

Central New Mexico Community College
School of Health, Wellness, & Public Safety

2014-2015 NURSING STUDENT HANDBOOK

Last Updated August, 2014



FOR THE ASSOCIATE OF APPLIED
SCIENCE IN NURSING PROGRAM

HANDBOOK AND ELECTRONIC SIGNATURES	4
STUDENT RESPONSIBILITY REGARDING THE CNM HANDBOOK	4
CNM SCHOOL OF HEALTH, WELLNESS AND PUBLIC SAFETY CONFIDENTIALITY AGREEMENT.....	4
CLINICAL CONTRACT STATEMENTS CONCERNING STUDENTS	5
ABOUT THE PROGRAM	6
NEW MEXICO NURSE PRACTICE ACT: CLINICAL PRACTICE OF NURSING STUDENTS	6
ACCREDITATION	6
AASN NURSING PROGRAM	7
PHILOSOPHY.....	7
ORGANIZATIONAL FRAMEWORK.....	9
ORGANIZATIONAL FRAMEWORK DIAGRAM.....	10
NURSING STUDENT CODE OF CONDUCT.....	10
AMERICAN NURSES ASSOCIATION CODE OF ETHICS FOR NURSES	11
NATIONAL STUDENT NURSES' ASSOCIATION (SNA)	11
SNA CODE OF PROFESSIONAL CONDUCT	12
PROGRAM EXPECTATIONS.....	12
EXIT COMPETENCIES	13
LPN MOBILITY PROGRAM	13
INFORMATION FOR TRANSFER OF NURSING CREDIT.....	13
DURATION OF NURS COURSE CREDIT.....	14
CLINICAL PRECEPTOR AND INSTRUCTOR APPROVAL OF CARE.....	14
UNIFORMS.....	14
UNIFORM/DRESS CODE.....	14
DRESS CODE WHEN UNIFORMS ARE NOT ALLOWED.....	16
GRADING	17
PASSING GRADE FOR NURS CLINICAL/DIDACTIC COURSES.....	17
GRADING AND EVALUATION	17
CLINICAL CALCULATIONS TEST (CCT)	19
PASSING GRADE FOR NURS 1080	20
DOSAGE CALCULATIONS (NURS 1007)	20
RESOURCES.....	21
ACHIEVEMENT COACH.....	21
COMPUTER LABS, LIBRARIES, AND TUTORING SERVICES	21
CLASSROOM AND CLINICAL	22
CLASSROOM AND CLINICAL PRIVACY	22
CLASSROOM ATTENDANCE	22
CLINICAL EVALUATION.....	22
CLINICAL ATTENDANCE.....	22
TARDINESS/LEAVING A CLINICAL SITE EARLY.....	23
ATTENDANCE SUSPENSION AND APPEAL	23
STUDENT REMOVAL FROM AN OFF-CAMPUS INSTRUCTIONAL SITE OR ON-CAMPUS LABORATORY	24
SUCCESS PLAN	26
APPEAL OF STUDENT REMOVAL FROM AN OFF-CAMPUS INSTRUCTIONAL SITE OR ON-CAMPUS LABORATORY	27
COURSE PROGRESSION.....	27
INCOMPLETE GRADE ASSIGNMENT AND REMOVAL (CNM ACADEMIC POLICIES).....	27
WITHDRAWALS AND FAILURES DEFINED	28

CNM NURSING COURSE FAILURE AND WITHDRAWAL	28
AUDITING NURSING CLASSES	28
RE-ENTRY INTO THE REQUIRED NURS COURSE	28
THE APPEAL PROCESS FOR PROGRAM FAILURE.....	29
COMMUNICATION	30
E-MAIL.....	30
ANNOUNCEMENTS/HANDOUTS	30
EXTERNAL COMPLIANCE	30
CREDENTIALING	30
DOCUMENTATION REQUIRED FOR THE OFFICE OF VERIFICATION AND COMPLIANCE.....	31
STUDENT CAREGIVER CRIMINAL HISTORY SCREENING POLICY.....	33
STUDENT DRUG SCREENING POLICY	38
POLICY AND PROCEDURE FOR STUDENTS SUSPECTED OF IMPAIRMENT	40
STUDENT HEALTH AND WELLNESS	42
INSURANCE	42
STUDENT HEALTH CENTER	43
STUDENT HEALTH AND WELLBEING	43
LATEX ALLERGY POLICY.....	44
BLOOD BORNE PATHOGEN AND EXPOSURE POLICY	44
INJURY AND NEEDLESTICKS.....	46
FUNCTIONAL ABILITIES FOR CNM NURSING STUDENTS	46
DISABILITY RESOURCE CENTER	48
MISCELLANEOUS.....	48
SECURITY	48
SMOKING POLICY	48
INCLEMENT WEATHER.....	48
CHILDREN ON CAMPUS.....	48
CELL PHONE/ELECTRICAL DEVICE POLICY	49
STUDENT REPRESENTATION ON FACULTY COMMITTEES.....	49
GRADUATION AND PINNING	49
RN LICENSURE AND UNLAWFUL ACTIVITIES	49
REQUIREMENTS FOR GRADUATION	50
HISTORY OF THE NURSING PIN.....	50
CNM PINNING CEREMONY	50
APPENDIX B: DRUG SCREENING REFERRAL FORM (FOR USE BY TESTING AGENCY)	53

HANDBOOK AND ELECTRONIC SIGNATURES

Student Responsibility Regarding the CNM Handbook

Students are responsible for knowing and adhering to the information contained in the Central New Mexico Community College (CNM) catalog and this Nursing Student Handbook. Nursing students are required to read the Nursing Student Handbook each semester and to electronically sign the acknowledgement on the nursing website. A record of the student's electronic signature will be maintained in the Nursing Program office.

In the event there appears to be a direct conflict between information contained in the Nursing Student Handbook and the CNM catalog, the catalog takes precedence. The nursing program may have more restrictive policies than the greater CNM community.

Nursing faculty reserve the right to make additions or deletions to the posted Nursing Student Handbook. The effective date for any changes made will be included in the handbook when it is updated and/or on Blackboard and/or in oral announcements and/or in written announcements to the students. Significant changes will be communicated to students in a fair and timely manner.

The updated Nursing Student handbook will be posted on the CNM Nursing website by the Nursing Student Committee chair in conjunction with the Media and Communications office (MCO). The effective date for any changes made to the Student Handbook will be included in the posting on the CNM Nursing Website, in oral announcements and written announcements.

Updated August 2013

CNM School of Health, Wellness and Public Safety Confidentiality Agreement

Any individual requiring access to patient or business information at any clinical site must sign this agreement in order to receive access. This includes access to written as well as electronically stored information. The terms of this agreement apply to oral, written and electronic information. Violations of the terms of this agreement are grounds for immediate legal and/or disciplinary action. This agreement supersedes all prior agreements related to confidentiality or proprietary information. **Please read the terms of this agreement carefully. Electronic acknowledgement will be kept in the nursing programs office.**

By submitting my electronic signature, I agree and understand the following conditions:

1. I will not disclose, release or discuss any patient information, including clinical information of any kind, such as treatment protocols, medical conditions, financial/social information or patient demographic information for any purpose except to complete duties assigned. I understand that this includes **all** patients – even ones that I may know personally. In addition, I understand that state and federal law also require me to keep all patient information confidential.
2. I will not disclose, release or discuss business (e.g., financial, legal, operational, marketing) or employee information with any third party without first receiving written authorization from an appropriate clinical site manager who has authority to grant such authorization.
3. I will not seek information about patients, employees or business operations for my own personal use by accessing electronic or written records or through oral communication. I understand that my access to such information is strictly limited only to information that I need to know in order to carry out duties assigned.

4. I will not transmit confidential information about patients, employees or business operations via unsecured networks. I understand that this includes sending unencrypted clinical information on the Internet and the utilization of unsecured cellular phone networks.
5. I will not, at any time, share or disclose usernames, passwords or other authorizations that I use to access information. I understand that this includes posting or writing this information where other individuals can view it. I accept responsibility for all activities undertaken using my access code or other authorization.
6. I will not attempt to gain unauthorized access to computer hardware/software/firmware that is owned by any clinical site or disclose procedures (in whole or in part) to others so that they might do so.
7. I will take reasonable care to prevent the unauthorized use, disclosure or availability of confidential and/or proprietary information including through unattended screen displays and/or unsecured written documents. I understand that business and employee information is confidential and proprietary and should not be made available to persons or entities outside the clinical site. I further agree, upon the conclusion of my clinical rotation, to return all business and patient information in my possession or control to my clinical preceptor/instructor.
8. I acknowledge that the clinical site retains the right to monitor and/or review my access to information at any time for evidence of tampering or misuse, and may, at its own discretion, suspend or terminate my access privileges pending administrative review.
9. I will immediately report any violations of these rules that I know of or suspect to the appropriate authorities.
10. The rules of confidentiality and ethical behavior at the clinical site are available to me for review. I agree to follow these rules and behave in a professional, ethical manner at all times. I understand that misconduct and/or breaches of confidentiality will be grounds for legal and/or disciplinary action.

Clinical Contract Statements Concerning Students

In addition to the Confidentiality Agreement, CNM – HWPS clinical contracts state:

“Students who are assigned to the program will not receive any compensation from the Agency while participating in the program for any purpose, whatsoever, nor will such students be eligible for any employee benefits provided by the Agency including, but not limited to, workers’ compensation.”

“...an Agency has the right, in its sole discretion, to exclude any individual at any time from any clinical area.”

“ In the event that a student becomes ill or is injured while in the Agency and requires medical services they are financially responsible for their care, not the Agency.”

HWPS Nursing Student Handbook Electronic Signature Page

By my electronic signature, I certify:

1. I am familiar with and will adhere to each of the Student Policies and Codes found in the CNM Course Catalog.
2. I have been informed about Contagious Diseases. I have had the chance to ask any questions I might have. I understand the information and agree to follow its guidelines.
3. I certify that I have been informed about the Blood borne Pathogens policy. I have had the chance to ask any questions I might have. I understand the policy and agree to be bound by its terms.

4. I certify that I have read about Latex Allergies and have had the chance to ask any questions I might have.
5. I certify that I have been informed about the Suspected Impairment policy, have had the chance to ask any questions I might have. I understand the policy and agree to be bound by its terms.
6. I acknowledge The Family Education Rights and Privacy Act of 1974 prohibits the release of any portion of a student's educational records to individuals without the student's consent. I therefore allow CNM to release information to a clinical site or testing site if it is determined to have a "legitimate need to know." This includes information required for external compliance and facility credentialing.
7. I have read and understand the Admissions Eligibility document. I certify that I have been informed about the Nursing Student Handbook, have had the chance to ask any questions I might have and agree to be bound by its terms.

HWPS Revised August 2003, Student Committee Revised May 23, 2012

ABOUT THE PROGRAM

New Mexico Nurse Practice Act: Clinical Practice of Nursing Students

The New Mexico Nurse Practice Act 61-3-29 states that the Act "shall not apply to or affect nursing by students when enrolled in approved schools of nursing or approved courses for the education of professional or practical nurses when such nursing is part of the educational program."

Revised April 18, 2012, Verified December 2013

Accreditation

The CNM AASN nursing program is approved by the New Mexico Board of Nursing through August 31, 2015. It is also nationally accredited from the Accreditation Commission for Education in Nursing (formerly the NLNAC) through fall 2014. CNM as a college holds regional accreditation through the North Central Association of Colleges and Schools.

Accreditations:

Accreditation Commission for Education in Nursing, Inc.
 3343 Peachtree Road NE Suite 850
 Atlanta, Georgia 30326
 (404) 975-5000
<http://www.acenursing.org/>

New Mexico Board of Nursing
 6301 Indian School Road NE Suite 710
 Albuquerque, NM 87110
 (505) 841-8340
 (505) 841-8347 (Fax)
www.state.nm.us/nursing/

North Central Association of Colleges and Schools
 c/o The Higher Learning Commission
 230 South LaSalle Street, Suite 7-500
 Chicago, IL 60604
<http://www.ncahlc.org/>

AASN Nursing Program

Purpose of Nursing Program

The purpose of the nursing program at CNM is to offer high-quality basic nursing education that meets the requirements for an associate of applied science degree in nursing. In addition, the nursing program supports mobility in nursing education for the LPN and/or students with previously acquired nursing knowledge. The program's purpose is to also provide qualified graduates to meet the community's need for nurses. The nursing program fosters personal, intellectual, and social growth of students.

Updated August 2013

History of the CNM Nursing Program

The LPN and ASN nursing programs at CNM evolved from a practical nursing program at Presbyterian Hospital in 1956. That practical nursing program, known as the Presbyterian Hospital School of Practical Nursing, was housed in the basement of the Hazeldine Infirmary Building adjacent to Presbyterian Hospital in Albuquerque, New Mexico. In 1964, the administrative direction of the practical nursing program was transferred from Presbyterian Hospital to the Albuquerque Public Schools. In 1965, CNM (formerly TVI or the Technical Vocational Institute) assumed the administrative responsibility for the nursing program.

In 1986, the New Mexico legislature granted degree awarding authority to TVI (now CNM) and plans were developed to initiate an associate of science in nursing program. In the fall of 1986, TVI (now CNM) assumed the responsibility for the Associate of Science program from the University of Albuquerque and the University of New Mexico. The University of Albuquerque closed. The University of New Mexico continues to offer BSN, MSN, and PhD programs in nursing.

CNM first associate of science in nursing (ASN) program was started in the fall of 1987. The curriculum of the practical nursing program was changed to promote coordination with the ASN program and career mobility between the practical nursing program and the ASN program at CNM. The practical nursing program was the first practical nursing program in New Mexico to be accredited by the National League for Nursing Accrediting Commission (NLNAC) and was accredited in 1989. The Associate of Science in Nursing program was initially accredited by the NLNAC in 1989. The accreditation was retroactive for one year and therefore included the first graduating class of April 1988.

The practical nursing program closed in 2013. CNM continues to offer an Associates of Applied Science (AASN) as a traditional program, or as an LPN to AASN mobility program. In 2014, CNM's nursing program will change to the shared, statewide New Mexico Nursing Education Consortium (NMNEC) curriculum. The last cohort of the "traditional" curriculum will graduate in August of 2015.

Updated August 2014

Philosophy

Nursing is a caring profession that reflects the science and art of nursing. Caring reflects a humanistic value and it requires sensitivity to one's self and others. Nurses care for clients and families from diverse cultural backgrounds across the lifespan in a variety of settings. Nurses recognize that the healthy client can perform self-care activities that maintain safety and contribute to well-being. Nurses also recognize that clients vary in their ability to achieve well-being. Nurses communicate effectively through verbal, nonverbal, written and technological means. Interdisciplinary collaboration is needed for individualized, therapeutic nursing interventions.

The CNM AASN Nursing Program is based on the recognition of the intrinsic value and mutual respect of each person. It is the philosophy of the nursing programs that a caring teacher-learner relationship is needed in a collaborative learning environment to promote caring in the nursing profession. The program values the faculty and their expertise, experience and professional development. The faculty members are recognized as facilitators of educational opportunities to meet individual student needs as well as professional competencies.

The AASN Nursing Program faculty support clinical reasoning resulting in clinical judgment as part of the organizing framework for learning. Learners are recognized as autonomous individuals who make independent decisions about their needs. Nursing requires clinical reasoning skills to be used as a guide to implement the nursing process and result in clinical judgment to meet client and family needs in the roles of provider and manager of care.

The faculty also believes that learning is a contextual lifelong process that fosters sensitivity to the unique and diverse nature of individuals, acquisition of knowledge, skills to access information and changes in values and behaviors. As role models of clinical reasoning and judgment, faculty shape an educational environment which empowers students to become independent learners, to accept responsibility for lifelong learning and develop professional competencies such as teamwork and accountability as managers of care.

