NURSING STUDENT HANDBOOK
2014-2015

SCHOOL OF NURSING
Nursing Student Handbook
2014-2015
The Nursing Student Handbook provides students with information about Henry Ford College’s (HFC) Nursing Program, its curriculum, policies and other information that is valuable toward the successful completion of the program. It is critical that all nursing students read this handbook, refer to it throughout their courses and comply with the policies described herein. It provides information needed for proper conduct and participation in the nursing student activities, information related to policies and procedures of the program.

Prior to beginning nursing classes, all potential candidates are required to attend mandatory orientation sessions which review information in the handbook. This handbook is revised annually. Policy changes that are implemented between revision cycles are communicated to students by the K drive and Nursing Program website. Students must check these resources regularly. The current handbook is available to students on the Nursing Program website. All students are responsible for their compliance with current policies and procedures in this handbook. As handbook revisions are made, students must comply with the new policies and procedures that may occur as they go forward toward completion of the program. In addition nursing students are held to all published policies and documents of the College.
Dear Student:

Welcome to Henry Ford College (HFC) Nursing Program! Our program has a great reputation in the community and nationwide. It is approved by the Michigan Board of Nursing and is accredited by the Accreditation Commission for Education in Nursing (ACEN), formally known as (National League for Nursing Accreditation Committee), (NLNAC) whose national headquarters is located at:

3343 Peachtree Road NE Suite 850
Atlanta, GA  30326
Phone:  (404) 975-5000
FAX:  (404) 975-5020
www.acenursing.org

Several non-traditional approaches are inherent to our program. Students engage in a self-directed modular approach to learning. A variety of technologies assist students in their learning. An advanced placement tract is offered for the L.P.N. (Licensed Practical Nurse).

Student nurses, like other learners, differ individually in learning style, time required for learning and in prior background experiences. Faculty also differs in background and teaching strategy. Instructional strategies are selected to help individualize learning.

Each nursing course is divided into sections. In each theory section, faculty collaborates in the planning and delivery of content. In the clinical area, students are placed in groups of 8 or less with one instructor. There are full time and adjunct nursing faculty, secretaries, lab personnel, a Program Coordinator and the Associate Dean of Health Sciences all who work on behalf of the Nursing Program.

The Administration and Faculty wish you success as you begin this academic year. Your efforts will reap satisfaction for you as a learner and person.

Sincerely,

Nursing Administration, Faculty and Staff
# NURSING STUDENT HANDBOOK

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General Information

Methods of Communication

Telephone Numbers & Email Addresses

The School of Nursing Office telephone numbers are (313) 845-9635 and 845-6305. The nursing computer/skills lab office is 845-6306. All faculty and staff email addresses are available online at: http://www.hfcc.edu/staff/StaffSearch.asp

Telephone/Cell Phone/ Messages

Telephone messages of an urgent nature ONLY will be transmitted to students who are attending regularly scheduled nursing classes at the college or clinical agency. There will be one exception: if you are expecting an emergency call, i.e. critically ill family member, you may leave an hour by hour daily schedule with the nursing office. STUDENTS MAY NOT have CELL PHONES, IPODS/MP3s OR BEEPERS in any CLINICAL AGENCY or on their person in the Practice Skills Lab (PSL). During classroom lectures and lab hours, cell phones, IPODS/MP3s, and any other electronic device will be on vibrate or off and put away. TEXTING IS PROHIBITED DURING LECTURES! During exams, cell phones will not be on a student’s person and will be turned off.

PLEASE NOTE: For mothers with children in school: Do not ask the school to call the nursing office if your child becomes ill. Designate a neighbor or friend who is to be contacted if the school must call regarding your child. This same neighbor should have your schedule, including clinical assignment.

Cancellation of Learning Experiences

1. The college may close unexpectedly due to an emergency situation, such as a snow storm.
2. All students should listen to media announcements for school closure and sign up for emergency alerts at www.myhfcc.edu where messages can be sent via text, email and voicemail. The media announcement of the school closure must be specifically for Henry Ford College and not Dearborn Public Schools.
3. When the college is closed, clinical experiences are cancelled.
4. Students are notified of cancellation of clinical experiences (illness of instructor, etc.) via Hawkmail. Clinical instructors may also use a fan-out telephone procedure detailed in their agency orientation at the beginning of each semester.

Change of Status

Students are required to notify the Nursing Office in writing of any change in name, address, phone number, or Hawkmail so that proper records and communication may be maintained. Students are also required to update their HFC information by logging into their WebAdvisor account.
Student Notification

All communications, updates and information are posted on the K-drive (accessed at my.HFC.edu), posted on the HFC Nursing website (http://nursing.hfcc.edu) and/or sent to student Hawkmail email account. All students are responsible for checking the K-drive, the program website and their HawkMail account frequently. Students can find information on how to access their HawkMail and ACEMAPP on the Nursing Program website at http://nursing.hfcc.edu

Mandatory Meetings and Deadlines

All students are expected to attend mandatory meetings and meet all deadlines for submission of necessary materials (i.e. physical, proof of hospitalization). Non-attendance at meetings or late submission of material may be subject to penalty.

Nursing Faculty

Direct dial phone numbers are easy and convenient to use. Voice mail allows you to leave a message. A courtesy phone and faculty directory are located by the Security Office and can be used to contact faculty directly in his/her office while on the East Campus. A listing of Full Faculty phone numbers and contact information can be found on the Nursing Program web page at http://nursing.hfcc.edu All faculty and staff email addresses are available online at: http://www.hfcc.edu/staff/StaffSearch.asp

DIRECTORY OF STUDENT SUPPORT SERVICES

If you are in need of support services while attending classes, please contact the following departments for assistance: For a complete directory, visit www. HFC.edu

<table>
<thead>
<tr>
<th>Department</th>
<th>Phone Number</th>
<th>Service Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACEMAPP</td>
<td>(517) 347-8093</td>
<td>Problems/Questions with ACEMAPP</td>
</tr>
<tr>
<td>Assisted Learning Services</td>
<td>(313) 845-9617</td>
<td>Services for physically challenged, learning disabled, and academically disadvantaged students, and tutoring</td>
</tr>
<tr>
<td>Child Development Center</td>
<td>(313) 317-6527</td>
<td>Day and evening child care for children ½ through 12 years old</td>
</tr>
<tr>
<td>College Store</td>
<td>(313) 845-9222</td>
<td>Purchase new/used books, modules, supplies clothing, software and snacks</td>
</tr>
<tr>
<td>Computer Services</td>
<td>(313) 845-6345</td>
<td>Helpdesk /HFC computer-related questions</td>
</tr>
<tr>
<td>Department</td>
<td>Phone</td>
<td>Description</td>
</tr>
<tr>
<td>------------------------------------</td>
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<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Counseling</td>
<td>(313) 845-9611</td>
<td>Assistance in reaching personal, educational, career goals.</td>
</tr>
<tr>
<td>Financial Aid Office</td>
<td>(313) 845-9616</td>
<td>email: <a href="mailto:finaid@HFC.edu">finaid@HFC.edu</a></td>
</tr>
<tr>
<td>Career Services</td>
<td>(313) 845-9618</td>
<td>This office assists students to create resumes and prepare for interviews.</td>
</tr>
<tr>
<td>Learning Lab</td>
<td>(313) 845-9643</td>
<td>The Learning Lab provides trained tutors for math, reading and writing.</td>
</tr>
<tr>
<td>Library</td>
<td>(313) 845-9606</td>
<td>Offers services and resources to all students</td>
</tr>
<tr>
<td>Media Center</td>
<td>(313) 845-6386</td>
<td>Offers computer lab and computers for student use</td>
</tr>
<tr>
<td>Registration</td>
<td>(313) 845-6403</td>
<td>Transcripts / enrollment services</td>
</tr>
<tr>
<td>Security</td>
<td>(313) 845-9630</td>
<td>Campus Safety and assistance</td>
</tr>
<tr>
<td>Student Outreach and Support Services</td>
<td>(313) 845-9629</td>
<td>Assists students in fulfilling their educational goals – female and male (non-traditional programs)</td>
</tr>
</tbody>
</table>
History of the Henry Ford College Nursing Program

The Henry Ford College Nursing Program was the first Associate Degree Nursing program in Michigan. It began in 1953 with 21 students as one of seven pilot nursing programs in the United States, and part of the cooperative Research Project in Junior and Community College Education for Nursing. The project, under the sponsorship of the Division of Nursing Education, Teacher’s College, Columbia University, New York City, originated to develop and test a new concept in the preparation of men and women in nursing. Functions which are commonly associated with the registered nurse were expected to be successful through this new type of program, conducted in a junior community college. Eleanor Tourtillot pioneered the HFC program as Assistant Director from 1953-1974.

Henry Ford College has continued to be a pioneer in nursing education through federally funded projects. The development of “New Media Approaches to Education for Nursing” from June 1, 1966 to May 3, 1971 and the “Development and Implementation of Instructional Modules”, February 1, 1975 to January 31, 1978 are two such projects. The Henry Ford College Program is known for its innovation in area of instructional technology.

Instructional strategies to individualize learning are in place for students in the Nursing Program. All nursing courses are modularized, which increases learner flexibility. All learners have access to on-campus tutorial laboratories for assistance with reading, writing and math skills development. Nursing students use the practice skill laboratory and computer lab for primary learning reviewing remediating and testing before clinical practice.

The Media Center in the East Campus library and the Computer Lab houses instructional material in audiovisual and computer format that are used throughout the Nursing Program. Students have access to these materials for primary learning and for review.

In 1981, after an in-depth curriculum review, Nursing Faculty developed the Curriculum Master Plan which was to be the blueprint for the new curriculum. This curriculum was implemented in September of 1983. It is based on Dorothea Orem’s Self-Care Model of Nursing.

