

COX COLLEGE

2021-2022

**Student Handbook
for Undergraduate Nursing**

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A Message to Cox College Undergraduate Nursing Students

Congratulations on becoming a nursing student at Cox College. At Cox College we take our mission of excellence in educating students and the healthcare community very seriously. You will find excellent faculty members who care deeply for our students. They live out the core values of the college every day. I am proud to welcome you to a college where excellence is the standard and the faculty strive daily to exceed that standard.

This student handbook, along with the college catalog will help acquaint you with the policies and processes here at Cox College. If you need any additional information, please consult with your faculty or advisor. They are happy to assist you as you progress through the program toward your chosen career.

We look forward to watching you learn and grow.

Dr. Amy Townsend, EdD, MSN, RN, CNE
Vice President of Student Nursing

Accreditations

Cox College is accredited by The Higher Learning Commission, a commission of the North Central Association of Colleges and Schools, 30 N. LaSalle Street, Suite 2400, Chicago, IL 60602-2504, 800-621-7440, www.ncahigherlearningcommission.org.

Cox College is a single-purpose specialized private college and affiliate of CoxHealth. The college provides integrated, comprehensive educational programs that prepare graduates for a changing health care environment.

The Missouri State Board of Nursing (MSBN) 3605 Missouri Blvd, PO Box 656, Jefferson City, MO 65102-0656, 573-751-0681, <http://pr.mo.gov> has granted full approval for both the Associate and Bachelor of Science in Nursing degree programs.

The Associate of Science in Nursing degree program at Cox College is accredited by the Accreditation Commission for Education in Nursing (ACEN), 3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326, 404-975-5000, www.acenursing.org (*previously National League for Nursing Accrediting Commission*)

The Bachelor of Science in Nursing degree at Cox College is accredited by the Commission on Collegiate Nursing Education (CCNE), 655 K Street, NW, Suite 750, Washington, DC, 20001, 202-887-6791, <http://www.aacn.nche.edu/ccne-accreditation>

GENERAL INFORMATION

The policies and procedures contained in this handbook are subject to change without notice at the discretion of the Program Chairs with the approval of the Chief Nurse Administrator. Any changes made will be communicated to students in a timely manner. This Handbook is not intended to be a contract, explicit or implied. It is the responsibility of each student to be acquainted with all requirements, policies, and procedures for his or her degree program and to assume responsibility for meeting those requirements.

It is the student's responsibility to become familiar with these documents and abide by all policies while enrolled at Cox College. Cox College policies can be found in the Cox College Catalog.

Please contact the Program Chairs, Academic Advisors, or Vice President of Student Nursing with questions regarding the information in this Handbook or general Cox College policies and procedures.

Undergraduate Nursing Programs

The nursing program offers two undergraduate degree options: The Associate of Science in Nursing (ASN) and the Bachelor of Science in Nursing (BSN).

Mission, Vision, Core Values, and Goals

Vision

Provide leadership using innovative approaches to advance the practice of nursing.

Mission

To provide excellence in educational programs that prepare nurses at the associate and baccalaureate levels.

Philosophy

The faculty of Cox College has chosen the following concepts to be included in the philosophy: human beings, society, health, nursing, learning and nursing education.

Human beings are unique holistic individuals with intrinsic value, having the right to be treated with respect and dignity from conception to end of life. Humans influence and are influenced by two interrelated forces, the internal and external environments. The internal environment consists of biological, psychosocial, and spiritual factors, whereas the external environment consists of socio-cultural, political, economical, physical and technological factors. Humans have rational power and personal values that affect self, others and environment, and have a right to be treated with respect and dignity. Human beings are social beings who constitute groups, with groups forming societies.

Society, characterized by cultural norms, beliefs and mores, defines the rights and responsibilities of its citizens and communities. Social organization allows procurement of benefits and resources for individuals and groups that might not be otherwise realized. Social organization addresses distribution of limited resources such as health care seeking to provide the highest benefit for greatest number as an ongoing imperative.

Health is a dynamic state in which the individual is constantly adapting to changes in the internal and external environment. A state of health is viewed as a point existing on a continuum from wellness to death. The meaning of health varies with the perception of each human being. The purpose of the health care delivery system is to assist individuals in achieving their optimal wellness and a state of being, by utilizing a multidisciplinary approach that is sensitive to both environmental resources and constraints.

Nursing is a synergy of art and science. The science of nursing is based on principles and

theories of nursing, behavioral, and natural sciences, which embody knowledge, skills and professional values, which are applied in a caring manner. The art of nursing, grounded in the humanities, is exemplified by the characteristics of caring that include commitment, authenticity, advocacy, responsiveness, presence, empowerment and competence. Nurses accept and respect cultural differences and develop skills to provide ethical, compassionate care.

The goals of nursing practice are to promote wellness, prevent illness, restore health and facilitate healing. Nursing process provides the framework for decision making and problem solving. Recipients of nursing care may be individuals, families, groups or communities. Nurses practice within legal, ethical and professional standards in the health care delivery system. A variety of nursing roles and practice settings offer nurses the opportunity to collaborate within a complex system while making a unique contribution. As a vital humanitarian service within society, nurses function in the interrelated roles of provider, manager, leader and research scholar.

Learning is a lifelong process influenced by conditions in the environment. Evidenced by changes in behavior, learning involves development in the cognitive, affective and psychomotor domains. Students are expected to be self-directed, goal-oriented and actively involved in the learning process. Faculty members facilitate the learning process by creating a flexible environment and planning goal-oriented experiences. Respect for individuality, freedom of expression, shared decision making and mutual trust promote reciprocal relationships and create an optimal learning environment. Faculty members accept responsibility for acting as role models and stimulating intellectual curiosity, critical thinking, self-awareness and promoting lifelong learning.

Nursing education prepares individuals to perform at various levels of decision making, which range from those based on accepted nursing knowledge, skills and values to those that require a complex organization of these components. Nursing knowledge which is further supported by evidence is foundational to professional nursing and is emphasized at all levels of nursing education. Each level of nursing education is valued for their contributions and collaborative work to achieve unity of effort. Faculty members value educational mobility and individual choice in educational pathways.

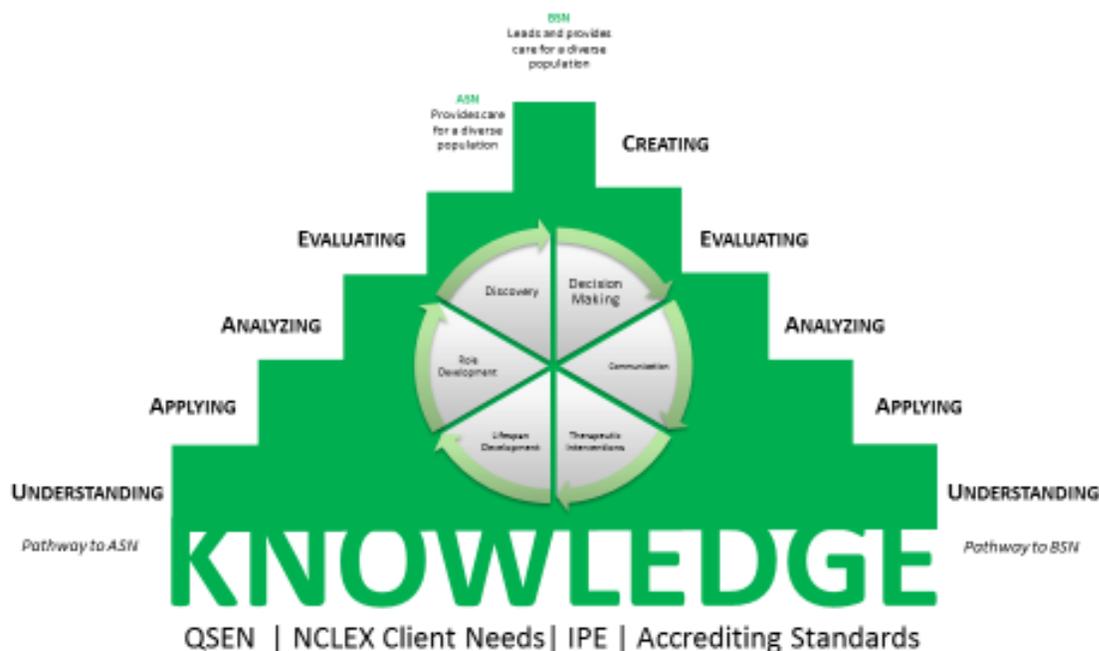
Associate degree education in nursing prepares practitioners for making decisions in the care of individuals and members of a family, group or community with common well-defined nursing diagnoses. Associate degree nurses are prepared to function in structured health care settings and to provide nursing care under established policies, procedures and protocols. Graduates of associate degree education recognize the value of accessing professional literature and applying interpreted research.

Baccalaureate degree education in nursing prepares practitioners capable of decision making in the care of individuals, families, groups and communities with complex interactions of nursing diagnoses. Baccalaureate nurses are prepared to function in structured and unstructured settings that may or may not have established policies, procedures and protocols. In addition, graduates are prepared to assume leadership roles in the provision of health care. Graduates of baccalaureate education critically integrate research findings to

provide and/or improve nursing care. (Revised 10/2011)

Conceptual Framework For Undergraduate Curriculum

COX COLLEGE UNDERGRADUATE NURSING DEPARTMENT



The curricular threads that run throughout the curriculum are:

- Decision making
- Communication
- Therapeutic interventions
- Life span development
- Discovery
- Role Development

Decision Making

Decision making involves the ability to critically analyze and think through concepts arriving at a plan of action or decision for action or decision for action. The nursing process provides the framework for decision making. As a part of decision making, critical thinking is a self-reflective, cognitive process that seeks to uncover the truth within a specific context. Critical thinking is evidenced when skills such as analysis, inference, synthesis and evaluation are used. Decision making should result in deliberate and focused data collection, accurate analysis of data, prioritization, and reflective judgment in the delivery of client care. It utilizes inductive and deductive reasoning.

Communication

Communication is the process by which information, ideas, and feelings are interchanged. It involves symbols, such as written words, gestures, images, and spoken language. It arises

from inherent capacities, sociocultural background, environment, attitudes, past experiences, knowledge of subject matter, and ability to relate to others. Communication is reciprocal and involves collaboration and group process.

Therapeutic Nursing Interventions

Therapeutic nursing interventions are actions involving critical thinking and decision making designed to assist movement of the client toward the mutually agreed upon outcome of healing. Implementation of therapeutic nursing interventions requires the use of cognitive processes, and affective and psychomotor skills. Therapeutic nursing interventions are delivered in a compassionate, caring manner and require application of knowledge and nonjudgmental evaluation. Delivery of therapeutic interventions requires a competent, organized provider who converts knowledge into application in the appropriate setting.