Nursing care based on clinical reasoning reflects consideration of the client's basic and higher-order needs and result in a healthful state of physical, emotional, mental and spiritual well-being. Clinical reasoning and clinical judgment should include the following Quality and Safety Education for Nurses (QSEN) competencies:

1. Patient-Centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.
2. Teamwork and Collaboration: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
3. Evidence-Based Practice: Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
4. Safety: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.
5. Informatics: Use information and technology to communicate, manage knowledge, mitigate errors, and support decision making.

Graduates of the Associate of Applied Science in Nursing (AASN) provide a safe and caring environment for clients across the lifespan recognizing the influence of spirituality and cultural diversity.

AASN graduates utilize critical thinking skills to apply the comprehensive nursing process when meeting the healthcare needs of clients with complex health problems. AASN graduates demonstrate accountability for maintaining professional competence based on evidence based nursing practice. AASN graduates communicate effectively through verbal, nonverbal, written and technological means to manage care through interdisciplinary collaboration to meet client health needs.

Approved February 27, 2012

Organizational Framework

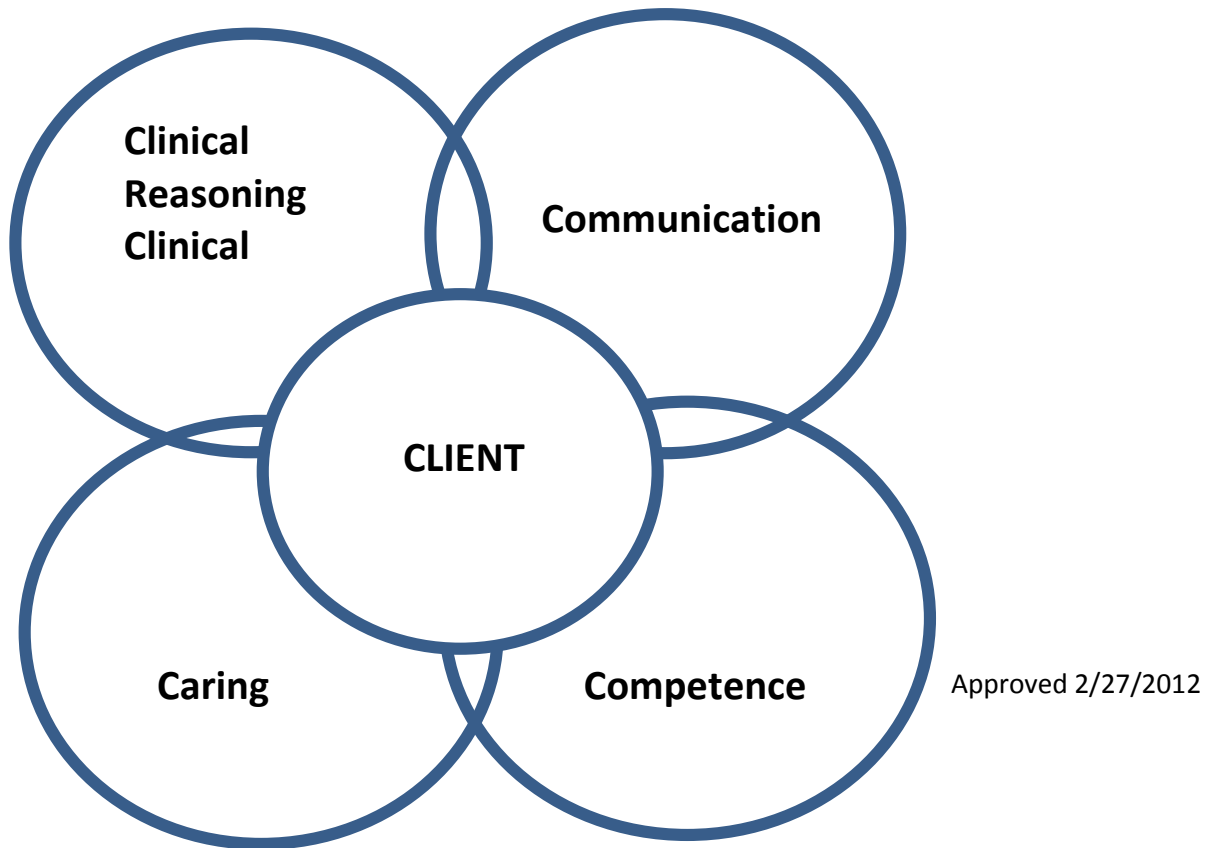
The central focus of the nursing program's organizational framework is the nurse-client relationship. Five constructs provide a framework for organizing the basic knowledge and education outcomes of the nursing program. These core components consist of:

1. **CARING:** Encompasses compassionate and professional service across the lifespan that recognizes cultural and spiritual diversity.
2. **COMMUNICATION:** Verbal and nonverbal, goal-directed interaction with clients, families and healthcare team.
3. **CLIENT:** Health promotion accomplished through maintenance and/or enhancement of the well-being of individuals, families and community.
4. **CLINICAL REASONING-CLINICAL JUDGMENT:** Clinical reasoning refers to the *process* by which clinicians make clinical judgments. Clinical judgment, according to Tanner (2006), is the interpretation or *conclusion* about a client's needs, concerns, or health problems including the decision to take action using evidenced-based practices as deemed appropriate by the patient's response.
5. **COMPETENCE:** Through clinical practice, the student develops accountability for safe client care which will be reflected in their proficiency to carry out a task and their ability to implement a role as caregiver, teacher, and manager.

The content threads are recurring themes within the nursing courses. The threads include teaching/learning, hierarchy of needs, growth and development, legal/ethical issues, management of client care and professional behaviors.

Approved February 27, 2012

Organizational Framework Diagram



Nursing Student Code of Conduct

The nursing profession requires high standards of legal, ethical and moral accountability. The Nursing Program supports and abides by the CNM Student Code of Conduct, but nursing students are further expected to behave in compliance with the professional standards of nursing and the [ANA Code of Ethics for Nurses](#) and the [NSNA Code of Professional Conduct](#).

Students demonstrating unsafe or disruptive behavior in the clinical facility or in class will be dismissed for the day and may ultimately be referred to the Dean of Students. Unsafe behavior, a serious incident, or disruptive behavior may also be a violation of CNM policy, School of Health, Wellness, and Public Safety policy, or clinical site policy. Violation of CNM, School of HWPS, clinical site policy, or failure to attain and demonstrate skills appropriate to the site may result in removal from the site, and possibly removal for the duration of the course resulting in a failing grade.

In response to unsafe behavior, a serious incident, or disruptive behavior, the instructor will send the student home and:

1. Consult with the level coordinator or program director as soon as possible, ideally within hours of the incident.
2. With the level coordinator, counsel the student within 24 hours of the occurrence.
3. The level coordinator and instructor, with counsel from the nursing program director, will decide if the student will return to the clinical site and/or classroom.

- A. If the student is allowed to return to the clinical site or classroom, the instructor will inform the student.
- B. If the student is not allowed to return to the clinical site or classroom, the student will accrue a failure for the activity, which may result in a failing grade for the course. Further, the CNM policies regarding code of conduct will be followed.

Approved March 26, 2012, updated August 2013

American Nurses Association Code of Ethics for Nurses

"A code of ethics stands as a central and necessary mark of a profession. It functions as a general guide for the profession's members and as a social contract with the public that it serves" (*Guide to the code of ethics for nurses*, ANA, 2008. p. xi). The ANA Code is as follows:

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
2. The nurse's primary commitment is to the patient, whether an individual, family, group or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety and rights of the patient.
4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.
9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

Fowler, M. D. M. (Ed.). (2008). *Guide to the code of ethics for nurses. Interpretation and application*. Washington, DC: American Nurses Association.

Revised February 15, 2012

National Student Nurses' Association (SNA)

SNA Representatives are chosen as volunteers from within the SNA membership and serve one term, renewable for up to four terms. SNA officers are elected at the end of each semester for the following term.

There will be a Nursing Faculty Advisor for the CNM SNA. Student groups such as the SNA may undertake special projects or plan special events. If so, these projects or events must be reported to the Dean of Students' office. The faculty advisor will work with the students during the planning and execution of the project or event.

SNA Code of Professional Conduct

As a member of the National Student Nurses' Association, I pledge myself to:

1. maintain the highest standard of personal and professional conduct.
2. actively promote and encourage the highest level of ethics within nursing education, the profession of nursing and the Student Nurses' Association.
3. uphold all by-laws and regulations relating to the Student Nurses' Association at the chapter, state and national levels, reserving the right to criticize rules and laws constructively, but respecting the rules and laws as long as they prevail.
4. strive for excellence in all aspects of decision-making and management at all levels of the Student Nurses' Association.
5. use only legal and ethical principles in all association decisions and activities.
6. ensure the proper use of all association funds.
7. serve all members of the Student Nurses' Association impartially, provide no special privilege to any individual member and accept no personal compensation from another member or non-member.
8. maintain the confidentiality of privileged information entrusted or known to me by virtue of an elected or appointed position in the association.
9. refuse to engage in or condone discrimination on the basis of race, gender, age, citizenship, religion, national origin, sexual orientation or disability.
10. refrain from any form of cheating or dishonesty and take action to report dishonorable practice to proper authorities using established channels.
11. always communicate internal and external association statements in a truthful and accurate manner by ensuring that there is integrity in the data and information used by the Student Nurses' Association.
12. use every opportunity to improve faculty understanding of the role of the Student Nurses' Association.
13. cooperate in every reasonable and proper way with association volunteers and staff and work with them in the advocacy of student rights and responsibilities and the advancement of the profession of nursing.
14. use every opportunity to raise awareness of the Student Nurses' Association mission, purpose and goals at the school chapter level.
15. promote and encourage entering nursing students to join and become active in NSNA.
16. promote and encourage graduating seniors to continue their involvement by joining professional nurses associations upon licensure as registered nurses.

Adopted by the 1999 House of Delegates, Pittsburgh, PA at the 47th Annual NSNA convention
Reviewed May, 2012

Program Expectations

All expectations are considered critical and must be met in order to pass each nursing course. The student will:

1. consistently demonstrate necessary knowledge and preparation for achieving nursing care for clients;
2. provide care with understanding and respect of the clients' cultural and ethnic diversity;
3. adapt care to meet the clients' growth and development needs;
4. consistently practice safely in all aspects of care;
5. adhere to the ANA Code of Ethics and CNM Nursing Student Handbook policies;
6. demonstrate the ability to clarify any questions with instructor or staff;
7. recognize and communicate errors made and seek appropriate resource for correction;

8. serve as a role model in caring; speaks on behalf of client/family when they are unable to do so;
9. follow policies of the assigned clinical facility;
10. maintain infection control policies of the clinical agency;
11. assume accountability for their nursing judgments and decisions;
12. admit to errors and communicate honestly in all interactions;
13. serve as a mentor;
14. present a professional image while providing client care;
15. seek supervision and guidance from the clinical instructor in carrying out nursing care;
16. accept constructive criticism;
17. provide constructive feedback to their peers;
18. follow faculty instructions, including written and verbal directions;
19. take initiative for their own learning;
20. support others in their growth;
21. document care provided accurately and in accordance with clinical facility policies;
22. demonstrate awareness of how their behavior affects others;
23. demonstrate awareness of their own cultural values and attitudes;
24. maintain confidentiality in interactions with the clients and health team members;
25. demonstrate recognition of legal and ethical considerations; and,
26. demonstrate clinical calculation competency.

Reviewed May, 2012

Exit Competencies

1. Utilize clinical reasoning and clinical judgment resulting from the application of the comprehensive nursing process when meeting the healthcare needs of clients with complex health problems.
2. Provide a safe and caring environment for clients across the lifespan, recognizing the influence of spirituality and cultural diversity.
3. Communicate effectively through verbal, nonverbal, written and technological means to manage care through interdisciplinary collaboration to meet client health needs.
4. Demonstrate accountability for maintaining professional competence as an AASN graduate and based on evidence-based nursing practice.

Approved February 27, 2012

LPN Mobility Program

The LPN Mobility option allowed qualified licensed practical nurses to complete their Associate of Applied Science in Nursing (AASN) by entering into the third term of the AASN program. Graduates of the AASN program meet the requirements set by the New Mexico State Board of Nursing to take the NCLEX-RN licensing examination. Specific terms of licensure can be obtained through the New Mexico Board of Nursing.

LPNs must meet all AASN program entrance requirements prior to being fully accepted into NURS 2580. This means that all transcript entries, substitutions and/or waivers must be completed prior to being accepted into Nursing 2580. See the CNM Nursing Programs website for the application process into the LPN Mobility Program.

Revised November 8, 2011, March 2013

Information for Transfer of Nursing Credit

Students seeking to transfer credit from other institutions will be considered on an individual basis. The student will be asked to provide course descriptions, course syllabi, achievement test scores, official transcripts, and a Central New Mexico Community College worksheet from academic advisement, in order

to determine qualifications for placement in the nursing program. Placement is subject to space availability. Since there are differences among nursing programs, students wishing to transfer should be aware that there may be an interruption in program progression. Applicants must have been in good standing from their previous college with a “C” average or better. Nursing courses which are being transferred must have been completed within three (3) years prior to admission to the CNM Nursing Program. All other admission requirements must be met.

Procedure for Application for Transfer of Nursing Credit

1. Apply to CNM. The student will receive a CNM e-mail address and student ID number. When communicating with advisors and/or the program director, please include your name, CNM ID number, CNM e-mail address, mailing address, and telephone number.
2. Request your official transcripts be sent to CNM for evaluation. You will receive a transcript evaluation from the Records Department via CNM e-mail.
3. When the evaluation has been received, make an appointment with the HWPS Academic Advisor.
4. Meet with the HWPS Academic Advisor to determine that all course pre-requisites are completed and the CNM residence requirements will be fulfilled if you transfer to CNM.
5. Complete the transfer packet and submit it with the cover sheet and checklist of the office of the School of Health, Wellness, and Public Safety, Nursing Department for transmittal to the Nursing Program Director for final evaluation.

Approved: March 26, 2011, Revised March 2013

Duration of NURS Course Credit

Nursing course credits are good for three years. Students are encouraged to apply for transfer or re-entry to the class as soon as possible and if there is space available, to return to class in less than a year.

Approved March 26, 2012

Clinical Preceptor and Instructor Approval of Care

It is CNM’s Nursing Program policy that students may have an observational experience or work with a clinical preceptor. The clinical instructor will name the person to whom the student will report in that setting. If there is any question regarding the clinical assignment or preceptor, the student is required to contact the nursing instructor and the Level Coordinator. In the event that a student provides nursing care at a time or place not previously approved by an instructor, it will be considered a “serious incident” and may result in removal from the clinical area and/or course. For further clarification, see [Removal from a Course](#) and the definition of a serious incident in this handbook.

Revised April 18, 2012

UNIFORMS

Uniform/Dress Code

Nursing students are to follow the guidelines to dress in a manner that is professional and dignified. Students wear the CNM uniform when they are:

1. in the classroom,
2. obtaining clinical assignments,
3. present at the clinical site during clinical hours,
4. present at on-campus clinical labs,
5. while functioning as a CNM nursing student at any other time.

Students who fail to meet dress code guidelines will be sent home and not permitted to participate in learning activities and they will accrue an absence. Exceptions can be made at certain clinical sites.

While students need to be in uniform when commuting to and from CNM activities, students will not be in uniform during off-duty hours.