In 1983, the Nursing Program was selected as one of five colleges in the Midwest to participate in a three-year program called “Associate Degree Nursing – Facilitating Competency Development.” The project, sponsored by the Midwest Alliance in Nursing, involved two Henry Ford College nursing instructors and two Harper-Grace nursing service administrators, working as a team in defining competencies of ADN graduates. The competencies became an integral part of educational curriculum and the nurse’s job description, thus helping to reduce stress in new associate degree nursing graduates. Consequently, this benefits students, faculty, and most of all, clients. In 1984, the Nursing Program entered into a special agreement with Hutzel Hospital to assist their Licensed Practical Nurses to complete the HFC Associates Degree Nursing Program. Theory classes were held at Hutzel Hospital. These LPN students graduated in June 1987 and all passed their National Council Licensing RN Examination.
The Nursing Program was honored with the 1988 Michigan League for Nursing Achievement Award for excellence in nursing education. In the fall of 1988, an Advanced Placement program for Licensed Practical Nurses was reinstituted. Licensed Practical Nurses earned credit toward their Associate Degree in Nursing by written challenge examinations and demonstration of clinical competence, submitting a portfolio, or by taking an accelerated track in selected courses. In addition to the campus Advanced Placement Program for LPNs, an on-site program at Henry Ford Hospital was also established in 1988.

The Nursing Program continues to advance the use of computers, updated mannequins and equipment, and other technologies for the improvement of instructions and efficiency of operations. A Computer Assisted Instructional (CAI) Program developed through State funding was initiated in the fall of 1988. The program has been phased into succeeding clinical courses.

In 1991 and again in 1994, the Nursing Program was awarded grants from the Helen Fuld Institute. The grants enable the Nursing Program to continue its multimedia efforts by implementing interactive video into the curriculum.

In May 1991, Henry Ford College and Madonna University developed a nursing articulation agreement that facilitates educational mobility for graduates of the HFC Nursing Program. Since changes in curricula occur over time, a new articulation agreement was completed in 1999. That same year, an articulation agreement was developed with Oakland University. In 2004, articulation occurred with Eastern Michigan. A transfer of credit agreement with Wayne State University, University Detroit Mercy, and several other colleges/universities exists which articulates graduates to the BSN or MSN degree in a smooth transition.

On March 26, 1992, at the 40th Anniversary of Associates Degree Nursing Education Banquet held in Lansing, Michigan, Henry Ford College received the Pioneers of Yesterday Award for forty years of excellence in nursing education. The program was again cited for the pioneer of ADN education at the 1999 NLN convention in a video depicting the history of such programs.

In October 2000, the Nursing Program was awarded accreditation with the NLNAC until the year 2008. Between 1994 and 2000, several supplemental and supportive courses were developed and implemented.

Community involvement was emphasized in 1999-2000 through a partnership with Oakwood Health System which encourages participation in community health projects. Faculty continues to expand clinical experiences in the community.

To address the nursing shortage, in 2000, an additional 60 students began entering the nursing program in the winter semester, expanding the first level entry to approximately 280 students a year.

On April 16, 2005, the 50th Graduating Class Anniversary was celebrated with a reception in the Health Careers Building Atrium. Eight members of the first graduating class of twenty-one members attended. Representatives of many other years of nursing graduates were also present, demonstrating the bond between the school, the graduates and the community.
The May 2005 nursing graduating class numbered 230 students, the largest in the history of the program to date.

In fall 2005, a partnership between Henry Ford Nursing Program and the Henry Ford Hospital System (HFHS) was established to create a mechanism that would address the nursing shortage at this large hospital complex through the sharing of assets. Current hospital personnel applied and were admitted to the nursing program. They took their nursing courses at the main HFH facility, completed their educational process, and then worked for the system that supported their education. HFC full-time nursing faculty and part-time HFHS and HFC faculty aided the process. The program at the Extended Site mirrored the on-campus nursing program. The first class began over Spring/Summer 2006.

In 2006, the LPNs transition into the nursing program became less cumbersome. The bridge course, NSG 091, facilitates entrance into the 2nd semester of nursing. The advanced placement provides LPN candidates the opportunity to obtain their ADN in one calendar year.

In 2007, the first graduating class from the partnership between Henry Ford College Nursing Program and the Henry Ford Hospital System completed all requirements. The second class of the ongoing partnership began in Spring/Summer 2007.

In 2008, The HFHS/HFC Accelerated Nursing Program was selected by the League of Community Colleges as the winner of the “Innovation of the Year Award”. The program demonstrated its sustainability by beginning a third cohort over Spring/Summer of that year.

In October 2008, two representatives from the NLNAC completed an assessment of the Nursing Program and recommended recertification for eight years.

In February 2009, the Board of the NLNAC awarded an eight year recertification to the Nursing Program.

In August, 2009, the final class from the Henry Ford Hospital partnership graduated. Fall of 2009, faculty attended an orientation on the use of “Sim baby”. This was followed by the set up and implementation of a simulation lab within the nursing division. Scenarios were developed for the “Sim baby” and have been expanded. In 2012 we added to our lab equipment, two high fidelity mannequins and baby Hal simulation mannequin.

In August 2010, the nursing program moved from the HFC main campus to the HFC School of Nursing, located on the HFC East Campus. Dedicated on November 17, 2010, the new School of Nursing provides a modern and spacious learning environment dedicated to the education of future nursing professionals and includes three simulation suites, expanded computer and practice skills labs, and plenty of “soft space” necessary for student collaboration and study.

In November, 2011, the NLNAC returned to evaluate and review our new School of Nursing building. The finished report supported our re-accreditation until 2016.

In May 2012 our first nursing student graduated from the HFC early college student program.
ASSOCIATE IN APPLIED SCIENCE DEGREE

The Nursing Program adheres to the philosophy of Henry Ford College by providing a two-year program which meets the requirements for the Associate in Applied Science Degree.

- Graduates of our program are able to function as ADN graduates and take the NCLEX-RN examination for licensure.

- Faculty continue to value ACEN accreditation as a means for greater articulation with NLN accredited BSN programs and for communicating that national standards are upheld in the HFC program. Issues within the HFC Nursing Program can be forwarded to ACEN (see contact information in this handbooks’ welcome section).

- This degree provides an entry level for students desiring future professional nursing practice or an exit point for those preferring a technical nursing practice.

- We recognize the value of guidance and counseling and refer students to internal and external resources as appropriate.

- Our nursing faculty and administrators are practitioners, speakers, writers or contributors to a variety of healthcare organizations.

- We recognize the diversity of our students, assess their learning styles and continue to develop creative teaching-learning methods.

- Our teaching methods and curriculum are based on current educational research and theory.

- Our students become more effective members of society as they develop in the affective and cognitive domains.
The Mission, Philosophy, Outcomes, and Conceptual Framework of The Henry Ford College Nursing Program

Mission

The Nursing Faculty of Henry Ford College supports and accepts the mission statement of the College. The Mission of the nursing division is to provide an Applied Science Degree that prepares a diverse population of students with the knowledge and skills necessary to attain graduation, state licensure, and entry level registered nurse practice in a rapidly changing health care system.

Philosophy of Nursing

In accordance with the mission of Henry Ford College, the nursing program is committed to prepare associate degree nurses for employment in a rapidly changing health care system. The nursing faculty has adopted Dorothea Orem’s Self-Care Deficit Theory of Nursing as the conceptual framework on which the curriculum is based.

Health

Health is viewed as biological, psychological, socio-culture, and spiritual well-being; a dynamic state influenced by many factors. Health is a state of wholeness or integrity of the human being. Homeostasis can be disrupted by an individual’s response to stressors and may influence placement on the health-illness continuum. Illness is a deviation from the normal, healthy state. Health and illness are relative qualities, not separate absolutes.

Client

The person is a complex, holistic, open system in continuous interaction with the internal and external environment. Individuals are part of diverse family and community systems. Individuals have the ability to care for themselves and others and to engage in health wellness behaviors. They have the right to quality health care and to make informed choices regarding their care and treatment. All persons are recognized as having intrinsic value, inherent worth and free will.

Nursing

Faculty believe that nursing is an art and a science whose practitioners possess specialized abilities to promote and restore health, prevent illness, or facilitate a peaceful dignified death. Nurses intervene across the life span, not just the focal client, but with clients as family members and members of groups. Nurses deliver client-centered, holistic care, which respects diversity in age, culture, ethnicity and lifestyle. An ethic of caring drives the decisions and actions of the nurse.

The Nursing process, which includes technological, social, and interpersonal elements, provides the methodology for nursing practice. It includes critical thinking and the application of scientific rationale in the assessment, diagnosis, planning, implementation, and evaluation of care. As a integral part of the health care team, nurses perform independent
and interdependent functions in the care of clients. Communication with clients, families, and the health care team is essential to the role of the nurse as a caregiver and care manager. The faculty believes that nursing is a profession of differentiated, mutually valued, and collaborative practice. Nursing practice should model the sorting of roles, function and skills of registered nurses according to education, clinical experiences and the defined competence and decision-making required by different clients in varying areas of nursing practice.

**Nursing Education**

In accordance with the philosophy of HFC, the nursing faculty view education to be lifelong process of internalizing knowledge which contributes to personal and professional growth. The learning process involves changing perceptions, thinking, feeling, and action of learners and teachers who represent diverse learning styles, life experiences, racial, age, and ethnic backgrounds. Faculty facilitates the process of continued formal education for graduates through articulation and credit transferability with local colleges and universities. Upward mobility within the nursing program is fostered through advanced placement for Licensed Practical Nurses.

Optimal learning occurs in a climate of mutual respect and is facilitated by related and concurrent experiences. The teacher serves as a professional role model who lends expertise, insight, and commitment to the process of learning while the learner is accountable to actively participate in the process. Teacher/learner roles can be reversed in given situations. Student becomes socialized to their role by valuing learning, acquiring and accepting information from other sources, critically questioning others, and obtaining feedback on learning outcomes through self, faculty, and peer evaluation. Innovation, individualized, and self-directed strategies are implemented to foster the teaching/learning environment.

Nursing education incorporates the application of nursing theory and research as well as the integration of knowledge from the biological and social sciences, and the humanities. Beginning nursing skills and the application of current technologies interrelate with prior, present and future learning and life experiences in building a strong foundation for nursing practice and development of professional behaviors.

Faculty believes that the nursing program should prepare nurses to function in a rapidly changing health care environment. As clients live longer and technology advances, increasing numbers and complexity of skills are required in the provision of nursing care. Therefore, increasing complexity of client experiences occurs as students advanced through the program. Total assessment of the client and significant support persons, as well as their ability to access community resources is integral to optimum care giving. This process assists students in the development of clinical decision-making skills.

