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### **Detroit Business Institute-Downriver**

### 2023 Student Handbook

# **Practical Nurse Program**

### Effective Jan 2023

For all new students starting on or after Jan 1st, 2023



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# **Table of Contents**

Vision	5
Mission Statement	5
Extraordinary Quality	5
Integrity	5
Professionalism	5
Making a Difference	6
Empathy, Caring and Cooperation	6
Nursing Philosophy	6
Person	
Health	
Environment	
Nursing	
Critical Thinking	
Communication	7
Therapeutic Nursing Interventions	7
Professional Behaviors	7
Teaching and Learning	8
Theories	8
Management	8
Nursing Education	
Purpose of Practical Nurse Program	10
Program Outcomes	10
Concepts and Sub-Concepts of the Nursing Philosophy	11
Curriculum Threads	12
Course Descriptions	14

Program Hours	19
Essential Challenges of a Nursing Student	21
Admissions Policies	22
Returning Students Criteria	23
Out of Program for less than a year	23
Out of the Program One Year or Longer	25
School Policies	25
General Policies	25
Attendance Policies	26
Punctuality	27
Grading Policies	28
Posting of Grades	29
Clinical Course Evaluations	29
Campus Laboratory	30
Uniforms and Accessories	31
Personal Appearance	31
Clinical Agency Protocol	32
Fitness-For-Clinical Guidelines	32
Commitment to Learning	33
Academic Dishonesty	33
Expectations for Behavior	34
Children in School	34

Student Work Policy	35
Health Situations increasing Risk in the Clinical Setting	35
Policy on Disabilities and Communicable Diseases	35
Changes to Policy and/or Curriculum Requirements	36
Student - Faculty Communication	36
Student Nurses' Association	36
Criminal Background Investigation	36
Drug Testing	37
Process for Licensure Application	37
Graduation	37
Tuition and Fees	38
Tuition charges	38
Additional Fees	38
Code of Ethics	38
Licensed Practical Nurse * Scope Of Practice	39
Michigan	39
Licensing & Regulation Guidelines	40
Prevailing Standards Of Care	40
Licensed Practical Nurse Standards Of Practice	40

#### Vision

It is the vision of Detroit Business Institute-Downriver to expand educational opportunities by adding additional program offerings to its medical training curriculum. Detroit Business Institute-Downriver will continue to assist in addressing local health career shortage areas. It is the vision of the staff and administrators of Detroit Business Institute-Downriver that we have additional start up programs in the near future. We are closely affiliated with state agencies, local non-profits, private and public community colleges, regional hospital systems and medical employers. Detroit Business InstituteDownriver is proud of its history and traditions. It is dedicated to the training of those individuals capable of filling the everincreasing demand for competent and skillfully trained employees in today's work force.

#### **Mission Statement**

The mission of Detroit Business Institute-Downriver is twofold: to serve the needs of both the individual student and the community. Our role is to provide specialized vocational education which will help our students prepare for a productive career and to provide the community with employees educated in professional and vocational skills. Our mission is to deliver cutting edge, transformational nursing career training and placement. We conduct ourselves and our enterprise from the following fundamental values that are at the heart of who we are:

### **Extraordinary Quality**

Producing results that exceed all expectation, and satisfy customers and partners is a high priority, as well as being known as the standard by which other schools are measured. It is our belief that by generating profitability from the value placed on our services by the community, which is shared with employees and local organizations, qualifies Detroit Business Institute-Downriver as extraordinary quality.

### Integrity

We are committed to honoring, what we say. We believe in being true to our principles. Honesty, Consistency, and Accountability are our guiding principles.

#### **Professionalism**

We uphold the highest standards of health professional behavior. We honor the collaborative process, leadership and team building. We are known for commitment, quality and team work.

### Making a Difference

We are members of a complexly interwoven society in which we care about each other and from which we derive our reason for being. We teach others how to accomplish and live their dreams.

### **Empathy, Caring and Cooperation**

We model moral and ethical behavior and decision making, including concern for others, harmony, stability, solidarity, equality, sharing, egalitarianism, conflict resolution, standing up for the oppressed, reconciliation, reciprocity, cooperative relation, compassion, trust, loyalty, and spirituality.

We intend to be true to our purpose, to accomplish our mission, to operate consistent with our values, and to prepare our students for a productive and fulfilling career.

Educating nurses is what we do at Detroit Business Institute.

# **Nursing Philosophy**

The philosophy of the Detroit Business Institute-Downriver practical nursing program is based upon the theorist Dr. Callista Roy's adaptation of nursing. This model comprises the four domain concepts of person, health, environment, and nursing and includes the faculty's beliefs about nursing education. Under each of the concepts, specific sub-concepts are selected for emphasis and are interwoven through the curriculum. The concept of person includes sub-concepts of individual and culture. Health includes the wellness-illness continuum and health promotion. Environment recognizes each person is part of a family or significant others. Nursing includes the sub-concepts of critical thinking, communication, therapeutic nursing interventions, nursing process, profession behaviors, teaching-learning theories and management.

#### Person

The faculty believes a person is an individual who possesses physical, psychosocial, cultural, and spiritual dimensions that combine to create a complex holistic being. Culture is a patterned behavioral response that develops over time as a result of imprinting the mind through social and religious structures as well as intellectual and artistic manifestations. Culture guides our thinking, doing, and being and becomes patterned expressions of who we are. Patterned cultural expressions are passed from one generation to the next. The nurse strives to provide culturally competent care as part of the holistic approach to nursing. Cultural competence is the adaptation of care in a manner that is congruent with the person's culture.

#### Health

Health is a degree of the physical, emotional, and spiritual wellness exhibited by an individual as each person adapts to internal and external environments. Health is an ever-changing process conceptualized by the wellness-illness continuum. An individual moves back and forth along wellness-illness continuum

throughout life. In a state of optimal functioning, an individual is able to adapt to internal as well as external stressors. Health promotion allows individuals to achieve and maintain the optimal level of wellness.

#### **Environment**

The environment includes internal and external factors that constitute the context in which one lives. The environment also includes material and non-material cultural resources such as housing, living and social surroundings, technologies used and other factors. The family is a basic unit of society. Each family member shares a sense of belonging to their family that deeply affects their lives. It is acknowledged that there are many other societal definitions of family.

### **Nursing**

Nursing is a dynamic and caring process. Nursing is an art and a science with a unique body of knowledge based on theory and the sciences, humanities, and nursing.

### **Critical Thinking**

Critical thinking is defined as a complex non-linear thought process that includes purposeful examination of a situation or position to arrive at an outcome or decision and involves the cognitive skills of interpretation, analysis, inference, evaluation and explanation. Critical thinking requires a knowledge base and progressive development and guides the actions of the nurse in decision making.

#### Communication

Communication is defined as the process by which information is exchanged between individuals verbally, non-verbally and/or in writing or through information technology. Communication abilities are integral and essential to the nursing process. The nurse collaborates with others in shared planning, decision making, problem solving, goal-setting and assuming responsibilities to meet needs of individuals.

# **Therapeutic Nursing Interventions**

Therapeutic Nursing Interventions assist individuals to promote, maintain, or attain optimal health by utilizing the nursing process for the diagnosis and treatment of human responses to actual or potential problems. The nursing process is a systematic problem solving approach which includes: assessments, diagnosis, outcome identification, planning, implementation, and evaluation. Therapeutic nursing uses creativity and caring to meet the needs of individuals and families. Participation of the individual is essential to the effective delivery of nursing care in diverse setting. The nurse integrates care with other members of the health care team.

#### **Professional Behaviors**

Within the scope of practice, professional behaviors are characterized by adherence to the nursing practice standards of the state and professional nursing organizations. Professionalism includes accountability for one's own actions and behaviors, and using legal and ethical principles in nursing practice. Professionalism includes a commitment to the profession of nursing and a concern for others demonstrated

by caring. Professionalism also involves participation in lifelong self-development activities as well as activities to improve the health care the society at large.

### Teaching and Learning

Teaching and learning are dynamic concepts basic to the educational process and promotion of health. Teaching uses planned methods or tools to direct learning. Learning occurs in three domains: Affective (attitudes, values, feelings), cognitive (knowledge), and psychomotor (skills). Learning can be the outcome of effective teaching or the developmental process. Multiple teaching strategies enhance individual learning.

