notify the instructor of errors noted by staff or refuses to admit and notify staff of errors noted by the instructor. B. Cannot identify own legal responsibility in a specific situation(s). C. Fails to seek assistance when appropriate. D. Provides patient/client with inappropriate or incorrect information E. The student fails to implement measures to promote a safe environment for patients/clients and others.

9. Fails to accept moral and legal responsibility for their own actions, thereby violating professional integrity.	A. Covers own/other's errors without concern for patient/client safety.
	B. Fails to report errors in patient/client care by self or others.
	C. Shares confidential information inappropriately.
	D. Fails to maintain patient/client or others' confidentiality.
	E. Inability to accept responsibility for consequences of one's own behavior:
	  1. Validate with instructor rationale for action when contrary to classroom or clinical instruction.
	  2. Decline assignments made by staff when that assignment is inconsistent with objectives or expectations for the level of the student.
	  3. Adhere to policies regarding scheduled medications, i.e., never access the electronic medication delivery system without supervision.
	F. Inability to consistently receive, interpret, and carry out instructions.
	G. Fails to identify patient/client correctly.

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
10. Demonstrates misconduct—actions or conduct that include, but are not limited to:	A. Falsifying reports, patient/client documentation, agency records, or other documents. B. Failing to cooperate with an investigation conducted by the Nursing Department, Dean, Coordinator, or Faculty; El Paso Community College. C. Causing or permitting physical, emotional, or verbal abuse; injury or neglect to the patient/client or the public; or failing to report same to the nurse or the instructor. D. Violating boundaries of the nurse/patient/ client relationship including, but not limited to, physical, sexual, emotional, or financial exploitation of the patient/client or the patient's/client's significant other(s). E. Threatening or violent behavior in the class/lab/clinical. F. Providing information that was false, deceptive, or misleading in connection with the practice of nursing. G. Drug diversion or attempts to divert drugs, controlled substances, or use of any drugs as a student during the nursing program (See Substance Abuse Testing for Health Occupations Students, EPCC policy 7.023.01.18). G. Inability to adjust to stress adequately to perform duties safely with patients/clients. H. Academic Dishonesty I. Unprofessional behavior/unsafe behavior that seriously jeopardizes clinical affiliations. J. Ineffective interpersonal interactions; knowledge and skill incompetence; and unprofessional image.

CATEGORY OF UNSAFE PRACTICE	EXAMPLES
11. Violates or threatens the psychological/sociological/ spiritual safety of the patient/client.	A. Inappropriate or poor communication with patient/client, a family member or substitute familial member, another student, a faculty member, or another healthcare provider. B. Repeatedly uses nontherapeutic techniques in interactions. C. Attacks or derogates individuals' (patients or other students) beliefs or values. D. Failure to explain a procedure correctly to the patient or family. E. Failure to include the patient and the family in discussions when in the patient's room. F. Failure to communicate at the appropriate level for the patient or family. G. Failure to obtain/provide translation for the patient as appropriate. H. Fails to maintain patient/family/student confidentiality. I. Fails to do appropriate patient/ family assessment to prevent harm to patient/family with psychological needs. J. Conduct that may endanger a patient's/ client's life, health, or safety. K. Violation of any of the Standards of Conduct in the policies and procedures of El Paso Community College (EPCC).

Last reviewed: August 2025

PROCEDURE FOR RESPONSIBLE COMPUTING

In support of its mission of teaching, research, and public service, El Paso Community College provides access to computing and information resources for students, faculty, staff, and community users, within institutional priorities and financial capabilities.

All who use the College's computing and information resources must act responsibly. Every user is responsible for the integrity of these resources. All users of College-owned or College-leased computing systems must respect the rights of other computing users, respect the integrity of the physical facilities and controls, and respect all pertinent license and contractual agreements. It is the policy of El Paso Community College that all members of its community act in accordance with these responsibilities, relevant laws, and contractual obligations, and the highest standard of ethics.

Misuse of Computing and Information Resource Privileges. Examples may include, but are not limited to:

- Accessing computers, computer software, computer data or information, or networks without proper authorization, regardless of whether the computer, software, data, information, or network in question is owned by the College (That is, if you abuse the networks to which the College belongs or the computers at other sites connected to those networks, the College will treat this matter as an abuse of your El Paso County Community College computing privileges).
- Using computing facilities, computer accounts, or computer data for purposes other than those for which they were intended or authorized.
- Encroaching on others'--use of the College's computers (e.g., disrupting others' computer use by game playing; by sending excessive messages, either locally or off-campus [including, but not limited to electronic chain letters]; printing excessive copies of documents, files, data, or programs; modifying system facilities, operating systems, or disk partitions; attempting to crash or tie up a College computer; damaging or vandalizing College computing facilities, equipment, software, or computer files).
- Printing Nursing Student Handbook, Course packets or any large document - 30 pages or as directed by computer room personnel.

Violations of these procedures may result in administrative and/or criminal actions. Such Administrative action may include, but not be limited to:
- inspect any files or programs in question.
- suspend or restrict the computing privileges of the violator.