Although nursing practice is available in acute care facilities, current health models are moving in the direction of ambulatory settings, clinics, homes, hospice, and nursing retirement centers, assisted living to total care facilities. Since graduates may care for clients in varying settings, a shift in focus to more community-based experiences is taking place. Innovative affiliations with committed institutional partners promote reality-based learning.
Program Outcomes

Identified program outcomes include the ability to critically think in making independent and interdependent judgments, use effective communication, deliver competent and therapeutic care to clients across the lifespan, attain program satisfaction, successful rates of graduation, high achievement on state boards, and employment within the ADN scope of practice in a variety of settings. Graduates are prepared to work with diverse client populations using an ethical and legal framework. The outcomes reflect the faculty’s desire to promote growth of all students and enhance the possibilities for success in their lives.

Conceptual Framework

The conceptual framework of nursing practice at Henry Ford College is based on Dorothea Orem’s Self Care Deficit Theory of Nursing. In accordance with that model, faculty supports the following beliefs and values.

1. Health is a state of biological, psychological, socio-cultural, and spiritual well-being
2. Health is a dynamic state, influenced by many factors, and can best be reviewed on a continuum. A person may move back and forth on the continuum between illness and high level wellness. Nurse’s help client’s move toward high level wellness.
3. A person is a complex open system whose health is influenced by biological, psychological, social, cultural, developmental and environmental factors. Physical, psychological and social stressors may disrupt physical and psychological homeostasis.
4. A person has intrinsic value, inherent worth, free will and is viewed in a holistic way.
5. Self-care is the practice of activities that individuals initiate and continuously perform on their own behalf that will maintain life, health and well-being. There are three categories of required activities: universal, developmental, and health deviation self-care requisites.
6. All people have some knowledge, skills and motivation to meet their own requirements for health. This ability is called self-care agency. Adults often have the responsibility of helping dependents meet their requirements for health. The ability to help another improve or maintain health is called dependent care agency.
7. A change in any of the factors that affect health can improve a person’s self-care ability or can overwhelm a person’s self-care agency and result in self-care deficits.
8. Persons become clients in the health care system. When they perceive themselves or are perceived by others as having a health problem.
9. Each client has a right to direct his own health-related activities, so the health care system must be individualized, cognizant of client’s moral code, anticipatory, accessible, financially feasible, and allow for choices of health care providers.
10. Nursing is an art and science whose practitioners possess the specialized abilities necessary to help clients prevent or overcome self-care providers.

11. Nursing systems are designed by nurses to help clients overcome self-care deficits. A nurse’s role within a nursing system will be complementary to the client’s self-care agency. A nurse may apply any of five general methods of helping: doing for, guiding, supporting, teaching, or providing a developmental environment.

12. Nursing practice includes the technological, interpersonal, and social skills necessary to diagnose and treat human responses to illness, trauma, or disability across the life span.

13. Nurse’s help clients develop self-care practices that enhance, maintain, or restore health.

14. Nursing practice is unified and goal-directed through the use of Orem’s model and nursing process.

15. The methodology of nursing practice is the nursing process, which include the steps of assessment, diagnosis, planning, implementation, and evaluation.

16. Nurses, as part of the health care team, perform independent and interdependent functions. Nursing diagnoses are problems that a nurse addresses independently. Collaborative problems are approached with other health professionals interdependently.

17. The American Nurses Association Code of Ethics guides all aspects of nursing care.

18. To best develop the student’s cognitive, affective and psychomotor domains which are consistent with such a philosophy, the faculty supports the following concepts relating to teaching-learning and nursing education.

A. Nursing education is a lifelong process of internalizing knowledge which contributes to personal and professional growth.

   1. The goal of nursing education is to:
      - Develop awareness of self and others
      - Develop nursing competence
      - Maintain high standards of nursing care

   2. The educational strategies used should be:
      - Innovative
      - Progressive
      - Varied
      - Individualized – promote self-direction
      - Dynamic
3. Teaching-learning is an interpersonal process used to develop:
   - Technological, interpersonal and social skills
   - Critical thinking
   - Problem-solving skills
   - Values
   - Attitudes

4. Learning is:
   - Enhanced by providing related and concurrent classroom and clinical experiences which consider individual learning styles, previous life experiences and cultural diversity.
   - Self-directed through the use of modules and remediation
   - Fostered by ongoing self-evaluation and feedback
   - A change in behavior which persists and results from experience.

5. Optimum learning occurs when:
   - There is a climate of mutual respect between teacher and learner
   - There is a progression of knowledge from simple to complex
   - Structured objectives and evaluations are given at each state of the process
   - Opportunities for application of knowledge occurs

6. The role of the learner is to:
   - Actively participate in the process of learning
   - Be motivated
   - Be physically and mentally ready for learning to occur
   - Be responsible for seeking additional help when necessary

7. The role of the educator is to:
   - Create an environment that is conducive to learning
   - Encourage the student to assume responsibility for learning
   - Facilitate the learning process
   - Provide information about nursing situations
   - Enhance creative problem solving
   - Foster respect for self and others
   - Assume responsibility for self-evaluation including the use of feedback from learners
   - Serve as a professional role model who lends expertise, insight and commitment to the joint endeavor of teaching-learning. Identify and advise students who are “high risk”
B. Faculty supports belief:

1. That nursing is a profession, and professional level of entry into practice is the Bachelor of Science in Nursing.

2. That two levels of practice should exist within the profession: the technical level, which is the Associate in Applied Science, and the professional level, which is the Bachelor of Science in Nursing.

C. Faculty supports the recommendation of the Federal Commission on Nursing to facilitate the articulation of LPN to ADN and to BSN.

The Faculty is in the process of finalizing our new curricular design with the initial semester implementation to occur in the fall of 2014 semester. The Mission, Philosophy, Program Outcomes, and Curricular Master Plan are available from the Nursing Office. Once completely finalized, it will be available as an addendum for this document.

ADN Competencies

The NLN Educator Competency Model has defined four Program Outcomes for the ADN graduate.

- Human Flourishing
- Nursing Judgment
- Professional Identity
- Spirit of Inquiry

These four Program Outcomes are incorporated into the HFC Nursing Program Curriculum Master Plan which was constructed by the nursing faculty.
CURRICULUM MASTER PLAN

Constructed by Nursing Division Faculty
# CURRICULUM MASTER PLAN

<table>
<thead>
<tr>
<th>Program Objective 1</th>
<th>→ OUTCOME 1: The Henry Ford College nursing graduate will use critical thinking in application of the Nursing Process and decision-making in the practice of nursing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0 The Henry Ford College Nursing Program graduate will use Orem’s Self-Care Deficit Theory, scientific principles and research findings as the foundation for critical thinking and decision making in nursing practice</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level I</th>
<th>Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 2.2</td>
<td>C 3.0</td>
</tr>
<tr>
<td>A 2.2</td>
<td>A 3.2</td>
</tr>
<tr>
<td>PM</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 2</th>
<th>SEMESTER 3</th>
<th>SEMESTER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter A</td>
<td>Letter A</td>
<td>Letter A</td>
<td>Letter A</td>
</tr>
<tr>
<td>C 2.2</td>
<td>C 2.0</td>
<td>C 3.0</td>
<td>C 3.0</td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 2.2</td>
<td>A 2.2</td>
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<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 2.3</td>
<td>A 2.3</td>
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<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 3.1</td>
<td>A 3.1</td>
</tr>
<tr>
<td>PM</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
</tr>
</tbody>
</table>

**SEMESTER 1**

- **Letter A**: C 2.2 Interprets the basic principles of systems theory in relation to the Self-Care Deficit Theory.
- **Letter B**: C 1.32 Identifies the biopsychosociocultural, developmental and ecological principles impacting the adult client as a self-care agent.
- **Letter C**: C 2.2 Explains the basic principles of change and its affect on self-care.
- **Letter D**: C 2.2 Explains the basic principles of learning and its affect on self-care agency.
- **Letter E**: C 3.2 Identifies the use of nursing research as a Standard of Professional Performance and a method to improve nursing practice.
- **Letter F**: C 2.2 Explains principles of critical thinking used in decision-making within nursing practice.

**SEMESTER 2**

- **Letter A**: C 2.0 Uses the principles of the Self-Care Deficit Theory in the care of adult clients with alterations in emotional and physical health.
- **Letter B**: C 2.2 Describes the biopsychosociocultural, developmental and ecological principles impacting the adult client as a self-care agent.
- **Letter C**: C 3.0 Uses principles of change theory to facilitate positive changes with self and clients.
- **Letter D**: C 3.0 Uses principles of learning theory to facilitate self-care agency in self and clients.
- **Letter E**: C 2.2 Explains the use of nursing research in the development of a nursing care.
- **Letter F**: C 2.2 Uses critical thinking in decision-making within nursing practice.

**SEMESTER 3**

- **Letter A**: C 3.0 Uses the Self-Care Deficit Theory as the nursing framework in the care of adult clients with complex health care needs.
- **Letter B**: C 3.0 Relates biopsychosociocultural, developmental and ecological principles to the adult client as a self-care agent.
- **Letter C**: C 3.0 Uses principles of change theory to facilitate positive change when managing complex situations.
- **Letter D**: C 3.0 Uses principles of learning theory to facilitate self-care agency and health promotion.
- **Letter E**: C 3.2 Uses interpreted nursing research findings when developing client nursing care plans.
- **Letter F**: C 3.0 Accepts responsibility for use of critical thinking in decision-making with increasingly complex client situational factors.