#### **Theories**

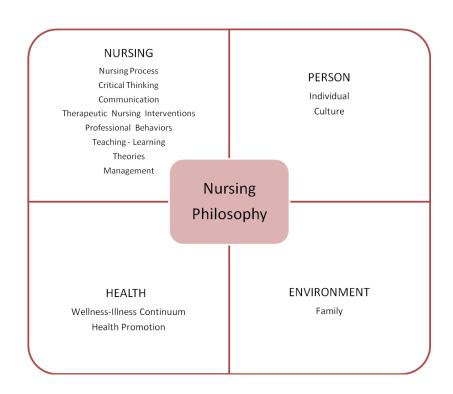
Provide the means of exploring the relationships between the concepts pertinent to the practice of nursing. Nursing practice integrates theories and research from nursing, social, and biological sciences when planning nursing care.

### Management

Management is the efficient, effective use of human, physical, financial, technological resources. The nurse manages care through the processes of planning, organizing, directing, and controlling the use of resources. All nurses must possess and develop management skills and leadership qualities such as organizational skills, effective communication, advocacy, assertiveness, conflict management, and appropriate delegation. Management skills and leadership qualities are intertwined and operational in varying degrees and setting by all nurses.

### **Nursing Education**

Nursing education is an active, on-going collaborative teaching/learning process which proceeds from the simple to the complex. The educational process is enhanced through continued use of the nursing process, critical thinking, scientific theories and developmental theories. Learning results in the acquisition of knowledge and behavioral changes. The faculty believes students are diverse and range in age, gender, creed, national origin, height, weight, marital status or disability. However, in order to practice nursing the individual needs to possess certain abilities such as cognitive, sensory, affective, and psychomotor skills which are listed as essential qualities of a nursing student.



#### **Detroit Business Institute-Downriver**

#### **Practical Nurse Program**

# **Purpose of Practical Nurse Program**

The purpose of the Practical Nurse Program at Detroit Business Institute-Downriver is to prepare students to meet all the Practical Nurse Program requirements of the State of Michigan. As a graduate of the Practical Nurse Program, the successful student will be eligible to take the Michigan Board of Nursing NCLEX- PN examination. After obtaining the license to practice as a Licensed Practical Nurse (LPN), the graduate will be able to function as an LPN to provide health care based on the standards set by the Michigan Board of Nursing.

Graduates of this program are educated to care for clients from conception to death. For some graduates, this program will be the fulfillment of a dream. It is Detroit Business Institute-Downriver's opinion that the LPN is an admirable component of any health care delivery system.

The mission of this Practical Nurse Program is to prepare knowledgeable, professional & caring nurses. Nursing education is a rigorous & demanding course of study. This education is a lifelong process that continues beyond graduation. It is important for the LPN to be an active participant in the teaching/learning process for the duration of a career as a nurse.

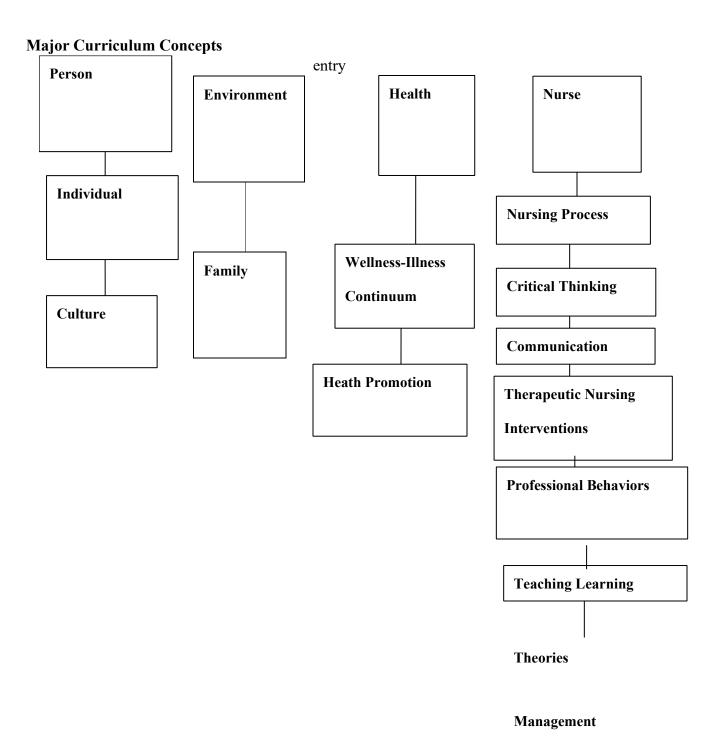
The graduates of the Practical Nurse Program of Detroit Business Institute-Downriver will be prepared to uphold the standards of the Licensed Practical Nurse in the state of Michigan.

# **Program Outcomes**

At the conclusion of the program the graduate will:

- Demonstrate the competency of the skills taught at Detroit Business Institute-Downriver, which includes; principles for health promoting behaviors, identifying man's basic needs, describing concepts relating to man's development, identify concepts of therapeutic communication, incorporate cultural-spiritual factors related to human needs, describe environmental stressors and adaptation variables, and explain the legal-ethical standards of practical nursing practice.
- Organize patient care in the clinical settings, report to the registered nurse, physician, or dentist.
- Document plan of care utilizing principles of the nursing process in meeting specific needs of patient.
- Demonstrate accountability and responsibility of the practical nurse profession.

# **Concepts and Sub-Concepts of the Nursing Philosophy**



# **Curriculum Threads**

Detroit Business Institute-Downriver Practical Nurse Levels and Terminal Outcomes

PN- Term 1	PN- Term 2	PN- Term 3
Person and Relating Persons 1.1 Identify man's basic needs, psycho-social development, and culturalspiritual factors that relate to nursing.	1.2 Describe man's basic needs, psycho-social development, and culturalspiritual factors that relate to the adult patient population.	1.3 Describe man's basic needs, psycho-social development, and culturalspiritual factors that relate to the pediatric, maternal/child and LPN transition/leadership roles to the patient population.
Health and Stress Adaptation 2.1 Begin to identify and understand concepts related to the Levels, variables influencing and systems affecting man's healthy adaptation to stressors in the environment.	2.2 Begin to describe the concepts related to Levels, variables influencing and systems affecting man's healthy adaptation to stressors in the environment within the adult patient population.	2.3 Apply and explains the concepts related to Levels, variables influencing and systems affecting man's healthy adaptation to stressors in the environment within the pediatric, maternal/child and LPN transition/leadership roles to the patient populations.
Nursing Scope 3.1 Identify legal-ethical standards of nursing practice for the practical nurse.	3.2 Explain legal-ethical standards of nursing practice for the practical nurse with adult patient populations.	3.3 Explain legal-ethical standards of nursing practice for the practical nurse with pediatric, maternal/child patient and LPN transition/leadership roles to the patient population.

Nursing Role Direct Care Provider Communicator 4.1 Identify the concepts of therapeutic communication skills.	4.2 Demonstrate the use of therapeutic communication skills in adult patient interactions.	4.3 Demonstrate the use of therapeutic communication skills in pediatric, maternal/child and LPN transition/leadership roles to patient interactions.
Teacher 5.1 Identifies learning needs for health promotion behaviors for patients and families.	5.2 Identifies learning needs and educational principles for health promotion behaviors in the adult patient population.	5.3 Identifies learner needs and educational principles for health promoting behaviors for pediatric, maternal/child patient and LPN transition/leadership roles to the patient population.
Manager 6.1 Identify management principles of safe patient care.	6.2 Describe and apply management principles of safe adult patient care.	6.3 Describe and apply management principles of safe pediatric, maternal/child and LPN transition/leadership roles to patient care. 16 hour preceptor rotation with a LPN in a skilled nursing home.
Evidence Based practitioner 7.1 Identify scientific principles from nursing research and theory.	7.2 Comprehend scientific principles from nursing research and theory in the care of adult patient population.	7.3 Comprehend scientific principles from nursing research and theory in the care of pediatric, maternal/child patient and LPN transition/leadership roles to the patient population.

#### **Nursing Process**

8.1 Identify the concepts of critical thinking within the nursing process-assessment, diagnosis, planning, implementation and evaluation.

8.2 Identify the concepts of critical thinking within the nursing process, collect data, and write a basic plan of care for the adult patient population.

8.3 Identity the concepts of critical thinking within the nursing process, collect data, and write a basic plan of care for the pediatric, maternal/child and LPN transition/leadership roles to the patient population.