Life Span Development

Life span development is an interactive process of human experience. Internal and external environments affect humans in a dynamic fashion. While life span can be measured chronologically, the epitome of human development is a continuum exemplified by the ability to find meaning in life, attach to one's environment, adapt to physical patterns, and express optimal cognitive function. Nursing care is directed toward prevention of illness and health promotion maintenance, and restoration across the lifespan when providing care to individuals or social aggregates such as communities and populations.

Discovery

Discovery is the ability to research topics for understanding. It requires the individual to take complex or diverse data and conform it into an understandable set of concepts for evidence based practice. Research, as a part of discovery, is a scholarly inquiry or investigation to inform practice and improve nursing care.

Role Development

Role development is the cumulative socialization process of developing a valuing of personal integrity, accountability, altruism, lifelong learning, and ethical behavior. A collaborative focus as a member of the nursing discipline results in interpersonal expressions that integrate social roles of provider and manager of nursing care, research consumer, and ultimately leader in health care systems. The complex development of professional nursing identity is characterized by advocacy for humans in need of nursing care, advancement of nursing through discovery and competent practice within legal parameters.

Professional Conduct Statements

NSNA CODE OF ACADEMIC & CLINICAL CONDUCT

The National Student Nurses' Association (NSNA) Code of Academic and Clinical Conduct was adopted by the NSNA House of Delegates in Nashville, TN. Administration, faculty and students, shall recognize the *Code of Academic and Clinical Conduct* and any violations of such may be brought to the attention of the dean of nursing who will act as a liaison among faculty and students.

Preamble

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we;

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging 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. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.

14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorization is obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold 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.

NURSING STUDENT CODE OF CONDUCT

In addition, students who have been admitted into the first nursing course are expected to consistently exhibit the following behaviors:

- ◆ Respect for the inherent worth and uniqueness of an individual by demonstrating caring, trust, and empathy. (This behavior is demonstrated by being accessible and prompt in meeting the needs of those under your care, encouraging and motivating individuals with whom you come in contact and respectful of those you come in contact with in the classroom and clinical settings.)
- ◆ Commitment to nursing and an attitude of enthusiasm, cooperation and self-direction. (This behavior is demonstrated by appearing to enjoy nursing, timeliness of duties and paperwork, being accountable for your behavior, presenting a willingness to learn and expand your nursing knowledge.)
- ◆ Commitment to standards of confidentiality with regard to disclosure of information regarding clients, their families and others. (Students are obligated to keep client-related matters confidential and are not permitted to make photocopies, faxes, audiotapes or reproductions of any kind of any portion of a client record.)
- ◆ Students are accountable as members of the health care team to report any communication suggesting harm to self or others to appropriate individuals.
- ◆ Commitment to safe/appropriate behavior. Examples of unsafe laboratory / clinical behavior includes behavior that:
 - Violates or threatens the physical safety of the client
 - Violates or threatens the psychological safety of the client
 - Violates or threatens the microbiological safety of the client
 - Violates or threatens the environmental safety of the client
 - Assumes inappropriate independence in action or decisions
 - Fails to recognize own limitation, incompetence and/or legal responsibilities
 - Fails to accept legal responsibility for own actions

- Fails to interact effectively with health team members
- Demonstrates lack of preparation for the care of assigned clients

All assignments are expected to be the work of the individual student unless directed otherwise. Cheating or plagiarism will result in an automatic zero for the assignment and may result in dismissal from the College.

Academic dishonesty in the learning environment could involve:

- Having a friend complete a portion of your assignments
- Having a reviewer make extensive revisions to an assignment
- Copying work submitted by another student
- Using information from online information services without proper citation
- Submitting your own work from another class without prior approval of the faculty.

APA Format

All graded papers should be written and cited in APA format as summarized in the *Publication Manual of the American Psychological Association* (7th ed.). In addition, appropriate APA citations should be given in student posts to reflect sources used for classroom discussion. If any of the above behaviors are not adhered to, it may result in being placed on probation or suspension. (See *Student Discipline – probation and suspension*).

The CODE OF ETHICS FOR NURSES WITH INTERPRETIVE STATEMENTS can be found at http://nursingworld.org/DocumentVault/Ethics_1/Code-of-Ethics-for-Nurses.html

Program Outcome Criteria

ASN Program Outcomes

Associate degree education in nursing prepares practitioners capable of decision making in the care of individuals, families, groups and communities. Graduates of associate degree education recognize the value of accessing professional literature and applying interpreted research.

Graduate Competencies for the ASN Degree

Upon completion of the program of study, the ASN graduate will be able to:

1. Utilize knowledge from nursing, behavioral and natural sciences to **make competent decisions** when providing direct care for individuals and members of a family or group with well-defined nursing diagnoses in structured health care settings.
2. Employ effective **communication** skills in interaction with clients, their family members and the health care team.
3. Implement **therapeutic interventions** for individuals and members of a family, group or community in structured health care settings using established policies, procedures, and protocols.
4. Apply principles of growth and development in providing care to individuals and members of a family or group across the **life span**.
5. Utilize methods of **discovery** to access professional literature and apply interpreted research.
6. Assume a **professional role** and practice nursing within legal, ethical and professional standards with a commitment to lifelong learning.

BSN Program Outcomes

Baccalaureate degree education in nursing prepares practitioners capable of decision making in the care of individuals, families, groups and communities. In addition, graduates are prepared to assume leadership roles in the provision of health care. Graduates of baccalaureate education critically integrate research findings to provide and/or improve nursing care.

Graduate Competencies for the BSN Degree

Upon completion of the BSN program of study the graduate will:

1. Utilize information management skills as a means of competent **decision making** and critical thinking to enhance nursing practice, client education and personal lifelong learning.
2. **Communicate** effectively using verbal, written, and interpersonal skills among colleagues, individuals, families, groups and communities.
3. Implement evidenced-based **therapeutic interventions** for individuals, families, groups and communities in structured and unstructured health care settings.
4. Integrate principles of **life span development** in the nursing care of diverse groups.
5. Utilize methods of **discovery** to inform practice and improve nursing care.
6. Integrate nursing **roles** to assure competent practice in a changing and diverse health care environment.

Policies and Guidelines

Undergraduate Nursing Policies and Guidelines

Grading Scale

Grades are assigned using the following scale:

<u>Grade</u>	<u>Percentage</u>	<u>Quality Points</u>
A	93 – 100	4.0
A-	90 – 92	3.7
B+	87 – 89	3.3
B	85 – 86	3.0
B-	80 – 84	2.7
C+	77 – 79	2.3
C	75 – 76	2.0
C-	70 – 74	1.7
D+	67 – 69	1.3
D	65 – 66	1.0
D-	60 – 64	0.7
F	59 – 0	0.0
P		Passing
W		Withdraw
WP		Withdraw Passing
WF		Withdraw Failing
WN		Withdraw Not Progressing*

Repeating a Nursing Course

A student will be required to repeat a nursing course if a percentage grade of “75” or below or a letter grade of “C-” or below is received. If a student does not meet progression requirements in any nursing course, that student can repeat the course only once. Enrollment in the repeated course will be on a space- available basis. The student’s GPA will reflect the grade received when the course is repeated. If a student withdraws prior to the last day to drop without receiving a grade, then that withdrawal is not counted as a repeat of the course. A student who withdraws failing by the exam average and/or course grade progression standard will receive the grade WN. This will be counted as a course failure.

A student who withdraws or does not achieve progression requirements in any prerequisite and corequisite course will NOT be allowed to progress to the next nursing course until the corequisite requirement is successfully completed. If withdrawal of a corequisite course occurs, withdrawal in the concurrent nursing course will also be required. If progression in the nursing program is interrupted for this or any other reason, enrollment will be resumed only on a space-available basis. Space-available basis is determined by the number of seats remaining in the course after all new and progressing students have been registered. If there are more students repeating than slots available, a ranking process will be used to register those students.

Please note the Undergraduate Nursing Department (UND) uses your *percentage grade*, not

your letter grade in determining progression

Students will be officially notified of their current grade at mid-term according to the calendar in the College Catalog. Mid-term and final grades will be assigned according to the published grading scale.

A D+ grade and below does not meet degree requirements for students admitted into a college program. Any program course must be repeated in order to meet degree requirements (for financial aid purposes, only “D+, D, and D- grades may be counted as “passing”).

*Each program has a grade progression requirement for program courses. Please see each program’s section in the catalog for further information.

Retaken courses with credit awarded are indicated on the student’s transcript with an “R” notation.

Other Grades—not computed in the Grade Point Average:

AU	Audit, no credit given
CR	Credit by examination
CV	Credit by validation, course requirement met
I	incomplete (Requirements of the course are not met due to special circumstances) It is the student’s responsibility to make arrangements with the instructor for completing the course (See Incomplete Course Grades Below)

Course requirements and grading standards will be provided in each course syllabus. Transfer credits are included in the earned hours to meet graduation requirements. Credit by examination and/or validation (with the exception of math proficiency) is included in cumulative credit hours to meet graduation requirements.

Incomplete Course Grades

A student may receive a grade of “I” (incomplete) in a course if, in the faculty’s estimation, there has been sufficient progress in the course to justify a grade of incomplete: The schedule for the completion of incomplete grades is as follows:

- Fall – Final grade is due by Friday of the 2nd week of Spring term
- Spring – Final grade is due by Friday of the 2nd week of Summer 1 term
- Summer – Final grade is due by Friday of the 2nd week of Fall term

Coursework not successfully completed by the scheduled timeframe may result in a failure (“F”). A final grade will be entered into the student’s academic record and may affect program progression and enrollment in prerequisite and co-requisite courses.

Under extenuating circumstances, students may request an extension. Extensions must be approved by the course instructor and the department chair. If an extension is approved, the

course instructor will communicate to the Registrar the expected completion date not to extend beyond the subsequent semester.

*Refer to the Catalog for program specific course incomplete details.

Skills Competencies

Each clinical course has assigned skills competencies that students must demonstrate in order to progress in the course. If a student does not pass their competency exam they will not be allowed to return to acute care clinical until they have successfully demonstrated competency.

Progression Policy

To successfully progress through the nursing program, students must demonstrate safe, responsible and professional conduct and meet the following academic standards:

- Students in all nursing programs must achieve a cumulative average of 75% on examinations in all nursing courses before any additional course points can be averaged into the course grade in order to be allowed to progress in the nursing course sequence or, in the case of the last courses in the programs, to be allowed to graduate.
- Any student who achieves a cumulative average of 74.49% or less on course examinations will not be allowed to progress to the next course and will have a “C-” or lower recorded as their final grade in the course, and no other course points will be allowed. Regardless of the letter grade posted, the student must achieve at least a percentage score of 75% or higher. If eligible, the student will be required to repeat the course.
- Once the cumulative 75% average on all course examinations has been achieved, the remaining points for the course will be averaged with the examination grades. This score will constitute the final course grade.
- If the final grade for the course is less than the 75% average after the remaining course points are added, the student will not be allowed to progress to the next course and will have a “C-” or lower recorded as the final grade for the course. Regardless of the letter grade posted, the student must achieve a percentage score of at least 75% or higher. If eligible, the student will have to repeat the course.
- If a student withdraws from a class after the withdrawal period, they will receive a grade of WP, WF, or WN, based on their exam average and/or course grade. A grade of WF or WN equates to a nursing course failure.
- Successful completion of the theory and laboratory components of nursing courses is

required. If a student is unsuccessful in the theory component but passes the lab component of course, both sections must be repeated. If a student is successful in the theory component of class but unsuccessful in the laboratory component of the course, both sections must be repeated.