1. Uniforms:

- a. Students must wear the uniforms available at the CNM bookstore. The only exceptions are if:
 - i. the student has a medical condition that cannot be accommodated by the uniform (pregnancy, etc.)
 - ii. the student would like to purchase (on their own) the Winks brand cargo scrub pants in hunter green. Students who are very small or plus size and petite plus may find the fit to be superior to what is sold in the bookstore. This is the only approved substitution.
- b. Female students must wear the white dress or hunter green pants with the white tunic. The CNM patch will be sewn three (3) inches below the center shoulder seam on the left shoulder sleeve. Students may hem the pants or dress, but should make no other modifications to the uniform.
- c. Male students must wear the hunter green pants with the white tunic. The CNM patch will be sewn three (3) inches below the center shoulder seam on the left shoulder sleeve. Students may hem the pants or dress, but should make no other modifications to the uniform.
- d. Uniforms will be wrinkle-free, should fit appropriately providing freedom of movement and must be suitable for standing, stretching and bending. Non-transparent undergarments (neutral colors) are to be worn and not visible.
- e. Students may wear a short or long sleeved white shirt under the tunic for warmth or to cover tattoos if needed.
- f. Students will have a long-sleeved, $\frac{3}{4}$ length lab coat with the CNM patch sewn on the left sleeve three (3) inches below the center shoulder seam. The lab coat may be worn over the full uniform, at the coordinator's discretion. The lab coat will also be worn at the pinning ceremony.
- g. Hoodies, sweaters, scarves, hats, or other cold-weather gear are not permitted over the uniform once educational activities have begun. Students may wear an additional white layer under the white shirt described in "e" above so long as it is unadorned.

2. Identification Badges: All students of the Nursing Program are required to wear their CNM ID badges while in uniform. Black break-away lanyards are acceptable. HWPS will provide badge holders with clips.

3. Shoes and socks:

- a. Canvas/cloth shoes and open toed/open heeled shoes are prohibited. Athletic shoes are acceptable if they are no less than 90% white and are leather or vinyl (no mesh). All shoes must be clean, in good condition, and odor free.
- b. Socks should be white, black, or hunter green and unadorned.

4. Hair Styling:

- a. Hair is to be kept clean and professionally groomed.
- b. Hair will be styled so that it does not fall forward over eyes or shoulders. Unrestrained hair poses a safety and infection control threat.
- c. Unnatural hair colors or outlandish styles are not allowed (e.g., purple, pink, green, excessively spiky, Mohawks, etc).
- d. Hair accessories should be kept to a minimum, and restricted to white, black, brown, or unadorned metal.

- e. Beards, mustaches, and side-burns should be clean and neatly trimmed. Students who shave should be clean shaven each day the uniform is worn.
- 5. **Cosmetics, Perfume, and Nails:**
 - a. Extremes in make-up are not allowed.
 - b. Perfumes, aftershaves, lotions, or other scented hygiene products are not allowed.
 - c. Artificial nails are prohibited. Nails must be kept clean, short, and well-manicured. Clear or natural nail polish may be worn if allowed by institution policy. If polish is worn, it cannot be chipped.
- 6. **Jewelry, Tattoos, and Piercings:** Wearing jewelry is limited to:
 - a. One band watch with second hand. The watch should be easy to move up the arm to facilitate hand washing.
 - b. Two (2) rings total. Avoid high settings.
 - c. One (1) earring per ear. Only studs are allowed.
 - d. Ear gauge studs must be neutral or skin color and occlusive.
 - e. Body piercing that is noticeable is prohibited (i.e., nose, tongue, eyebrow, etc.). Body piercings beyond the ears need to be removed or covered (i.e., with an adhesive bandage, etc.). Any exceptions to this policy will be addressed on a case by case basis.
 - f. Tattoos, body art, and other body modifications should remain as covered as possible. The wearing of an unprinted long-sleeve, white t-shirt under the uniform top is authorized and may help cover such markings.
- 7. **Hygiene:** Students should be clean and free of offensive body odor. Patients may be sensitive to scents that may include tobacco odor. Tobacco products, including electric cigarettes, should not be visible or carried in the uniform.

Approved March 25, 2013, Updated August 2013

Dress Code when Uniforms are Not Allowed

There may be times when wearing the uniform is not permitted by a clinical facility (for example, some acute inpatient psychiatric facilities do not want staff, faculty or students in uniforms). When this is the case, it will be clearly communicated to students.

1. **Identification Badges:** All students and faculty of the Nursing Program are required to wear their CNM ID badges in the clinical area and it is recommended they be worn in theory classes as well. "Break-away" lanyards are acceptable. Students are provided with lanyards by the Nursing Program Office.
2. **Shoes** – No open-toed shoes are allowed.
3. **Pants/Slacks** – No denim (jean) material pants regardless of color. No scrubs or components of scrub uniforms. No shorts of any length.
4. **Skirts** – No skirts shorter than one inch above the knee. No skirts with slits above the knee.
5. **Socks/Stockings** – Students must wear socks or stockings at all times. No bare feet or "five toes-type" shoes. Socks should be black or white and contain no ruffles or designs.
6. **Blouses/Shirts** – No sleeveless shirts, tank tops, t-shirts or shirts with pictures, logos, etc.
7. **Lab Coats** – Students will wear the lab coat as appropriate. The lab coat must have the CNM patch on the left shoulder sleeve. Students may not wear components of the uniform in lieu of the lab coat (such as the uniform shirt worn open over street clothes).

Reviewed and revised April 18, 2012, Updated August 2013

GRADING

Passing Grade for NURS Clinical/Didactic Courses

To progress in the nursing program, students must earn a grade of 'C' (75%) or better in all required NURS courses.

The clinical component or clinical is defined as any activity assigned by the nursing faculty that occurs during clinical/laboratory times. This may include the work in the simulation lab or campus lab, media review, assignments to be completed at the CNM library, attendance at a professional nursing meeting off campus, attendance in classes on clinical days on campus, and/or examinations on clinical days. Clinical days are usually Thursdays and Fridays during the semester. If clinical activities are scheduled outside of normal class hours, students will be given adequate notice.

Students are required to take HESI standardized nursing exams each semester to assist them in preparing for the National Council Licensure Examination (NCLEX). A HESI score of 850 or higher is desired. Students scoring below an 850 are encouraged to sit for a second version of the exam. Students scoring lower than an 825 may be required to retest. Please see the course syllabi for specific information on how the exams are administered.

A letter grade is given for the theory component of the course. The clinical grade is pass or fail. Failure in either clinical or theory of a nursing course constitutes a failure for the course. Students who fail the theory **or** clinical portion of a nursing (NURS) course will be required to repeat the entire course (theory and clinical). In the event that a NURS course is failed, refer to the [Re-entry into the Required NURS Course](#) section in this handbook.

The nursing faculty is responsible to keep the public safe. Therefore students are held to the standards of the nursing profession. For further information, refer to the State of New Mexico Nursing Practice Act and Administrative Rules and Regulations of the New Mexico Board of Nursing, 16 NMAC 12.2.12 – Standards of Nursing Practice, effective 2/17/06. Because of this responsibility, the CNM nursing faculty reserves the right to retain only those students in the nursing program whose knowledge, skill, health, and attitude indicate the capability to be members of the healthcare team and students who demonstrate they are capable of working effectively in providing healthcare.

Grading and Evaluation

The following grading policies apply to all nursing courses of the curriculum. Course and clinical grades are based on a variety of activities designed and assigned by the faculty. The grading criteria for theory and clinical courses are included in course syllabi.

Revised February 15, 2012

Graded Assignments

Assignments are designed to help you come to class better prepared. We encourage students to work ahead as much as possible and resist waiting until the last minute.

For assignments available to students for less than five days:

Ten percent (10%) will be deducted for each calendar day an assignment is late. If the assignment is received after five (5) calendar days from the due date, a grade of zero (0) will automatically be given for that assignment. It is the student's responsibility to have either a

nursing instructor or a Health, Wellness, and Public Safety administrative assistant write the date and time any assignment is turned in when it is not given directly to the course instructor.

For assignments available to students for more than five days:

Late assignments receive a grade of zero. No exceptions or extensions will be made.

July 2014

Examinations and Quizzes

It is the expectation that students take examinations on time. Every effort should be taken by the student to balance his/her schedule in a manner that places examination time as a priority.

Daily or unannounced quizzes administered in class that are missed by the student will not be made up.

In regards to circumstances conflicting with scheduled examinations:

- Job interviews, physician appointments, childcare issues, vacations, etc. do not constitute a valid excuse for missing exams or requesting a rescheduling.
- Qualified exceptions include (but are not limited to): court dates, medical emergencies, or deaths in the immediate family. Students are expected to provide the level coordinator supporting documentation.

Students missing exams are expected to follow these procedures:

1. The student who misses an exam or anticipates an impending qualifying exception must communicate with the instructor of record as soon as possible, preferably before the exam. It is the student's responsibility to initiate this communication in writing (email is acceptable, texting is not).
2. A student who misses an examination without notifying the instructor of record in advance of the test day and who does not make arrangements with the instructor to take the examination the day she/he returns to class or clinical will receive a grade of zero (0) for that examination.
3. Make-up examinations may be in any format (e.g., oral, essay, multiple choice, etc.) at the discretion of the instructor.
4. Examinations taken at any time/date other than when the test is originally scheduled will incur a 10% exam score reduction with the 10% based on the total number of points possible on that exam. The penalty may be reversed when the student is able to provide official documentation of their qualifying exception.

December 2013, updated July 2014

Responsibility for Grades

Each student is responsible for knowing his or her own academic status based on grades earned from learning activities. If a student finds he has an unsatisfactory grade that may result in failure of the nursing class, he is encouraged to contact the instructor for guidance related to success. It may be recommended that the student contact the HWPS Achievement Coach.

Revised August 2013

Grading Scales

1. Grades are calculated as percentages and they will be calculated using NO rounding. This means that a student who has a numeric grade of 74.999% will receive a 'D' since 75% is passing. The grade percentage on examinations and quizzes will be calculated as follows:

Total points earned on each exam
Total possible points for the exam

2. The test, quiz, and assignment earned points will be totaled at the end of the semester and divided by the possible points. For example, if there were 496 points earned by the student, and there were 699 possible points (questions thrown out of the exams will be subtracted from the original possible points resulting in the total possible points), then the student's grade would be 74.9585% and which is equivalent to a letter grade of 'D.'

Grading Scale:

A: 90-100%	C: 75-79.999%	F: Below 65%
B: 80-89.999%	D: 65-74.999%	

3. An examination review session for students in a group will be arranged by the level coordinator or instructor(s) within ten (10) calendar days of the test. If possible, the instructor(s) who contributed to the test content will be present at the test review. The correct answer for each question will have a rationale provided.
4. It is the student's responsibility to seek remediation if he or she did not pass a test. Students needing remediation should make an appointment with the HWPS Achievement Coach.

Revised February 15, 2012, Approved February 27, 2012

Clinical Calculations Test (CCT)

Students must continue to demonstrate competency in dosage calculations in each semester (NURS 1580, 2080, 2580 and 2680) of the nursing program.

1. All students in NURS 1580, 2080, 2580, and 2680 take the CCT the first week of the semester. The required passing score for the CCT is 90% or higher.
 - a. Students are strongly advised to study review materials prior to taking the CCT.
 - b. Students must take the CCT at the scheduled time for their level. Exceptions can only be made under extenuating circumstances and must be approved by the level coordinator. Exams taken late will be subject to the late penalty described in the Examinations and Quizzes section of the [Grading and Evaluation](#) section of this handbook.
 - c. The CCT is a paper/pencil examination and is proctored on campus.
 - d. Students are only allowed to use a dedicated, standard calculator. Cell phone calculators, PDAs or any other programmable devices are not allowed.
2. If students do not pass the CCT the first time the test is given in the semester, remediation is required. It is the student's responsibility to participate in remediation. Suggested remediation includes:
 - a. Review the test with the level coordinator or dosage instructor. Each level will have a designated dosage instructor to manage the completed exams.
 - b. Seek out additional resources as needed. It is recommended that students spend time reviewing information in their dosage textbook.
3. The second CCT will be paper/pencil and proctored on campus. The same guidelines established for the first CCT apply (see 1 above).
 - a. Students are allowed one opportunity to take and pass the second CCT exam with a score of 90% or above.

- b. Students must take the CCT retake at the scheduled time for their level. Exceptions can only be made under extenuating circumstances and must be approved by the level coordinator. Exams taken late will be subject to the late penalty described in the student handbook.
4. Students that do not successfully complete and pass the second CCT will be removed from the nursing course in which the student is currently enrolled (NURS 1580, 2580, or 2680). Students may change their enrollment status to “audit” and continue attending the classroom portion of the course. Auditing students may not take or review course exams.
5. Students who do not pass the CCT may apply to re-enter the nursing program (see [Re-entry into the Required NURS Course section](#) of the handbook). Students who are re-entering the nursing program will enter the nursing course and take the CCT along with the other students of that level and must pass the CCT at 90% or higher (same requirements apply).

Revised May, 2009, Reviewed May 2012, Edited for clarity August 2013

Procedure for assisting students to maintain clinical calculation skills

1. There will be a minimum of one clinical application math question on every test in NURS (clinical) courses.
2. A critical behavior on all clinical evaluation forms includes accurate calculations.
3. Expectations for clinical preparation include responsibility for dosage calculations and intravenous calculations for any medication a client has ordered when students obtain their patient assignment.
4. Students who cannot perform calculations accurately in the clinical area will be placed on a [success plan](#) and referred to a dosage Instructor.
5. Continued difficulty with calculations is seen as a serious patient safety issue and can result in clinical failure.

Revised April 2009, August 2013

Passing Grade for NURS 1080

Students must complete NURS 1080 with the first enrollment. Students who are unsuccessful in NURS 1080 will accrue a program failure. These students will have to re-petition to the nursing program if they wish to continue their studies at CNM. The rationale for this strict policy is that the program always admits a full cohort and seats for re-entry are either limited or non-existent. Historically, the wait for re-entry for NURS 1080 is at least two semesters, with many students waiting out more than a year. This policy allows students a better opportunity to resume their studies.

NURS courses are good for three years. Students who have completed Pharmacology and Dosages will likely not have to re-take these courses. All other requirements for application to our program are in effect.

March 2013

Dosage Calculations (NURS 1007)

To ensure client safety during medication administration, students must initially demonstrate and continue to demonstrate competency in dosage calculations. Passing NURS 1007 is required prior to enrollment in NURS 1580.

1. NURS 1007 is a required course in the Associate of Applied Science in Nursing program. Students are required to pass NURS 1007 with a score of 85% or above. NURS 1007 may be taken one semester prior to entering NURS 1080 but must be taken and passed before the student is allowed to progress to NURS 1580.

2. Students may challenge NURS 1007 one time before enrolling in the course. Once a student has enrolled in NURS 1007, the student may not challenge the course for ten years. A passing score on the challenge exam is 85%.
3. LPN Mobility, re-entry or transfer students must meet the requirements for NURS 1007 prior to entering NURS 2580. These applicants will need to successfully challenge or complete NURS 1007 before entering a clinical course.
4. Credit for NURS 1007 is valid for three years (CNM class credit policy).

Reviewed May, 2012, March 2013

RESOURCES

Achievement Coach

The role of the [Achievement Coach](#) is to help students succeed with their education and career goals. This is accomplished by problem solving to overcome barriers to education and utilize strengths. An achievement coach is available to students both individually and in a class setting to assist in areas of study habits, test taking skills, time management and other life skills as needed. Appointments may be made through the School of HWPS administrative assistants (224-4111). The coach may make referrals to other student services and agencies as needed.

Updated August 2013

Computer Labs, Libraries, and Tutoring Services

Computer Labs and Learning Centers are available to students as follows:

- [Main Campus Learning Center](#) (Student Resource Center Room 203)
- [Main Campus Business Resource Center](#) (BRC, Smith Brasher Hall Room 212)
 - A copy machine is available for 0.10 cents a copy at the BRC
- [Main Campus Library Computer Lab](#)
- [Montoya Campus Learning Centers and Computer Labs](#)
- [South Valley Campus Learning Centers and Computer Labs](#)
- [Westside Campus Learning Center and Computer Labs](#)
- [Rio Rancho Campus Learning Center and Computer Labs](#)

Library Services

- [Main Campus](#) is located in the Student Resource Center (SRC). Books and periodicals are available for student use in the library. The media center is also located in the library and is available for students to view audio/visual materials.
- The library for [Rio Rancho Campus](#) is located on the 1st floor of the Rio Rancho Campus building. Library hours are posted on the library door and are available through the CNM website at www.cnm.edu.