# **Course Descriptions**

#### **NUR 110 Fundamentals of Nursing** 5.0 credits

This course is designed to introduce the student to the principles of basic nursing care and the nursing process as a foundation for all future nursing courses. A comprehensive nutritional component will be incorporated into this course that establishes dietary guidelines for individuals. This nutritional thread will enhance the importance of normal growth and development needed for tissue maintenance and repair, cellular metabolism, and organ function. Total hours: 97 (60 lecture,

22 computer lab and 15 out-of-class hours) Pre-requisites: Admissions requirements

Co-requisites: NUR 111, 112, 113, 114, and 115

#### NUR 111 Fundamentals of Nursing Skills Lab 3.0 credits

This course will introduce the student to the skill of physical assessments of the adult patient utilizing a systematic approach. This lab will emphasize techniques required to perform a variety of patient assessments utilizing principles of nursing practice and computer skills necessary to document patient findings. The basic concepts of Dr. Callista Roy's theory of Adaptation are utilized to guide the clinical nursing care plans. Completion of a check-off list with 100% proficiency is required to pass this course.

Total hours: 68 (56 skills lab and 12 out-of-class hours)

Pre-requisites: Admission requirements Co-requisites: NUR 110, 112, 113, 114, 115

#### NUR 112 Fundamentals of Nursing Skills Clinical 3.50 credits

This course will introduce the student to the therapeutic data collection utilizing subjective and objective data in a long-term care setting. Hands-on application of skills will be performed on patients. Lab and diagnostic interpretation will be recorded as well as written and electronic documentation, chart review and patient safety to ensure continuity of care. Total hours: 112 (104 clinical and 8 out-of-class hours) Pre-requisites: Admission requirements

Co-requisites: NUR 110, 111, 113, 114, 115.

#### BIO 113 Anatomy and Physiology 5.5 credits

Students will be introduced to the principles of anatomy and physiology within the course with an analysis of the structure and functions of organs, tissue and their relationship to disease causing illnesses that affect the population as a whole. The 15 hours of computer lab incorporated into NUR 113 will consist of 70 items related to anatomy and physiology, plus 5 pre-set items evaluating 12 topic areas of the human body.

Total hours: 106 (70 lecture, 15 computer and 21 out-of-class hours)

Pre-requisites: Admission requirements Co-requisites: NUR 110, 111, 112, 114, 115

#### BIO 114 Medical Terminology 1.0 credits

This course introduces the student nurse to the principles of medical terminology including spelling, pronunciation and application. This knowledge is applicable to all aspects of nursing care. Out-of-class activities consist of seven weekly homework assignments. Total hours: 25 (20 lecture and 5 out-of-class hours)

Prerequisite: Admissions requirements Co-requisites: NUR 110, 111, 112, 113, 115

#### **NUR 115 Math for Clinical Practice** 3.0 credits

This course introduces the mathematical principles of dosage and drug calculations needed for medication administration in the nursing profession. Total hours: 50 lecture hours

Prerequisite: Admissions requirements Co-requisites: NUR 110, 111, 112, 113, 114

#### NUR 116 Pharmacology 5.0 credits

This course is designed to introduce the student to drug classifications utilizing a systematic approach while instruction the student how pharmacokinetics, distribution, absorption, and metabolism of drugs affect the human body. The student learning outcomes include knowing safe dosages, safe ranges, and drug calculations, how to safely admin9ister oral, rectal, intramuscular, subcutaneous, transdermal, topical, suppositories, eye, ear, and intravenous medications. The documentation of time and drug effectiveness will be taught utilizing electronic data bases and the medication administration record (MAR). A nutritional component is incorporated in the course that explains food allergies, which medications must be taken with or without food and how to alert other healthcare team members of a patient's sensitivity.

Total hours: 100.5 (60 lecture, 22 computer lab and 18.5 out-of-class hours).

Pre-requisites: NUR 110, 111, 112, 113, 114, 115

Co-requisites: 117, 118, 119, 120

#### **NUR 117 Medical Surgical Nursing 1** 5.0 credits

This course is designed to introduce the student to medical nursing concepts and their application to clinical practice within a culturally diverse community addressing common health care needs of adults. The focus will be on medical diagnosis and the nursing care required ensuring wellness.

Total hours: 104.5 (53 lecture, 31 computer lab and 20.5 out-of-class hours)

Pre-requisites: NUR 110, 111, 112, 113, 114, 115 Co-requisites:

NUR 116, 118, 119, 120

#### NUR 118 Medical Surgical Nursing II 4.5 credits

This course is designed as a continuation of NUR 117 and will explore the surgical concepts and their application to clinical practice within a culturally diverse community addressing common health care needs of adults. The focus will be on surgical diagnosis and the nursing care required ensuring wellness during pre-operative, intraoperative and post-operative care and patient teaching.

Total hours: 95 (52 lecture, 24 computer lab and 19 out-of-class hours)

Prerequisite: NUR 110, 111, 112, 113, 114, 115

Co-requisites: NUR 116, 117, 119, 120

#### NUR 119 Medical Surgical Nursing Skills Lab 3.5 credits

The skills laboratory will encompass the following student learning objectives: Intermediate physical exam assessments, a comprehensive medication administration review, wound care, IV therapy, phlebotomy, EKG's and chest tube care. The introduction of a 35 hour simulation laboratory will be twofold: One section will involve 30 hours of clinical reasoning scenarios for medical surgical learning 2.0 developed by ATI on the following topics: Diabetes Mellitus, Heart Failure, Kidney Disease Pneumonia, and Urinary Tract Infections, 6 hours each. The student focus will be on making clinical decisions that affect the care, treatment and outcomes for virtual clients. Completion of a check-off list with 100% proficiency is required to pass this course. Total hours: 78 (70 skills lab and 8 out-of-class hours)

Pre-requisites: NUR 110, 111, 112, 113, 114, 115

Co-requisites: NUR 116, 117, 118, 120

#### **NUR 120 Medical Surgical Nursing Clinical** 2.5 credits

The focus of the clinical section will be on physical assessment, developing and implementing care plans, medication administration, admission, discharging, shadowing, and client teaching and writing a surgical and teaching paper. Emphasis is placed upon implementing the nursing process in the care of adults in a structured medical/surgical setting. The student will be required to complete the designated number of clinical hours specific to this rotation for successful completion of the clinical rotation.

Total hours: 83 (75 clinical and 8 out-of-class hours) Pre-requisites:

NUR 110, 111, 112, 113, 114, 115

Co-requisites: NUR 116, 117, 118, 119

#### **NUR 121 Obstetrical Nursing 3.5 credits**

This course is designed to introduce the student t the role of the LPN in caring for families experiencing childbirth and understanding health promotion during pregnancy in a virtual setting. A nutritional component is incorporated in the course that explains the caloric needs to meet the growth and development requirements for this population of patients. Total hours: 78.5 (28 lecture, 35 computer lab and 15.5 out-of-class)

Pre-requisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites: NUR 122, 123, 124, 125, 126

#### NUR 122 Obstetrical Nursing Simulation Lab 2.0 credits

This course will prepare the student to embrace virtual simulation scenarios for Maternal Newborn. The following topics will be explored: Gestational diabetes, postpartum hemorrhage, preeclampsia, preterm labor and thermoregulation and care of a newborn among others. Total hours: 50 (40 simulation and 10 out-of-class hours)

Prerequisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites: NUR 121, 123, 124, 125, 126

#### **NUR 123 Pediatric Nursing** 4.0 credits

This is an introductory course that focuses on a holistic approach to the care of the child and the adolescent patient. The nursing process is used as the foundation for providing holistic care from patients with common illnesses and their families. The student is introduced to the common complications of childhood diseases, pre and post operative care and immunization schedules, as well as concepts of caring and acknowledging the sensitivity to unique cultural, spiritual, and agerelated needs.

Total hours: 90 (32 lecture and 40 computer lab and 18 out-of-class hours)
Pre-requisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites:
NUR 121, 122, 124, 125, 126

#### NUR 124 Pediatric Nursing Simulation Lab and Clinical 2.0 credits

This course focuses on a holistic approach to the care of the child and the adolescent patient with a focus on pediatric growth and development, pediatric vital signs and assessments, pediatric medication administration and accurate calculation and age related communication techniques. Completion of a check-off list with 100% proficiency is required to pass this course. The student will be required to complete the designated number of clinical hours specific to this rotation for successful completion of the clinical rotation.