**SEMESTER 4**

- **Letter A**: C 3.0 Uses Orem’s Self-Care Deficit Theory, scientific and research findings as the foundation for critical thinking and decision making in nursing practice.
- **Letter B**: C 3.0 Relates biopsychosociocultural, developmental and ecological principles to the client as an self-care agent throughout life stages.
- **Letter C**: C 3.0 Uses principles of change theory to facilitate positive change when managing a group clients.
- **Letter D**: C 3.0 Uses principles of learning theory to facilitate self-care agency when managing a group of clients.
- **Letter E**: C 3.0 Uses interpreted nursing research findings for developing nursing care.
- **Letter F**: C 3.0 Assumes responsibility for use of critical thinking in decision-making when managing multidimensional situations.
### Curriculum Master Plan (Cont’d)

<table>
<thead>
<tr>
<th>Program Objective 2</th>
<th>Outcome 1 and 2 cont:</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
<td>The Henry Ford College Nursing Program graduate will communicate effectively with individuals, families, communities, and the health care team using a variety of processes and technologies (informatics).</td>
</tr>
<tr>
<td>Level I</td>
<td>Level II</td>
</tr>
<tr>
<td>C 3.0</td>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses principles of therapeutic communication and effective communication skills in the care of clients.</td>
<td>Communicates effectively with individuals, families, communities and health care team using a variety of processes and technologies.</td>
</tr>
<tr>
<td>A 2.2</td>
<td>A 3.2</td>
</tr>
<tr>
<td>PM 2.0</td>
<td>PM 3.0</td>
</tr>
</tbody>
</table>

#### SEMESTER 1

<table>
<thead>
<tr>
<th>Letter A</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses basic communication skills with clients, faculty, staff and peers when providing care to clients. Applies selected principles of therapeutic communication when interacting with clients.</td>
</tr>
<tr>
<td>A 2.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Documents accurately assessment data and nursing interventions on appropriate clinical agency documents. Communicates significant observations performed with client response to appropriate agency personnel before leaving the unit. Communicates significant changes in client condition which warrant immediate interventions to appropriate person.</td>
</tr>
<tr>
<td>A 2.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Describes the importance of health teaching in developing the self-care agency.</td>
</tr>
<tr>
<td>A 2.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses computer for mediated learning and information retrieval.</td>
</tr>
<tr>
<td>A 2.1</td>
</tr>
</tbody>
</table>

#### SEMESTER 2

<table>
<thead>
<tr>
<th>Letter A</th>
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<tbody>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses principles of therapeutic communication and effective communication skills in the care of clients.</td>
</tr>
<tr>
<td>A 2.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Communicates effectively with individuals, families, communities and health care team using a variety of processes and technologies.</td>
</tr>
<tr>
<td>A 2.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Documents significant client data related to achievement of client outcomes on appropriate clinical agency documents. Communicates significant client data in appropriate time and method to the health team members using established channels.</td>
</tr>
<tr>
<td>A 2.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses standard teaching plans to manage identified self-care deficit.</td>
</tr>
<tr>
<td>A 2.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Demonstrates beginning skills in information retrieval and word processing for student learning and client documentation.</td>
</tr>
<tr>
<td>A 2.2</td>
</tr>
</tbody>
</table>

#### SEMESTER 3

<table>
<thead>
<tr>
<th>Letter A</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Develops and maintains goal-directed interventions to encourage expression of needs and support coping behaviors in the care of adult clients.</td>
</tr>
<tr>
<td>A 3.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Documents adult client data with well-defined nursing diagnosis to provide continuity of care.</td>
</tr>
<tr>
<td>A 3.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Communicates client data with well-defined to provide continuity of care using established channels.</td>
</tr>
<tr>
<td>A 3.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Modifies a standard teaching plan to manage the identified self-care deficits for a group of clients.</td>
</tr>
<tr>
<td>A 3.2</td>
</tr>
</tbody>
</table>

#### SEMESTER 4

<table>
<thead>
<tr>
<th>Letter A</th>
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</thead>
<tbody>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Communicates client data with well-defined to provide continuity of care using established channels.</td>
</tr>
<tr>
<td>A 3.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Identifies collaboration with clients, significant others and health care providers in providing client care as an ANA Standard of Professional Performance.</td>
</tr>
<tr>
<td>A 3.2</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Collaborates with clients, significant others and health care providers when delivering patient care.</td>
</tr>
<tr>
<td>A 3.1</td>
</tr>
<tr>
<td>C 3.0</td>
</tr>
<tr>
<td>Uses computers to retrieve, process, document and deliver information related to student learning and client care.</td>
</tr>
<tr>
<td>A 3.1</td>
</tr>
</tbody>
</table>
## Program Objective 3

C 4.2 The Henry Ford College Nursing Program graduate will use standards of care in health promotion, disease prevention and illness management for individuals and families throughout life stages.

→ **Outcome 1, 2 and 3 Cont.:** The Henry Ford College nursing graduate is prepared to work within the prescribed ADN scope of nursing practice and use Orem and other nursing theories as a basis for providing therapeutic interventions in care.

<table>
<thead>
<tr>
<th>Level I</th>
<th>Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
<td>C 4.2</td>
</tr>
<tr>
<td>Uses standards of care in health promotion, risk reduction, disease prevention and illness management for adult individuals</td>
<td>Uses standards of care in health promotion, risk reduction, disease prevention and illness management for individuals and families throughout life stages</td>
</tr>
<tr>
<td>A 2.2</td>
<td>A 3.2</td>
</tr>
<tr>
<td>PM 2.0</td>
<td>PM 3.0</td>
</tr>
</tbody>
</table>

### SEMESTER 1

<table>
<thead>
<tr>
<th>Letter A</th>
<th>C 2.2</th>
<th>Describes the ANA Standards of Care.</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 2.2</td>
<td></td>
<td>Explains the relationship of the ANA Standards of Care to the steps of the nursing process.</td>
</tr>
<tr>
<td>A 2.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PM 2.0</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Letter B</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
<td>Collects data from primary and secondary sources.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>Develops the skill of interviewing, observation and physical appraisal as methods of collecting data.</td>
</tr>
<tr>
<td>PM 2.0</td>
<td></td>
</tr>
</tbody>
</table>

### SEMESTER 2

<table>
<thead>
<tr>
<th>Letter A</th>
<th>A 3.1</th>
<th>Uses the ANA Standards of Care when caring for clients.</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
<td></td>
<td>Uses the purpose and use of standards specific to nursing in specialty areas.</td>
</tr>
<tr>
<td>A 2.2</td>
<td></td>
<td>Uses additional techniques and methods for data collection related to client’s biopsychosociocultural, developmental and ecological principles, health-illness status and setting.</td>
</tr>
<tr>
<td>PM 2.0</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Letter B</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 4.2</td>
<td>Uses additional techniques and methods for assessment of client’s biopsychosociocultural, developmental and ecological principles, health-illness status and setting.</td>
</tr>
<tr>
<td>A 3.1</td>
<td>Uses the standards specific to nursing when caring for clients in specialty areas.</td>
</tr>
<tr>
<td>PM 3.0</td>
<td></td>
</tr>
</tbody>
</table>

### SEMESTER 3

<table>
<thead>
<tr>
<th>Letter C</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0</td>
<td>Determines the therapeutic self-care demand and self-care agency using data related to client’s basic conditioning factors and power components.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>Predicts client’s self-care deficits based on interpretation of data.</td>
</tr>
<tr>
<td>C 3.0</td>
<td>Develops nursing diagnoses/ collaborative problems to prevent self-care deficits.</td>
</tr>
<tr>
<td>A 2.2</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Letter C</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 4.2</td>
<td>Analyzes client’s basic conditioning factors to determine therapeutic self-care demand and self-care agency.</td>
</tr>
<tr>
<td>A 3.1</td>
<td>Deduces client’s nursing diagnoses/ collaborative problems to prevent or treat self-care deficits.</td>
</tr>
<tr>
<td>C 4.2</td>
<td></td>
</tr>
</tbody>
</table>

### SEMESTER 4

<table>
<thead>
<tr>
<th>Letter C</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 4.2</td>
<td>Determines nursing diagnoses/ collaborative problems to prevent or treat self-care deficits based on the analysis of the client’s basic conditioning factors and power components.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Letter C</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 4.2</td>
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</tbody>
</table>

**Note:** The above table provides a structured overview of the curriculum objectives and outcomes. Each semester builds upon the previous one, ensuring a comprehensive development of skills and knowledge in nursing practice.
<table>
<thead>
<tr>
<th>Program Objective 3</th>
<th>Outcome 1, 2 and 3 Cont.: The Henry Ford College nursing graduate is prepared to work within the prescribed ADN scope of nursing practice and use Orem and other nursing theories as a basis for providing therapeutic interventions in care.</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 4.2 The Henry Ford College Nursing Program graduate</td>
<td>Level I: C 3.0 Uses standards of care in health promotion, risk reduction, disease prevention and illness management for adult individuals. A 2.2 and illness management for individuals and families throughout life stages.</td>
</tr>
<tr>
<td>A 3.2 will use standards of care in health promotion, disease prevention and illness management for individuals and families throughout life stages. PM 3.0</td>
<td>Level II: C 4.2 Uses standards of care in health promotion, risk reduction, disease prevention and illness management for individuals and families throughout life stages. A 3.2 and illness management for individuals and families throughout life stages. PM 3.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 2</th>
<th>SEMESTER 3</th>
<th>SEMESTER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Letter D Planning</strong></td>
<td><strong>Letter D Planning</strong></td>
<td><strong>Letter D Planning</strong></td>
<td><strong>Letter D Planning</strong></td>
</tr>
<tr>
<td>C 3.0 Predicting the nursing systems that will achieve client outcomes. A 2.1</td>
<td>C 3.0 Predicting the nursing systems that will achieve client outcomes. A 2.1</td>
<td>C 3.0 Predicting the nursing systems that will achieve client outcomes. A 2.1</td>
<td>C 3.0 Predicting the nursing systems that will achieve client outcomes. A 2.1</td>
</tr>
<tr>
<td>C 3.0 Selects nursing systems to achieve client outcomes. A 2.1</td>
<td>C 3.0 Selects nursing systems to achieve client outcomes. A 2.1</td>
<td>C 3.0 Selects nursing systems to achieve client outcomes. A 2.1</td>
<td>C 3.0 Selects nursing systems to achieve client outcomes. A 2.1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Letter E Implementation</strong></th>
<th><strong>Letter E Implementation</strong></th>
<th><strong>Letter E Implementation</strong></th>
<th><strong>Letter E Implementation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0 Uses therapeutic interventions which support the client’s self-care agency in achieving and meeting universal self-requisites. A 2.1</td>
<td>C 3.0 Uses therapeutic interventions which will achieve identified client outcomes for adult client. PM 2.0</td>
<td>C 3.0 Uses therapeutic interventions which promote health, prevent disease and support client at the optimal level of functioning to achieve identified client outcomes in adult client.</td>
<td>C 3.0 Uses therapeutic interventions which support the client’s self-care agency in achieving and meeting universal self-requisites. A 2.1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Letter F Evaluation</strong></th>
<th><strong>Letter F Evaluation</strong></th>
<th><strong>Letter F Evaluation</strong></th>
<th><strong>Letter F Evaluation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>C 2.2 Understands method of evaluating client progress toward outcome achievement within the nursing system. A 2.1</td>
<td>C 3.0 Evaluates the effectiveness of identified therapeutic interventions in achieving client outcomes within the nursing system. A 2.2</td>
<td>C 4.2 Analyzes the effectiveness of therapeutic interventions in client outcomes achievement. A 3.1</td>
<td>C 4.2 Analyzes the effectiveness of therapeutic interventions to redesign the nursing system for goal achievement. A 3.2</td>
</tr>
</tbody>
</table>