Assistance Centers for Education (tutoring)

- The [ACE](#) is located in the SRC on Main Campus. Tutoring assistance and study space is available in the ACE.
- Study space is available groups of students. Rooms must be scheduled in advance by calling 224-4306.

Reviewed and revised April 18, 2012

CLASSROOM AND CLINICAL

Classroom and Clinical Privacy

Due to federal student privacy laws (FERPA) and copy right laws, it is imperative to protect the privacy of enrolled students and the intellectual property offered by the instructors. To promote this, the following applies to students:

1. No videotaping during class or lab.
2. No Audiotaping of lectures without instructor permission. If permission is granted, recordings will not be posted on the internet or distributed in any way.
3. No photography of instructional materials used in the classroom (examples include but are not limited to slide presentations, videos, etc).
4. No posting of classroom or clinical /lab activities on social media.
5. Further, during exam reviews, students are not allowed to have any electronic devices on their person (all electronic devices will be stowed in a backpack or purse, etc). Students are not allowed to take notes during exam reviews.

Students who do not follow these policies will be handled as per the CNM Academic Code of Conduct policies.

July 2014

Classroom Attendance

1. Data shows that successful nursing students attend all classes. A student who must be absent from class should call the nursing program office at 224-4121 and/or the instructor of the absence before the class begins.
2. Attendance is taken at all class sessions.
3. Students are responsible for obtaining handouts and announcements given during absences.
4. Per CNM policy, students who miss 15% of the total class hours per course per term may be dropped from the course for non-attendance at the program's discretion (instructor team and Nursing Programs Director).
5. Most in class assignments cannot be made up. In the event a student misses an exam or a written assignment during an absence from class, he should refer to the [Grading and Evaluation section of the handbook](#).

Revised February 15, 2012

Clinical Evaluation

Pass/fail grades are awarded in clinical courses based on the student's ability to apply knowledge and skill to patient care, to meet the clinical objectives, to achieve 75% or higher on required written assignments, and to give safe, reliable nursing care.

Clinical instructors, based on each student's performance, write daily or weekly anecdotal notes and/or evaluations. Daily or weekly written anecdotal notes or evaluations of student progress will be individually reviewed and signed by each student during a post-clinical conference and/or planned student evaluation sessions after the last day of the clinical experience.

Revised February 15, 2012

Clinical Attendance

Students are required to attend all clinical sessions. This includes on-campus lab days as well as clinicals attended at healthcare partner sites.

1. If an extreme emergency prevents attendance, the student should call the clinical instructor one hour before the beginning of the clinical day or as specified by the clinical instructor.
2. More than two (2) days of clinical absences per term will result in attendance suspension of the student. Students may appeal attendance suspension (See [Attendance Suspension and Appeal](#)).

Clinical absence is defined as:

1. arriving 15 or more minutes late at the clinical site and/or
2. being unable to perform patient care due to the lack of preparation and/or
3. leaving the clinical site more than 15 minutes prior to the end of the clinical day.
3. Those students on attendance suspension from the clinical site should continue in the clinical area while awaiting the appeal.
4. Students attending SNA conferences/activities will not be given excused clinical absences.

Approved October 26, 2012, Updated August 2013

Tardiness/Leaving a Clinical Site Early

Students are expected to arrive on time and remain for the full clinical time. Students should plan to arrive early at the clinical site to compensate for traffic, parking, and other unforeseen issues. Tardiness or leaving a clinical site early is a behavioral issue and addressed through the clinical evaluation tool and the Communication System procedure.

Tardiness is defined as:

1. arriving on the clinical unit late but less than 15 minutes after the designated start time
2. leaving the clinical site less than 15 minutes prior to the end of the clinical day.

Any tardiness event will result in documentation of the following communication system procedure:

1. First offense: a documented verbal warning on the anecdotal notes including the amount of time the student was tardy from the clinical start time until the student arrival time.
2. Second offense: the student will submit a written plan to prevent future tardy to the clinical instructor before the end of the clinical day.
3. Third offense: a program level [success plan](#).
4. Fourth offense: removal from the clinical site for the rest of the day which constitutes a clinical absence.

Approved October 26, 2012, Updated August 2013

Attendance Suspension and Appeal

Appeal of removal of a nursing student for missing more than two clinical days requires the following procedures:

1. Students may request to appeal an attendance suspension before an Administrative Review Committee (ARC). Forms to initiate the process are available in the Health, Wellness, and Safety office.
2. The written request for an appeal must be made to the Nursing Program Director within two (2) working days of notification of the removal.
3. The student should continue to attend class sessions and clinical experiences while waiting for the appeal.
4. The ARC will meet and render a decision within five (5) working days of receipt of the request for appeal. The ARC meeting may be delayed if the CNM campus is closed (snow days, etc).
5. Once the review has been scheduled, the student must attend or the removal will be upheld and the student will receive a failing grade for clinical.

6. The ARC is composed of:
 - a. one (1) student from the same nursing level as the student requesting the appeal
 - b. two (2) faculty members from a different nursing level than the student requesting the appeal, and
 - c. the student's clinical instructor (if the instructor is unable to attend, the level coordinator will be present to provide information on the student's absences and clinical performance).
7. The ARC hears all cases and either upholds the removal or allows the student to continue based on the appeal.
8. The decision of the ARC is final.
9. A written record of the hearing and decision will be given to the student (or mailed at a later date). Copies of the decision will be distributed to the Nursing Program Director (to be placed in the student's file), the level coordinator, and the clinical instructor.
10. Reinstated students are responsible for meeting all clinical objectives.

Approved July 23, 2012, Updated August 2013

Student Removal from an Off-Campus Instructional Site or On-Campus Laboratory

Purpose and Rationale:

HWPS students are often engaged in experiential learning, both in the community and in on-campus sites. These sites serve clients, patients, employees, and students whose safety and well-being must be protected. Additionally, CNM, HWPS and the site's policies and procedures must be strictly upheld to maintain the integrity of the site's services.

HWPS may enter into a contractual agreement with each off-campus site that authorizes the off-campus site to "dismiss any student from the training site premises when it is deemed in the training site's sole discretion that the student's health or performance is a detriment to the well-being of any training site patient or employee." The term "patient" is replaced with "client" or "site student" when the site does not serve "patients."

All HWPS students will be given an orientation to CNM, HWPS and site policies.

- I. Definitions:
 - A. *Instructional Sites* (hereinafter referred to as "site" or "sites")
 - B. *Off-Campus Sites*: HWPS conducts practical, clinical, internship, externship and cooperative education at off-campus community-based sites. The site may be a hospital, clinic, doctor's office, diagnostic or research laboratory, long-term care facility, government agency, public or private school, or another appropriate site. These sites are also businesses that have standards and policies to ensure the safety and well-being of their clients, students and/or employees. HWPS students are expected to comply with the same standards and policies as the employees of the site.
 - C. *On-Campus Sites*: Practical, clinical, internship, externship and/or cooperative education may also occur in On-Campus locations such as the Health Center, Fitness or Cosmetology Laboratory. The instruction in these on-campus sites is distinguished from a standard classroom or laboratory in that students work directly with clients or patients. These sites are also work sites that have standards and policies to ensure the safety and well-being of their clients, students and employees.

- D. *Serious Incident*: An incident which compromises patient, employee, other student(s) safety or the integrity of the site; or which violates a CNM or site policy; or which violates a local, state or federal law; or which constitutes a breach of an established professional code of ethics applicable to the field of study.
 - E. *Session*: The period of time for which a student is given an assignment to a site that occurs within a continuous 24-hour period of time that begins at 12:00 midnight and ends at 11:59 p.m.
 - F. *Essential Skills*: Skills necessary to comply with standards and policies that ensure the safety, confidentiality and well-being of clients, students and/or employees or the integrity of the site services.
 - G. *Success Plan*: A plan that outlines individualized objectives and plans for improvement as a condition for a student reentering a clinical course or continuing their educational experience at a site.
- II. Failure to Attain and Demonstrate Essential Skills Appropriate to the Site:
- A. When a student fails to attain and/or demonstrate Essential Skills appropriate to the site, a progressive and timely Communication System will be used to notify the student.
 - B. When a student fails to meet the conditions of the [Success Plan](#) and his/her continued attendance at the site is reasonably likely to present a risk to patient, employee, other student's safety or welfare, or to the integrity of the site's services, the student may be temporarily removed from the site by the Program Chair.
 - C. An investigation will be conducted and a determination will be made pursuant to Section V of this Policy.
- III. Temporary Removal for a Serious Incident
- A. As soon as possible after the incident, the instructor will meet privately with the student to explain why he/she may be temporarily removed from the site.
 - B. The student will be given an opportunity to respond.
 - C. After the meeting with the student and consideration of the student's response, the instructor may decide to immediately and temporarily remove the student from a site.
 - D. If the decision of the instructor is to temporarily remove the student from the site, the student shall be informed verbally that they must leave the site for the remainder of the session and that they will receive further instructions from the Program Director/designee. The instructor shall obtain current contact information from the student and shall provide that information to the Program Director/designee.
 - E. The instructor will notify the Program Director/designee as soon as possible after the incident.
- IV. Investigation, Evaluation and Determination
- A. After a student has been temporarily removed from the site or a recommendation for temporary removal has been made, the Program Director will conduct an investigation which may include, but shall not be limited to, discussions with instructors or supervisors directly involved with the student, preceptors or other site employees, and other students having knowledge of the student. If the student has already been removed from the site, the student should be told that during the investigation and determination process, he/she should not attend scheduled sessions at the site unless otherwise directed by the Dean or Program Director.
 - B. The Program Chair shall meet with the student to discuss the events that led to the temporary removal. The student will be given an opportunity to respond.
 - C. After conducting an investigation and meeting with the student, the Program Director will present the evidence to the HWPS Dean or Associate Dean.

- D. The HWPS Dean or Executive Director shall review the evidence and meet with the student to present the results of the investigation. The student will be given an opportunity to respond to the evidence relating to the removal.
 - E. The HWPS Dean or Executive Director shall determine whether to return the student to the site, whether to transfer the student to another appropriate and available site, or whether to remove the student from the site for the duration of the course.
 - F. The determination of whether and when the student may return to the site or an alternative site shall be made within 10 business days, and, if possible, prior to the next site session for which the student is scheduled.
- V. Removal for the Duration of the Course
- A. If, after investigation and consultation with the Program Director, the student and other relevant personnel, the HWPS Dean or Program Director determines that the student is reasonably likely to present an ongoing risk to patient, employee, other student's safety or welfare, or to the integrity of the site's services, the student may be removed from the site for the duration of the course. This may result in failure of the course.
 - B. The HWPS Dean or Associate Dean shall inform the student verbally and in writing of the determination. The student shall have the right to appeal the decision to remove him/her for the duration of the course and shall be so informed in writing. All such appeals are processed through the HWPS Division pursuant to the Appeal Policy found in HWPS Division Office and Support Center, CNM Main Campus, A copy of the Appeal Policy shall be provided with the determination memo. The student will also be provided with the Student Checklist for Appeal of Removal.
 - C. Removal from a course pursuant to this policy shall not affect the student's other courses or, standing alone, be cause for removal from an HWPS program. Students may be required to withdraw from co-requisite program courses. Students removed from a course pursuant to this policy may re-enroll in the course at the next enrollment opportunity, subject to space availability and subject to any HWPS limitations on the number of times a student may repeat courses. (See the program handbook [Nursing Course Failure and Withdrawal](#).) Students re-enrolling in a clinical, internship or cooperative education course at a Site after prior removal pursuant to this policy must develop a [Success Plan](#) prior to re-commencing the course.
- VI. Confidentiality. The details and all communication related to any removal pursuant to this policy shall be kept confidential, subject to the contractual requirements of individual sites. If an incident involves more than one student, each student's case shall be investigated, evaluated and decided individually.

Success Plan

An integral part of student learning is the ability to bridge deficits. The purpose of the success plan is to help the student identify strengths and strategies to overcome the gaps in knowledge, skills, or behaviors. Students who will be placed on a success plan include, but are not limited, to the following:

- A. Students who fail to attain and demonstrate essential skills appropriate to the site.
- B. Students who consistently show difficulty with attaining program objectives.
- C. Students who are allowed to return to a clinical site after a critical incident.
- D. Students who are re-entering the program after a course failure.

The Success Plan will be developed in collaboration with the level coordinator and the clinical instructor, the student and the HWPS Achievement Coach. The Program Director/designee must approve, sign and date the Success Plan. The student will sign and date the Success Plan and will be given a copy of the

signed documents. Students who are subject to a Success Plan shall meet regularly with the level coordinator and/or designee to review the student's status and progress.

Students who do not meet the measurable objectives listed on the success plan by the dates listed may accrue a course failure.

Approved by Division Council December 2006, Revised: August 2013

Appeal of Student Removal from an Off-Campus Instructional Site or On-Campus Laboratory

The School of Health, Wellness and Public Safety (HWPS) provides for an appeal process for students removed for the duration of a course in accordance with the Student Removal Policy.

- I. Student Appeal Request
 - A. The student, following the Student Checklist for an Appeal, initiates the appeal in writing by using the appeal request form.
 - B. The appeal request form must be submitted to HWPS Office within two business days of receipt of the written notice of removal. The form must be signed by the student and be accompanied by written justification to support the appeal.
 - C. All documentation to be considered during the appeal hearing must be submitted by 12:00 noon, one business day prior to the appeal hearing. The documentation will be time stamped showing the time of submission. The person submitting the documentation will be required to initial the time stamp.
 - D. Upon receipt of the Appeal Request Form and at the earliest possible convenience, the HWPS Dean or Nursing Program Director will review the appeal request with the student and discuss the appeal process.
- II. Appeal Hearing Panel and Documentation
 - A. Within five business days of the receipt of the Appeal Request Form, the HWPS Division will appoint a three member panel to conduct the appeal hearing and schedule the appeal hearing. The panel will be composed of two HWPS faculty members and one HWPS student. One of the faculty members will serve as the chair. The chair cannot be a faculty member in the program from which the student has been removed.
 - B. The appeal hearing will be scheduled by the HWPS Office (JS-310, 224-4111), and all parties will be notified of the date, time and location of the hearing.

December 2006

COURSE PROGRESSION

Incomplete Grade Assignment and Removal (CNM Academic Policies)

A grade of 'I' (incomplete) is given when circumstances beyond the student's control have prevented completion of the work for a course within the official dates of a term. In no case is an 'I' to be used to avoid a failing grade or to allow extra time to complete work normally expected. Please see the CNM Catalog for the full text of this policy.

Reviewed May, 2012

Withdrawals and Failures Defined

Withdrawal: When the student chooses to drop enrollment in a required nursing course. The nursing program does not take the grade at the time of withdrawal into consideration. A withdrawal is considered a course failure.

Course failure: When the student achieves a grade of less than 75% in any NURS course (supplemental labs excluded), a grade of less than 90% on the CCT retake, a clinical failure, or withdraws from a course.

Program failure: When the student fails and/or withdraws from two or more required NURS courses. When this occurs, the student may not continue in the AASN program until there is a successful appeal.

Approved March 26, 2012, Updated August 2013

CNM Nursing Course Failure and Withdrawal

A course failure is defined as the following:

1. a grade below the passing rate of 75% and/or
2. a clinical failure and/or
3. a grade below 90% on a CCT retake ([Clinical Calculations Test \(CCT\)](#) procedure) and/or
4. withdrawal from a NURS/NRSG course for any reason.

Students who have had a single course failure may enroll in the same course ([except for NURS 1080](#)) for a second time.

Students who accrue two (2) course failures may not continue in the AASN program but may [appeal](#) if extenuating circumstances occurred.