- Completion of required academic assessments administered by Cox College.
- Maintenance of American Heart Association (AHA) Healthcare Provider certification or equivalent.
- Maintenance of current immunizations.

Progression Requirements

Once a student has been admitted into a pre-licensure nursing program, enrollment must be maintained during each subsequent semester until completion. If the student withdraws from the college, it will be necessary for the student to reapply for admission into a nursing program. (See Leave of Absence).

If progression in the RN-BSN track beyond a semester is interrupted for any reason, the student **MUST** apply for readmission to both the college and the desired program. Readmission to courses is on a *space available basis*.

Students dismissed from the nursing program are not eligible for re-admission to the program. Those students dismissed from the nursing program may reenter the nursing program through one of the following bridge programs (LPN to ASN, ASMA to ASN, ASMA to BSN, LPN to BSN or RN to BSN). Questions regarding this policy may be addressed in writing to the Chief Nurse Administrator.

Dropping (“Withdrawal from”) a Course

Responsibility for withdrawing from a course rests with the student. An official *Change of Schedule* form, obtainable from the reception desk, Registration office or academic advisor, must be filed with the Registration office. Failure to officially withdraw from a class will result in a grade of “F” for the course. Withdrawals may not occur during the last two weeks of a 16-week semester.

If a course is listed as a co-requisite to another course in which the student is enrolled, withdrawing from the co-requisite course requires withdrawal from the concurrent nursing course. Co-requisite courses must be completed at Cox to monitor student enrollment and related policies. If a student is taking courses at another institution, he/she needs a transcript from the institution showing courses “in progress” and an official transcript upon completion of the course.

When withdrawal from a course occurs before the end of the sixth week of the semester, the

student will receive a “W” – Withdrawal without grade status. Withdrawals occurring after the end of the sixth week of the semester will require grade status in terms of pass or fail. Withdraw Passing (WP) has no effect on grade point average. Withdraw Failing (WF) will be computed into the grade point average as an “F” in the course.

Repeating a Course

A student will be required to repeat a nursing course if a percentage grade of 75 or below or a letter grade of “C-“ or below is received. If a student does not meet progression requirements in any nursing course, that student can repeat the course only once. Enrollment in the repeated course will be on a space-available basis. The student’s GPA will reflect the grade received when the course is repeated. If a student withdraws prior to the last day to drop without receiving a grade, then that withdrawal is not counted as a repeat of the course.

A student who withdraws or does not achieve progression requirements in any co-requisite course will NOT be allowed to progress to the next nursing course until the co-requisite requirement is successfully completed. If withdrawal of a co-requisite course occurs, withdrawal in the concurrent nursing course will also be required. If progression in the nursing program is interrupted for this or any other reason, enrollment will be resumed only on a space-available basis. Space-available basis is determined by the number of seats remaining in the course after all new and progressing students have been registered. After registration has been completed, if there are more students repeating than slots available, a ranking process will be used to register those students.

Students who fall out of progression and who do not register the following semester for a nursing clinical course are responsible for scheduling to review and practice clinical skills prior to enrollment in the next clinical course.

Laptop Requirements

Students in the undergraduate nursing programs are required to own a laptop and bring it to every class session. All exams will be taken on the laptops. Below are the technical requirements for the laptops.

Device

PC – Windows 7, 8, 8.1 or 10*

Mac – Mac OS® X 10.9 or later

Browser

Firefox 36+ – <http://www.mozilla.org>

Google Chrome 41+ – <http://www.google.com/chrome>

Safari 6.2.7+ (Mac Only) – <http://support.apple.com>

Internet Explorer 9 or 10 (Version 11 Not Recommended)

**For Windows 10, Only Firefox and Chrome Are Recommended. Use of Microsoft Edge Is Not Supported At This Time. 70*

Software

Adobe.com (FlashPlayer and Acrobat Reader)

Java.com

Microsoft Office Suite

Other Requirements

Chromebooks or Microsoft Surface tablets are not recommended

Webcam and microphone required

Behavior

Attendance

Regular attendance and punctuality are considered essential in meeting the objectives of the program. Classroom and clinical attendance is expected for maximum preparation for the professions. We believe there is a direct correlation between attendance and success in the course. Students are expected to attend all scheduled classroom, lab and clinical educational sessions. Absence for any reason does not relieve the student of responsibility for all course requirements. The student needs to make an appointment with the appropriate faculty and is responsible for obtaining information, announcements and assignments covered during absences. The faculty keeps records of attendance in all regularly scheduled courses at Cox College.

For Financial Aid purposes, if a student misses any class for **15** consecutive working days, (**or three consecutive weeks**) the faculty will report this in writing to the office of the Enrollment Management.

The attendance record is significant to the total record and is useful in guidance and counseling. When absences are excessive, the professor will report the fact to the office of Student Services, and they will in turn counsel with the student. The total number of absences in class will be reported to the office of the Records and Registration along with the final grade at the end of the semester. Students should be aware that absences from some program-specific courses invariably have a built-in penalty of lower academic achievement. Excessive absences usually result in failure to achieve the course goals.

Additional attendance requirements are addressed in course syllabi.

Classroom Academic and Behavioral Expectations

Along with the learning of theoretical concepts, students in the health sciences programs at Cox College are engaged in preparation for professional practice. Students in a professional program are held to these standards. Therefore, it is expected that the student demonstrates professional behaviors in all aspects of health sciences courses. Academic integrity and professional conduct are also expected of all students. The use of another student's work or the incorporation of work not one's own without proper credit will result in sanctions. Similarly, inappropriate behavior or behavior judged by faculty to be disruptive to the educational environment will not be tolerated.

Policy on Classroom Decorum

Learning is a social activity. We integrate new experiences and alternative viewpoints with our previous understanding to develop new understanding and perspective. Accordingly, much emphasis is placed on active participation, sharing of ideas and the use of critical thinking skills in each course. Attendance in class is highly encouraged. Learning activities are planned for each class period. Students who are prepared for class will gain the most benefit from lectures and discussions and will experience greater success in the course. The faculty are committed to facilitating the success of each student in each program. Please do not hesitate to speak with the faculty in order to have concerns addressed or questions clarified.

There is a large amount of content to be covered in a semester which can be challenging. You will be best served if you keep current with the readings and participate actively in each of your learning opportunities. It is expected that you will:

- Be prompt and regular in attending classes on time
- Be well prepared for classes
- Submit required assignments in a timely manner
- Meet the course and behavior standards as defined by the instructor
- Make and keep appointments when necessary to meet with the instructor
- Call the faculty member and leave a voice mail/phone message or e-mail in the event of tardiness or absence from class
- Turn off your cell phone during class
- Be respectful of the faculty member and classmates and not talk when others are talking during class
- Treat your colleagues, the agency staff, and the faculty with respect, always address the faculty member by his or her title: Professor or Doctor
- Demonstrate ethical and professional behavior in all aspects of this course
- Be respectful of all communications to students and faculty
- Not bring a guest or children to class
- Not violate any HIPAA and/or FERPA rights within social media discussions

Faculty reserve the right to not permit students who are late in class until the official class break and to dismiss students from class for failure to respond to faculty's directions, incivility, disruptive behavior or otherwise distracting from the learning environment.

There is no tolerance for disrespectful communication or incivility towards faculty or other students. Behaviors considered disruptive, unruly or behavior that interferes with the ability of the instructor to teach effectively may include:

- Intimidating behavior
- Behavior that interferes with the ability to teach effectively, for example; disruptive behavior, persistent argumentation, refusal to comply with a direct request, and disrespectful behavior such as yelling in class, eye rolling, etc.
- Gross and/or inappropriate behavior such as foul and/or inappropriate language

Any threats made against faculty or disrespectful conduct will be reported to the VPAA which

may result in penalties to the student.

Students entering and leaving class during the class session is VERY disruptive to the learning process, disrespectful of classmates and faculty and should not occur, except in an emergency situation. Students arriving after the session has started, may, at the discretion of the faculty, be asked to wait outside the classroom and enter at the next break.

Dress Code and Professional Conduct

Professionalism is a central concept in health care practice. In both classroom and clinical settings, professionalism is demonstrated by appropriate behavior and appearance. The following guidelines are to be followed for appropriate attire in the classroom and clinical setting.

General Information

Professional attire and one's presentation of self adds to one's credibility and inspire others' (e.g. clients and members of the college community). Thus, students are expected to convey an image of competence, confidence and professionalism at all times when they are on the Cox College campus and in the clinical setting.

Cox Health policy states that tobacco use will not be permitted on hospital grounds. Furthermore, Cox Health will not employ individuals who smoke. Facilities shall include all of the following areas owned and/or operated by the hospital: the physical campuses, parking facilities and adjacent offices, including administrative and physician offices and offices affiliated with the hospital but not physically adjacent to the hospital. This also includes personal vehicles on the physical campuses and hospital vehicles no matter where they are operated. Students with an offensive smoke odor on or in their clothing may be asked to change into a set of hospital issued scrubs or sent home on their own time to change clothes. Failure to comply may result in the application of formal sanctions.

Language (words, tone, and delivery) and behavior are to be appropriate, non-confrontational and respectful at all times.

When you are doing any documentation in the clinical setting, you are to sign your name and list your title as CCNS. Example: Jane Doe, CCNS.

The student represents Cox College in the clinical agency; therefore attire, appearance and conduct are to be appropriate and professional at all times. The client is the focus of attention and any behavior, dress or conduct that does not place the client first will be addressed by faculty. The following guidelines are to be followed:

General Hygiene

All students should bathe or shower regularly and use an effective body deodorant and breath freshener.

Appropriate Classroom Attire

Attire is to be appropriate for attending a professional educational setting. If clothing items are found to be distracting to the learning environment, the individual will be asked to leave.