Total hours: 62.5 (20 skills lab, 30 clinical and 12.5 out of-of-class hours)
Pre-requisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites:
NUR 121, 122, 123, 125, 126

#### NUR 125 Transition and Roles of the LPN 5.0 credits

Legal, ethical and moral issues affecting the LPN nurse are explored as well as strategies to meet the needs the cultural and spiritual needs of patients. This course includes application of critical thinking to clinical problem solving for the NCLEX-PN exam and for leading and managing others in the workplace. A mandatory ATI PN Comprehensive Predictor will be administered and a score of 85 POP percent or higher is required to complete the designated number of clinical hours specific to this rotation for successful completion of the clinical rotation. Total hours: 95 (60 lecture, 10 computer, 16 clinical and 9 out-of-class)

Prerequisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites: NUR 121, 122, 123, 124, 126

#### NUR 126 Gerontological Nursing/Mental Health 3.5 credits

This course focuses on the health promotion, prevention and protection concepts for older adults. This course will introduce the student to a comprehensive mental health component as it relates to geriatric and the adult client and will utilize ATI's PN Mental Health Nursing 10.0 textbook/online assessments.

Total hours: 75 (30 Lecture, 30 computer lab and 15 out-of-class hours)
Pre-requisites: NUR 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120 Co-requisites:
NUR 121, 122, 123, 124, 125

# **Program Hours**

Term I (15 Weeks)	Lecture Hours	Skills/ Computer Lab Hours	Clinical Hours	Out-of-Class Hours	Total Clock Hours	Credit Hours
Nursing 110 Fundamentals	60	22		15	97	5
Nursing 111 Fundamentals Skills Lab		56		12	68	3
Nursing 112 Fundamentals Skills Clinical			104	8	112	3.5
BIO 113 Anatomy and Physiology	70	15		21	106	5.5
BIO 114 Medical Terminology	20			5	25	1
Nursing 115 Math for Clinical Practice	50			0	50	3.0
Term Totals	200	93	104	61	458	21.0
Term II (15 Weeks)						
Nursing 116 Pharmacology	60	22		18.5	100.5	5
Nursing 117 Medical/Surgical Nursing I	53	31		20.5	104.5	5
Nursing 118 Medical/Surgical Nursing II	52	24		19	95	4.5
Nursing 119 Medical/Surgical Skills Lab		70		8	78	3.5

75

8

83

2.5

Nursing 120 Medical/Surgical

Clinical

Term Totals	165	147	75	74	461	20.5
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Term III (15 Weeks)	Lecture Hours	Skills/ Computer Lab Hours	Clinical Hours	Out-of-Class Hours	Total Clock Hours	Credit Hours
Nursing 121 Obstetrical Nursing	28	35		15.5	78.5	3.5
Nursing 122 Obstetrical Nursing Sim Lab		40		10	50	2
Nursing 123 Pediatrics	32	40		18	90	4
Nursing 124 Pediatrics Sim Lab and Clinical		20	30	12.5	62.5	2
Nursing 125 Transition & Roles of LPNs	60	10	16	9	95	5.0
Nursing 126 Gerontological Nursing/Mental Health	30	30		15	75	3.5
Term Totals	150	175	46	80	451	20.0
Program Totals	515	415	225	215	1135	61.5

This is a one-year program (45 weeks)

# **Essential Challenges of a Nursing Student**

In order to practice nursing, a person must possess a variety of cognitive, sensory, affective and psychomotor skills. These functions are essential to successful progression in and completion of the nursing program requirements, and are a required part of each course. If a nursing student cannot meet these standards, the student must communicate this to the director of the program in writing to explore options for reasonable accommodations of modifications in order to meet program requirements.

Function	Description/Standards	Representative Activities (not all inclusive)
Interpersonal Skills	Ability to interact appropriately with diverse individuals, families and groups	Establish therapeutic relationships with clients, establish rapport with health care team members, negotiate interpersonal conflict
Communication Skills	Communicate effectively in English in verbal and written form	Explain treatment procedures, initiate health teaching, give oral reports, speak on the telephone, document on agency records
Mobility	Ability to move from place to place and to maneuver to perform nursing activities in small spaces, stand and walk for extended periods	Bend, twist, stoop, move around in rooms, administer CPR, push and pull 25 pounds, move quickly, climb stairs
Motor Skills	Gross and fine motor skills sufficient to provide safe, effective nursing care	Calibrate and use equipment, position clients, key based typing skills, squeeze with fingers, grasp small objects with hands/fingers, reach above shoulders, below waist, maintain balance
Critical Thinking	Ability to exercise sound nursing judgment and problem solving. Long hours for studying nursing materials. Work under stressful conditions	Sequence information, identify cause effect, plan/control activities for others
Hearing	Auditory ability enough for assessing and monitoring client needs	Hear normal speaking level sounds, hear faint body sounds, auditory alarms
Tactile	Ability to accurately assess and monitor client needs	Feel vibrations, detect temperature, feel difference in size
Visual	Ability to accurately assess and monitor client needs	Distinguish color, see objects up to 20 feet away, use peripheral vision, perceive nonverbal communication, observe specimen

F 1 G . 1 '1'	1	Provide client with emotional support, adapt
<b>Emotional Stability</b>	responsibility/accountability	to stressful situations, monitor own emotions,
	for actions	perform multiple responsibilities concurrently

### **Admissions Policies**

Applications for admission are completed online on school management software-Populi. Initial contact may start at www.dbidownriver.edu or by contacting the school to schedule an appointment with an admissions representative. All applicants are required to complete a personal interview with an admissions representative to ensure the applicant has the desire and commitment to complete the training and also to assist in determining if the applicant is reasonably capable of benefitting from the training. All applicants must have graduated from high school or have received a GED. Independent documentation such as transcripts and copies of diplomas or other documentation of equivalency must be submitted to the school portal on populi prior to enrollment.

The admissions documentation for students from foreign countries must be translated and certified to be at least equivalent to the credential required by the school in its admissions criteria.

Admission to the Practical Nurse Program at DBI is selective with an objective to ensure that each admitted student is able to successfully complete the PN program and further to be licensed to practice as a LPN. The admissions process offers two decision cycle options to the applicants: Early action deadline and a regular decision deadline.

Regular Decision - Under this option, applicants will be considered and admission decisions made on the completed application by the deadlines date as mentioned in the calendar. Those applicants who select the Regular Decision option or who do not select an option, or who applied Early Decision but did not fulfill its requirements or whose decision was deferred, will be considered under the Regular Decision option. Generally, applications are considered in the order that they are completed, so early applications are encouraged. Applicants whose credentials do not fall squarely within the ranges, but whose applications are competitive for admission, may be held for further review in the regular applicant pool. The Admissions Committee makes every effort to announce its decision on completed applications within a reasonable time.

Early Decision Option: The Early Decision option is available for prospective students who are able to complete all admissions requirements in time and who after all considerations are certain of pursuing a PN program. Early Decision candidates must submit their applications by the published date for Early decision and all items necessary for completion of the application must be received by deadlines. Only completed applications are considered for admission in early decision cycle.

#### I The applicant must meet the following criteria:

All applicants must have graduated from high school or have received a GED. Independent documentation such as transcripts and copies of diplomas or other documentation of equivalency must be submitted to the school prior to enrollment.

The admissions documentation for students from foreign countries must be translated and certified to be at least equivalent to the credential required by the school in its admissions criteria.

- 1. Graduated from high school or received a GED.
- 2. Pass criminal background check and drug screening
- 3. Pass ATI entrance examination with a minimum score of 30 overall with a minimum of 20 on the math subtest. However, if Math and Science subtest score in TEAS is less than 40 then the student will be required to take mandatory tutoring\*
- 4. Complete health appraisal form to include negative TB test, required immunizations and/or Titers (required before the start of classes).
- 5. Two favorable letters of recommendation (from clergy, teacher, or employer)
- 6. CPR certificate required by to include BLS/CPR for Health Care Professionals with AED training required before the start of class (to include BLS/CPR for Healthcare Professionals with AED training)
- 7. Complete personal interview with admissions representative

# **Returning Students Criteria**

# Out of Program for less than a year

All students requesting re-entry into the program, who have been out of the program for one year or less from their last day of attendance through the scheduled re-entry date, must meet the criteria as described below.

- 1. Students who dropped out of the program due to personal reasons, or failure, may re-apply for readmission by writing a letter of request addressed to the Director of the nursing program. The letter of request must state the reasons for the withdrawal and must include a detailed plan, which will be evaluated by the re-admission's committee to determine their eligibility for returning and potential for achieving success in the program.
- 2. Re-admission requests are due a minimum of a week prior to the term for which the student is applying to re-enter.