Revised August, 2013

Auditing Nursing Classes

In addition to the CNM audit policy, with the approval of the Office of the Registrar and the course (level) coordinator for the nursing course, auditors may be permitted in the nursing course under the following conditions:

1. The prospective auditor must have been enrolled and eligible to re-enroll in the nursing class that is to be audited, withdraw from the class, either passing or failing and then complete the process to change to audit.
2. Regular course fees are paid.
3. Auditors are clearly identified to the instructor. The student may not attend class until evidence of having enrolled in audit is presented to the instructor.
4. Auditors are NOT permitted to take quizzes and/or exams or participate in the nursing lab or clinical activities.
5. A grade cannot be subsequently or retroactively awarded.

Reviewed May, 2012

Re-entry into the Required NURS Course

For Dosage Calculations and Pharmacology, students may simply re-enroll after a withdrawal or a failure. These courses do count towards program failure. It is possible for a student to accrue a program failure before ever taking a core clinical course. If this happens, they will be eligible for an [appeal](#); otherwise they

may re-enter the program after three years. The supplemental labs are not required coursework and therefore do not count towards program failure.

Students who withdraw from or are unsuccessful in NURS 1080 must re-petition to the program.

For all other coursework: After one required NURS course withdrawal or failure, the student may apply to reenroll in the course. To apply for re-entry into the course, complete the Request for Readmission Form which is available in the HWPS office. Submit the form to the Nursing Program Director on the 4th floor of the JS building. Please note: re-entry into the program is on a space available basis. Students are ranked by grade at the end of the term. Students who have appealed will get second priority by date of appeal. All re-entry students will be [drug tested](#). Also, if there has been a break in enrollment at CNM, the student will also have to pay for fingerprinting and an additional [background check](#).

Approved March 26, 2012, Revised August 2013

The Appeal Process for Program Failure

Appeal for Reentry due to Extenuating Circumstances

Nursing school is difficult under the best of conditions. Occasionally, students experience unusual or particularly stressful life events that contribute to the program failure. In these situations, students who have accrued two course failures are encouraged to submit a letter of appeal to the Student Committee requesting one additional opportunity to overcome those difficulties and to succeed.

The intent of the letter of appeal is to provide the student the chance to explain their extenuating circumstances related to required NURS course withdrawal and/or program failure.

Prior to submitting a letter of appeal, the student is encouraged to meet with the HWPS School Advisor and/or the Achievement Coach for guidance. The student will create and submit a letter of appeal to the Chair of the Nursing Student Committee.

The student's written appeal must be submitted to the Chair of the Nursing Student Committee by the first day of each month. The letter of appeal must include the student's full name, mailing address, email address and telephone number. The student is encouraged to meet with the Nursing Program Director for guidance on the appeal process. The student will also need to complete a Request for Readmission Form and submit it to the program director for her records.

- 1) The appeal letter must include a full description of the extenuating circumstances that contributed to the program failure plus a [success plan](#). This letter is reviewed only by the faculty in the Student Committee and is kept highly confidential.
- 2) The appeal letter must also include a plan for success. This plan should describe positive changes that occurred after the prior withdrawal or failure that the student now believes will allow them to be successful going forward. The student should also describe factors that interfered with or prevented success in the classes, and remediation they completed in order to minimize the reoccurrence of academic failure.

If the appeal is accepted by the Nursing Student Committee, the student will be readmitted into the AASN Nursing Program if space is available and based on the priority in the readmission section of this handbook.

The appeal will be reviewed by the Nursing Student Committee at a regularly scheduled meeting. The decision of the committee is final. If the Committee accepts the appeal, the student will be eligible to [return](#) to the AASN Nursing program. This will be the one and only time that this option will be granted to that student.

If the appeal is accepted by the Nursing Student Committee, the student will be readmitted into the AASN Nursing Program if space is available and based on the priority in the readmission section of this handbook. Students must accept the seat when it comes available or the appeal will be null and void. Unsuccessful appeals or a student who had a successful appeal but then who were unsuccessful in any NURS course enrollment (with the exception of NURS 1092 or NURS 1592) will not be permitted to continue in the Nursing Program. Should the student decide to pursue nursing again through CNM, he/she will need to wait three years to enter the Nursing Program again. All program entry requirements must be met at the time of petitioning per the Nursing Program requirements as listed in the current CNM catalog. At the time of successful re-petitioning, students will start again in the Nursing Program anew with no prior history from the prior enrollment in the Nursing Program.

Approved September 24, 2012, Updated August 2013

COMMUNICATION

E-mail

E-mail is the primary means of communication in the Nursing Program. Students are required to access and maintain their CNM e-mail accounts. The CNM email address is the only email address that the school of nursing will use to communicate with enrolled students. Students should check their e-mail daily, but absolutely must check their e-mail at least twice a week. While it is possible to forward email from the CNM account to other accounts, it is not recommended because it often results in message failure, which is not considered a valid excuse for missing information. Students are held responsible for the information within the e-mails, whether they read them or not. Students are responsible for contacting the CNM Information Technologies help desk via telephone at 224-4357 or at servicedesk@cnm.edu to resolve any e-mail problems.

Approved July 23, 2012, Updated August 2013

Announcements/Handouts

Students are responsible for the content of all classroom announcements and handouts, even if they are absent. Important notices will also be posted on Blackboard. Notices of general interest and information for nursing students may also be posted with approval on bulletin boards in Jeannette Stromberg Hall.

Revised August 2013

EXTERNAL COMPLIANCE

Credentialing

Students are expected to complete all credentialing requirements by the deadlines provided each term. While CNM has specific requirements of students (e.g. CPR certification, health requirements, background checks, etc) students are further expected to complete any site-specific requirements set forth by the clinical partners. This includes, but may not be limited to attending computer training sessions, completing required computer modules, and attending face-to-face training/orientations sessions. These requirements will be clearly communicated, but be aware that the communication may come directly from the clinical partner and not from CNM.

Failure to credential will result in an inability to place the student at the assigned clinical location and subsequent clinical failure. The student will not be offered an alternate clinical site for non-credentialing reasons unless they are deemed to be truly outstanding (e.g., serious illness or injury resulting in non-attendance of training). If a student does miss a required deadline, the student may be required to show proof of serious illness or injury.

Approved July 23, 2012, updated August 2013

Documentation Required for the Office of Verification and Compliance

Student compliance requirements that must be completed and on file in the CNM Office of Verification and Compliance (OVC) prior to their first clinical day* for all of the following:

HEALTH RELATED:

Disease Screening	Accepted Documentation of Immunity	Action Required if Client is not Immune	Timeframe
Tuberculosis (TB) – <ul style="list-style-type: none"> • PPD Skin test or • QuantiFeron (TB Gold) 	<ul style="list-style-type: none"> • Nonreactive result (PPD) or • Not Detected for QuantiFeron 	Chest X-ray (CXR) result read by a radiologist showing the student is negative for active disease.	<ul style="list-style-type: none"> • Documentation for screening is due annually. • CXR satisfactory for five years of the time of the x-ray, but students must sign a TB form annually in OVC.
Tetanus, Diptheria, and Pertussis (TDaP or DTaP)	<ul style="list-style-type: none"> • Proof of immunization 	Proof of immunization	Immunization must be within the past 10 years. Students whose TDaP will expire while enrolled at CNM are encouraged to get revaccinated.
Measles, Mumps, and Rubella (MMR)	<ul style="list-style-type: none"> • Proof of immunization after 1992 or • Reactive titer for all three diseases 	Proof of immunization dated after the negative titer.	Once
Varicella	<ul style="list-style-type: none"> • Proof of immunization – this is a two-injection series. Both shots must be documented. • Proof of positive titer 	<p>Proof that two injection series has been started at least two weeks before the beginning of the term. Records will be tracked to ensure that the remaining injection is administered.</p> <p>The second injection is given at least four weeks from the first.</p>	Once
Hepatitis B <i>(please note, CNM recommends that students seek immunization for Hepatitis A as well, but this is not required)</i>	<ul style="list-style-type: none"> • Proof of immunization – this is a three-injection series. All three shots must be documented. • Proof of positive titer 	<p>Proof that three injection series has been started at least two weeks before the beginning of the term. Records will be tracked to ensure that the remaining injection is administered.</p> <p>Injections are given at 0, 1, and 6 months.</p> <p>A two-dose series of Recombivax HB at 20 microliters is available.</p>	<p>Once</p> <p><i>Note: Studies have shown inconsistent levels of immunity after ten years. It is recommended that students have another hepatitis B titer drawn to determine if a booster would be beneficial.</i></p>

Influenza (flu)	Proof of immunization	Students may “opt out” of the annual flu-shot, but may be required to wear a mask during clinical. The mask is not to be removed in patient or staff areas.	Annually between September and March – <i>*Because of the seasonal nature of the flu vaccine, students are only required to receive annual immunization within this timeframe.</i>
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NON-HEALTH RELATED:

Requirement	Where to get forms	Approved Documentation	Timeframe
Urine Drug Screen	New students will get the forms at orientation. Re-entering students, or students who have lost the papers can get the forms from the OVC on the 4 th floor of the JS Building	The lab will communicate directly with the OVC. They report when the sample is obtained and when results are known. Students must use CNM’s approved labs and forms. Other labs, or results from the contracted lab, using a different request form, are not accepted.	<ul style="list-style-type: none"> On admission. On readmission - students must have the drug screen in process before classes begin. On suspicion of drug or alcohol use.
Fingerprinting and the New Mexico Department of Health (DOH) Background Check.	New students will get the forms at orientation. All CNM students must have a new background check**, regardless of checks done recently for other reasons. Re-entering students who have had a break in CNM enrollment can get the forms from the OVC on the 4 th floor of the JS Building.	The DOH communicates directly with CNM.	On admission to the nursing program. <i>**LPN mobility students are exempt from fingerprinting and the background check, so long as their license is active and unrestricted.</i> On readmission if student has had a break in CNM enrollment.
Cardiopulmonary Resuscitation Certification (CPR)	CNM does not provide forms. Healthcare provider level training in one of the following approved providers: <ul style="list-style-type: none"> American Heart Association (AHA) American Red Cross (ARC) American Safety and Health Institute (ASHI)	A photocopy both sides of the issued CPR card. OVC staff will need to visually inspect the actual card. The expiration (or recommended renewal date) must be legible.	Certification must be current. Different providers may have different certification periods.
Completion of Basic Patient Care Skills (BPCS) Requirement	N/A	Proof of completion of one of the following: <ul style="list-style-type: none"> Current CNA license Completion of CNM NA course Completion of CNM BPCS class Completion of UNMs BPCS class (NUR 223) Completion of BPCS checkoff. 	Upon admission to NURS 1080.

While the OVC will endeavor to notify students with incomplete or soon-to-expire credentialing items, it is ultimately the student's responsibility to maintain compliance. Students who miss credentialing deadlines will not be allowed to attend on- or off-campus clinicals, which may result in a failing grade.

Updated August 2013

Student Caregiver Criminal History Screening Policy

Central New Mexico Community College and the New Mexico's Department of Health (DOH) are committed to zero tolerance of abuse, neglect and exploitation of individuals receiving health care.

The New Mexico Caregivers Criminal History Screening Act (CCHS) was passed during the 1998 Legislature. This law requires that a "care provider," which includes those individuals providing direct care or having routine and unsupervised physical or financial access to any care recipient, must undergo a nationwide criminal history screening to ensure to the highest degree possible the prevention of abuse, neglect or financial exploitation of individuals receiving care. This law prohibits persons with disqualifying convictions from working with individuals receiving health care. The law is very specific about the conviction history and the care provider's responsibility, as well as the types of crimes and convictions. See Section IV of this policy for a list of disqualifying convictions.

HWPS students enrolled in healthcare education are defined by the law as "caregiver" and as such, must submit an application for a nationwide criminal history screening prior to entering the program or within the first week of the program's clinical component. A student must receive a full clearance to maintain enrollment in the program. If the screening results in a disqualification, the student will be removed from the program immediately upon notice of the disqualification.

Definitions: For purposes of this policy, the following definitions shall apply:

- "*act*" means Sections 29-17-2 to 29-17-5, NMSA 1978 of the caregivers criminal history screening act.
- "*applicant*" means a person who applies, and is offered employment or contractual service with a care provider to provide services as a caregiver or hospital caregiver whether as an employee or contractor.
- "*care*" means the therapy, services, treatment, support, supervision, and assistance with the activities of daily living or management of a care recipient.
- "*caregiver*" means any person whose employment or contractual service as a student with a care provider includes direct care or routine and unsupervised physical or financial access to any care recipient serviced by that provider.
- "*care provider*" includes: state owned or operated health care facilities, intermediate care facilities for the mentally retarded, general acute care hospitals, long-term care hospitals, psychiatric hospitals, rehabilitation hospitals, hospice services, guardianship providers, adult residential care facilities, adult community residential facilities, adult limited diagnostic treatment centers, case management entities providing services to persons with developmental disabilities, adult boarding homes, adult day care centers, adult family care homes, adult halfway homes, care providers operating respite, companion or personal care programs funded by the New Mexico aging and long term services department, care providers funded through the New Mexico

Children Youth and Families Department providing homemaker and adult care services, disabled and elderly residential care providers providing services paid for in whole or in part by state funds, home health agencies, all residential habilitation service or respite service care 7.1.9 NMAC 2 providers authorized to be reimbursed in whole or in part by state funds or under any Medicaid or Medicaid waiver program, nursing home facilities, any other care provider entity which is licensed or Medicaid certified and which is not specifically identified herein.

- “care provider” does not include: outpatient treatment facilities, diagnostic and treatment facilities, ambulatory surgical centers and facilities, end-stage renal dialysis and treatment facilities, rural health clinics, private physicians’ offices or other clinics that operate in the same manner as private physicians’ offices in group practice settings, and any care facility located at or performing services exclusively for any correctional facility.

CNM, as an institution providing healthcare education, enters into clinical education contracts with care providers in New Mexico that allow students to serve as caregivers. In this capacity, CNM is required by law to obtain a caregiver criminal history screening clearance through the New Mexico Department of Health, Division of Health Improvement, Caregivers Criminal History Screening Program.

- “*care recipient*” means any person under the care of a care provider who has a physical or mental illness, injury or disability or who suffers from any cognitive impairment that restricts or limits the person’s activities.
- “*consent*” means the written acknowledgment of permission to conduct a nationwide or statewide criminal history screening. Consent also includes, with respect to the criminal history record, permission for the New Mexico Department of Health, Caregivers Criminal History Screening Program, following an attempt to obtain clarifying information from the applicant, caregiver or hospital caregiver to attribute, as a rebuttable presumption, disqualifying conviction status to any arrest for crimes that would constitute a disqualifying conviction and for which the arrest appearing on the nationwide criminal history record lacks a final disposition.
- “*disqualifying conviction*” means a plea, judgment or verdict of guilty, a plea of nolo contendere, an Alford plea or any plea or judgment entered in connection with a suspended sentence, in this state or from any other state or jurisdiction to a felony crime listed in 7.1.9.11 NMAC. If a conviction may be considered in or used for sentence enhancement in a subsequent proceeding, then it is a disqualifying conviction under these rules if the conviction is for a crime listed in 7.1.9.11 NMAC.
- “*hospital caregiver*” means any person whose employment or contractual service with a care provider includes direct care or routine and unsupervised physical or financial access to any care recipient serviced by that care provider in an inpatient setting who is not a licensed New Mexico health care professional practicing within the scope of a profession’s license.
- “*nationwide criminal history screening*” means a criminal history background investigation of an applicant, caregiver or hospital caregiver through the use of fingerprints reviewed by the Department of Public Safety and submitted to the Federal Bureau of Investigation, resulting in the generation of a nationwide criminal history record for that applicant, caregiver or hospital caregiver.