Appropriate Clinical Attire

- The uniform consists of green pants, scrub top or white polo shirt, and a green jacket with the Cox College emblem, and mostly white, low-heeled shoes.
- Shoes should cover the entire foot. Shoes must be clean and polished.
- The uniform should be clean, pressed and fit appropriately. Students are allowed a solid white undershirt under a scrub top.
- Undergarments should not be visible beneath the uniform.
- Maternity attire should be consistent with the regular uniform described above.
 - Students may need to purchase additional, larger tunics to accommodate pregnancy.
- The jacket should be worn over appropriate street clothes when the student is in the clinical setting obtaining clinical assignments or completing pre-planning.
- Shorts, pants above ankle, joggers, and jeans of any type are not appropriate attire for obtaining clinical assignments, preplanning or clinical assignment.
- Some nursing courses have different requirements that will be noted in the syllabus.
- Scrub clothing may be provided by the health care agency for some special areas.
- Scrub clothing that belongs to the agency is not to be taken home for any reason.
- Gait belts are considered a part of the clinical uniform and must be worn at all times when in uniform, unless specifically directed by course faculty.
- Contact your advisor, faculty, or Program Chair for any questions regarding uniform requirements

Virtual Access

Cox College expects students to have access to reliable high-speed internet and telephone service. Every attempt should be made to eliminate background noise when possible to prevent distraction and interference. The visual background must be professional and neat in nature. The college dress code is to be used in the virtual environment. A neat and professional appearance is required. Timeliness is to be a priority in the virtual environment. While class schedules may vary, students should adhere to the schedule found in the student portal as much as possible.

Clinical Standards

The clinical experience requires very close client contact and use of aseptic techniques therefore:

- Hair must be worn so that it does not compromise client care.
 - Hair should be clean, neat (no loose hanging strands of hair), and worn so that comfort, safety and infection control are considered.
 - Shoulder length (or longer) hair must be contained (i.e. braided or secured) and off the neck.

- The hair color should be such that it looks professional.
 - Extreme fashions and hairstyles/colors are not acceptable.
- Hair accessories should be plain and the same color as the hair.
- Beards and mustaches are to be neat and trimmed.
- Fingernail length should not extend more than $\frac{1}{4}$ inch beyond the fingertip.
 - No artificial nails or acrylic overlays are to be worn.
 - Nail polish should be clear or light in color
 - No chipping observed.
- Cosmetics should be worn in moderation and from a modest color palette (e.g. clear, pale pink or nude tones).
- Perfume or aftershave is not to be worn in the clinical setting.
- Gum Chewing is not appropriate in the clinical setting.
- Watch with a sweep second hand required for clinical setting
- Jewelry is limited to:
 - Two rings
 - Rings should be confined to those that will not scratch the patient and can be kept clean.
 - Elaborate and/or valuable rings are discouraged in clinical; these may be restricted in some clinical areas
 - One set small post earrings
 - No dangling earrings, including hoops
 - No rod/bar earrings
 - Existing gauges require skin-tone plugs while at work.
 - Gauges larger than "0" are not acceptable.
 - Wearing jewelry in any facial piercing or covering with a bandage is not acceptable.
 - No tongue jewelry
- Tattoos considered offensive by faculty, staff, peers, or any hospital personnel, must be covered while at work.
- Faculty reserve the right to impose other restrictions depending on the clinical setting and client population. Students that do not adhere to dress code may be dismissed from the clinical setting which will result in absence. Frequent disregard for the dress code policy may result in a clinical contract with remediation up to and including dismissal from the program. If you have questions regarding the dress code ask your clinical instructor.

Students that do not adhere to dress code may be dismissed from the clinical setting which will result in absence. Frequent disregard for the dress code policy may result in a clinical contract with remediation up to and including dismissal from the program. If you have questions regarding the dress code ask your clinical instructor.

When reporting to a health care agency that requires a uniform, the student is required to bring:

- Watch with a sweep second hand
- Stethoscope
- Black ink pens

- Small notepad or clipboard
- Bandage scissors
- Kelly clamps
- Pen light
- Gait belt

The student photo ID is to be worn with name and picture visible at all times on the Cox College campus and in all clinical settings. Students will be asked to cover their last name while on the mental health units with specific uniform requirements noted in the syllabus.

Purses and valuables taken to the clinical unit are done so at the student's own risk, the college cannot guarantee safety or return of lost valuables or personal items. The students may lock them in the trunk of their cars. The amount of items to bring to the clinical setting depends on the clinical setting, due to storage limits. Check syllabus for details.

Electronic devices may be used in the clinical setting as long as they DO NOT have recording ability, voice or picture. Cell phones, pagers, or other communication devices must be kept in the room or area designated by the instructor or clinical agency.

All cellular telephones and pagers should be turned off or placed in silent / vibrate mode upon entering classroom. Students are NOT to answer the cellular telephone / pager during any classroom activities. Faculty may approve an exception for special considerations. If you have an emergency situation and are expecting a phone call, please receive permission from the faculty ahead of time to leave your phone on.

Other Requirements

To start and/or remain in a nursing program, the student MUST keep current with immunizations, CPR and TB testing.

Clinical and Classroom Course Requirements

Course requirements will be given in each course syllabus. Several nursing courses are composed of a theory and a laboratory component. In these courses, the theory component is assigned a letter grade and the laboratory component is evaluated as Pass (P) or Fail (F). To receive credit for the course, a grade of "C" or better must be received for the theory component and a "P" for the laboratory component. In the event an "F" is received in the laboratory component of a nursing course, an "F" will be recorded on the transcript as the course grade, and the course must be repeated. Final grades will be assigned for those courses based on the student's combined performance in both the theory and laboratory components. Transfer credits are included in the earned hours to meet graduation requirements. Credit by examination and/or validation (with the exception of math proficiency) is included in cumulative credit hours to meet graduation requirements. One make-up day will be scheduled during the last week of each semester. All missed clinical hours and/or activities should be completed during this timeframe. Inability to do so may result in the student being administratively withdrawn from the course by the department chair. Consequently, the student will be required to re-enroll in the course the following semester.

More than 15% hours of unexcused clinical absences will result in a failure of the clinical component of the course.

CLINICAL EVALUATION

- Laboratory performance will be evaluated as Pass (P) or Fail (F) according to laboratory objectives and criteria on the laboratory evaluation tool.
- In order to receive credit for the course, a grade of C or better must be received for the theory component and a P for the laboratory component.
- In the event an F is received in the laboratory component, an F will be recorded on the transcript as the course grade and both the theory and the laboratory components must be repeated.
- If a student receives a P in the laboratory component of the course, but a D or F in the theory component, both laboratory and theory must be repeated.
- Students are encouraged to review the Student Handbook for information regarding unsafe clinical behavior.
- Students may be required to attend a summative clinical conference.
- Failure to attend a required summative conference will result in failure of the laboratory component of the course, and the course must be repeated.
- Clinical weekly assignments must be submitted by determined weekly due date. A weekly grade of “Complete” is expected. You may receive a written warning after the first incomplete grade. Receiving one or more subsequent “Incomplete” grades for clinical weekly assignments may result in a clinical failure grade

Communication Of Policy Changes

Situations may occur during the academic year that faculty feel requires an immediate policy change within the program. These changes are communicated to the student in the following manner:

1. Verbal announcement of the policy change in class by faculty
2. E-mail distribution of the policy change to students
3. Announcements on the Student Portal/Canvas

Student Right in Delivery of Care

- Students may be excused from participation in certain procedures (e.g., administration of blood and blood products, etc.) in the provision of direct patient care in situations where the prescribed treatment presents a conflict with the student’s cultural values, ethics or religious beliefs.
- In no instance will the mission of the college, or that of any clinical agency/facility, be compromised.
- Students are expected to provide care to all persons in need, regardless of race, national origin, creed or religion.
- Excusing students from performing certain procedures during clinical laboratory experiences in no way affects any required demonstration of competency in that procedure or skill.

Health Risk For Nursing Programs

General Information

Certain risks and dangers to students' physical, psychological and/or emotional well being may occur during enrollment in the academic programs. Students entering the undergraduate programs should be aware that they will be in close contact with other individuals having a variety of health problems in which the etiology (cause) may or may not be known. In providing care to ill people, students may be exposed to infectious disease such as Hepatitis B (HBV), Human Immunodeficiency Virus (HIV) and other communicable diseases. The undergraduate programs have specific precautionary requirements based on the type of exposure and/or clinical agency policies. It is the responsibility of each student to know and follow the program guidelines for necessary standard precautions against contracting and transmitting disease. Personal protective equipment is available in health care facilities where students are assigned clinical experiences. It is the student's responsibility to know the location of this equipment and to follow good health practices for their own protection as well as that of the general public that they are or will be serving.

The faculty of the college endorse and follow the standard precaution policies of the institutions where clinical experience occurs. *Standard Precautions*, as outlined by the Centers for Disease Control and Prevention (CDC) were developed to protect health care workers from blood-borne pathogens. All clients must be considered as having the potential to transmit infectious diseases. Students must take measures to protect themselves, their coworkers, and the community at large from possible exposure to blood-borne pathogens.

Students enrolled in the academic programs at Cox College who experience any injury or who have been diagnosed with an infectious disease or who have been exposed to an infectious disease which could place their clients or others at risk, should immediately inform their clinical instructor.

Student Health Policy

Students are to have certain health records complete and up-to-date **before** being allowed in the clinical setting. The list includes:

- **Tetanus/Diphtheria/Pertussis** – Current Tetanus/Diphtheria (TD) immunization status (booster required every ten years) AND documentation of one dose of adult pertussis vaccine (Tdap)
- **Varicella** – Initiation or completion of vaccine series OR laboratory confirmation of immunity
- **Hepatitis B** – Initiation or completion of vaccine series OR laboratory confirmation of immunity
- **Measles/Mumps/Rubella (MMR)** – Initiation or completion of vaccine series OR laboratory confirmation of immunity.

- **Tuberculosis Screening (TB)** – Documentation of current TB screening
- Completion of the American Heart Association (AHA) for Healthcare Provider course or equivalent which is limited to the Military Training Network or the Heart and Stroke Foundation of Canada. No other life support programs will be accepted as equivalents.

If a needle stick and/or injury incident occurs, while a student is doing a clinical experience, the student shall notify their clinical instructor as soon as possible. The agency policies will be followed where the incident occurred, and the student will be responsible for medical expenses. This topic will be discussed as part of orientation for clinical classes.

COVID-19

Faculty, staff, and students may not come to campus if they have experienced any of the following:

- Have tested positive for COVID-19 within the last 10 days
- Have had close contact within the last 10 days with a known COVID-19 positive person
- Have had any of the following symptoms of COVID-19 within the last 10 days that is unexplained:
 - ♣ Fever
 - ♣ Cough
 - ♣ Shortness of breath
 - ♣ Chills
 - ♣ Repeated shaking with chills
 - ♣ Muscle pain
 - ♣ Headache
 - ♣ Sore throat
 - ♣ New loss of taste or smell

Faculty, staff, and students will not be permitted to return to campus until they have undergone testing for COVID-19 more than three days after their potential exposure to the virus, received results indicating that they are negative for COVID-19 infection, and provided documentation of such results to their supervisor or program chair. Students will be allowed to make up work during this time, and will not be penalized for missed class time.