<sup>\*</sup>For more details, please contact the admissions office.

<sup>\*</sup>This mandatary tutoring to be offered in the first five weeks of LPN program on Mondays. This tutoring will be provided on Mondays for 3 hours for each subject a student may need tutoring in. For more details, consult the section on Tutoring further in this document.

- 3. The letter of request will be reviewed by the nursing re-admission committee and a follow-up meeting will be scheduled with the student.
- 4. Prior to submitting a request for re-admission, the student must satisfy all outstanding financial obligations to the school.
- 5. There is a required re-entry fee of \$100, which must be submitted to the Financial Aid office, prior to the beginning of the re-admission's process. Additionally, a drug screen and background check will be conducted at this time. If re-admission is denied, for reasons other than drug screening or background check, the re-entry fee will be refunded to the student. If the Re-entry period is within 90 days of the previous Drug Screen+ Background check, the student will not be required to pay the re-entry fee of \$100.
- 6. The returning student must meet the school's minimum, entrance examination score, which is in effect for the Assessments Technologies Institute (ATI) Test of Essential Academic Skills (TEAS), at the time of re-admission. A students' (TEAS) score is valid for no more than three years prior to the start date of the schedules program.
- 7. All returning students must meet the curriculum requirements of the program that are in effect at the time of re-entry.
- 8. All students returning in Term I or Term II or Term III after termination due to failure or withdrawal due to personal reasons must re-take any failed course or the entire course sequence if applicable (as mentioned on Page 29) and complete a competency validation procedure for all previously completed courses as outlined below. The student is not charged for the repeated course, provided the student re-enters within one year or less from their last day of attendance. The student is financially responsible for any increase in tuition.
  - a. A math competency examination to include math conversions, reading labels and syringes. The math competency test must be passed with a passing score of 77% or higher. If a student does not satisfactorily pass the math competency test, the process for re-admission is ended.
  - b. Pass the theory Competency Test(s) with a minimum passing score of 77%.
  - c. It is the student's responsibility to prepare for the competency tests. The student will be required to demonstrate necessary assessments selected by the Director of the nursing program.
  - d. If a student does not satisfactorily pass a competency for a specific course, the student will be required to repeat the course.
  - e. All competency evaluations that are conducted will become a permanent part of the student's academic file.
- 10. Written evaluation and recommendations will be sent to the nursing admission committee for a final decision regarding a student's re-entry into the nursing program.
- 11. Students not submitting acceptable documentation in response to requests or decisions made by the nursing re-admission committee may be denied re-admission.

- 12. The student must meet all enrollment requirements of the school including submission of an updated health form, a negative TB test (or negative chest x-ray), all necessary vaccines and or titers, including current flu and Tdap vaccines. All documentation must be submitted prior to reentry.
- 13. A student who qualifies for re-entry into the Practical Nurse program will be subject to the Standards of Satisfactory Academic Progress as outlined in the school catalog.

### Out of the Program One Year or Longer

All students requesting re-entry into the program, who have been out of the program for one year or longer from their last day of attendance through the scheduled re-entry date, must meet the additional returning student criteria as described below.

- 1. If the student wishes to receive credit for previously completed classes he/she must demonstrate through an assessment by the Director of the nursing program that he/she possesses the necessary knowledge and skills required to pass the class. If the student does not possess the necessary knowledge and skills, as determined by the school, the student must repeat the classes. The student will be charged for any class that is repeated.
- 2. It is the student's responsibility to prepare for the competency and skills validation test(s). The student will be required to demonstrate the necessary assessments selected by the Director of the nursing program.
- 3. Students who have been out of DBI's Practical Nurse program for more than three years will not be eligible to return under the school's criteria for retuning students.

# **School Policies**

The school reserves the right to update and revise program and school policies

#### **General Policies**

- 1) A CPR card must remain current throughout the program and a copy will be kept in the student's files, in the nursing office. CPR must be American Heart Association BLS for healthcare providers (CPR & AED). OSHA and HIPAA training is **MANDATORY** for all students and instructors prior to the beginning of a clinical rotation.
- 2) Students with concerns must follow the Chain of Command:

- i) Instructor
- ii) Nursing Program Director
- iii) Director of the School
- iv) President of the School

#### **Attendance Policies**

Attendance is **mandatory** in all classes. However, if a student is absent (excused or unexcused) more than 10 % of the scheduled days in a particular class this will constitute automatic **failure** of that class. The make-up test/exam will be taken outside of class time, at the discretion of the instructor, on the basis of verifiable, documented, excused absence which has been approved by the PN Program Director or School Director of the school. An alternate form of the test may be given at the discretion of the instructor and PN Program Director.

Quizzes, tests and final exams are to be taken on the scheduled day and at the scheduled time. A student who is tardy on a test day may be admitted to the testing room, but will not be allowed additional time to complete the test. Students taking the test later than the scheduled time, for any reason(Unless approved by the Program Director), will have 10% deducted from the final score. Make up tests may be scheduled twice a month at the discretion of the Program Director.

- 1) An excused absence consists of the following:
  - i) Court notices for student or dependent child ii) Funeral of immediate family members iii) Medical excuse for student, spouse or child iv) Excuse deemed an emergency by the School Director
  - v) Written excuses must be submitted to the School Director within 10 days of any absence to be considered.
- 2) When a student is unable to report or not able to arrive on time to a clinical rotation due to planned illness or emergency, the student must notify the site manager and clinical instructor prior to the scheduled start time, except in extreme emergencies. Failure to report may result in DISMISSAL from the clinical and FAILURE of the course. Each student must meet the program contact/clinical hour requirements *as defined in the course syllabus*. If a student is dismissed from a clinical site the student will fail the course.
- 3) The student will be required to complete the designated number of clinical/lab hours specific to that clinical rotation for successful completion of the clinical rotation. If an absence occurs, (lab or clinical) the student may be required to complete clinical hours at an additional expense. The first excused incident is free; the second incident whether excused or unexcused will be charged \$20 per clock hour and must be paid in advance of the scheduled clinical/lab, make-up day. Also, if a student is more

that 15 minutes late but less than 2 hours late for a clinical/skills lab, a minimum fee of \$40 will be charged. If more than 2 hours late, the student will be required to make up the entire class.

4) One excused absence is permitted without payment for a simulation make-up lab/clinical. One unexcused absence will require a simulation make-up class at \$20 per clock hour. Two unexcused absences may result in a student's dismissal. Failure to report may result in DISMISSAL from the clinical and FAILURE of the course.

The above-mentioned policy applies to leaving either a class, lab or clinical site early. If you miss a scheduled make-up lab/clinical you may be dismissed from the program.

#### ATTENDANCE POLICY DURING COVID-19 REMOTE LEARNING MODE

In addition to the DBI attendance policy stated in the catalog/syllabus, the following conditions need to be met in order to be marked 'PRESENT' for the Didactic Clinical Day:

- 1. Attend the virtual class meeting sessions (Zoom Meeting) with the instructor as per the timings conveyed by the instructor on the instructor's course Google Classroom.
- 2. Each Clinical /Skill day will have two meeting sessions. Attendance in both class sessions is compulsory to be counted as present for the day.
- 3. Each didactic session will have two meeting sessions likewise with sessions planned by the instructor. All information will be posted on Google Classroom and its student's responsibility to log in to the classroom and stay updates with announcements and requirements.
- 4. A student needs to be in attendance in the Zoom class session with camera turned ON at ALL TIMES. A student with camera turned OFF will be marked Absent.
- 5. The scenario/work assigned for the day has to be completed and submitted on time as per the instructor directions to be counted toward attendance.
- 6. Any situation or circumstance preventing a student from attending any class has to be reported as per the attendance policy in the handbook and syllabi before the start of the class. If circumstances arise during the class, it is the responsibility of the student to report the issue via email preferably immediately to the instructor and school office at: (mcarter@dbidownriver.edu)
- 7. If for some reason, the internet is not working, a phone call must be made to report the issue to the school office (734.479.0660) followed by an email to the instructor as soon the internet connection is restored.
- 8. In absence of such reporting, student will be marked absent.

# **Punctuality**

- 1) Students must be on time for all classes and must report **15 minutes before** the scheduled time for all *clinical* rotations.
- 2) Tardiness of more than 10 minutes for class/skills/computer/clinical will be considered an absence. Leaving classes more than 10 minutes before the completion of the class constitutes an absence.