- *“nationwide criminal history record”* means information collected by criminal justice agencies concerning an applicant’s, caregiver’s or hospital caregiver’s arrests, indictments or other formal criminal charges, and any dispositions arising there from, including convictions, dismissals, acquittals, sentencing and correctional supervision.
- *“routine”* means in the context of care provision or financial access by an applicant, caregiver or hospital caregiver, that which is non-episodic and regularly scheduled or assigned.
- *“supervised”* means, in the context of care provision or financial access, the supervisory oversight a care provider employs to ensure the prevention of abuse, neglect or the misappropriation of property of a care recipient by a caregiver or hospital caregiver during the caregiver’s or hospital caregiver’s conditional employment period. Supervisory oversight shall include but is not limited to a management program utilized by the care provider, which demonstrates a systematic and routine monitoring of the safety and quality of service provided by the caregiver or hospital caregiver to the care recipient during the caregiver’s or hospital caregiver’s conditional employment period.
- *“statewide criminal history screening”* means a criminal history background investigation of an applicant, caregiver or hospital caregiver through the use of fingerprints reviewed by the department of public safety resulting in the generation of a statewide criminal history record of the applicant, caregiver or hospital caregiver.
- *“unsupervised”* means, in the context of care provision or financial access, that which occurs without the on-site, visual or physical presence of another caregiver or hospital caregiver or a family member of the care recipient or of another individual representing the care provider.

Disqualifying Convictions: The following felony convictions disqualify a student from being enrolled in the program:

- homicide;
- trafficking, or trafficking in controlled substances;
- kidnapping, false imprisonment, aggravated assault or aggravated battery;
- rape, criminal sexual penetration, criminal sexual contact, incest, indecent exposure, or other related felony sexual offenses;
- crimes involving adult abuse, neglect or financial exploitation;
- crimes involving child abuse or neglect;
- crimes involving robbery, larceny, extortion, burglary, fraud, forgery,
- embezzlement, credit card fraud, or receiving stolen property; or
- an attempt, solicitation, or conspiracy involving any of the felonies in this subsection.

In cases when the criminal history record lists an arrest for a crime that would constitute a disqualifying conviction and no final disposition is listed for the arrest, the New Mexico Department of Health, Caregivers Criminal History Screening Program will attempt to notify the applicant, caregiver or hospital caregiver that a final determination requires additional information. The additional information/evidence, such as, a certified copy of an acquittal, dismissal or conviction of a lesser crime, will be requested and must be provided by the applicant, caregiver or hospital caregiver regarding the final disposition of the arrest within timelines set forth by New Mexico Department of Health, Caregivers Criminal History Screening Program.

Caregivers Criminal History Screening Program Application Process: The New Mexico Department of Health, Division of Health Improvement manages the Caregivers Criminal History Screening Program (CCHSP). CNM, a contracted partner of the care providers, is required to submit an application for screening on behalf of each student who is enrolled in an HWPS program and who is defined as a caregiver. The application must be submitted by HWPS to the CCHSP prior to the student's entry into the program or at the commencement of the student's clinical education experience. The application must include:

- Three (3) completed fingerprint cards;
- A copy of a photo identification (driver's license or passport) that meets the requirements of the Immigration and Naturalization Act; and
- A signed "Authorization for Release of Information" form which includes the student's social security number.

All documentation submitted to the New Mexico Department of Health, Caregivers Criminal History Screening Program for the purposes of criminal history screening and for the purposes set forth in 7.1.9.9 NMAC and 7.1.9.10 NMAC shall become the sole property of the New Mexico Department of Health, Caregivers Criminal History Screening Program with the exception of fingerprint cards which shall be destroyed upon clearance by both the Federal Bureau of Investigation and Department of Public Safety. All other submitted documentation shall be retained by the New Mexico Department of Health, Caregivers Criminal History Screening Program for a period of one year from the final date of closure and thereafter shall be archived. More information about this program is available from the New Mexico Department of Health:

New Mexico Department of Health
Division of Health Improvement (DHI)
Caregivers Criminal History Screening Program (CCHSP)
P.O. Box 26110
Santa Fe, NM, 87502
TEL: (505) 476-0801
FAX: (505)424-7974
<http://dhi.health.state.nm.us/cchsp/index.php>

Fingerprinting sessions will be scheduled by HWPS prior to and during the beginning of each term. All students who are enrolled in HWPS programs and who are defined as caregivers are required to be fingerprinted at one of the schedule sessions. Students must present an appropriate photo ID (driver's license or passport) that meets the requirements of the Immigration and Naturalization Act and sign an "Authorization for Release of Information" form at the time of fingerprinting.

The CCHS Program electronically submits the screening information within 24 hours of receipt of the application. A clearance may be determined in as few as 7 days if an applicant has no criminal history. A final determination for an applicant with a disqualifying history, depending on criminal charges and inter-agency processing, may take as many as 90 days or longer.

Screening Results

CCHSP will send the results of each applicant's screening to CNM School of Health, Wellness and Public Safety and to the applicant simultaneously.

Applicants with no disqualifying criminal history are given a clearance. The clearance is in effect for the duration of continuous enrollment in the program. When a student is not enrolled in a program for more than one term and/or, when a student changes to a different program within HWPS for which a screening is required, the screening must be repeated. When a screening is being repeated within 12 months of the previous screening in which no disqualifying convictions were found, the screening may include a statewide criminal history screening only.

CCHSP will send a written notice of a disqualifying conviction to CNM School of Health, Wellness and Public Safety and to the applicant simultaneously. A student found to have a disqualifying conviction will be removed from the program immediately, unless an individual program policy allows students to remain enrolled pending the outcome of an administrative reconsideration. (See Section VI D.) If applying for reconsideration, the student must present documentation to the program chair that a request for reconsideration was submitted to the CCHSP within the state-mandated time-frame of fourteen (14) calendar days (determined by the date of notice from CCHSP). While the request for reconsideration is being reviewed by the CCHSP, students will be supervised closely when in a clinical agency. Any student allowed to remain enrolled during administrative reconsideration will be removed immediately if they are not granted clearance through administrative reconsideration. HWPS will send notice to CCHSP verifying any student removed from a program. The student will not be eligible to enroll in any other allied health or nursing program that requires a caregiver's criminal history screening.

A student found to have a disqualifying conviction may request an administrative reconsideration from the New Mexico Department of Health, Caregivers Criminal History Screening Program.

The reconsideration committee shall take into account the requirements of Section 28-2-1 to 28-2-6, NMSA 1978 of the criminal offender employment act. However, that act may not affect the disposition of the student's case. The following factors may be considered:

- total number of disqualifying convictions;
- time elapsed since last disqualifying conviction or since discharge of sentence;
- circumstances of crime including whether violence was involved;
- activities evidencing rehabilitation, including but not limited to substance abuse or other rehabilitation programs;
- whether conviction was expunged by the court or whether an unconditional pardon was granted;
- false or misleading statements about any conviction in the signed declaration;
- evidence that applicant, caregiver or hospital caregiver poses no risk of harm to the health and safety of care recipients; and,
- the age of applicant, caregiver or hospital caregiver at time of disqualifying conviction.

Maintenance of Records and Confidentiality.

HWPS shall maintain relevant documentation for all students required to undergo a caregiver criminal history screening. Documentation of the student's application status, clearance or disqualification shall be maintained in accordance with the college's records retention policy.

All information related to the caregiver criminal history screening process shall be kept confidential except when there is a legitimate academic need-to-know in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA, P.L. 93-380, 512)

Student Drug Screening Policy

- I. Purpose and Rationale: Central New Mexico Community College and healthcare facilities used for student instruction are committed to zero tolerance of use of illegal drugs and the abuse of legal drugs. Healthcare facilities, as part of their contractual clinical agreements with the School of Health, Wellness and Public Safety (HWPS), require that all students complete an initial drug screen prior to beginning their educational experiences. Students who re-enter the program will also submit to a drug screen. Students with a positive drug screen will be removed from the course for that term. (See Positive Urine Drug Screening Policy).
- II. Definitions: For purposes of this policy, the following definitions shall apply:
 - A. Drug screen is a forensic urine drug screen conducted by a licensed drug screening facility designated by CNM. The facility will collect the urine sample and conduct the drug screen following standard protocol. The screen will detect the presence/non-presence of specified drugs or their analogs at standard industry levels indicating a positive (present)/negative (not present) screen.
 - B. Illegal drugs are drugs identified by state and federal law as illegal and include but are not limited to: marijuana, hashish, cocaine (including crack), amphetamines, heroin, PCP, hallucinogens and legal drugs taken without a documented prescription for the student.
 - C. Legal drugs are prescription drugs and controlled substances that are required by law to be prescribed by a physician or licensed healthcare provider for a specific individual. The drug is considered legal if the person has written verification from their healthcare provider.
- III. Drug Screening Process: All students will submit to a drug screen at a facility designated by CNM upon admission to the program/course and provide written consent for the results to be released to the HWPS Dean or designee. Additional information will be provided by the program Chair upon admission/enrollment in a program/course. Figure A lists the drugs for which the urine is screened.
- IV. Screening Results:
 - A. A student who tests positive for illegal drugs will receive a written notice of a disqualifying drug screen (positive drug screen) and will immediately be removed from the course. The student may request a retest of the specimen at their own expense.
 - B. A student who tests positive for legal drugs will be allowed to remain in the course contingent upon submission of documentation from a provider that the drug was prescribed for them legally and there is no evidence of impairment. This determination is made by the Medical Review Officer with the contracted facility doing the drug screening.
 - C. Program policy may allow students who test positive to remain in the course until the results of a second urine drug screen are received; however, they may NOT attend clinical at a healthcare facility until a negative drug screen report is received. Students will only be allowed to retest one time. Students who test positive on any required urine drug screening will be removed from the nursing program immediately. These students will have two options:
 - a. The student may retest within five (5) business days of the receipt of the original screening results.
 - i. If the second screening is negative, the student will be reinstated into the nursing program. The student will remain subject to the Impaired Student Policy which applies to all students.
 - ii. If the second screening is positive, the student will be removed with a withdrawal/failure. Students may apply for re-entry to the program in accordance with the [CNM Nursing Course Failure and Withdrawal process](#)

whether they have an additional urine drug screen or not. They will be subject to the CNM policy for urine drug screening and criminal background checks.

- b. Students may choose not to retest and be removed from the nursing program with a withdrawal/failure. The student may apply for re-entry (unless student was enrolled in NURS 1080) and will be subject to the policy for urine drug screening and criminal background checks upon reentry. Students will be considered for re-entry to the Nursing Program in accordance with the Withdraw/Fail/ Readmit policy and based on availability.
- D. Students with a negative drug screen are given a clearance. The clearance is in effect for the duration of continuous enrollment in the program.
- E. All students are subject to the [HWPS Policy for Suspected Impairment](#).
- F. When a student requests re-entry, they will need to follow program policy regarding a new drug screen.
- G. When a student changes to a different program within HWPS for which a screening is required, the screening will be repeated.
- H. A student with a disqualifying drug screen will not be eligible to enroll during that term in any other allied health or nursing program that requires a drug screen. For those programs using a petitioning process, students will need to follow program protocol for requesting entry at a later time and the screening will need to be repeated as directed by the program Chair. This screening will be at their expense. Students enrolling in other allied health or nursing courses that do not use a petitioning process will need to re-enroll another term, according to program/course policies, and will have a repeat drug screen as required by the course.
- V. Maintenance of Records and Confidentiality – HWPS shall maintain relevant documentation for all students required to undergo a drug screening in accordance with the college’s records retention policy.

All information related to the drug screening process shall be kept confidential except when there is a legitimate need to know in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA, P.L. 93-380, 512).

Figure A: The drug screen may detect the following:

Drugs	Examples of/other names for the drug
Alcohol	
Amphetamines	Speed, Methamphetamine
Barbiturates	Phenobarbital, Seconal
Benzodiazepines	Valium (diazepam), Librium, Xanax, Restoril, Ativan, Clonipin, Seraz, Halcion, Rohypnol
Cannabinoids	Marijuana, Weed, Pot, Hashish
Cocaine	Coke, Crack, Benzoylcoaine
Fentanyl	
Merperidine	Demerol
Methadone	Dolophine
Opiates	Heroin, Morphine, Codiene, Opium
Oxycodone	Oxycontin
Phecyclidine	PCP, Angel dust
Propoxyphene	Darvon, Darvocet
Sufentanil	

June 11, 2007 Revision Approved: August 23, 2007, Updated August 2013

Policy and Procedure for Students Suspected of Impairment

- I. Purpose: Drug or alcohol use, either while on campus or in a clinical, practical or laboratory setting, can seriously endanger the safety of patients and students, as well as render it impossible to provide safe healthcare and service. Impairment, or potential impairment, of judgment in the clinical, practical or laboratory setting places the safety of students, patients, faculty and the general public at an unacceptable risk. The purpose of the policy is to:
 - A. Provide clear guidelines and consistent procedures for handling incidents of student use/abuse of alcohol, drugs or controlled substances that affect or are likely to affect judgment in the clinical, practical or laboratory setting.
 - B. Inform students of their responsibility to conform to all state and federal laws and regulations and CNM policies, rules and regulations regarding alcohol, drugs or controlled substances.
 - C. Provide substance abuse prevention/detection education for all faculty regarding problem recognition and implementation of this policy.
 - D. Balance the need to safeguard the public with the student’s rights.
- II. Policy: Although CNM enforces a policy regarding substance abuse, the special needs of the School of Health, Wellness and Public Safety requires additional procedures for handling the suspected drug/alcohol impairment of students enrolled in HWPS coursework designated as clinical, practical or laboratory courses. Due to the nature of the course of student, students enrolled in such HWPS clinical/practical/laboratory courses must not be under the influence of any substance (regardless of whether the use of substance is legal or illegal) which impairs or is like to impair their clinical judgment while in the patient care, clinical, practical or laboratory setting. This policy demonstrates the School of Health, Wellness and Public Safety’s commitment to safeguard the health of students and the public and provides a safe place for students to learn.
 - A. Legal Drugs – Legal drugs include medications prescribed by a physician for a specific individual and over-the-counter medications. The School of Health, Wellness and Public Safety prohibits the use/abuse of such drugs to the extent that behavior or judgment is adversely affected.
 - B. Illegal Drugs – Illegal drugs include those controlled substances (certain drugs or substances that are subject to, or have a potential for, abuse or physiological dependence) under federal or state law that are not authorized for sale, possession or use/abuse (in confirmed, detectable levels), and legal drugs which are obtained or distributed illegally. Manufacture, use/abuse, possession, sale, purchase or transfer of illegal drugs is prohibited. The [CNM Student Code of Conduct](#) further elaborates this policy.
 - C. Impairment – A chemically impaired person is one who is under the influence of a substance that interferes with mood, perception or consciousness resulting in physical and/or behavioral characteristics which affect the individual’s ability to meet standards of performance, behavior and/or safety in clinical, practical or laboratory course settings.
- III. Legal Use of Substance Under Direction of Physician: A student taking legal drugs must be able to provide documentation of a medical reason for such in the event of a positive drug screen. This student may not participate in any clinical, practical or laboratory setting if impaired. All attendance policies remain in place and the student remains responsible for completing all requirements of the course or program.
- IV. Factors Suggesting Impairment: Current students, while in patient care, clinical, practical or laboratory settings, may be asked to submit to a drug test is cause or reasonable suspicion of substance use exists. Factors which could establish cause/reasonable suspicion include, but are not limited to:

Unsteady gait	Unusually disheveled appearance	Bloodshot eyes
Unusual sleepiness or drowsines	Aggressive tone	Physical aggression

Slurred speech or change in the student's usual speech pattern	Unexplained and/or frequent absenteeism during a scheduled class or clinical laboratory	Personality changes or disorientation Marked decrease in manual dexterity and/or coordination in body movement
Residual odor peculiar to some chemical or controlled substances	Odor of alcohol or marijuana	Inappropriate behavior impacting clinical, practical or laboratory judgment
Repeated failure to follow instructions or operating procedures	Violation of clinical, practical or laboratory facility or CNM safety policies	Involvement in an accident or near-accident
Discovery of or presence of drugs/drug paraphernalia in student's possession	Alcohol in a student's possession	Theft or absence of narcotics from the student's clinical or practical site

V. Substance Use Testing Procedures: The student will be removed from the classroom or clinical laboratory without delay and will be given an opportunity to explain his/her behavior. If the instructor/preceptor reasonably suspects impairment, the student shall be sent for a drug screen to a suitable laboratory designated by CNM. The student will not be able to return to class or clinical laboratory until the Nursing Program Director, the Dean or Executive Director of the School of Health, Wellness and Public Safety, the Dean of Students or identified designees deem it appropriate. The student remains responsible for all course or program requirements during such period.