It should be understood that nothing in these guidelines precludes enforcement under the laws and regulations of the State of Texas, any municipality or county therein, and/or the United States of America.

Link: EPCC Student Code of Conduct
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FLB-1.pdf#search=computer%20use

Last reviewed: August 2024

EPCC NURSING PROGRAMS POLICY FOR SOCIAL MEDIA AND NETWORKING

Students in the Associate Degree Nursing Program, Vocational Nursing Program, and the LVN-RN Transition Program at El Paso Community College are expected to adhere to the high standards of the Nursing profession with regard to maintaining confidentiality. This not only includes guarding patient confidentiality at a clinical site, but also in the classroom, at home, and online.

Social Media is web-based technology used to communicate with others. The following guidelines are for behavior involved with cell phone use, Facebook, X(Twitter), Instagram, Blogs, Video Sharing (e.g., YouTube), Collaborative websites, Message Boards, Podcasts, and any other social networking site. Many of you already have such sites established and are eager to use them to convey what you are learning and doing while in these programs. You may continue to use those sites but with these cautions:

- It is your responsibility to keep your site appropriate and your profile clean.
- Do not post threats or derogatory remarks about anyone associated with the Associate Degree Nursing Program Vocational Nursing program, and the LVN-RN Transition program. This includes fellow

students, faculty, staff, college administrators, clinical affiliates, and, above all, patients. This is a violation of the EPCC Board Policy; you will be reported to the police, and disciplinary action will be taken. Dismissal is possible for this violation from class(es), Nursing program, and/or the college.

- Any photos posted of yourself must be made out of uniform, make no reference to EPCC, the Associate Degree Nursing program, the Vocational Nursing program, the LVN-RN Transition program, or clinical affiliates, and will not include any illegal activity. Posting photos of other students, faculty, staff, clinical affiliates, patients, etc., is forbidden.
- Cell phone use in the classroom and at the clinical site is forbidden. Unless given permission by the affiliate security/police, charge nurse, or instructor. If cell phones are discovered they will be confiscated for the remainder of the class or clinical day.
- Smartwatches, Apple Watches, or watches linked to the internet are NOT allowed in the classroom during testing.
- No cameras of any kind are allowed in the classroom or at clinical.
- Instances of inappropriate use of social and electronic media may be reported to the Texas Board of Nursing (BON)

STUDENT CONCERNS PROCEDURE

Students who have concerns related to their educational experience in the Nursing Programs are encouraged to address them with the relevant individuals. The nursing faculty, program coordinators, and the Dean of Nursing are dedicated to fostering a positive learning environment for all students. To facilitate the resolution of concerns, students may use the "Student Concern Form" provided at the end of this handbook to document their issues, which will be directed to the appropriate party for review and resolution.

Last reviewed: June 2025

TEXAS BOARD OF NURSING LICENSURE ELIGIBILITY AND RELATED RULES

- TITLE 22, PART 11, CHAPTER 213: RULE 213.27: GOOD PROFESSIONAL CHARACTER
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?$locale=en_US&interface=VIEW_TAC_SUMMARY&queryAsDate=06%2F11%2F2025&recordId=187647

- TITLE 22, PART 11, CHAPTER 213: RULE 213.28: LICENSURE OF INDIVIDUALS WITH CRIMINAL HISTORY
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=210419&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 213: RULE 213.30: DECLARATORY ORDER OF ELIGIBILITY FOR LICENSURE
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=174145&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.2: LICENSURE BY EXAMINATION FOR GRADUATES OF NURSING EDUCATION PROGRAMS WITHIN THE UNITED STATES, ITS TERRITORIES, OR POSSESSIONS
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=210424&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.3: TEMPORARY AUTHORIZATION TO PRACTICE/TEMPORARY PERMIT
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=199335&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.5: TEMPORARY LICENSE AND ENDORSEMENT
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=217024&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.11: STANDARDS OF NURSING PRACTICE
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=133132&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.12: UNPROFESSIONAL CONDUCT
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=196802&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

- TITLE 22, PART 11, CHAPTER 217: RULE 217.17: NURSING JURISPRUDENCE EXAM (NJE)
  Link: https://texas-sos.appianportalsgov.com/rules-and-meetings?recordId=138344&queryAsDate=06%2F11%2F2025&interface=VIEW_TAC_SUMMARY&$locale=en_US

EL PASO COMMUNITY COLLEGE NURSING STUDENT HANDBOOK ACKNOWLEDGMENT

I have read and understood the Nursing Student Handbook. I was given the opportunity to ask questions, and by signing below, I agree to comply with all requirements, policies, and procedures outlined within it.

_____

Student printed name

_____   _____

Student Signature   ID #

_____

Program/Semester

Date _____

SUBMIT THIS COMPLETED AND SIGNED FORM THROUGH YOUR COMPLIO
ACCOUNT

EL PASO COMMUNITY COLLEGE NURSING PROGRAMS PATIENT CONFIDENTIALITY

1. All information learned during a patient care experience or from patient records is completely confidential. (Exceptions: instructors and agency staff members may be notified of all confidential matters.)