Masking

All students, faculty, and staff must be masked to enter Cox College and remain masked while in the common areas building i.e. classrooms, student lounges, labs.

Student Discipline

Probation, Suspension, Dismissal

Cox College reserves the **right to place on probation, suspend or dismiss students** from the college whose conduct or performance is detrimental to the interests of the college or program-specific profession. **Probation may or may not precede dismissal.** Examples of behavior that would violate college standards **include but are not limited to** the following:

1. Acting in a manner which is disruptive to an educational or extra-curricular activity.
2. Intentionally damaging, destroying or defacing college property or property of any member of the college community.
3. Committing sexual offenses or harassment.
4. Harassing, exploiting or intimidating any member of the college community.
5. Using or threatening to use force in order to intentionally inflict bodily harm upon any person on the college premises.
6. Possessing, storing or using firearms, dangerous weapons, explosives or fireworks in any area of the college premises or on premises used by the college.
7. Making a false report of a fire or any report of false emergency in a college building or on premises related to college activities.
8. Stealing, assisting or attempting to steal college property or the property of any member of the college community.
9. Knowingly misrepresenting facts to any official of the college.
10. Breaching standards of confidentiality.
11. Purposely misleading others or misrepresenting themselves.
12. Distributing copyrighted materials without the owner's permission (music, games, videos, etc.) through print, illegal downloading, via web pages, e-mail or peer-to-peer distribution of intellectual property.
13. Inappropriate behavior or information verbally, electronically or on social media sites.
14. Violation of *Student Code of Conduct* or program-specific professional standards.

Academic Probation

1. A student is placed on academic probation when the semester GPA falls below 2.0 at the end of any semester.
2. Students may be on academic probation for no more than two semesters while enrolled at the college.
3. If a student is dismissed from the program, they must wait one calendar year before Re-applying.

Clinical Probation

The following are the steps for clinical probation:

1. Meeting with the student, course coordinator, and program chair.
2. Development of a plan of action to improve chances of clinical success.
3. Review of the attendance policy.
4. Point out that any clinical hours missed will be made up.

One make-up day will be scheduled during the last week of each semester. All missed clinical hours and/or activities should be completed during this timeframe. Inability to do so may result in the student being administratively withdrawn from the course by the program chair in collaboration with the Chief Nurse Administrator. Consequently, the student will be required to re-enroll in the course the following semester.

More than 15% of unexcused clinical absences will result in a failure of the clinical component of the course.

Disciplinary Probation

A student may be placed on disciplinary probation for:

1. Failure to meet remediation related to laboratory/clinical suspension.
2. Unsatisfactory laboratory/clinical performance (including but not limited to lack of preparation and irresponsible, unsafe, or unprofessional conduct).
3. Scholastic misconduct (including but not limited to plagiarism or dishonesty).
4. Non-academic misconduct in violation of published standards described in this handbook including those specifically addressed in the *Student Code of Conduct*, *Standards of Ethics* and the *Drug-Free Schools* policy, which includes sexual offenses or harassment.

Procedures for Disciplinary Probation

When a student is placed on disciplinary probation the student will be informed verbally and will receive a copy of the "Student Counseling Tracking Form." Steps for remediation and the length of the probationary period will be outlined on the form that will be signed by the appropriate individuals and the program chair/Chief Nurse Administrator. During the probationary period, the appropriate individuals may meet with the student regularly to evaluate progress toward meeting conditions of probation and these meetings will be recorded on the student conference record. The student has the right to have an advisor or liaison of their choice present at the meetings. It is the student's responsibility to work with the individuals involved to schedule these meetings.

At the end of the designated probationary period, appropriate individuals will review the student's progress and a decision made determining whether the student has met the steps of remediation. The student will be notified in writing of the decision. At this time, the student may be removed from probation, receive a failing grade in the course, or be dismissed from the program.

Suspension

A student may be suspended for:

1. Unsatisfactory laboratory/clinical performance including but not limited to lack of preparation and irresponsible, unsafe or unprofessional conduct; or
2. Non-academic misconduct in violation of published standards described in the handbook including those specifically addressed in the *Student Code of Conduct* and the *Drug-Free Schools* policy, which includes sexual offenses or harassment.

Dismissal

A student will be dismissed from the college for any of the following reasons:

1. Achievement of a grade of less than 75% in any repeated course within a college degree or certificate program.
2. Academic performance that would result in academic probation for more than two semesters.
3. Students dismissed from the nursing program are not eligible for re-admission to the program. Those students dismissed from the nursing program may reenter the nursing program through one of the following bridge programs (LPN to ASN, ASMA to ASN, ASMA to BSN, LPN to BSN or RN to BSN). Questions regarding this policy may be addressed in writing to the program's nursing chair.

Disciplinary Dismissal:

In addition, a student may be dismissed from the college for any of the following reasons:

1. Failure to conduct oneself in a responsible, safe, and professional manner as described in this *Student Handbook*
2. Academic misconduct, including, but not limited to, plagiarism or dishonesty
3. Failure to follow the *Code of Conduct* as outlined in the Student Handbook and/or program-specific professional standards
4. Failure to meet disciplinary probation remediation requirements
5. Use of or being under the influence of alcohol and/or illegal drugs in the classroom, laboratory or clinical setting
6. Sexual offenses or harassment
7. Conviction of a felony

The student has the right to due process in any situation of discipline, probation or dismissal through the *Complaint Resolution Procedure* (Grievance) identified in the college catalog. In the event that disciplinary actions need to be taken, the following procedure may be followed:



Student Counseling Procedure

Overview

The student disciplinary process includes three stages: 1) Written Warning, 2) Probation, and 3) Dismissal. For clinical matters an additional stage, suspension, may be included prior to dismissal.

- All disciplinary actions are initiated by the faculty and moderated through the department chair.
- All actions include a counselling session with the student.
- All disciplinary actions are initiated by the faculty with the submission of the *Student Incident Report* form. The report is provided to the department chair who then initiates the appropriate disciplinary action.

The action types and procedures explained here are designed to replace all existing disciplinary procedures at the college.

Action Type	Procedure
<p>Written Warning</p> <ul style="list-style-type: none"> • Definition: <i>First step in the disciplinary process when the student is notified in writing of inappropriate behavior.</i> • Student behaviors/actions resulting in written warning are defined in the student handbook. • A written warning is issued by the department chair (following an incident report from the faculty) 	<ul style="list-style-type: none"> • <i>Student Incident Report</i> form is completed by the faculty and submitted to the department chair. • A written warning (“Student Counseling Form”) is completed by the department chair and signed by the faculty and chair. The student signs the form during a counselling session with the student. • The warning form is given to the student and a copy is housed with the department chair.
<p>Probation</p> <ul style="list-style-type: none"> • Definition: <i>A permanent or temporary condition during which any new offense result in suspension or dismissal from the program.</i> • Student behaviors/actions resulting in probation are defined in the student handbook. • A student is placed on probation by the department chair (following an incident report from the faculty) 	<ul style="list-style-type: none"> • <i>Student Incident Report</i> form is completed by the faculty and submitted to the department chair. • Probation is initiated by the department chair. The counselling form is signed by the faculty, chair, and dean. The student signs the form during a counselling session with the student. • The counselling form explaining the terms of probation (correction plan, time frame, etc.) is given to the student

	<p>and a copy is housed with the department chair.</p>
<p>Suspension (Clinical)</p> <ul style="list-style-type: none"> • Definition: <i>Immediate administrative withdrawal from all clinical courses. Student may enroll in clinical courses only after meeting certain conditions defined by department.</i> • Student behaviors/actions resulting in suspension are defined in the student handbook. • A student is placed on suspension by the department chair (following an incident report from the faculty) • Consequences: Student is withdrawn from clinical courses without refund. Students returning to a clinical course after suspension are placed in a probationary status. Any new offense results in immediate dismissal from the program. 	<ul style="list-style-type: none"> • <i>Student Incident Report</i> form is completed by the faculty and submitted to the department chair. • Suspension is initiated by the department chair. The counselling form is signed by the faculty, chair, and dean. The student signs the form during a counselling session with the student. • The counselling form explaining the terms of suspension (correction plan, time frame, etc.) is given to the student and a copy is housed with the department chair.
<p>Dismissal</p> <ul style="list-style-type: none"> • Definition: <i>Permanent removal from the program</i> • Student behaviors/actions resulting in dismissal are defined in the student handbook. • A student is dismissed by the VPAA (following an incident report from the faculty and recommendation from the department chair) • Terms of dismissal: <i>Student cannot re-apply to the program or any other program at the college.</i> 	<ul style="list-style-type: none"> • <i>Student Incident Report</i> form is completed by the faculty and submitted to the department chair. • Dismissal is initiated by the department chair. The counselling form is signed by the faculty, chair, dean, and VPAA. The student signs the form during a counselling session with the student. • The counselling form explaining the terms of dismissal is given to the student and a copy is housed with the department chair, dean, and VPAA.



Student Incident Reporting Form

This form is to be completed by the faculty and submitted to the appropriate department chair. This form should be completed for:

- Violations of the student code of conduct
- Violations of expectations defined in the Student Handbook
- Any action – academic, clinical, or professional – the faculty believes should initiate the student disciplinary process

Student: _____	Faculty: _____
Course: _____	Date of Incident: _____
Description of Incident:	

Recommended Course of Action:	
Written Warning <input type="checkbox"/> Probation <input type="checkbox"/> Suspension <input type="checkbox"/> Dismissal <input type="checkbox"/>	

Faculty Signature: _____

Submitted To (Chair): _____ Date: _____

Student Counseling Tracking Form

Action Type
Verbal Warning
Name _____ Date of Conference _____ Date of Infraction _____ Description of Incident (attach any pertinent documentation to back of form) _____ _____ Correction Plan: _____ _____ Signatures: Student _____ Faculty _____ Chair _____
Written Warning
Name _____ Date of Conference _____ Date of Infraction _____ Description of Incident (attach any pertinent documentation to back of form) _____ _____ Correction Plan: _____ _____ Signatures: Student _____ Faculty _____ Chair _____
Probation
Date of Conference _____ Date of Infraction _____ Description of Incident (attach any pertinent documentation to back of form) _____ _____ Correction Plan _____ _____ _____ Signatures: Student _____ Faculty _____ Chair _____ VP Nursing _____

Correction Plan Met? Date met _____ Date of Conference _____
 Yes-no further action needed.
 No-proceed to dismissal section.
Attach any pertinent documentation to back of form
Signatures:
Student _____ Faculty _____
Chair _____ VP Nursing _____

Suspension

Date of Conference _____ Date of Infraction _____
Description of Incident (attach any pertinent documentation to back of form) _____

Correction Plan _____

Signatures:
Student _____ Faculty _____
Chair _____ VP Nursing _____

Correction Plan Met? Date met _____ Date of Conference _____
 Yes-no further action needed.
 No-proceed to dismissal section.
Attach any pertinent documentation to back of form
Signatures:
Student _____ Faculty _____
Chair _____ VP Nursing _____

Dismissal

Date of Conference _____ Date of Infraction _____
Description of Incident (attach any pertinent documentation to back of form) _____

Signatures:
Student _____ Faculty _____
Chair _____ VP _____
Nursing _____
VPAA _____

Clinical

Clinical experiences are carefully planned to assist students in integrating theoretical content with clinical practice. The experiences provide a means for supervised practice of selected skills. This “hands on” experience is essential for evaluation. Students are required to make up clinical absences. Faculty will designate the clinical make up experience. More than one clinical absence may necessitate a course failure. The outcome of absences will be decided by the faculty teaching the course. See individual course syllabus for further details.