24
Program Objective 4
C 3.0 The Henry Ford College Nursing Program graduate will manage health care for clients in varied settings recognizing the impact of societal forces on quality care and the health care delivery system
A 3.2

→ Outcome 1, 2, 3 and 4 cont.: The Henry Ford College graduate is prepared to work within the ADN scope of practice, while employed in a variety of settings.

<table>
<thead>
<tr>
<th>Horizontal Level I</th>
<th>Horizontal Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 3.0 Organizes the management of nursing care for assigned clients describing the impact of societal forces on quality care and the health care delivery system.</td>
<td>C 3.0 Manage health care for clients in varied structured settings recognizing the impact of societal forces on quality care and the health care delivery system.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 2</th>
<th>SEMESTER 3</th>
<th>SEMESTER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Letter A</strong></td>
<td><strong>Letter A</strong></td>
<td><strong>Letter A</strong></td>
<td><strong>Letter A</strong></td>
</tr>
<tr>
<td>C 1.32 Identified the ANA Standards of Professional Performance which systematically evaluate the quality and effectiveness of nursing practice.</td>
<td>C 2.2 Explains the impact of systematic evaluation on quality and effectiveness of nursing care.</td>
<td>C 3.0 Uses systematic processes to evaluate quality and effectiveness of nursing care delivered to clients.</td>
<td>C 3.0 Uses established policies which systematically evaluates nursing care delivered for quality and effectiveness when managing a group of clients.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
<tr>
<td><strong>Letter B</strong></td>
<td><strong>Letter B</strong></td>
<td><strong>Letter B</strong></td>
<td><strong>Letter B</strong></td>
</tr>
<tr>
<td>C 1.32 Identifies the impact of social problems on the delivery of health care.</td>
<td>C 2.3 Explains the impact of social problems on the delivery of health care.</td>
<td>C 3.0 Relates the impact of social problems on the delivery of health care.</td>
<td>C 3.0 Uses knowledge of the impact of social problems when delivering care.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
<tr>
<td><strong>Letter C</strong></td>
<td><strong>Letter C</strong></td>
<td><strong>Letter C</strong></td>
<td><strong>Letter C</strong></td>
</tr>
<tr>
<td>C 1.32 Identifies the ANA Standards of Professional Performance which affect resource utilization.</td>
<td>C 2.3 Explains the impact of resource utilization on the delivery of quality care.</td>
<td>C 3.0 Relates the impact of economic and political forces of the health care delivery system to the resources available for assigned clients.</td>
<td>C 3.0 Manages care integrating an understanding of economic and political forces on quality care and the health care delivery system.</td>
</tr>
<tr>
<td>C 1.32 Identifies the impact of economic and political forces on quality care and the health care delivery system.</td>
<td>C 2.3 Explains the impact of economic and political forces on the delivery of quality care within assigned agency.</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
<tr>
<td><strong>Letter D</strong></td>
<td><strong>Letter D</strong></td>
<td><strong>Letter D</strong></td>
<td><strong>Letter D</strong></td>
</tr>
<tr>
<td>C 1.32 Identifies the roles of health care providers.</td>
<td>C 2.3 Explains role relationships among health care providers in the promotion of optimal care.</td>
<td>C 3.0 Relates the impact of health care providers roles on the promotion of optimal care.</td>
<td>C 3.0 Relates the impact of health care providers roles on the promotion of optimal care.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
<tr>
<td><strong>Letter E</strong></td>
<td><strong>Letter E</strong></td>
<td><strong>Letter E</strong></td>
<td><strong>Letter E</strong></td>
</tr>
<tr>
<td>C 3.0 Organizes delivery of planned therapeutic interventions for individual clients to be accomplished within specified timeframe.</td>
<td>C 3.0 Organizes delivery of planned therapeutic interventions for individual clients to be accomplished within specified timeframe.</td>
<td>C 3.0 Coordinates the delivery of planned therapeutic for individual clients to be accomplished within specified timeframe.</td>
<td>C 3.0 Manages the delivery of planned therapeutic interventions for a group of clients to be accomplished within specified timeframe.</td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.2</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
<tr>
<td><strong>Letter F</strong></td>
<td><strong>Letter F</strong></td>
<td><strong>Letter F</strong></td>
<td><strong>Letter F</strong></td>
</tr>
<tr>
<td>A 2.1</td>
<td>A 2.3</td>
<td>A 3.1</td>
<td>A 3.2</td>
</tr>
</tbody>
</table>
**Program Objective 5**
The Henry Ford College Nursing Program graduate will practice nursing with diverse client populations using an ethical and legal framework.

**Level I**
C 3.0 Applies ethical and legal principles to the care of clients from diverse populations.
A 2.3

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 2</th>
<th>SEMESTER 3</th>
<th>SEMESTER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Letter A</strong>&lt;br&gt;C 2.2 Describes the nurse’s responsibility to incorporate the client’s sociocultural orientation when delivering care.&lt;br&gt;A 2.1</td>
<td><strong>Letter A</strong>&lt;br&gt;C 3.0 Demonstrates sensitivity to client’s sociocultural orientation and rights&lt;br&gt;A 2.3</td>
<td><strong>Letter A</strong>&lt;br&gt;C 3.0 Accepts accountability to deliver culturally competent care.&lt;br&gt;A 3.1</td>
<td><strong>Letter A</strong>&lt;br&gt;C 3.0 Assumes accountability to be culturally competent when managing nursing care.&lt;br&gt;A 3.2</td>
</tr>
<tr>
<td><strong>Letter B</strong>&lt;br&gt;C 2.2 Explains the impact of the ANA Standard of Professional Performance related to ethics on the nurse’s decision making and actions.&lt;br&gt;A 2.1</td>
<td><strong>Letter B</strong>&lt;br&gt;C 3.0 Demonstrates ethical behavior and decision-making when providing nursing care&lt;br&gt;A 2.3</td>
<td><strong>Letter B</strong>&lt;br&gt;C 3.0 Accepts ethical accountability and decision-making when providing nursing care&lt;br&gt;A 3.1</td>
<td><strong>Letter B</strong>&lt;br&gt;C 3.0 Assumes accountability for ethical behavior and decision making when managing nursing care.&lt;br&gt;A 3.2</td>
</tr>
<tr>
<td><strong>Letter C</strong>&lt;br&gt;C 2.2 Describes the impact of the Michigan Nurse Practice Act on clients, peers, faculty, and agency personnel.&lt;br&gt;A 2.1</td>
<td><strong>Letter C</strong>&lt;br&gt;C 3.0 Practices within the framework of the Michigan Nurse Practice Act when delivering client care.&lt;br&gt;A 2.3</td>
<td><strong>Letter C</strong>&lt;br&gt;C 3.0 Practices within the framework of the Michigan Nurse Practice Act when delivering client care.&lt;br&gt;A 3.1</td>
<td><strong>Letter C</strong>&lt;br&gt;C 3.0 Uses framework of the Michigan Nurse Practice Act when delivering client care.&lt;br&gt;A 3.2</td>
</tr>
<tr>
<td><strong>Letter D</strong>&lt;br&gt;C 2.2 Describes the impact of agency policy on the delivery of nursing care.&lt;br&gt;A 2.1</td>
<td><strong>Letter D</strong>&lt;br&gt;C 3.0 Demonstrates legal accountability when providing nursing care.&lt;br&gt;A 2.3</td>
<td><strong>Letter D</strong>&lt;br&gt;C 3.0 Accepts legal accountability when providing nursing care&lt;br&gt;A 3.1</td>
<td><strong>Letter D</strong>&lt;br&gt;C 3.0 Assumes legal accountability when managing nursing care.&lt;br&gt;A 3.2</td>
</tr>
</tbody>
</table>