- 3) The student is tardy if he/she arrives 5 to 9 minutes after the start of all classes. **Three tardies equals one absence** and a written warning will be issued.
- 4) Students who report late for theory courses will not be permitted to enter the class in session until break time so as not to disturb the class.

# **Grading Policies**

- 1) Each student is accountable/responsible for his/her results and grades produced in class.
- 2) A minimum cumulative grade of 77% must be maintained throughout the program in all theory courses. Theory grades are awarded as follows.

Grading Metho	ods
94-100	A
90-93	A-
87-89	B+
83-86	В
80-82	B-
77-79 C+ (NU	URSING PROGRAM CUT -OFF)
76 and below	E

3) Skill/SIM/Clinical grades are awarded as follows:

Grading Meth	ods
94-100	A
90-93	A-
87-89	B+
83-86	В
80-82	В-
79 and below	Е

- 4) A student failure of a theory/lab or clinical course is subject to policy explained later of course sequence.
- 5) Rounding Less than Whole Percentage Numbers to Determine Grade If the final percentage is less than a whole number, the grade will not be rounded. Students must achieve a minimum of 77% to pass the course.
- Nursing a progressive course and a student must successfully pass all courses in a term before moving to the next term. E.g., A student failing in term 2 will not be allowed into the Term 3 until they pass all the courses in Term 2.

### **Posting of Grades**

- 1) Grades are available approximately 72 hours after the test administration or at the discretion of the faculty.
- 2) At the discretion of the instructor, tests may be discussed during class time.
- 3) If a student wishes to challenge a grade, he/she must provide a written explanation to the instructor. If the student is not satisfied with the outcome, the student will have the option to pursue the challenge via the chain of command.

#### **Clinical Course Evaluations**

CLINICALS CAN BE ANY DAY OF THE WEEK, INCLUDING WEEKENDS, AND MAY INCLUDE DAYS OR EVENINGS HOURS.

- 1. Clinical evaluations are ongoing. An instructor can evaluate a student at any time if inadequate performance is noted. A written warning form will be filed in the students' file. The purpose of this form is to assist and guide the student in correcting any deficiencies.
- 2. There will be a final clinical evaluation. Weekly anecdotal notes will be graded as well as care plans.
- 3. Clinical evaluation tools are developed by the faculty for each clinical and are in each syllabus. Each evaluation tool provides specific, measurable objectives that cover the scope and extent of each clinical course objective.
- 4. Clinical performance is evaluated on a grading scale, see syllabus for details. The student must earn a 77% in all theory classes. Skills lab and Clinical Grading are detailed in the syllabus associated with the course
- 5. The terminal course, Nursing 125, will require taking two PN-Predictors administrated by ATI. A final score of 85% POP percent or above is required on one of the predictors to PASS Nursing 125. Punctuality is mandatory for the predictors; the door will be locked after the assessment begins. A third Comprehensive Predictor if approved by the Program Director has to be taken within 60 days of the end of the term.
- 6. At the end of each clinical rotation, the instructor will meet with each student to summarize and discuss their progress, strengths and/or areas needing improvement.
- 7. Both the student and the instructor will sign the evaluation form indicating that the evaluation tool was read and discussed.

For the nursing courses with skill and clinical complements the student must pass <u>All</u> of the nursing courses in that sequence to pass the class. For example, the following is how a student must achieve academic success (satisfactory) in the nursing skills/simulation labs and clinical components of the course.

- Nursing 110,111 and 112 are composed of: Theory, nursing skills lab and clinical. If you are unsuccessful in **ANY** course of this sequence, you **FAIL** the course and must retake and reapply as a returning student in the next available Term 1 and repeat the Fundamentals course sequence.
- Nursing117,118,119 and 120 are composed of: Theory, nursing skills lab and clinical. If you are unsuccessful in **ANY** course of this sequence, you **FAIL** the Medical Surgical course sequence and must drop out and reapply as a returning student and retake the entire series of 117,118,119,120.
- ➤ Nursing 121,122 is composed of: Theory, nursing simulation lab and clinical. If you are unsuccessful in **ANY** course of this sequence, you **FAIL** the course series and must drop out and reapply as a returning student to retake the NUR 121,122.
- Nursing 123,124 is composed of: Theory, nursing simulation lab. If you are unsuccessful in **ANY** course of this sequence, you **FAIL** the course and must drop out and reapply as a returning student to retake the NUR 123,124.
- Nursing 125 is composed of: Theory, NCLEX-PN review and a 16 hour shadowing experience. If you are unsuccessful in ANY component of this course, you FAIL the course and must drop out and reapply as a returning student. The student has two and a half months after the beginning of the term to complete the 16-hour shadowing experience at their place of employment or a location selected by the nursing director. NO exception will be granted for not completing this shadowing experience by the due date and submitting all documents pertaining to the same by the due date. The theory instructor for this class will sign off on the shadowing experience as satisfactory or unsatisfactory.

#### **Unsatisfactory Work**

- a. Students who are not achieving satisfactory work will be counseled immediately.
- b. Written warning for improvement will be given to the student. The student must sign a warning form with the faculty member agreeing to the plan of action for improvement. This form will be filed in the student's academic file.
- c. If the student is unable to satisfactorily complete **three** asterisk (\*) clinical objectives, the instructor will meet with the nursing Program Director who will make the **final** decision for action with the instructor and the nursing admission committee.

# **Campus Laboratory**

- a. Students are required to attend all scheduled campus laboratory and theory classes in uniform.
- b. Students are required to demonstrate proficiency in skills in the laboratory before practicing those skills in the clinical area.

- c. Open skills time must be arranged with the instructor.
- d. Students are not permitted in the laboratory without supervision.
- e. A final laboratory competency assessment will be administrated on your final day in the lab. You **MUST** pass this check-off with **100**% accuracy to pass the lab and hence the course (111 and 119). Your syllabus will give you details as to what your testing will encompass.

### **Uniforms and Accessories**

- a. Scrubs are required for ALL CLASSES on campus and at the clinical site.
- b. It is recommended to have two dark gray colored scrubs and grey warm up jackets with the Detroit Business Institute-Downriver emblem. NO Sunglasses in school/clinical. (Two sets of uniform scrubs and warm up jacket will be provided by the school). c. General attire for women
  - White stockings, socks or hose may be worn with scrubs.
  - Shoes must be 100% white Leather with enclosed heel and toe.
  - Grey warm-up jacket must be worn over the uniform.

#### d. General attire for men

- Dark gray colored scrubs are required.
- White socks and 100% white Leather Shoes with enclosed heel and toe.
- Alternate attire may be required for various clinical facilities and will be noted in the course syllabi.
- Grey warm-up jacket must be worn over the uniform.
- **No** denim clothing, tennis shoes, **clogs**, sweat suits, or shirts with sayings or logos are permitted.
- Students will be asked to leave the class or clinical area if the dress code is violated and will receive an unexcused absence.
- A watch with a second hand, scissors, pen light, \*stethoscope, and black pens are required at the clinical sites.\* provided by the school.

# **Personal Appearance**

- Body odor, perfume, shaving creams, heavy makeup and **tobacco** odor are not permitted in the clinical area.
- Hair must be neat and off the collar. Hair-natural one color or natural highlights.
- Beards and mustaches must be clean, short, and neatly trimmed, or clean shaven.
- Fingernails must be clean and short with clear polish. Artificial/acrylics fingernails are not permitted, including overlays.
- The only acceptable jewelry consists of a plain wedding band, wrist watch, and stud earrings (no hoops).
- No visible body piercing, multiple earrings, decorative pins on uniforms are not permitted.
- All visible tattoos are to be covered at ALL times.
- Gum chewing is not permitted in any class or at clinical.

- CELL PHONES ARE NOT PERMITTED IN THE CLASSROOMS and must be kept in lockers provided by the school.
- Free lockers will be provided for ALL students.
- Students who do not adhere to the above dress code will not be permitted to remain in class or clinical.
- NO ARTIFICIAL EYELASHES....

# **Clinical Agency Protocol**

- a. Students must remember that they are guests within agencies and display professional demeanor at all times.
- b. Students must become familiar with the emergency protocols of the agencies.
- c. Personal calls are not permitted in the clinical area nor are beepers or cell phones permitted.
  - Cell phones must be kept in your car.
- d. Any emergency calls must be made by landline phone.
- e. If family members need to reach a student, they must call the nursing office, who will contact the instructor. Families should be informed of current clinical placement. Students will be given a schedule at the beginning of each clinical rotation detailing their assignment.
- f. Students are expected to follow dress codes and/or specific rules unique to each facility.
- g. All training related questions should be directed to the instructor and not the clinical site staff.