In the event of illness or an emergency, it is the student’s responsibility to notify the appropriate faculty a minimum of 30 minutes, preferably one hour prior to the time the experience is to begin. Notification may be different for specific courses; this will be listed in the syllabus.

Arriving late disrupts the clinical experience for the student and can affect client care. Therefore, absence, tardiness or leaving early can result in unsuccessful completion of course objectives. Punctuality is essential in the nursing profession and a component of professionalism. Students are expected to arrive 10 minutes prior to scheduled clinical time. Arriving late 10 minutes late or more is a tardy. A tardy will be considered one hour or more of clinical absence.

Any absences may be considered a clinical failure. Absences will be subject to review by the nursing faculty for the purpose of counseling. Any nursing student accumulating more than 15% of absences for the clinical component of the course will be placed on clinical success plan by the nursing faculty.

Inclement Weather

In the event the College is closed due to inclement weather, news media will be notified. Students will also be notified via Student Reach text messages and/or phone messages. If the College is not closed, judgment should be exercised in regard to safe travel however failure to attend class/clinical will result in an absence and will follow the absence guidelines. In the event of faculty illness or emergency, every effort will be made to notify and alert students of alternate plans.

Confidentiality Policy

See the *NSNA Code of Academic and Clinical Conduct* and *Nursing Student Code of Conduct* policies in this handbook for further details.

Dosage Calculation

I. General Rule for Rounding

- A. When rounding, numbers that end in five (5) and above up, round **UP**
- B. When rounding, numbers that end in four (4) and below, round **DOWN**.
- C. Do not end with zero (trailing zero) in the final answer. However, leave whole numbers as a whole number.

Correct	Incorrect
17.4 mL	17.40 mL
14 mL	14.0 mL

- D. Always place a zero before a decimal point if the number is less than one. (example 0.23)

Correct	Incorrect
0.28 mL	.28 ml

- E. D. All answers must be properly labeled (or will be counted wrong.)

Correct	Incorrect
4.62 mcg/kg/min	4.62
0.17 mL	0.17
7.5 mg	7.5
80 mL/hr	80
20 drops/min	20

II Weights (pounds, kilograms, grams, milligrams, etc.)

- A. All weights should be carried to the thousandth and rounded to the hundredth.

Example:

Ending in 4 or less: 77.272 kg = 77.27 kg

Ending in 5 or more: 1.885 mg = 1.89 mg

- B. Pounds and ounces should be carried to nearest whole ounce.

Example:

8 lbs. 12.44 ounces = 8 lbs. 12 ounces

8 lbs. 12.65 ounces = 8 lbs. 13 ounces

III. Capsules and Tablets

- A. Round tablets/capsules to the nearest whole or half tablet (if scored). The difference should not exceed 10% of the total amount ordered.

Example: 1.9 capsules = 2 capsules

Example: 1.5 scored tablets = 1 ½ tablets

IV. Liquid Medications by Mouth

- A. If unable to accurately measure dose on available medication cup, use a syringe to obtain accurate measurement of dose. Do not use household measuring spoons or cups.

- B. Milliliters:

- a. Volumes greater than 1 mL: -Carry to the hundredths place and rounded to the nearest tenth.

Example: 1.25 mL = 1.3 mL

- b. Volumes less than 1 mL: - Carry to the thousandths place, and rounded to the nearest hundredth. A Tuberculin syringe (TB) is appropriate for this measurement

Example: 0.969 = 0.97 mL

0.963 = 0.96 mL

VI. IV Rates and/or Calculation

- A. IV Fluid Drip Rates - Calculate drip rates to the tenths place and round off to the nearest whole number

Example: 15.4 = 15 drops per minute

15.5 = 16 drops per minute

- B. IV Pump Rates – Calculate to the hundredths place and round to the tenths place. The IV pumps can be set at a decimal.

Example: 15.44 = 15.4 mL/hr

15.45 = 15.5 mL/hr

VII. Equivalents

1 kilogram (kg)	=	1000 grams (gm)
1 gram (g)	=	1000 milligrams (mg)
1 milligram (mg)	=	1000 micrograms (mcg)
1 Liter (L)	=	1000 milliliters (mL)
1 milliliter (mL)	=	1 cubic centimeter (cc)
30 mL	=	1 ounce (oz)
65 mg	=	1 grain (gr)
2.2 pounds (lb)	=	1 kilogram (kg)

Standardized Testing

Cox College has partnered with Assessment Technologies Institute (ATI) to assist students with acquiring critical reasoning skills and building nursing content knowledge essential for nursing practice and NCLEX-RN success.

WHAT IS ATI?

Cox College has partnered with Assessment Technologies Institute (ATI) to assist students with acquiring critical reasoning skills and building nursing content knowledge essential for nursing practice and NCLEX-RN success.

Used as a comprehensive program, ATI tools can help students prepare more efficiently, as well as increase confidence and familiarity with content. Students in the prelicensure undergraduate nursing programs will be required to take ATI competency tests pertaining to each of the major courses/content areas throughout the curriculum. The ATI tests will be given toward the end of each nursing course. The comprehensive ATI review program offers the following to students:

- An assessment-driven comprehensive review program designed to enhance student NCLEX® success.
- Multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.
- ATI Orientation resources, such as the ATI Plan that can be accessed from “My ATI” tab. It is highly recommended that you spend time navigating through

these orientation materials.

Review Modules/EBooks

ATI provides Review Modules in eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement course work and reading. Instructors may assign chapter reading either during a given course and/or as part of active learning/remediation following assessments.

Tutorials

ATI offers unique Tutorials that are designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions. Nurse Logic is an excellent way to learn the basics of how nurses think and make decisions. Learning System offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide are embedded throughout the Learning System tests to help students gain an understanding of the content.

Focused Reviews/Active Learning/Remediation

Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood (as determined on an ATI assessment). Remediation tools are intended to help the student review important information to be successful in courses and on the NCLEX®. The student's individual assessment report will contain a listing of the Topics to Review. It is highly recommended to remediate using the Focused Review after completion of any practice/proctored tests, which contains links to ATI eBooks, media clips, and active learning templates.

Your instructor has online access to detailed information about the timing and duration of time spent in assessments, focused reviews, and tutorials by each student. Students will provide documentation that required ATI work was completed using the "My Transcript" feature under "My Results" of the ATI Student Home Page. Each course instructor will indicate in the syllabus how evidence of remediation is submitted. Proctored exams will be given no later than week 15 in order to allow time to remediate. All remediation must be completed by week 16. This remediation will assist students in preparing for course final exams by focusing on areas in which they are weak.

ATI Grading

ATI will count for 5% of your course grade. The points awarded are outside of the required exam average. The benchmark for both the Content Mastery Series and Comprehensive Predictor proficiency is Level 2.

Proficiency Indicators	
Level 3	Indicates student is very likely to exceed NECLX standards in this content area. Student demonstrates a higher than expected level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content. Demonstrates achievement of a level of competence needed for professional nursing practice in this content area that exceeds most expectations.
Level 2	Indicates student is fairly certain to meet NCLEX standards in this content area. Students demonstrates a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content. Demonstrates achievement of a satisfactory level of competence needed for professional nursing practice in this content area.
Level 1	Likely to just meet NCLEX standards in this content area. Demonstrates the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content. Demonstrates achievement of a minimum level of competence needed for professional nursing practice in this content area.
Level 0/below level 1	Student is likely to not meet NCLEX standards in this content area. Demonstrates minimum level of knowledge in this content area and does not demonstrate readiness for subsequent curricular content. Student does not meet the minimum level of competence needed for professional nursing practice in this content area.

CONTENT MASTERY SERIES GRADING RUBRIC

Using a combination of the CMS practice and proctored assessments to achieve 5% of the course grade. This sample assumes a course worth 100 points. Point values will be adjusted based on total number of course points to equal a total possible score of 5% of the course grade.

Activity				Points Possible	Points Awarded
CMS Practice Assessments					
Complete Practice Assessment A <i>including:</i> For each topic missed, complete an active learning template.				1	
Complete Practice Assessment B <i>including:</i> For each topic missed, complete an active learning template.				1	
CMS Standardized Proctored Assessment					
Level 3	Level 2	Level 1	Below Level 1		
3 points	2 points+ 1 point for remediation	1 point + 1 point for remediation	0 points + 1 point for remediation	3	
Focused Review is recommended.	Focused Review is recommended.	Focused Review is recommended.	Focused Review is recommended.		
No remediation required.	For each topic missed, complete an active learning template.	For each topic missed, complete an active learning template.	For each topic missed, complete an active learning template.		
Proctored Assessment Retake					
Not required. No additional points allowed.	Not required. No additional points allowed.	Required. 1 additional point if Level 2 or 3 achieved.	Required. 1 additional point if Level 2 or 3 achieved.		
Total Points				5	

COMPREHENSIVE PREDICTOR GRADING RUBRIC

Using a combination of the practice and proctored assessments to achieve 5% of the course grade. This sample assumes a course worth 100 points. Point values will be adjusted based on total number of course points to equal a total possible score of 5% of the course grade.