VI. Students suspected of impairment will be sent for a 10+ alcohol forensic urine drug screen with split specimen and proper chain of custody by a laboratory that is certified by the Substance Abuse Mental Health Services Administration for DHHS/DOT testing and accredited in Forensic Urine Drug Testing by the College of American Pathologists (CAP-FUDT). The preceding requirements regarding custody and certification apply to a retest. Some screening sites may use a Breath Analyzer Test for alcohol. A facility that is licensed in compliance with the law will be used for the testing.

- A. The student will be given a drug screening referral form (see Appendix) and will take the form to the testing site immediately. The student must report to the testing site within one hour from the time the drug screen referral form is completed. The student shall provide the instructor with his/her current phone number.
- B. The student shall take a government issued picture identification card, such as a driver's license, with him/her to the testing facility.
- C. The student may not drive him/herself to the testing facility. The student may have someone else give him/her a ride to arrive at the lab site within one hour, or the instructor will arrange for transportation from the clinical or practical laboratory to the designated testing site through the School of Health, Wellness and Public Safety. The student will need to find his/her own transportation from the testing facility.
- D. CNM will pay for drug/alcohol screening whether the results are positive or negative. The student shall be informed of the test result. If the test result is positive, a student may request and pay for a retest of the collected urine specimen at the designated laboratory or another certified laboratory within five days of the positive result. Results of the test and contents of the suspected impairment form shall remain confidential and may be released only to the Dean of HWPS and the Dean of Students or the deans' designee and those with a legitimate need to know.

VII. Consequences:

- A. **Negative Results:** the student will meet with the instructor and the Nursing Program Director within two working days (not including Saturday or Sunday) of the receipt of the test results. During this meeting, the student will have an opportunity to present information regarding the matter. Behavioral issues that prompted the drug/alcohol screen will be discussed and a decision

will be made as to whether disciplinary action will be taken. If disciplinary action is indicated, the matter will be referred to the Dean of Students Office. The outcome of the decision (whether or not disciplinary action is needed) will be sent to the Dean of HWPS.

- B. **Positive Results**, the following actions will occur:
1. The student will be notified by the Nursing Program Director, the Dean or Executive Director of HWPS, or an identified designee of the results of the test and that the student cannot return to the clinical, practical or laboratory setting until approved to do so by the Dean of Students Office.
 2. All documentation will be sent to the Dean of Students Office for further action.
 3. The student shall contact the Dean of Students Office by the next working day after being notified of the test results.
 4. The student may request a retest of the split specimen at their own expense at another certified laboratory as described above.
- C. **Admission of guilt:** If the student admits to being impaired by drugs or alcohol, they will be removed from the clinical, practical or laboratory site and treated as though for a positive drug screen. Documentation will be forwarded to the Dean of Students Office for further action.
- D. **Failure to report for screening/refusal of screening:** Students must report to the testing site within the time required (one hour) or refuses to have a drug screen completed, such failure or refusal shall be treated as though for a positive drug screen. All documentation will be forwarded to the Dean of Students Office for further action.
- E. In the event that a disciplinary action includes removal from the HWPS program and/or CNM and the student thereafter requests and is allowed to return to any HWPS program, the following steps will be required prior to re-entry:
1. All CNM and the School of Health, Wellness and Public Safety requirements associated with the removal must be met.
 2. The student must provide a clean drug and alcohol screen prior to re-entry.
 3. The student must submit to random urine screens as long as the student remains enrolled in a clinical, practical or laboratory program within the School of Health, Wellness and Public Safety. An outside agent will be used, such as the Monitored Treatment Program.
 4. A positive test will result in referral to the Dean of Students Office for further action, with a recommendation from the Dean of HWPS for permanent removal from the School of Health, Wellness and Public Safety.
- F. Students testing positive for drugs and/or alcohol will be strongly advised to complete a Drug/Alcohol Rehabilitation Program.
- G. Conviction of a criminal drug statute while enrolled in an HWPS program will result in referral to the CNM Dean of Students Office for possible further action.

Approved 11/12/2003, Reviewed August 3, 2005, Revised August 2013

STUDENT HEALTH AND WELLNESS

Insurance

1. CNM does **not** provide the nursing student with health/accident insurance. The student is strongly encouraged to maintain his/her own health/accident insurance. This means that expenses incurred by the student, e.g., hospitalization, physician's fees, x-rays, would be the responsibility of the student, not the school. The [Student Health Center](#) can provide for many of the under or uninsured student's individual needs.

2. CNM provides liability insurance for each nursing student in the clinical area while practicing in the role of a student nurse. This insurance does **not** cover a student who functions in a nursing related role independently of his/her student role. Students do not need, and are actively discouraged, from purchasing individual malpractice insurance.
3. Students are NOT considered employees of any clinical agency while they are students. Clinical agencies to which nursing students are assigned do **not** provide any insurance for the nursing student. Injuries/illnesses occurring at or related to clinical performance are, at least initially, the financial responsibility of the student. Examples of such situations include, but are not limited to, the following:
 - back injury related to lifting patients
 - an infectious disease contracted from a patient
 - injuries sustained from auto accident while traveling with community nurse
 - injuries inflicted by patients
 - needle stick.

Updated August, 2013

Student Health Center

CNM has a health clinic on the main campus to provide affordable and quality primary care services to CNM students. At the [Student Health Center](#), medical records are held in strict confidence. They are not shared with parents, faculty, administrators or potential employers. Copies of records are released only at the patient's written request.

First aid and basic primary care services are offered. There is a co-pay due before services are rendered. Walk-ins are seen on a first come basis. A current class schedule and student ID are required.

Counseling services are also available to nursing students at the health center. The student will receive a call back from the counselor within 24 hours to set up an appointment. Eight sessions are available at no cost to the student.

Hours of operation are Monday through Friday from 0800-1700. Call 224-3080 for more information or to make an appointment.

Updated August 2013.

Student Health and Wellbeing

In order to promote health and wellness for students and the populations with which they interact, students will:

2. get adequate rest, especially before clinical days. Sleep deprivation can have similar physiologic effects to drug and alcohol intoxication and poses a significant threat to patient safety. Students who work nights must absolutely refrain from working immediately before and between clinical shifts.
3. not attend class, clinical, labs, etc. if they are ill. Upper respiratory and gastrointestinal illnesses can be highly contagious. If students are sick, they should stay at home to recover and not bring the illness to the classroom or to the clinical sites. A student who appears ill for class or clinical may be asked by the instructor to leave and may be advised consult a healthcare provider (HCP). The following addresses some common conditions:

CONDITION	RESTRICTION	RETURN
Conjunctivitis	No direct patient contact. Preferred that students stay away from theory but may attend.	24 hours after Rx started
Diarrhea>48 hrs	No direct patient contact or food handling	Until resolved

Furunculosis/Boils/ Draining rashes/Lesions	No direct patient contact or food handling	Until no drainage
HIV Infections	Clearance by physician on physical exam	
Hepatitis A	No direct patient contact	7 days after Jaundice onset or 2 weeks after symptom onset
Hepatitis B, acute	See Blood borne Pathogen Policy	
Hepatitis C, acute	See Blood borne Pathogen Policy	
Hepatitis, viral	See Blood borne Pathogen Policy	
Impetigo	No direct patient contact	Lesions dry/crusted
Influenza	Handled on individual basis	
Measles (Rubeola)	No work	Until 7 days after rash appears
Mumps	No clinical/classroom	Until 9 days after Parotitis onset
Rubella	No clinical/classroom	Until 5 days after rash appears
TB, active	No clinical/classroom	48 hrs after antibiotic begun, Sputum Bacilli free for 3 consecutive days (this may take months)
Strep Throat	No clinical	Until 24 hrs antibiotic begun
Shingles	May not care for high-risk patients, i.e. Labor and Delivery, postpartum, newborns <1, or Immuno-suppressed patients	Lesions dry/crusted
Varicella	No clinical/classroom	Lesions dry/crusted

4. notify the level coordinator if they are taking a medication that may or does impair judgment (see [Policy and Procedures for Student Suspected of Impairment](#)). Students are also reminded that prescription, as well as over-the-counter, medications may alter sensorium, gait or coordination which could cause a safety risk to the client or student.
5. provide a “return to work” note from the HCP to the Nursing Program Director if the student:
 - a. Has been away from campus for three days or more due to illness
 - b. Has undergone any surgical procedure, treatment for injury, childbirth, or other medical procedure – In this case the release note must have specifics about restrictions (e.g.) may only lift 20 pounds) OR that no restrictions are in place.
 - c. Is currently under the care of a rehabilitation care team member (respiratory therapist, physical therapist, cardiovascular rehab, etc). – In this case the release note must have specifics about restrictions (e.g.) may only lift 20 pounds) OR that no restrictions are in place.

A copy of the note will be placed in the student file. Students must update the program director as changes to restrictions occur. HCP clearance is required prior to the student returning to the clinical rotation for changes in health status.

6. discuss any recommendation pertinent to clinical or classroom requirements made by a HCP with the instructor or Level Coordinator.

Latex Allergy Policy

CNM endeavors to be a latex-free facility, but some latex-based supplies are still used at the clinical facilities. Students who have, or suspect that they have, a latex allergy should inform their level coordinator and clinical instructor.

Blood Borne Pathogen and Exposure Policy

The purpose of this policy is to reduce the risk of student exposure to blood borne pathogens such as, but not limited to, Hepatitis B Virus (HBV), Hepatitis C Virus (HBC) and the Human Immunodeficiency Virus (HIV). Standard precautions are an approach to infection control that reduces the risk of spreading pathogens and known and unknown infections by blood and body fluids for all patients and patient specimens regardless of diagnosis. Standard precautions will be the minimum standard of practice throughout the clinical sites and classroom labs. Whenever possible, transmission based precautions will

be used. Transmission based precautions takes standard precautions one step further and requires specific barrier precautions depending on how the pathogen is spread. All human blood and body fluids will be handled as if they are infectious.

Education and Training in Prevention of Blood borne Pathogen Exposure – Students will be required to participate and show evidence of blood borne pathogen exposure prevention and control training prior to attending clinical sites. The student must have satisfactorily demonstrated skills in using protective equipment and procedures before receiving a patient care assignment.

- I. Hepatitis B Vaccine – Students will be required to have begun the Hepatitis B vaccine series with a plan to complete on schedule or sign a declaration prior to going to clinical sites. Students may receive the series through the Student Health Center or their own private healthcare provider.
- II. General Screening – The School of Health, Wellness and Public Safety will not undertake any program of screening faculty or students for the antibody to HIV. Any student or faculty wishing to be tested will be referred to his/her private physician or the county health department.
- III. Guidelines for Clinical Assignments – Students who have received formal classroom instruction in blood borne pathogen exposure, and can satisfactorily demonstrate knowledge and skills requisite to such care, are required to accept clinical assignments in order to meet the course objectives.
- IV. Students at Risk:
 - A. The risk of transmission of HIV infection to pregnant healthcare workers is not known to be greater than the risk to those not pregnant. The risk of transmissions of other pathogens, such as cytomegalovirus, from patients with AIDS to pregnant healthcare workers is unknown but thought to be low to nonexistent. Based on the above information, there is no epidemiological reason to exempt pregnant students from caring for patients with blood borne diseases.
 - B. Students with diagnosed immunological deficiencies are at risk for developing opportunistic infections that may be present in clients with blood borne diseases as well as other non-infected clients. However, strict adherence to standard precautions will minimize the risk.
- V. Patients at Risk:
 - A. The Centers for Disease Control (CDC) does not recommend barring HIV-infected healthcare workers from practicing their profession. There is no evidence that infected healthcare workers have ever infected a client in the process of providing care. Studies on a number of HIV-infected dentists and surgeons have not discovered any transmission to any of their patients.
 - B. Based on the information from the CDC, students with HIV infection need not be restricted from clinical experience unless they have some other illness for which any healthcare worker would be restricted. Symptoms of HIV (fatigue, paresthesia, vision problems or dementia) may limit the healthcare worker's ability to safely practice.

The decision to reassign a student for a clinical experience will be made on a case-by-case basis by the faculty of the clinical course with guidance from the Nursing Program Director based on the above criteria. Extended reassignments will be made in consultation with the student's physician and the Nursing Program Director. Students will be expected to meet all course requirements.

Within the Code of Federal Regulations, there are statements designed to protect medical information and the privacy of the individual, providing there is no overriding need for the public to know. To mandate that a person infected with HIV be required to notify the School of Health, Wellness and Public Safety authorities is difficult, if not impossible, to enforce and legally challengeable.

Individuals involved in healthcare giving services that know they are infected with a blood borne disease are ethically and legally obligated to conduct themselves responsibly in accordance with the following protective behaviors:

- A. Seek medical advice
- B. Follow agency/site guidelines when involved in direct client care
- C. Be knowledgeable about and practice measures to prevent transmission of blood borne diseases

***Of note** – No specific or detailed information concerning complaints or diagnosis will be provided to faculty, administrators or parents without the express written permission of the individual in each case. The position with respect to health records is supported by amendment to the Family Education Rights and Privacy Act of 1974 and the New Mexico HIV Test Act (Chapter 277) of 1989. Health officials and other institutional officers must remember that statutes protect all confidential medical/health information and that any unauthorized disclosures may create legal liability.

Injury and Needlesticks

If a student be injured during school/clinical time, it should be reported immediately to the instructor and to the proper hospital personnel. The instructor will fill out two reports: an incident report for the facility where the injury occurred and an NMPSIA student incident report to be given to the CNM security department. If necessary, the student will be seen in the hospital's emergency room. Students will be responsible for any expenses related to their injury.

It is also possible for students to incur a needlestick injury. In the event of a contaminated needlestick, the student will notify the clinical instructor immediately. The faculty will contact the level coordinator and the infection control nurse for the institution (if one is employed). Again, the two incident reports will be completed by the clinical instructor as described above. The student will be seen in the CNM Student Health Clinic the next business day for medical follow-up.

Reviewed and revised April 18, 2012 and Updated August 2013

Functional Abilities for CNM Nursing Students

The CNM Nursing Program is accessible to qualified students with disabilities. The CNM Nursing Program follows the National Council of State Boards of Nursing, Inc. recommendations of functional abilities for nurses. In addition, the CNM Nursing Program complies with the Americans with Disabilities Act (ADA) of 1990, the 2008 ADA Amendments and Section 504 of the Rehabilitation Act. Knowledge and skills information was derived from a compilation of information and documentation provided by O*NET™ which is a trademark of the U. S. Department of Labor, Employment and Training Administration.

A nursing student's health must allow them to fulfill the requirements and outcomes of the Nursing Program. Therefore, if an applicant to the Nursing Program believes they are unable to demonstrate the skills described below, they should meet with the School of Health, Wellness and Public Safety Advisor prior to applying to the Nursing Program and provide documentation of their disability to the Disability Resource Center. The documentation of the disability should reflect an evaluation of the student performed within the 6 months prior to their application to the Nursing Program. Documentation of the disability needs to be from a professional that is familiar with the applicant's disability such as a physician, psychologist or rehabilitation counselor. Documentation should establish the validity of the disability and it will need to be submitted to the Nursing Program with a request for accommodations.