→ Outcome 1, 2, 3 and 4:
<table>
<thead>
<tr>
<th>Program Objective 6</th>
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</thead>
<tbody>
<tr>
<td>C 3.0  The Henry Ford College Nursing Program graduate will incorporate professional nursing values into role development as a competent degree nurse.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level I</th>
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</thead>
<tbody>
<tr>
<td>C 3.0  Derives satisfaction from personal and professional role development within the framework of associate degree nursing.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level II</th>
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</thead>
<tbody>
<tr>
<td>C 3.0  Incorporates professional nursing values into role development as competent associate degree nurse.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 2</th>
<th>SEMESTER 3</th>
<th>SEMESTER 4</th>
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<tbody>
<tr>
<td><strong>Letter A</strong></td>
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<tr>
<td>C 2.2  Demonstrate awareness of the relationship of self-awareness to self development.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>A 2.1  Demonstrate awareness of the relationship between self-directed learning and self development.</td>
<td></td>
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</tr>
<tr>
<td><strong>Letter A</strong></td>
<td></td>
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<tr>
<td>C 3.0  Demonstrates awareness of the relationship of self-evaluation and feedback of faculty, peers, and agency personnel as tools for self development.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>A 2.3  Initiates self-directed learning to facilitate self development.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Letter A</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C 3.0  Accepts responsibility for self development through the use self-evaluation and feedback of faculty, peers and agency personnel to make appropriate behavior changes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A 3.1  Initiates self directed learning to facilitate self development.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Letter A</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C 3.0  Assumes responsibility for self development through self- evaluation and directed learning.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **C 2.2** |
| **C 3.0** |
| **C 2.1** |
| **C 2.3** |

| **Letter B** |
| C 2.2  Explains the impact of the ANA Standard of Professional Performance on nursing practice performance appraisal. |
| A 2.1  Describes the importance of professional standards to evaluation of nursing practice. |
| **Letter B** |
| C 3.0  Demonstrates awareness of the use of standards to evaluate and improve own nursing practice. |
| A 2.3  Initiates self-directed learning to facilitate self development. |
| **Letter B** |
| C 3.0  Accepts responsibility to use professional standards to evaluate and improve own nursing practice. |
| A 3.1  Initiates self directed learning to facilitate self development. |
| **Letter B** |
| C 3.0  Assumes responsibility to use professional standards to evaluate and improve own nursing practice. |

| **Letter C** |
| C 2.2  Describes the role of the associate degree nurse within the nursing profession. |
| A 2.1  Describes methods for the role development as a member of the nursing profession. |
| **Letter C** |
| C 2.2  Demonstrates awareness of role development as an associate degree nurse. |
| A 2.3  Initiates self-directed learning to facilitate self development. |
| **Letter C** |
| C 3.0  Accepts responsibility for role development as an associate degree nurse. |
| A 3.1  Initiates self directed learning to facilitate self development. |
| **Letter C** |
| C 3.0  Assumes role development as an associate degree nurse in the nursing profession. |

| **Letter D** |
| C 2.2  Demonstrate awareness of the importance of the concepts of caring in nursing. |
| A 2.1  Explains the role of the associate degree nurse within the nursing profession. |
| **Letter D** |
| C 3.0  Uses caring behaviors when administrating nursing care. |
| A 3.1  Initiates behavior congruent with collegial relationships with peers, faculty and the health care team. |
| **Letter D** |
| C 3.0  Accepts responsibility for using caring behaviors when administrating nursing care. |
| A 3.1  Initiates behavior congruent with collegial relationships with peers, faculty and the health care team. |
| **Letter D** |
| C 3.0  Assumes responsibility for incorporation of caring behaviors when interacting with clients, families and the health care team. |

| **C 2.2** |
| **C 3.0** |
| **C 3.1** |
| **C 2.3** |

| **Letter E** |
| C 2.2  Explains the impact of the ANA Standard of Professional Performance on collegiality. |
| A 2.1  Explains the role of the associate degree nurse within the nursing profession. |
| **Letter E** |
| C 2.2  Demonstrates awareness of the Collegial relationship with peers, faculty and the health care team. |
| A 2.3  Initiates behavior congruent with collegial relationships with peers, faculty and the health care team. |
| **Letter E** |
| C 3.0  Exhibits behavior congruent with collegial relationships with peers, faculty, and the health care team. |
| A 3.1  Initiates behavior congruent with collegial relationships with peers, faculty and the health care team. |

| **Letter E** |
| C 3.0  Assumes responsibility for collegial relationships with peers, faculty and the health care team. |

27
### Semester/Course Sequence

<table>
<thead>
<tr>
<th>Prior to Admission to Nursing</th>
<th>Semester Credits</th>
<th>Class PSL Hrs/wk</th>
<th>Clinical HR/Total</th>
</tr>
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<tbody>
<tr>
<td>PSY 131 Introductory Psychology</td>
<td>3</td>
<td>3</td>
<td></td>
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<tr>
<td>ENG 131 English Composition</td>
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<td>3</td>
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<tr>
<td>ENG 132 English Composition</td>
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**SEMESTER 1**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester Credits</th>
<th>Class PSL Hrs/wk</th>
<th>Clinical HR/Total</th>
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<tbody>
<tr>
<td>NSG 120 Nursing &amp; Health Care Systems I</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>NSG 126 Nursing &amp; Self-Care I</td>
<td>7</td>
<td>4</td>
<td>9 (15 wk)</td>
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<tr>
<td>BIO 233 Anatomy and Physiology**</td>
<td>4</td>
<td>3</td>
<td></td>
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<tr>
<td>AH 120 Pharmacology</td>
<td>3</td>
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**SEMESTER 2**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester Credits</th>
<th>Class PSL Hrs/wk</th>
<th>Clinical HR/Total</th>
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</thead>
<tbody>
<tr>
<td>NSG 150 Nursing &amp; Self-Care II (8wks.)</td>
<td>5</td>
<td>6</td>
<td>12 (7.5 wk)</td>
</tr>
<tr>
<td>NSG 155 Nursing &amp; Self-Care III (8wks.)</td>
<td>5</td>
<td>10</td>
<td>12 (7.5 wk)</td>
</tr>
<tr>
<td>BIO 234 Anatomy &amp; Physiology**</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>PSY 253 Life Span Development*</td>
<td>3</td>
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**Spring/Summer Sessions**

<table>
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<tr>
<th>Course</th>
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<tbody>
<tr>
<td>SOC 131 Introduction to Sociology</td>
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**SEMESTER 3**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester Credits</th>
<th>Class PSL Hrs/wk</th>
<th>Clinical HR/Total</th>
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</thead>
<tbody>
<tr>
<td>NSG 221 Nursing &amp; Self-Care IV, Part I</td>
<td>5</td>
<td>6</td>
<td>12 (7.5 wk)</td>
</tr>
<tr>
<td>NSG 222 Nursing &amp; Self-Care IV, Part II</td>
<td>5</td>
<td>6</td>
<td>12 (7.5 wk)</td>
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</table>

**SEMESTER 4**

<table>
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<tr>
<th>Course</th>
<th>Semester Credits</th>
<th>Class PSL Hrs/wk</th>
<th>Clinical HR/Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSG 250 Nursing &amp; Self-Care V (10wks)</td>
<td>7</td>
<td>6</td>
<td>13.5</td>
</tr>
<tr>
<td>NSG 255 Nursing &amp; Health Care Systems II</td>
<td>3</td>
<td>3</td>
<td>18.5</td>
</tr>
</tbody>
</table>

**Total**

65

*Must be taken as scheduled or before program admission.*

**Anatomy & Physiology course taken five or more years prior to nursing course enrollment must be repeated.**

**NOTE:** All students admitted to the college must meet all HFC degree requirements for graduation.

Practice Skills Lab (PSL) credit is assigned for some nursing courses. PSL time may be used: 1) by faculty to demonstrate skills or technologies, 2) by students and faculty to critique performances, or 3) by students to prepare for clinical assignments.

A ratio of three 52 minutes hours to one credit hour (3:1 ratio) is established for all nursing clinical courses.
**Course Descriptions Required** (Current cohort will follow until winter 2016)

**NSG 120 Nursing and Health Care Systems I**
*Corequisites: NSG 126, BIO 233, AH120  2 Credit Hours*
**Prerequisites:** Acceptance to the Nursing Program. Nursing division approval, PSY131, ENG131, ENG 132

This course socializes the student into today’s nursing and introduces concepts necessary for functioning at optimal levels as a student and ADN graduate nurse. This course includes Orem’s self-care deficit theory of nursing; professional values and ethics; legal issue; trends; and components of the health care delivery system. Two consecutive hours of theory per week.

**NSG 126 Nursing and Self-Care I**
*7 Credit Hours*
**Prerequisite:** Acceptance to the Nursing Program, PSY131, ENG131, ENG132.
**Corequisites:** NSG 120, BIO 233, AH120

This course introduces the nursing process and Orem’s self-care model as the conceptual model for nursing practice. Laboratory practice precedes clinical experience with actual clients. In clinical experience, the emphasis is on development of competence for ADN roles. Proficiency in dosage calculations is required for continuation in the course. Four hours of theory, twelve hours of clinical/PSL practice per week in an acute hospital.

**NSG 150 Nursing and Self-Care II**
*5 Credit Hours*
**Prerequisites:** NSG120, NSG 126, BIO 233, and AH120
**Corequisites:** NSG 155, BIO 234, PSY 253

This course continues development of the nursing process to assist psychiatric adults clients with diagnoses related to indirect self-destructive behavior, inability to relate with others, alteration in mood, severe anxiety, social maladaptation, and psychophysiological conditions. Legal and ethical standards for ADN practice are explained. Therapeutic communication and therapeutic use of self-care are emphasized. Six hours of theory, twelve hours of clinical practice per week for 7.5 weeks in a mental health care setting.

**NSG 155 Nursing and Self-Care III**
*5 Credit Hours*
**Prerequisites:** NSG120, NSG 126, BIO 233, and AH120
**Corequisites:** NSG 150, BIO 234, PSY253

This course continues development of competency in nursing process to help adults achieve self-care goals. Principles, concepts, and factors related to the client’s health state are emphasized. Ethical dimensions of practice are integrated with nurse agency, ADN role, and standards of care. Proficiency in dosage calculation is required for continuation in the course. Provides six hours of theory and fifteen hours of clinical practice per week for 7.5 weeks in an acute hospital care setting.

*Cannot progress to 150 if 155 is not passed and vice versa, beginning in January 2011.*

**NSG 221 Nursing and Self-Care IV, Part I**
*5 Credit Hours*
**Prerequisites:** AH120, BIO233,234, NSG120, NSG126, NSG150, NSG155, PSY131, 253, SOC131

 Provides development of competency in applying the nursing process in the care of adults with common medical-surgical problems affecting the cardiac, urinary, and gastro-intestinal and endocrine systems with emphasis on oxygenation, urinary elimination and metabolism. This course emphasizes principles, concepts, factors related to the client’s health state, as well as issues, trends, legal and ethical accountability, and promotion of quality care in nursing practice. Proficiency in dosage and IV calculations is required for continuation in the course. Six hours of theory, twelve hours of clinical practice (including 1 hr of data collection) in an acute hospital setting is required.