2. No comment should be made about the patient that could be taken as negative or critical. Such comments could easily be taken very personally by the patient or friends if overheard. The attitude taken about the patient and the treatment should always be in the best interest of the patient. DO NOT TALK about or discuss patients in an unsecure, place, i.e., hallways, elevators, bathrooms, cafeteria, where others are congregating, at school when not in classroom etc.

CONFIDENTIALITY AGREEMENT

I understand and agree that in the performance of my duties as a student in _____ (course/program), I must hold patient information in confidence. Further, I understand and agree that intentional or voluntary violation of the patient's confidentiality may result in refusal by the health care facility to allow me to participate in patient care. Violating patient confidentiality may place the patient in emotional jeopardy, one form of unsafe clinical practice, and may result in failure to meet course objectives.

DATE: _____

COURSE/SEMESTER _____

NAME: _____
                    (Please Print Legibly)

SIGNATURE: _____

STUDENT ID NUMBER: _____

SCHOOL E-MAIL ADDRESS: _____

PERSONAL E-MAIL ADDRESS: _____

SUBMIT THIS COMPLETED AND SIGNED FORM THROUGH YOUR COMPLIO ACCOUNT

EL PASO COMMUNITY COLLEGE
NURSING PROGRAM--RELEASE OF INFORMATION

PURPOSE: Under the Family Educational Rights and Privacy Act of 1974, permission is needed to release information.

EXPLANATION: Developing clinical rotation schedules for students enrolled in <u>Nursing</u> courses is necessary. The information is given on an 'as needed basis' to:
1.   Discipline faculty and staff (as needed)
2.   Clinical affiliates
3.   Classmates (within the rotation)
4.   Program use (accreditation reports, for graduation, etc.)

Schedules are used by faculty at El Paso Community College and the clinical affiliates for placement of students in the Healthcare facilities/clinical areas. The schedules are also to notify students of messages received, especially in case of emergencies.

I, _____, give my permission for El Paso Community College to issue to the healthcare facilities/clinical areas the following information that is relevant. <u>The information is confidential and released only on an as needed basis.</u>

The following is information that is needed by the healthcare facilities/clinical areas for a student to attend clinical and also data that is at times required by accrediting agencies or other entities.

a. clinical schedule with names of students	j. address (home)
b. date of CPR Certification/First Aide	k. address (work)
c. TB skin test results and date	l. references for employment and/or scholarships
d. all immunizations and titers	m. enrollment/graduation information
e. telephone number (home and/or cell)	n. participation in program activities
f. telephone (work)	o. accrediting/licensing agencies requiring information
g. background check	p. name, addresses to clinical affiliates for invitations to graduation parties
h. drug screen	
i. Preclinical clearance form	q. N-95 mask
	r. other

If you do not agree to the release of this information, please list the ones you do not want released below.

_____

Failure to release this information may result in non-admittance to healthcare facilities/clinical affiliates. Healthcare facilities and Clinical affiliates require some or all of this information of students providing patient care. <u>The information is confidential and released only on an as-needed basis.</u>

Failure to release this information may result in a processing delay of data required by the healthcare facilities/clinical affiliates.

Student Signature: _____ Date: _____

Printed name: _____ Student ID number_____

School email: _____ Personal email: _____

Course/ Semester (required): _____

SUBMIT THIS COMPLETED AND SIGNED FORM THROUGH YOUR COMPLIO
ACCOUNT

STUDENT CONCERN FORM

DATE: _____

NAME: _____   ID Number: _____

Address: _____   E-mail Address: _____

Phone: Home-_____ Cell-_____   Work-_____

I want this to be kept confidential **Yes** ☐   **No** ☐

Please note that by checking the *Yes* box, the Dean will only be able to discuss your particular concern in a generalized fashion with the indicated party and will be unable to share any of the specifics or this written form with them. Please further note that should you find no other recourse than to elevate your concern to the Vice President of Instruction, that even by checking the *Yes* box, any information you elect to share within this form will be submitted for the Vice President's office to review.

Notification Made By: Letter __ Interview __ Phone call ____ Other _____

Additional sheets of paper may be added as needed.

Subject of Concern: _____

TYPE OF CONCERN: Grades ____ Tests ____ Procedures ____ Teaching Methods ____ Other ____

Professor/Staff Name: _____ Course/Section: _____ Class Days ___ Time _____

EXPLANATION OF YOUR CONCERN:
(Students knowingly making false claims will be subject to disciplinary action in accordance with the Student Code of Conduct)

Has the identified party been contacted?   **Yes** ☐   **No** ☐   **NA** ☐
Has the faculty coordinator been contacted?   **Yes** ☐   **No** ☐   **NA** ☐

For Administrative Use Only
RECOMMENDED ACTION:

Follow-Up: Faculty/Staff ☐   ***Coordinator*** ☐   ***Staff Supervisor*** ☐   **List Attachments: _____**
For Faculty/Staff: I have met with my dean/supervisor: Yes ☐ **No** ☐   **Comments Attached: Yes** ☐   **No** ☐
RESOLUTION:

COMMENTS:

Interviewer's Signature _____   Additional Documents Attached _____