In addition to achieving satisfactory performance in the nursing skills lab, simulation lab and clinical areas, on your check-off sheet and clinical course evaluations, if a student is dismissed from <u>ANY</u> clinical site for disruptive behavior that student will be dismissed from the clinical site and receive a failing grade in the course. Disruptive behavior is whatever is deemed disruptive by the clinical site leaders and DBI administration.

# **Fitness-For-Clinical Guidelines**

- a. If the instructor notes that the student's behavior is erratic due to unknown cause, the student's safety will be protected by either taking the student to the emergency room or placing a call to a family member for safe transport from the facility.
- b. The instructor will not attempt to diagnose possible cause of observed behavior; only describe the observations of the student.
- c. The Nursing Program Director will be notified immediately.
- c. The student will meet with the Nursing Program Director and the instructor.
- e. A written warning form will be completed and signed by the student, the director, and the faculty member.
- f. The student will be required to have documentation from a physician stating that he/she is fit to continue on in the nursing program.

# **Commitment to Learning**

- a. Faculty is committed to helping students learn.
- b. The student must submit all written work on time. Any late or missed assignment is subject to a grade reduction, as specified in the course syllabus or by the instructor.
- c. The student must verbally participate in classroom activities including pre- and post-conferences in the clinical area.
- d. The student must meet all scheduled commitments when assigned.
- e. In order to maximize learning, cell phones must be turned off and stored in the locker provided during class. Students using cell phones during exams or graded activities in class may be cited for academic dishonesty.
- f. In cases of an unexpected emergency, students may give family the schools phone number and they can call the front office.

# **Academic Dishonesty**

- a. The faculty supports the school's policy on academic dishonesty, cheating many times involves two individuals. Cheating can take many forms, including but not limited to plagiarism, exchange of information on examinations, copying the work of another or allowing another to copy's one's written work.
- b. The first incident of cheating the student will receive a zero on the assignment and a written notice will be sent to the student. The student who shared the work in question and the student receiving the work will be given a zero for the assignment or the test. The written notice will include the nature of the alleged act of violation, the facts present, and the possible discipline being considered in addition to the zero awarded. The Student will be called for an interview with the instructor/ PN Director. The evidence will be presented by the Instructor for the alleged act of violation and the student will be given a chance for hearing. Upon completion of the meeting and within 7 days of the meeting, a written recommendation notice for the disciplinary action(if any), in addition to a zero in the test or assignment, will be given to the student by the Program Director. If the student refuses to sign the written notice or fails to attend the interview, it will be deemed as an acceptance of the alleged act and the PN Director will make a notation of the student refusal to sign and date. A copy will be placed in the student's file, along with the student receiving a copy of the refusal. The disciplinary action for Academic Dishonesty for first violation may include a failure of the course involved and the student may receive from an E grade upto Dismissal from the program.

It may be noted that Written notice to the student shall also include that continuation or repetition of specific conduct found wrongful within a period of time stated in the warning may be cause for more severe disciplinary action. Written reprimands may become part of a student's permanent record at the college.

c. On the second incident the student will be sent the Notice for Violating Code of Conduct. The written notice will include the nature of the alleged act of violation, the facts present, and the possible discipline being considered in addition to the Grade of E (Failure of the course) for the assignment, test or exam. The Student will be called for an interview with the PN Director

and the School Director. The evidence will be presented by the Program Director for the alleged act of violation of conduct and the student will be given a chance for hearing. Upon completion of the meeting and within 7 days of the meeting, a written recommendation for the disciplinary action (if any), in addition to the failure of the course, will be given to the student by the Program Director. If the student refuses to sign the written notice or fails to attend the interview, it will be deemed as an acceptance of the alleged act and the PN Director will make a notation of the student refusal to sign and date. The disciplinary action notice in such cases will be taken and the student notified of the same in written. Written Notice document for "Violation of Professional Code of Conduct/Academic Dishonesty" will be placed permanently on the student academic file. PN Director will place the records/evidence of cheating/plagiarism for permanent record retention. A Student should understand that at this point continuation in the program is in jeopardy and that he/she may be dismissed/terminated from the program for Academic Dishonesty/Violation of Professional Code of Conduct.

# **Expectations for Behavior**

- a. Each student is expected to act in a professional manner.
- b. No children or spouses are permitted in class or at the clinical site.
- c. Students are ethically committed to a non-judgmental attitude, to be honest, and to protect the confidentiality and the right to privacy of the patient.
- d Patient names should never be used when writing nursing care plans or presenting case studies.
- e. Under no circumstances is a student permitted to photocopy any part of the patient's record or remove any information with the patient's name on it from the agency.
- f. Any information seen or heard concerning a patient's diagnosis, condition, treatment, financial or personal status must be held in absolute confidence.
- g. Details of a patient's history or status should not be discussed in elevators, restrooms, or in any other public place.
- h. Discussing a patient's medical history merely for the sake of gossip is highly unethical and unprofessional and is grounds for dismissal from the nursing program.
- i. When the clinical experiences terminate, the need to respect the client's confidentiality does not.

### Children in School

DBID maintains an atmosphere conducive to learning and does not have provisions to accommodate children. It is the policy of the school that student should not bring children to orientation, classrooms, or labs, or left without parental supervision in lounges, offices, or any part of the school.

# **Student Work Policy**

- a. Since the theoretical component of the program is intense and clinical preparation is demanding, it is highly recommended that students not work.
- b. The program is a full-time commitment and requires the student to be well rested which is conducive to safe practice in the clinical area.
- c. If the instructor feels that the student is unsafe due to fatigue, the student will be requested to leave the clinical area resulting in an unexcused absence.
- d. A written warning form will be completed, signed by the student and will become a part of the student's academic file.

# Health Situations increasing Risk in the Clinical Setting

- a. Changes in student health status must be reported to the Nursing Program Director.
- b. Changes include, but are not inclusive to: pregnancy, injury, and or infectious diseases.
- c. The student must complete an "Acceptance of Risk" form in cases of pregnancy or certain limitations in function with signatures of the student and a health care provider. Form must state that the student is safe to function in the clinical setting.
- d. Costs of testing, diagnosis, and treatment of any infectious and/or communicable disease contracted while acting as a caregiver in clinical experiences will be the responsibility of the student.
- e. Any injury in the clinical area sustained by the student due to improper procedure will be the responsibility of the student to cover the cost for any medical treatment.

# **Policy on Disabilities and Communicable Diseases**

- a. Detroit Business Institute-Downriver attempts to conform to all local, state and federal laws as outlined by the Center for Disease Control as well as the Handicap/Disability Act pertaining to education.
- b. At no time will there be discrimination against any persons because they have a disability.
- c. Provisions will be provided for those with disabilities. However, these students must be able to demonstrate the same behavioral objectives as those without disabilities.
- d. Students with HIV/AIDS virus and other communicable diseases will be required to inform the school and confidentiality of such will be maintained.

# Changes to Policy and/or Curriculum Requirements

The school, due to the nature and demands of an educational program and the nursing profession, reserves the right to change specific policies and/or curricular requirements to enhance and update the curriculum design for the program of nursing. These changes will be made known to the students as they occur. In the event of any failure or delay in the School's performance resulting from causes beyond the School's reasonable control and occurring without its fault or negligence, including without limitation, acts of God, fire, pandemic, epidemic, government restrictions, wars, threats or acts of terrorism and insurrections, the tuition obligations under this Agreement shall continue and the School shall not be liable for any such failure or delay in its performance.

The School may extend schedules for the time equal to the time lost due to any delay so caused and/or to conduct classes via distance-learning and/or schedule classes on weekends, at the School's discretion.

# **Student - Faculty Communication**

Students are encouraged to take clinical or classroom related concerns to the appropriate faculty member. If a concern is not resolved the student should follow the organizational chain of command.

Clinical and course evaluations as well as the exit interview and the program satisfaction survey provide additional mechanisms for students to provide feedback to faculty and Detroit Business Institute - Downriver.

Student input is valued in the governance of Detroit Business Institute-Downriver. Thus, students may be nominated, asked to volunteer, or be appointed to serve on various committees at Detroit Business Institute-Downriver.

# **Student Nurses' Association**

DBI- PN students can visit the Michigan.gov/LARA website for student nurse associations.