**NSG 222 Nursing and Self-Care IV, Part II**
*5 Credit Hours*
**Prerequisites:** AH 120, BIO233,234, NSG120, NSG126, NSG150, NSG155, PSY 221, PSY131, 253, SOC131

Provides continued development of competency in the application of the nursing process to adults with common medical-surgical problems of nutrition, reproductive health and for clients with neurosensory and musculoskeletal disorders. Discussion of the community role of the nurse in disaster nursing is continued. Principles, concepts, and factors related to the client’s health state, as well as issues, trends, legal and ethical accountability, and promotion of quality care in nursing practice are emphasized. Proficiency in dosage and IV calculation is required for continuation in the course. Six hours of theory, twelve hours of clinical practice (including 1 hr of data collection) per week in an acute hospital setting is required.

**NSG 250 Nursing and Self-Care V**
*7 Credit Hours*
**Prerequisites:** NSG 120, 126, 150, 155, 221, 222; BIO233, 234; PSY131, 253, SOC131; ENG 131, 132, AH120

This course develops competency in using the nursing process to help the child (birth through adolescence) and childbearing family achieve self-care goals, applying scientific principles, concepts, and factors related to the child and family as a self-care agent. Current issues, trends, legal and ethical accountability, and promotion of quality care are integrated into nursing practice. Six hours of theory, 12 hours of clinical practice per week for ten weeks (five weeks in pediatric setting and five weeks in an obstetrical settings).

**NSG 255 Nursing and Health Care Systems II**
*3 Credit Hours*
**Prerequisites:** NSG120, NSG 126, 150, 155, 221, 222, 250; BIO233, 234; PSY131, 253; SOC131; ENG131, 132; AH120

This course emphasizes the transition phase from student to ADN graduate nurse, focusing on management strategies necessary for setting priorities, including organizing and delegating work when responsible for a group of clients and applying prior learning in delivery of nursing care, work relationships, and legal and ethical accountability in the promotion of quality care. Three hours of theory, fifteen hours of clinical per week for five weeks in an acute hospital or extended care setting.
Electives

NSG 083 Supplement to Nursing and Self-Care II and III
1 Credit Hour
Prerequisite: Student must be enrolled in NSG150/155. Be sure to choose the supplemental that starts with the course taken during the first eight weeks.

Supplemental course designed in two sections, taken concurrently, to provide special help with NSG 150, Nursing and Self-Care II, and NSG 155, Nursing and Self-Care III. Emphasis is on the use of critical thinking to facilitate application of psychiatric and medical-surgical nursing theory to clinical practice. One hour of lecture per week.

NSG 085 Supplement to Nursing and Self-Care IV
1 Credit Hour
Prerequisite: To be taken concurrently with NSG 221/NSG 222

Supplemental course designed to be taken concurrently with NSG 221, NSG 222, Nursing and Self-Care IV, in order to provide special help with the course. Emphasis is on the use of critical thinking to facilitate application of medical-surgical nursing theory to clinical practice. One to one-and-a-half hours of lecture per week.

NSG 091 Nursing Systems II for Articulating L.P.N transition
1 Credit Hour
Prerequisite: Acceptance into the nursing program as an Advanced Placement student articulating to the A.D.N. program. Permission of the Associate Dean of Health Sciences and L.P.N facilitator required.

Course required of all students registered and admitted into the LPN-AND Advanced Placement Program. The course will provide a detailed overview of the Advanced Placement program and methods available to receive nursing course credits. Students will begin the process of assimilation into the second semester NSG 150 and/or NSG 155, depending upon review of LPN transcripts. The course will introduce Dorothea Orem’s Self-Care Deficit Theory Model, document math competency in medication administration, and validate application of the nursing process. Individual advisement will be available to each student.

NSG 095 Calculating Medication Dosages I
1.5 Credit Hours
Prerequisite: Enrollment in the first year of the Nursing program or in current nursing practice or approval of the Division

Aids the student entering the nursing program who experiences difficulty with mathematics. Emphasis is on working actual clinical medication and intravenous problems with accuracy and proficiency in a realistic time period. Proficiency in calculating dosages is gained through class work, practice problems, and practice timed testing. Three hours of class per week for eight weeks. Day and evening offerings depend on student requests and availability of instructors.

NSG 096 Calculating Medication Dosage II
1.5 Credit Hours
Prerequisite: Enrollment in the second year of the Nursing Program or in current nursing practice.

Aids the student experiencing difficulty with calculating dosages who desires more intensive assistance. Emphasis is on working complex dosages and intravenous and pediatric calculations with accuracy in a realistic time period. Proficiency in calculating dosages for medical/surgical and pediatric clients is gained through class work, practice problems, and practice time testing. Three hours of class per week for eight weeks. Summer offering only.

NSG 097 Calculating Pediatric Medication Dosages
0.5 Credit Hours
Prerequisite: Enrollment in a pediatric nursing course.
Corequisite: This medication administration course is taken concurrently with NSG250.

Aids the student experiencing difficulty with calculating dosages. Emphasis is on working pediatric medication/intravenous problems with accuracy within a realistic time period. Knowledge of the process of calculating pediatric dosages based on weight, body surface area, and intravenous flow rates is gained. Proficiency is attained thorough classwork, practice problems, and practice timed testing. Four hours of class on two Saturdays. Spring offering only.

NSG 098 Calculating Medication Dosage; Advanced Medical-Surgical Nursing
0.5 Credit Hours
Prerequisite: NSG 120, NSG126, NSG 150, NSG 155

This course is designed for the student entering the second year nursing classes, who needs assistance with dosage calculations. Emphasis is on complex medication and ICU medication dosage calculations. Students gain proficiency in calculating medication dosage problems for advanced medical/surgical clients through class work, timed practice tests, and assigned homework problems.

NSG 101 Beginning Health and Physical Assessment
2 Credit Hours
Prerequisite: BIO 233 and BIO 234

This course will outline beginning knowledge and demonstrate skill necessary to perform a health assessment on an adult client. At the end of the term, the student will be expected to demonstrate a comprehensive head-to-toe physical assessment at the beginner level. This course is recommended for students entering the nursing program, re-admitting to the program or supplementing beginning skills and knowledge of physical assessment.

NSG 185 Basic Pathophysiology for Nursing
3 Credit Hours
Prerequisite: BIO 233, BIO 234 or BIO 134 or a transfer equivalent with a “C” or better.

This is a preparation course for students desiring a beginning understanding of Pathophysiology as it applies to nursing content. Content of this course would prepare students for the nursing content of the first year of the nursing program and complements the content of the NSG 155 Medical/Surgical course. This course provides a background for the more complex NSG 285 Pathophysiology course.

NSG 203 Introduction to Critical Care I
2 Credit Hours
Prerequisite: Enrollment in the third semester of the Nursing Program or a licensed nurse, and BIO 234.

Provides beginning theoretical concepts related to caring for the critically ill client for the student or practicing nurse who is considering specializing in this area.
NSG 285 Pathophysiology for Nurses

4 Credit Hours

Prerequisites: Student must have completed BIO 233 or BIO 234, or the equivalent with a “C” or better, or be a registered nurse.

This course is designed to introduce mechanisms and manifestations of different human diseases. In very simple terms, the basic science of pathology is concerned with the etiology and pathogenesis of disease. This study also provides essential information for understanding the diagnosis of diseases in the clinical setting. Pathology is divided into general and systematic (organ system) pathology. General pathology is concerned with the basic concepts/phenomena and mechanisms by which the body responds to different injurious agents, while systematic pathology investigates disease entities specific to particular organ systems. This area encompasses analyzing the extent of the injuries, the preference for organs involved and special features inherent in the character of the injurious agents. The study of pathophysiology allows us to combine both of these areas of pathology to give students the fundamental background necessary in understanding how the body responds to various stimuli affecting homeostasis and leads to disease.

NCS 110 Competency Evaluated Nurse Assistant

6 Credit Hours

Prerequisites: High school diploma/GED; score of 43 or above on ASSET reading test or 84 or above on COMPASS or satisfactory completion of ENG 081; current BLS card from American Red Cross or American Heart Association.

This 5-week program prepares students to work as a Nurse Aide. After passing the class, students are eligible to take the State of Michigan Nurse Aide Competency Examination for certification to receive the CNA designation. The program also makes a great foundation for students who would like to work as a patient care technician. Most PCT jobs required that the applicant be certified as a nurse aide before beginning work as a PCT. Nurse Aides assist nurses in rendering care to residents, clients, and patients with varying degrees of wellness and illness. Nurse aides are the primary caregivers for residents living in a long term care facility. Some of their job duties include: protecting resident’s rights, providing personal care, observational skills, promoting communication, taking and recording vital signs, and keeping the resident safe. Students can work in acute and chronic settings as well as in home care. The basic nursing skills that are necessary to perform the duties of a nurse aide are acquired. The course incorporates 40 hours of theory, 50 hours of laboratory practice, and 30 hours of practice in a clinical agency.
LPN Advanced Placement – Sequence of Program*

<table>
<thead>
<tr>
<th>Prior to Admission to Nursing</th>
<th>Semester Credit</th>
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<tbody>
<tr>
<td>BIO 233 Anatomy &amp; Physiology**</td>
<td>4</td>
</tr>
<tr>
<td>BIO 234 Anatomy &amp; Physiology**</td>
<td>4</td>
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<tr>
<td>ENG 131 Composition</td>
<td>3</td>
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<tr>
<td>ENG 132 Composition</td>
<td>3</td>
</tr>
<tr>
<td>PSY 131 Introductory Psychology</td>
<td>3</td>
</tr>
<tr>
<td>PSY 253 Life Span Development</td>
<td>3</td>
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<td>AH 120 Pharmacology</td>
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</tr>
<tr>
<td>SOC 131 Introduction to Sociology</td>
<td>3</td>
</tr>
<tr>
<td>NSG 091 Bridge Course LPN to RN</td>
<td>1</td>
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<tr>
<td></td>
<td><strong>27</strong></td>
</tr>
</tbody>
</table>

*Prior to admission, current licensed LPN’s are required to have 2000 hours of work experience within the last 2 years as an LPN with verification of most recent work experience from employer as well as a resume and letter of intent, official transcript from LPN institution and current Michigan LPN license.