Activity				Points Possible	Points Awarded
Comprehensive Predictor Practice Assessments					
Complete Practice Assessment A <i>including:</i> For each topic missed, complete an active learning template.				1	
Complete Practice Assessment B <i>including:</i> For each topic missed, complete an active learning template.				1	
Comprehensive Predictor Standardized Proctored Assessment					
95% or above passing predictability	90-94% passing predictability	85-89% passing predictability	84% or below passing predictability		
3 points	2 points+1 point remediation	1 point + 1 points remediation	0 points + 1 points remediation	3	
Focused Review is recommended.	Focused Review is recommended.	Focused Review is recommended.	Focused Review is recommended.		
No remediation required.	For each topic missed, complete an active learning template.	For each topic missed, complete an active learning template.	For each topic missed, complete an active learning template.		
Proctored Assessment Retake					
Not required. No additional points allowed.	Not required. No additional points allowed.	Required. 1 additional point if Level 2 or 3 achieved.	Required. 1 additional point if Level 2 or 3 achieved.		
Total Points				5	

TESTING SCHEDULE

Course	ATI Assessment
ASN	
NURS 105	Fundamentals
NURS 106	Maternal Newborn Nursing Care of Children
NURS 206	Mental Health Pharmacology
NURS 208	Adult Medical Surgical Comprehensive Predictor
BSN	
NRSI/NRSA/NRSC 325	Assessment A & B Fundamentals
NRSI/NRSA/NRSC 212	Mental Health
NRSI/NRSA/NRSC 304	Maternal Newborn
NRSI/NRSA/NRSC 305	Nursing Care of Children
NRSI/NRSA/NRSC 335	Adult Medical Surgical
NRSI/NRSA/NRSC 402	Leadership
NRSI/NRSA/NRSC 404	Community Health
NRSI/NRSA/NRSC 410	Comprehensive Predictor/Virtual ATI
NRSI/NRSA/NRSC 410	Pharmacology

Undergraduate Nursing Testing Policy

Undergraduate Nursing Testing Policy

Purpose:

Provide guidelines for fair and consistent testing throughout the Undergraduate Nursing Programs.

Expectations for Testing in the On-Campus Environment:

- The college uniform is to be worn during testing. Uniform standards will be identical to those upheld in the clinical setting.
- Examinees are advised to use the restroom prior to the start of the assessment.
- Food and drink, unless predetermined as medically necessary, are not allowed in the exam room.
- Students will place all belongings, excluding laptops used for testing, at the designated location.
- Students are required to bring a laptop to the exam and adequately charged or plugged in prior to the start of the exam.
- No personal electronic devices, other than a laptop, of any kind are allowed during testing. This includes, but is not limited to cell phones and smart watches. Cell phones and any other sound generating or vibrating devices must be silenced and set to not vibrate during the exam. This includes personal laptops used to take the exam. If sound is required for the exam, you will be instructed to bring ear buds or headphones
- Access to personal belongings during the exam is not permitted.
- The calculator provided within the testing program, or an approved, 4 function calculator may be utilized in taking the exams. Failure to bring an approved calculator forfeits the right to use a calculator.
- At the beginning of each exam, students will produce a photo ID for proof of identification.
- Two pieces of scratch paper will be provided to examinee or examinee may use white board, white board marker, and eraser.
- Students who enter the classroom after the start of the exam will not be granted extra time to complete their exam.
- Exam time will be calculated at 1.5 minutes per question. Time limits will be strictly observed.
- Examinees may not leave the testing room without proctor approval. No time will be added if you leave the room.
- Scratch paper must be turned in prior to leaving exam room. White boards must be wiped clean.
- The time and manner for reviewing exams will be decided by the course faculty.
- Any concerns regarding points awarded on content exam must be resolved prior to the next scheduled exam and prior to the end of the semester for the final exam.
- All the above rules apply to test review.

Expectations Regarding Testing in the Personal Environment in Canvas

When testing in the personal environment, such as at home, in Canvas:

- The college uniform is to be worn during testing. Uniform standards will be identical to those upheld in the clinical setting.
- The exams will occur online and may be scheduled outside of class time. The same standards and requirements regarding testing behavior and procedures will be followed as for seated exams.
- Absolutely no collaboration on exams will be allowed. Appropriate testing environment is expected. No other individuals should be present. Canvas gathers information about IP addresses, times of individual questions, time taken to answer questions, and more making collaboration detectable.
- Integrity in all matters, including exams, is core to our profession. Refer to the Nurse's Code of Ethics regarding expectations:
<http://nursingworld.org/DocumentVault/Ethics-1/Code-of-Ethics-for-Nurses.html>
- Exams will be administered through the Respondus Monitor. A detachable web cam with microphone is recommended. If camera and microphone are built in, a mirror must be used to visualize the front of the computer screen and keyboard.
- No browsing or use of the computer for anything other than the exam is allowed during the exam.
- Students are not allowed to decrease volume or mute sound during the exam.
- You will need a quiet and uninterrupted space to complete your exam. Limit ambient background noise such as TV's, radio, windows down in car, people talking, etc. If you are interrupted, explain the interruption to the camera and email faculty to explain the situation at the conclusion of the exam.
- No cell phones, additional computers, laptops or tablets can be in the testing area.
- All calculators used will be available within Respondus.
- Students will be required to show your ID to the camera as part of the exam set up.
- The testing area must be clear and a 360 degree view of the testing area, floor around test area and walls behind computer required. Any permitted items, such as white board, markers, eraser, etc. will be displayed clearly in the pre-test video. Specific instructions for this and other requirements for testing will be discussed in class.
- Erase the white board at the completion of the exam and show both sides to the camera.
- You will not see the answers and rationales after the exam. General review of exam content may be customized to the course format.
- Failure to comply with the Testing in the Personal Environment (online testing environment) policy may result in a 15% deduction from the total possible points of the exam/quiz.

Missed Exams

All exams must be made up within 24 hours of the scheduled exam time unless extreme circumstances warrant an exception. Students will be responsible for making arrangements with course coordinator to take missed exams. If an exam is missed, students will have 10% of their grade deducted unless the Program Chair approves appropriate documentation. This could include physician excuses for extreme illness, sick children, etc. If approved by the Chair, the 10% will not be deducted. If exam is not taken within 24 hours, the student may receive a zero grade on the exam.

Test Grade Notification

Test grades will be available by the next class period. Grades are to be obtained by the student in person, via online platform in the Gradebook, or, with your permission, via communication from the LMS by text or email. There will be NO grades given per phone or e-mail by faculty.

Exam Bonus Points

- Students may be given the opportunity to improve their score of up to 3-6% of total exam points.

Test Blue Print Format
Course Number, Name, Semester
Exam Blue Print # (enter number)

Total Points: _____

Dosage Calculation: _____

Time Frame: _____

Alternative Format: _____

Content	Number		
<i>Enter Content</i>	<i>Enter Number</i>		
Cognitive Level	Number	QSEN	Number
Remembering/Knowledge		Patient Centered Care	
Understanding/Comprehension		Teamwork and Collaboration	
Applying/Application		Evidence Based Practice	
Analyzing/Analysis		Quality Improvement	
Evaluating/Evaluation		Safety	
Creating/Synthesis		Informatics	

NCLEX Test Plan Domains	Exam Percent	NCLEX Percent
Safe and Effective Care Environment		—
Management of Care	<i>Enter percent</i>	17-23%
Safety and Infection Control		9-15%
Health Promotion and Maintenance		6-12%
Psychosocial Integrity		6-12%
Physiological Integrity		-----
Basic Care and Comfort		6-12%
Pharmacological and Parental Therapies		12-18%
Reduction of Risk Potential		9-15%
Physiological Adaptation		11-17%

Degree Requirements

Application for Graduation

An *Application for Degree/Certificate* form is to be completed the semester before the student plans to graduate. The applicant should be sure to write his/her complete, formal name on the form, exactly how he/she wants it to be written on the diploma. At the time of registering for final semester classes, students complete this form with the advisor and obtain the advisor's signature. The completed form is to be returned to the Registration office when registering for the last semester. Refer to the academic calendar.

If students do not complete the final course requirements, a new *Application for Degree/Certificate* form will need to be submitted.

Graduation Requirements

Every candidate for a degree is responsible for meeting all of the requirements for graduation. The responsibility for understanding and meeting graduation requirements rests entirely with the student.

The *Associate of Science in Nursing* degree requires:

1. Satisfactory completion (75% or better) of all specified courses in the curriculum plan
2. Completion of second year nursing courses with a minimum of 20 credit hours granted by Cox College
3. Minimum cumulative GPA of 2.0 on a 4.0 scale on completion of required courses for ASN program
4. Completion of all nursing courses within five years of enrollment in the ASN program

The *Bachelor of Science in Nursing* degree requires:

1. Satisfactory completion (75% or better) of all specified courses in the curriculum plan
2. Completion of the last two semesters of clinical nursing courses as outlined on the proposed plan of study with a minimum of 30 hours of credit granted by Cox College (pre-licensure students).
3. Minimum cumulative GPA 2.0 on a 4.0 scale on completion of required courses for the BSN program
4. Completion of all nursing courses within five years of enrollment in the BSN program

Letter of Reference

A student will grant their written permission to allow faculty and administrators of Cox College to write letters of reference for them by completing the *Request for a Letter of Reference* form. The form and a copy of the reference letter will be placed in the student's permanent education record.

Licensure Examination For Registered Nurses

The *National Council Licensure Examination for Registered Nurses* (NCLEX RN®) is the licensing examination for graduates of all nursing schools that provide educational programs preparing registered professional nurses. Applications to take the licensing examination are distributed and verified by the undergraduate nursing program chairs or designee. The application process consists of two parts; the Missouri State Board of Nursing Licensure by Examination application and the NCLEX Candidate Bulletin. Part of the application process consists of being fingerprinted. Information regarding approved locations and necessary completions dates will be sent/given to each student prior to the beginning of their last semester of course work. Students may obtain information about licensure in states other than Missouri by contacting boards of nursing in the individual state. Fees are charged by Pearson Vue (exam administrator) and the board of nursing in the state where the individual wishes to be licensed.

Licensure Requirements

The Missouri State Board of Nursing requires an applicant for a license to practice as a registered nurse to be of good moral character. The licensure application, which is completed prior to graduation, contains the statement “A person who has ever been convicted of any crime other than a minor traffic violation should report this.” During new nursing student orientation, students will be given a form titled “Knowledge of State Statutes” to complete. If the student marks yes on any of the statements, he/she will need to schedule an appointment with the appropriate undergraduate nursing program chair for a confidential discussion of the situation. **Completion of a nursing program does not guarantee eligibility to sit for the licensure examination.**

State of Missouri, Nursing Practice Act

The State of Missouri Nursing Practice Act (2012) governs licensure and the practice of professional nursing in Missouri. The Act, Missouri Statutes Chapter 335, is enforced by the Missouri State Board of Nursing. Section 335.066 describes grounds for denial, revocation or suspension of a license, and states:

335.066. Denial, revocation, or suspension of license, grounds for, civil immunity for providing information — complaint procedures.

1. The board may refuse to issue or reinstate any certificate of registration or authority, permit or license required pursuant to this chapter* for one or any combination of causes stated in subsection 2 of this section or the board may, as a condition to issuing or reinstating any such permit or license, require a person to submit himself or herself for identification, intervention, treatment, or monitoring by the intervention program and alternative program as provided in section [335.067](#). The board shall notify the applicant in

writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by [chapter 621](#).