# **Criminal Background Investigation**

Changes in 2006 to the Michigan Public Health Code have necessitated the implementation of criminal background investigations of all students in nursing programs during the course of their clinical

<u>assignments.</u> This background check is performed to verify no felony (within the past 15 years) or misdemeanor (within the past five years) offenses punishable by imprisonment for a maximum of term of two years. (Processed through the Internet Criminal History Access Tool.) (ICHAT)

Students entering the program must pass to a criminal background investigation. Students will also be subjected to two to three additional background checks throughout the program. Students may inquire in the nursing office for specifics on this process.

# **Drug Testing**

All students must pass a drug screening before admission to the nursing program and throughout the program prior to a new term. Students may inquire in the nursing office for specifics on the process.

# **Process for Licensure Application**

The Nursing Program Director will send a Certificate of Completion to the Michigan State Board of Nursing upon successfully completion of the program. This certificate informs the state board that the student has met all the requirements and is eligible to write the boards for licensure. The school will submit the eligible students' applications to the testing entities: The Michigan State Board of Nursing (fee \$208.80) and Pearson Vue NCLEX-PN examination (\$200). Fingerprinting is now required by the Michigan Board of Nursing prior to licensure and the student will schedule this process and the school will provide eligible students the payment of \$63.00. The total of \$471.80 for the testing process to become a licensed practical nurse.

\*\*\*\* Please note that these prices are subject to change.

### Graduation

Students, who satisfactorily complete all course requirements, including financial obligations to Detroit Business Institute-Downriver, will be awarded a certificate of completion from Detroit Business Institute-Downriver. This certificate does not entitle the graduate to practice as a licensed practical nurse (LPN); the graduate must pass the NCLEX-PN examination. There will be one graduation ceremony for all graduates. A formal graduation ceremony for the conferring of diplomas is normally scheduled annually. Graduates are notified by mail. There is a \$40.00 graduation fee for those graduates participating in the graduation ceremony.

### **Tuition and Fees**

### **Tuition charges**

Practical Nurse program .......\$29,970

#### **Additional Fees**

Application Fee	\$125.00
Transcript fee	\$ 10.00
Late Fee* (Monthly Deferred Payment Plan)	\$ 25.00
Re-entry fee**	\$100.00
Replacement Cost for lost ID badge	\$ 10.00
Clinical/lab make-up	\$20.00/hour
Michigan Board of Nursing application fee***	\$208.80 Michigan
Board of Nursing PN-NCLEX exam fee***	\$200.00
Criminal Background check (Fingerprinting) for PN-NCLEX exam***	\$ 63.00
Student requested Reappeal for drug screen test	\$100.00

<sup>\*</sup> Late fee is incurred upon late payment or non payment of the agreed deferred monthly tuition payment in a particular month.

Late fee is incurred each month till the payment is overdue. A maximum of 2 late fines can be waived in the entire duration of course if a good reason / situation beyond their control for being late is presented to the Finance department to their satisfaction.

\*\*

A student who has withdrawn from school and has not completed a leave of absence form, or reschedule form, must pay a reentry fee

# **Code of Ethics**

For the Licensed Practical/Vocational Nurse

#### The Licensed Practical/Vocational Nurse shall:

- 1. Consider as a basic obligation the conservation of life and the prevention of disease.
- 2. Promote and protect the physical, mental, emotional, and spiritual health of the patient and their family.
- 3. Fulfill all duties faithfully and efficiently.
- 4. Function within established legal guidelines.
- 5. Accept personal responsibility for his/her acts and seek to merit the respect and confidence of all members of the health team.

<sup>\*\*\*</sup> These fees are not set by the school and are subject to change.

- 6. Hold in confidence all matters coming to his/her knowledge in the practice of his/her profession and in no way and at no time violate this confidence.
- 7. Provide conscientious service and charge just remuneration.
- 8. Learn and respect the religious and cultural beliefs of his/her patient and of all people.
- 9. Meet his obligation to the patient by keeping abreast of current trends in health care through reading and continuing education.
  - a. As a legal resident of the United States of America, uphold the laws of the land and seek to promote legislation which shall meet the health needs of its people.

From: National Association for Practical Nurse Education and Service, Inc. NAPNES.org

# **Licensed Practical Nurse \* Scope Of Practice**

# Michigan

In 1978, Michigan incorporated its Nurse Practice Act into the Michigan Public Health Code (MPHC). Formerly called "Nurse Practice Act", it is now called "Practice of Nursing" under Michigan Public Health Code.

Each state has its individual definitions for the Practice of Nursing. This 'scope' of practice helps define what range of practice a nurse can or cannot *legally* perform. Scope is not the same as Standards. In 1978, Michigan legislature combined all laws regulating health personnel into one statute consolidating the legal framework for nursing in the Michigan Public Health Code, rather than a separate Nurse Practice Act. Rules governing nursing found in the Occupational Codes and in the Administrative Rules of Nursing are used by the Michigan Board of Nursing as the guidelines to issue licenses and promote the health, safety and welfare of the public.

#### MLPNA 4 POINT SUMMARY OF THE LPN SCOPE OF PRACTICE

- The LPN must be trained to perform the nursing tasks he or she does.
- The LPN must hold a current license.
- The LPN must work under the supervision of a physician, dentist or RN.
- The LPN may not delegate LPN tasks or functions to unlicensed personnel.

# **Michigan Board Of Nursing**

In 1909, the Michigan Nurse Practice Act, Public Act 319 was passed, and imposed the legal obligation upon the Michigan Board of Nursing as the Regulator of nursing practice. In 1952, provision was made for licensure of practical nurses. Functions of the Board of Nursing include:

- ♦ Grant licenses to RNs and LPNs
- ♦ Impose disciplinary action on licensees, which includes levying fines for violations
- ♦ Establish standards for education & approve education programs
- ♦ Grant certification of specialties
- ♦ Generate/update administrative rules concurrent with the Michigan Public Health Code and Amendments
- ♦ Review test items for NCLEX exams
- ♦ Determine distribution of Nurse Scholarships

### **Licensing & Regulation Guidelines**

Nurses are licensed to ensure that the public receives a high level of care consistent with the law and the standards set by the state. Legal regulation(s) of nursing practice are based on the definition of nursing in the Nursing Section (Part 172) of the Michigan Public Health Code. Legal boundaries are derived from this Section and are used as the basis for interpreting the safe practice of nursing. Occupational Regulation Sections help define licensure, delegation, and supervision. The Bureau of Health Professions provides administrative support services for licensure and regulation licensed under MPHC. Such services include mailing licenses & renewal notices, collecting license fees, investigating activities related to the practice of nursing, holding hearings and ordering relevant testimony to be taken, and then reporting the findings to the Board of Nursing.

### **Prevailing Standards Of Care**

Standards are derived from many sources: legal regulation, professional regulation, professional literature, educational program curricula, research and other areas. Standards determine qualifications for persons to perform delegated functions. While an individual may claim she/he is capable of performing a certain task, the acceptable and prevailing standards of care determines the appropriateness of delegating that task.

#### **Licensed Practical Nurse Standards Of Practice**

The following standards represent the foundation for delivery of safe, competent and cost-effective nursing practice, to safeguard the physical, mental, emotional and spiritual health of the patient and his family. Competency implies skills, talents, knowledge and understanding guided by a commitment to

ethical principals. Cost effective means providing nursing care in a way that is available and affordable to all.

# THE LPN WHO PROVIDED INDIVIDUAL AND FAMILY-CENTERED NURSING CARE WILL:

- A. Utilize principles of the nursing process in meeting specific needs of patients of all ages in the areas of:
  - 1. Growth and development
  - 2. Safety and comfort
  - 3. Nutrition
  - 4. Interpersonal relationships
  - 5. Pharmacology
  - 6. Health teaching
  - 7. Culture
  - 8. Legal aspects
  - 9. Professional ethics
- B. Utilize appropriate knowledge, skills and abilities in providing safe, competent care.
- C. Utilize principles of crisis intervention in maintaining safety and making appropriate referrals when necessary.
- D. Utilize effective communication skills.
  - 1. Communicate effectively with patients, family, significant others and members of the health team.
  - 2. Maintain appropriate written documentation.
- E. Provide appropriate health teaching to patients and significant others in the areas of:
  - 1. Maintenance of wellness
  - 2. Rehabilitation
  - 3. Utilization of community resources.
- F. Serve as a patient advocate:
  - 1. Protect patient rights
  - 2. Consult with appropriate others when necessary

Formulated: May 1993 by MLPNA Standards of Practice Committee