CNM cannot provide any service, modification, or accommodation if none are requested. Should any changes occur during the student's time in the Nursing Program, changes to the requested accommodation(s) should be provided in writing to the Nursing Program Director.

Once the student is admitted into the Nursing Program, a pathway for success will be designed between the student, the [Disability Resource Center](#), and the Nursing Program. It is the student's responsibility to notify the Nursing Program Director of any changes to or additions for accommodations.

Skills	Description
Social Perceptiveness	Being aware of others' reactions and understanding why they react as they do.
Interpersonal Skills	Interpersonal abilities sufficient to interact with individuals, families, and groups, respecting social, cultural, and spiritual diversity.
Emotional Stability	Emotional stability sufficient to assume responsibility/accountability for actions.
Active Listening	Giving full attention to what other people are saying, taking time to understand the points being made, asking questions as appropriate, and not interrupting at inappropriate times.
Coordination	Adjusting actions in relation to others' actions.
Speaking	Talking to others to convey information effectively.
Communication	Communication abilities sufficient for interaction with others in oral and written form.
Analytical Thinking	Reasoning skills sufficient to perform deductive/inductive thinking for nursing decisions.
Clinical Reasoning	Using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusion or approaches to problems. Clinical reasoning ability sufficient to exercise sound nursing judgment.
Reading Comprehension	Understanding written sentences and paragraphs to work related documents. Reading ability sufficient to comprehend the written word at a minimum of a tenth grade level.
Service Orientation	Actively looking for ways to help people.
Monitoring	Monitoring/assessing performance of self and others or organizations to make improvements or to take corrective action.
Judgment and Decision Making	Considering the relative costs and benefits of potential actions to choose the most appropriate one.
Science	Using scientific rules and methods to solve problems.
Gross Motor Skills	Gross motor skills sufficient to provide the full range of safe and effective nursing care
Fine Motor Skills	Fine motor skills sufficient to perform psychomotor skills.
Physical Endurance	Physical stamina sufficient to perform client care activities for entire length of work role.
Physical Strength	Physical strength sufficient to perform full range of required client care activities.
Mobility	Physical abilities sufficient to move from place to place and to maneuver to perform nursing activities.
Hearing	Auditory ability sufficient for physical monitoring and assessment of client healthcare needs.
Visual	Visual ability sufficient for accurate observation and performance of nursing care.
Tactile	Tactile ability sufficient for physical monitoring and assessment of healthcare needs
Smell	Olfactory ability sufficient to detect significant environmental and client odors.

Approved November 26, 2012

Disability Resource Center

The CNM [Disability Resource Center](#) assists students with physical, mental, learning, visual, speech or hearing disabilities. Career counseling, program planning, classroom accommodations, adaptive equipment, coordination with community support agencies and specialized learning plans are available.

Reviewed May 23, 2012

MISCELLANEOUS

Security

Security officers are available 24 hours a day. The non-emergency number is 224-3002. Officers can escort students after hours or any time they feel unsafe walking on campus to class or to their cars. It is recommended that any special situation regarding your security on campus or at the clinical site (restraining orders, stalking, etc.) be communicated to CNM Security as well as nursing faculty. Further, they can provide simple automobile assistance such as help in changing a tire or providing a jump start.

Students are also encouraged to sign up for “Attention CNM” emergency text alerts by logging on to www.getrave.com/login/cnm. The “Attention CNM” system is provided by Rave Mobile Safety. Rave does not charge subscribers to send or receive text messages. Standard or other messaging charges apply depending on the wireless carrier plan and subscription details.

Updated August, 2013

Smoking Policy

The CNM Governing Board has approved a proposal to make all CNM campuses smoke free starting in the Fall of 2013. The use of tobacco products, including the use of chewing tobacco and e-cigarettes, is now limited to designated smoking areas and banned from all other areas at all CNM campuses and locations. A smoke-free campus campaign will begin at the start of the fall term and will include a communications campaign, smoke-free campus signage, designated smoking area signage and resources to help CNM students and employees go smoke free. Once the campaign has begun, enforcement of the CNM smoke-free policy will commence.

Updated, August 2013

Inclement Weather

CNM announces a special schedule due to snow and inclement weather only under extreme conditions. When this occurs, information will be provided to the media regarding specific changes, if possible, by 6:05 a.m. Students may also call 224-4766 after 6:00 a.m. Students can also sign up for text alerts through www.getrave.com/login/cnm.

In the event that CNM has been closed due to inclement weather, clinical is also canceled that day. On an abbreviated schedule, classes begin at 10:00 a.m. Students who are in the clinical area for a full day will report to the clinical site at that time. Students who have a clinical half-day (out by 12 noon) will wait for instructions from their clinical instructor and/or level coordinator. These instructions will be posted on Blackboard.

Updated August, 2013

Children on Campus

CNM does not provide child care. It is CNM policy that children may not attend classes, labs, or clinical with students. Further, children should not be left unattended in cars, non-instructional areas, or in CNM computer labs.

Updated August 2013.

Cell Phone/Electrical Device Policy

- Students have the right to uninterrupted classroom and clinical experiences. Phone calls and text messages can disrupt the learning environment for the person sending/receiving the messages and the student peers in proximity. Classroom: When making or receiving personal calls, students should step out of the classroom. Cellphones or other electronic devices can be on the student's person, but must be in "silent" or "off" mode. Any disturbance, including the sound of a vibrating alert, by a student's cellular phone/electronic device is considered rude and disrespectful. The person with the obtrusive cellular phone/electronic device will be asked to leave the classroom.
- Clinical Areas: Cell phone and electrical device use will be at the discretion of the clinical instructor and in compliance with the facility's policy.
- Family emergencies: Students may use the Nursing Program office number as an emergency contact number (224-2141). Students will not be called out of class or clinical experiences unless the nature of the emergency is explained by the calling person. If a student feels that the family situation warrants greater availability than a message relay, the student should consider attending to those issues instead of attending class or clinical (see [Classroom Attendance](#) and [Clinical Attendance](#)).

Divergence from these policies may lead to initiation of a [success plan](#).

Updated August, 2013

Student Representation on Faculty Committees

Communication between representative student groups and the faculty is tremendously important, especially when decisions and discussions impact students. Students need to know about continuous process improvement initiatives and faculty need the student perspective when considering changes, implementing ideas, and collecting information on outcomes. To facilitate this, student representatives will be given the opportunity to attend nursing faculty and committee meetings as non-voting student representatives who can gather and share information.

In order to have student representation on Nursing Program committees, the nursing faculty advisor for the SNA will work with the Chair of each nursing student committee to recruit student representatives. Five (5) student representatives will be recruited near the beginning of each term. One representative will serve one each of the following CNM nursing program committees: Full Faculty, Student, Curriculum, Systematic Plan of Evaluation (SPE), and Resource. Student representatives are non-voting members. When confidential student information is discussed, the student representative will be asked to leave the room.

Updated Fall, 2013

GRADUATION AND PINNING

RN Licensure and Unlawful Activities

In accordance with the procedures contained in the Uniform Licensing Act [61-1-1 NMSA 1978], the board may deny, revoke or suspend any license held or applied for under the Nursing Practice Act, reprimand or place a licensee on probation or deny, limit or revoke the multistate licensure privilege of a nurse desiring to practice or practicing professional registered nursing or licensed practical nursing as provided in the Nurse Licensure Compact [61-3-24.1 NMSA 1978] upon grounds that the licensee, applicant or nurse: of

Nursing may deny, revoke or suspend any license held, or applied for, under the Nursing Practice Act upon grounds that the licensee or applicant violates any of the following:

1. is guilty of fraud or deceit in procuring, or attempting to procure, a license or certificate of registration
2. is convicted of a felony
3. is unfit or incompetent
4. is intemperate or is addicted to the use of habit-forming drugs
5. is mentally incompetent
6. is guilty of unprofessional conduct as defined by the rules and regulations adopted by the board pursuant to the Nursing Practice Act
7. has willfully or repeatedly violated any provisions of the Nursing Practice Act, including any rule or regulation adopted by the Board pursuant to that act
8. was licensed to practice in any jurisdiction, territory or possession of the United States or another country and was the subject of disciplinary action as a licensee for acts similar to acts described in this subsection (From the State of New Mexico Nursing Practice Act, Section 61-3-28 retrieved 08/16/2013 www.state.nm.us/nursing).

Adopted: August, 1987, Revised: December, 1992, Updated August 2013

Requirements for Graduation

The Associate of Applied Science in Nursing degree is granted to associate degree nursing students on completion of all courses in the prescribed curriculum with a grade of 'C' or better. Students must apply for graduation; this is not something the school of nursing can do on the students' behalf.

Revised August 2013

History of the Nursing Pin

The nursing pin is a 1,000-year old symbol of service to others. The earliest ancestor of the pin dates back to the Maltese Cross, adopted by crusaders and worn on their habits as a symbol of service. Over the centuries, variations of the crusader's symbol were gradually modified and became family coats of arms, often symbolizing service to a ruler. By the Renaissance, guilds had adopted coats of arms symbolizing masterful service to the community. The most recent ancestor of the pin is the hospital badge of 100 years ago. It was given by the hospital school of nursing to the students to identify them as nurses who were educated to serve the health needs of society. This symbol of service involves many professional rights and responsibilities (PubMed.gov).

Our pin was designed and presented to Albuquerque Technical Vocational Institute by Cindy Brandow (a graduate in the first ASN class of 1988). At the time, a contest was held to allow faculty and staff to design the pin. Eight designs were submitted and the final design was elected as the winner. The gold color represents purity. The laurel leaves around the border represent the tradition of the Greeks and Romans to honor their heroes. New Mexico's local culture is also represented by the Native American symbols of the medicine bird and the Zia.

The purchase of the pin is optional. The pin is usually ordered in the final semester and is available in a variety of styles and costs. We encourage students to consider the purchase of the pin as a symbol that represents their hard work and to continue the wearing of the pin as a nursing tradition.

CNM Pinning Ceremony

The pinning ceremony is the culmination of the educational journey that the graduate nurse has taken in order to qualify to enter the nursing profession. This ceremony welcomes the new graduates into the nursing profession.

At the end of the final semester in the nursing program, students receive a limited number of invitations for their family and friends to attend the pinning ceremony. At that ceremony, the nursing pin will be presented to the newly graduate nurse by the nursing faculty. Graduating students who attend the pinning ceremony need wear a ¾ length white lab coat over appropriate business attire. The pinning ceremony is coordinated by students under the guidance of a faculty volunteer. The pinning ceremony is scheduled with input from students and faculty. The time and date cannot conflict with the CNM commencement ceremony. The faculty keep a collection of CNM Nursing pins for graduates who are unable to purchase a pin. The graduate will be able to borrow the pin for the ceremony.

APPENDIX A: HWPS Suspected Impairment Form

Student Name:	Date:	Time:
Course:	Location of Event:	

This student was removed from the clinical, practical or laboratory setting, based on the factors indicated below. This student may not return to the clinical laboratory or classroom until they meet with the Nursing Program Director and the Dean of School of Health, Wellness and Public Safety and/or the Dean of Students Office.

- | | |
|--|--|
| <input type="checkbox"/> Unsteady gait
<input type="checkbox"/> Bloodshot eyes
<input type="checkbox"/> Unusual sleepiness or drowsiness
<input type="checkbox"/> Unusually disheveled appearance
<input type="checkbox"/> Slurred speech or in a different pattern from the student's usual pattern
<input type="checkbox"/> Aggressive tone (describe below)
<input type="checkbox"/> Physical aggression (describe below)
<input type="checkbox"/> Odor of alcohol or marijuana (circle one)
<input type="checkbox"/> Residual odor peculiar to some chemical or controlled substance (describe):
<input type="checkbox"/> Unexplained and/or frequent absenteeism during a scheduled class or clinical laboratory
<input type="checkbox"/> Personality changes or disorientation | <input type="checkbox"/> Discovery or presence of drugs/drug paraphernalia and/or alcohol in student's possession (circle one)
<input type="checkbox"/> Repeated failure to follow instructions or operating procedures
<input type="checkbox"/> Violation of safety policies of the clinical, practical or laboratory facility or CNM
<input type="checkbox"/> Involvement in an accident or a near accident
<input type="checkbox"/> Marked decrease in manual dexterity and/or coordination in body movement
<input type="checkbox"/> Theft or absence of narcotics from the student's clinical or practical site
<input type="checkbox"/> Other behaviors (describe below)
Other comments (include length of time observed, distance from student and how student responded when confronted): |
|--|--|

The following witness also observed the behavior(s) noted:

 Witness (Print Name)

 Witness Signature

(If a preceptor, please print the time of notification and the instructor's name.)

 Time/Date

 Instructor's Name

Student Name _____

The actions taken were (check which applies):

The student was sent for drug/alcohol test at:

_____ (Date) (Time)

- The student may not return to the clinical, practical or laboratory setting until results are known and approved to do so.
- The student must take government issued picture identification to the drug-testing site.
- The student may arrange for transportation to the drug-testing site. They may not drive themselves. If they cannot arrange transportation, CNM will provide a one-way trip from the clinical, practical or laboratory site to drug-testing site. Transportation provided by:

- _____
- The student must arrange for transportation from the drug-testing site.
- The student has a maximum of one hour to report to the drug-testing site from the time at which the drug screening referral form is completed.
- A split specimen may be collected in the even the student will want another lab to test the specimen.

The student admits to being under the influence of _____ and shall be treated as having a positive drug/alcohol test. THE STUDENT MUST SIGN THE FORM.

The student refused to go for a drug/alcohol test as described and shall be treated as having a positive drug/alcohol test.

A positive drug or alcohol test will result in immediate referral to the Dean of Students Office for disciplinary action. Self-admission of drug or alcohol impairment or refusal to go for a test will also result in immediate referral to the Dean of Students Office. All information is to be kept confidential.

Instructor/Preceptor (Print Name) Instructor/Preceptor Signature
Time/Date

Student (Print Name) Time/Date Student Signature

Witness (Print Name) Time/Date Witness Signature

If student would not/could not sign, please indicate reason or reasons given:

Notification to _____ occurred on _____
(Chair, Dean or Dean Designee) (Date and Time)

Copies of this form shall be given to: the student, the Dean of HWPS, the Nursing Program Director, the instructor and one placed in the student file.

Revised: November 12, 2003, Reviewed: August 3, 2003, Revised: June 3, 2011

APPENDIX B: Drug Screening Referral Form (for use by testing agency)

To: Concentra:

<input type="checkbox"/> at Commons 3811 Commons Ave. NE Albuquerque, NM 87109(505) 345-9599	<input type="checkbox"/> at Encino 801 Encino Pl. E-12 Albuquerque, NM 87102 (505) 842-5151	<input type="checkbox"/> at North Pointe 5700 Harper NE Ste. 110 Albuquerque, NM 87109 (505) 823-9166
<input type="checkbox"/> Outside Albuquerque:		
<input type="checkbox"/> After hours in Albuquerque:		

From: Dean of the School of Health, Wellness and Public Safety
 Central New Mexico Community College
 525 Buena Vista SE
 Albuquerque, NM 87106
 (505) 224-4117

_____ (Print Student Name) is to obtain a 10+alcohol forensic urine drug screen with a split specimen and proper chain of custody. In addition, the student is to have a breath analyzer test for alcohol. Results of both tests are to be clearly marked "CONFIDENTIAL" and sent in a sealed envelope clearly marked "CONFIDENTIAL" to the Dean of the School of Health, Wellness and Public Safety at the above address.

I, _____ (Print Student Name) give permission for Concentra to release the results of this drug screen to the Dean of the School of Health, Wellness and Public Safety and/or the person named below at CNM.

Immediate
 results will
 be called to:

_____ at _____
 (Program Director/Designee) (Phone Number)

 Student (Print Name)
 Time/Date

 Student Signature

 Instructor/Preceptor (Print Name) Time/Date

 Instructor/Preceptor Signature

Finalized: November 12, 2003, Reviewed: August 3, 2005, Revised November 2008