2. The board may cause a complaint to be filed with the administrative hearing commission as provided by [chapter 621](#) against any holder of any certificate of registration or authority, permit or license required by sections [335.011 to 335.096](#) or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:

(1) Use or unlawful possession of any controlled substance, as defined in [chapter 195](#), by the federal government, or by the department of health and senior services by regulation, regardless of impairment, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by sections [335.011 to 335.096](#). A blood alcohol content of .08 shall create a presumption of impairment;

(2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution pursuant to the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to sections [335.011 to 335.096](#), for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to sections [335.011 to 335.096](#) or in obtaining permission to take any examination given or required pursuant to sections [335.011 to 335.096](#);

(4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;

(5) Incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by this chapter*. For the purposes of this subdivision, "**repeated negligence**" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;

(6) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:

(a) Willfully and continually overcharging or overtreating patients; or charging for visits which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;

(b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;

- (c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests, or nursing services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;
- (e) Performing nursing services beyond the authorized scope of practice for which the individual is licensed in this state;
- (f) Exercising influence within a nurse-patient relationship for purposes of engaging a patient in sexual activity;
- (g) Being listed on any state or federal sexual offender registry;
- (h) Failure of any applicant or licensee to cooperate with the board during any investigation;
- (i) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;
- (j) Failure to timely pay license renewal fees specified in this chapter;
- (k) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;
- (l) Failing to inform the board of the nurse's current residence within thirty days of changing residence;
- (m) Any other conduct that is unethical or unprofessional involving a minor;
- (n) A departure from or failure to conform to nursing standards;
- (o) Failure to establish, maintain, or communicate professional boundaries with the patient. A nurse may provide health care services to a person with whom the nurse has a personal relationship as long as the nurse otherwise meets the standards of the profession;
- (p) Violating the confidentiality or privacy rights of the patient, resident, or client;
- (q) Failing to assess, accurately document, or report the status of a patient, resident, or client, or falsely assessing, documenting, or reporting the status of a patient, resident, or client;
- (r) Intentionally or negligently causing physical or emotional harm to a patient, resident, or client;

(s) Failing to furnish appropriate details of a patient's, client's, or resident's nursing needs to succeeding nurses legally qualified to provide continuing nursing services to a patient, client, or resident;

(7) Violation of, or assisting or enabling any person to violate, any provision of sections [335.011 to 335.096](#), or of any lawful rule or regulation adopted pursuant to sections [335.011 to 335.096](#);

(8) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;

(9) Disciplinary action against the holder of a license or other right to practice any profession regulated by sections [335.011 to 335.096](#) granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;

(10) A person is finally adjudged insane or incompetent by a court of competent jurisdiction;

(11) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by sections [335.011 to 335.096](#) who is not registered and currently eligible to practice pursuant to sections [335.011 to 335.096](#);

(12) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;

(13) Violation of any professional trust or confidence;

(14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;

(15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;

(16) Placement on an employee disqualification list or other related restriction or finding pertaining to employment within a health-related profession issued by any state or federal government or agency following final disposition by such state or federal government or agency;

(17) Failure to successfully complete the intervention or alternative program for substance use disorder;

(18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of [chapter 208](#) or [chapter 630](#), or for payment from Title XVIII or Title XIX of the federal Medicare program;

(19) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;

(20) A pattern of personal use or consumption of any controlled substance or any substance which requires a prescription unless it is prescribed, dispensed, or administered by a provider who is authorized by law to do so or a pattern of abuse of any prescription medication;

(21) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section [302.525](#);

(22) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement, or licensee's professional health program;

(23) Failure to submit to a drug or alcohol screening when requested by an employer or by the board. Failure to submit to a drug or alcohol screening shall create the presumption that the test would have been positive for a drug for which the individual did not have a prescription in a drug screening or positive for alcohol in an alcohol screening;

(24) Adjudged by a court in need of a guardian or conservator, or both, obtaining a guardian or conservator, or both, and who has not been restored to capacity;

(25) Diversion or attempting to divert any medication, controlled substance, or medical supplies;

(26) Failure to answer, failure to disclose, or failure to fully provide all information requested on any application or renewal for a license. This includes disclosing all pleas of guilt or findings of guilt in a case where the imposition of sentence was suspended, whether or not the case is now confidential;

(27) Physical or mental illness, including but not limited to deterioration through the aging process or loss of motor skill, or disability that impairs the licensee's ability to practice the profession with reasonable judgment, skill, or safety. This does not include temporary illness which is expected to resolve within a short period of time;

(28) Any conduct that constitutes a serious danger to the health, safety, or welfare of a patient or the public.

3. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of [chapter 621](#). Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a

period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate, or permit.

4. For any hearing before the full board, the board shall cause the notice of the hearing to be served upon such licensee in person or by certified mail to the licensee at the licensee's last known address. If service cannot be accomplished in person or by certified mail, notice by publication as described in subsection 3 of section [506.160](#) shall be allowed; any representative of the board is authorized to act as a court or judge would in that section; any employee of the board is authorized to act as a clerk would in that section.

5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the board after compliance with all the requirements of sections [335.011 to 335.096](#) relative to the licensing of an applicant for the first time.

6. The board may notify the proper licensing authority of any other state concerning the final disciplinary action determined by the board on a license in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.

7. Any person, organization, association or corporation who reports or provides information to the board of nursing pursuant to the provisions of sections [335.011 to 335.259](#)** and who does so in good faith shall not be subject to an action for civil damages as a result thereof.

8. The board may apply to the administrative hearing commission for an emergency suspension or restriction of a license for the following causes:

(1) Engaging in sexual conduct as defined in section [566.010](#), with a patient who is not the licensee's spouse, regardless of whether the patient consented;

(2) Engaging in sexual misconduct with a minor or person the licensee believes to be a minor. **"Sexual misconduct"** means any conduct of a sexual nature which would be illegal under state or federal law;

(3) Possession of a controlled substance in violation of [chapter 195](#) or any state or federal law, rule, or regulation, excluding record-keeping violations;

(4) Use of a controlled substance without a valid prescription;

(5) The licensee is adjudicated incapacitated or disabled by a court of competent jurisdiction;

(6) Habitual intoxication or dependence upon alcohol or controlled substances or failure to comply with a treatment or aftercare program entered into pursuant to a board order, settlement agreement, or as part of the licensee's professional health program;

(7) A report from a board-approved facility or a professional health program stating the licensee is not fit to practice. For purposes of this section, a licensee is deemed to have waived all objections to the admissibility of testimony from the provider of the examination and admissibility of the examination reports. The licensee shall sign all necessary releases for the board to obtain and use the examination during a hearing; or

(8) Any conduct for which the board may discipline that constitutes a serious danger to the health, safety, or welfare of a patient or the public.

9. The board shall submit existing affidavits and existing certified court records together with a complaint alleging the facts in support of the board's request for an emergency suspension or restriction to the administrative hearing commission and shall supply the administrative hearing commission with the last home or business addresses on file with the board for the licensee. Within one business day of the filing of the complaint, the administrative hearing commission shall return a service packet to the board. The service packet shall include the board's complaint and any affidavits or records the board intends to rely on that have been filed with the administrative hearing commission. The service packet may contain other information in the discretion of the administrative hearing commission. Within twenty-four hours of receiving the packet, the board shall either personally serve the licensee or leave a copy of the service packet at all of the licensee's current addresses on file with the board. Prior to the hearing, the licensee may file affidavits and certified court records for consideration by the administrative hearing commission.

10. Within five days of the board's filing of the complaint, the administrative hearing commission shall review the information submitted by the board and the licensee and shall determine based on that information if probable cause exists pursuant to subsection 8 of this section and shall issue its findings of fact and conclusions of law. If the administrative hearing commission finds that there is probable cause, the administrative hearing commission shall enter the order requested by the board. The order shall be effective upon personal service or by leaving a copy at all of the licensee's current addresses on file with the board.

11. (1) The administrative hearing commission shall hold a hearing within forty-five days of the board's filing of the complaint to determine if cause for discipline exists. The administrative hearing commission may grant a request for a continuance, but shall in any event hold the hearing within one hundred twenty days of the board's initial filing. The board shall be granted leave to amend its complaint if it is more than thirty days prior to the hearing. If less than thirty days, the board may be granted leave to amend if public safety requires.

(2) If no cause for discipline exists, the administrative hearing commission shall issue findings of fact, conclusions of law, and an order terminating the emergency suspension or restriction.

(3) If cause for discipline exists, the administrative hearing commission shall issue findings of fact and conclusions of law and order the emergency suspension or restriction to remain in full force and effect pending a disciplinary hearing before the board. The board

shall hold a hearing following the certification of the record by the administrative hearing commission and may impose any discipline otherwise authorized by state law.

12. Any action under this section shall be in addition to and not in lieu of any discipline otherwise in the board's power to impose and may be brought concurrently with other actions.

13. If the administrative hearing commission does not find probable cause and does not grant the emergency suspension or restriction, the board shall remove all reference to such emergency suspension or restriction from its public records. Records relating to the suspension or restriction shall be maintained in the board's files. The board or licensee may use such records in the course of any litigation to which they are both parties. Additionally, such records may be released upon a specific, written request of the licensee.

14. If the administrative hearing commission grants temporary authority to the board to restrict or suspend the nurse's license, such temporary authority of the board shall become final authority if there is no request by the nurse for a full hearing within thirty days of the preliminary hearing. The administrative hearing commission shall, if requested by the nurse named in the complaint, set a date to hold a full hearing under the provisions of [chapter 621](#) regarding the activities alleged in the initial complaint filed by the board.

15. If the administrative hearing commission refuses to grant temporary authority to the board or restrict or suspend the nurse's license under subsection 8 of this section, such dismissal shall not bar the board from initiating a subsequent disciplinary action on the same grounds.

16. (1) The board may initiate a hearing before the board for discipline of any licensee's license or certificate upon receipt of one of the following:

(a) Certified court records of a finding of guilt or plea of guilty or nolo contendere in a criminal prosecution under the laws of any state or of the United States for any offense involving the qualifications, functions, or duties of any profession licensed or regulated under this chapter, for any offense involving fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(b) Evidence of final disciplinary action against the licensee's license, certification, or registration issued by any other state, by any other agency or entity of this state or any other state, or the United States or its territories, or any other country;

(c) Evidence of certified court records finding the licensee has been judged incapacitated or disabled under Missouri law or under the laws of any other state or of the United States or its territories.

(2) The board shall provide the licensee not less than ten days' notice of any hearing held pursuant to [chapter 536](#).

(3) Upon a finding that cause exists to discipline a licensee's license, the board may impose any discipline otherwise available.

(L. 1975 S.B. 108 § 12, A.L. 1981 S.B. 16, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2013 H.B. 315, A.L. 2018 H.B. 1719)

*Words "[chapter 335](#)" appear in original rolls.

**Section [335.259](#) was repealed by S.B. 52, 1993.