**SEMESTER 1**
Licensed practical nurses are granted experiential learning credit for their practical nurse experience. NSG 120-Nursing Health Care System I and NSG 126-Nursing Self Care I nursing courses are awarded as experiential credit. 9 credits

**SEMESTER 2**
Credit
NSG 150 Nursing & Self-Care II 5 LPN program reviewed for prior learning in mental health
NSG 155 Nursing & Self-Care III 5 All entering LPN’s take this course 10

**SEMESTER 3**
Credit
NSG 221 Nursing & Self-Care IV, Part I 5
NSG 222 Nursing & Self-Care IV, Part II 5 10

**SEMESTER 4**
NSG 250 Nursing & Self-Care V 7
NSG 255 Nursing & Health Care System II 3 10

Total 66

Practice Skills Lab (PSL) is assigned for some nursing courses. PSL time may be used: 1) by faculty to demonstrate skills/technologies, 2) by students and faculty to critique performances, or 3) by students to prepare for clinical assignments.

**Anatomy and Physiology courses taken five or more years prior to nursing course enrollment must be repeated.

NOTE: All students admitted to the college must meet all HFC degree requirements for graduation.
STUDENT COSTS
http://www.hfcc.edu/tuition_and_payment/

First semester fees include uniforms and mandatory testing fees. The College is enforcing tuition and registration deadlines in a firm and consistent manner, meaning all deadlines are strictly adhered to and are non-negotiable. If you are dropped from a class by the Registrar due to non-payment, and you will not be permitted to re-enroll in that class. This will constitute a personal withdrawal from the Nursing Program. Information about deadlines is repeatedly communicated via HawkMail, the HFC website, Web Advisor, and ACEMAPP.org.

ACEMAPP (www.acesystem.org)

ACEMAPP fees and Assessments must be completed before the semester begins, once per year and may have to be done up to three times during your program depending on your start date. Directions for ACEMAPP can be found at https://nursing.hfcc.edu/

PROGRAM COSTS

Costs vary from semester to semester, depending on required books in the course. Students are advised to purchase all modules, required books and reprints. Recommended text may serve to supplement required learning materials. All materials are available in the College Store. Most materials purchased for Semester I are used throughout the program. Information regarding books can be accessed directly at the HFC College Store, their website is http://collegestore.hfcc.edu/

Due to the rapid changes in health care, textbooks are frequently updated through new editions. The Nursing Division cannot guarantee “book buy back” at the College Store. We do encourage student nurses to keep their textbooks.

GRADUATION

Cost information for graduation is available on the HFC Nursing web page at https://nursing.hfcc.edu/

Insurance

1. Hospitalization
   Students must assume responsibility for all expenses incurred due to illness or injury during clinical experience. Students are not covered by Workmen’s Compensation through the clinical agency.
   
   Free Emergency Room services are not provided.
   
   Each student must bring his/her copy of hospitalization insurance to the Nursing Office, N-120, by designated date. Students are not allowed in clinical area without evidence of current health insurance coverage.

   Students may obtain insurance information from the Nursing Office.
2. **Professional and Personal Liability**
   The College assumes no responsibility for students’ personal liability, even when guided by an instructor in clinical experiences. ** IT MUST BE REMEMBERED THAT NURSING STUDENTS ARE LEGALLY RESPONSIBLE FOR THEIR OWN ACTS AND HELD TO THE NURSING STANDARDS OF CARE AT THE LEVEL OF THE NURSING COURSES TAKEN.**

   Malpractice insurance costs for students are covered by monies from the lab fees charged by HFC.

*IMPORTANT – GRADUATING STUDENTS*

   Students’ malpractice coverage terminates upon graduation. You are responsible for obtaining your own coverage after graduation.

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**STUDENT SERVICES**

**Financial Aid**


**Maintaining Eligibility**

Information can be found via the following link:

[http://www.hfcc.edu/tuition_and_payment/financial_aid/](http://www.hfcc.edu/tuition_and_payment/financial_aid/)

**Satisfactory Academic Progress**

The Satisfactory Academic Progress (SAP) requirements are explained in detail in the College Catalog and Financial Aid Addendum. Students who fail to meet the SAP requirements will lose financial aid eligibility. Students may refer to the following link for information:

[www.hfcc.edu/financial-aid/sap](http://www.hfcc.edu/financial-aid/sap)

**Loss of Eligibility After a Disbursement is Made**

If a student receives financial aid and is later determined to be ineligible for that aid, she/he will be billed for the amount of the over-award and will be required to repay the College. The student will not be allowed to return to the College until the balance is repaid in full or repayment arrangements have been made with the Business Office.
HENRY FORD COLLEGE

Nursing Merit Scholarship

Guidelines

The HFC Nursing Scholarship Program is designed for students demonstrating exceptional academic achievement integrated with extracurricular activities. $500 awards will be applicable to tuition and books.

Criteria

1. Presently enrolled in the HFC Nursing Program and completed first year of Nursing Program.
2. Cumulative GPA of 3.2 or above.
3. Submit an essay in 300 words or less on:

“The Public Image of Nursing”
(Must be typed, double spaced on 8½”x11” paper)

4. Extracurricular activities considered, preference given to Nursing Organizations.
5. Preference to student receiving no other scholarship aid.

Application Procedure

1. Submit application for HFC Nursing Scholarship with essay attached to:

   Henry Ford College
   Nursing Scholarship Program
   Merit Scholarship
   3601 Schaefer Road, Bldg B
   Dearborn, MI  48126

2. Submit application no later than the first Friday in September for Fall consideration and the 3rd Friday in January for winter consideration. Transcript must be included.
The Career Services staff is available during daytime hours to provide nursing students with information about employment and career placement assistance. The Career Services office and the Nursing Division co-sponsor a Career Fair during the winter semester. This enables nursing students to personally network with area nurse recruiters. It is also available to beginning nursing students seeking nurse aide and nurse entry positions.

**STUDENT OUTREACH AND SUPPORT (SOS)**

Student outreach and support is a comprehensive program designed to help women and men achieve their educational goals. This includes men in nursing, since they are a minority in the profession. The Student Outreach and Support Program offer support groups, resources, and referrals. A vocational education tuition reimbursement program for special populations supplies some funds for single parents, displaced homemakers, and for persons wanting careers not traditionally associated with their sex, e.g., nursing for males and electronics for females. Call 313-845-9629 for more information or stop at Student Outreach and Support office in LRC 125, located in the Assisted Learning Service office.

**COUNSELING**

Counseling is available for students, both career and personal at the HFC Counseling office:

- Coping with Change
- Stress/Anxiety reduction
- Stop Test Anxiety
- Coping with Change
- Career Path
- Interests, values, and skills assessment

Counseling is free to HFC students. To pursue services, students can call the counseling office at (313) 845-9611, or email to counseling@hfcc.edu.

**FULL TIME FACULTY SUPPORT**

The full-time theory section instructors are available ten office hours per week. Hours of their availability are included in a binder located at the security office desk on East Campus. Hours are also reviewed with course materials on the first day of class. Students are encouraged to seek instructor assistance for poor academic performance and for clinical concerns.
LEARNING LAB

http://learnlab.hfcc.edu/

Henry Ford College Learning Lab serve students, faculty and divisions by researching, developing and providing services offered outside the traditional classroom. We design these services to improve student success in courses and programs. We deliver these services through our physical location, through this website and through sessions at other locations accessible to teachers and students.

We measure our success by the success of our students in their courses and programs and by the satisfaction of the students, faculty and divisions we serve. Located on the top floor of the Learning Resource Center on main campus. The Learning Lab phone number is (313) 845-9643, please refer to the website above for information about hours and services.

- Tutoring services: http://learnlab.hfcc.edu/tutor
- Test help & Compass prep: http://learnlab.edu/testing
- Computer Labs & Study groups: http://learnlab.hfcc/study

Eshleman Library – Main Campus

For information about the Eshelman library hours, location and a catalog search please use the following link: http://library.hfcc.edu/about

East Campus Nursing Library/Computers

- Nursing library is open during regular office hours and some evenings while classes are in session.
- Printing is on the ‘honor’ system and is 10 cents per page, payable upon printing to the main office. A copy machine is also available and is coin-operated.
- It is a quiet zone, available for studying – no group work is allowed in this area.

COMPUTER AND PRACTICE SKILLS LABORATORY (PSL)

Nursing PSL and Simulation Suite

Students will be assigned to the laboratory or simulation on specific days and times as part of their mandatory clinical experience. Lab and simulation experiences are considered a “clinical experience” and therefore the clinical absence policy applies to scheduled lab time. The subsequent practice of these clinical skills is critical to the student’s learning. To maximize the learning opportunity for the entire clinical group the student will be expected to:

- Arrive on time and be seated at a designated place, wearing HFC name tag
- Dress in the HFC clinical uniform
- Bring necessary equipment (consult module or instructor for specific details)
- Failure to be on time and prepared for the assigned lab experience will result in a clinical tardy or absence (See clinical absence policy).
- Practice times are posted on the lab door. It is suggested that the students do not wait until the last day prior to their scheduled evaluation to practice, as only one lab may be open for practice or the practice lab may be at student capacity.

Students will be assigned an appointment with a clinical instructor for skill(s) evaluation that will take place in the lab.

Students are responsible for reviewing the lab related software programs and practicing related activities. Activities must be practiced, not merely simulated. The student is expected to fully demonstrate skill(s) correctly using appropriate equipment and supplies, not merely verbalize explanation of the skill(s).

**Nursing Computer Lab**

Monday-Friday (Hours to be posted)

**PLEASE NOTE:** NO FOOD OR BEVERAGE ALLOWED IN THE COMPUTER LAB, LIBRARY, PSL OR SIMULATION SUITES.

NO GUESTS OR CHILDREN ARE PERMITTED IN THE COMPUTER LAB, LIBRARY, PSL, SIMULATION SUITES, CLASSROOMS, OR IN WAITING AREAS OF THE BUILDING.

**CHILD DEVELOPMENT CENTER**

**CHILDCARE**

http://www.hfcc.edu/childcare

Henry Ford College – Main Campus, South Entrance (313) 317-6527

**STUDENT ACTIVITIES**

**National Student Nurse Association (SNA) – HFC Local Chapter**

The National Student Nurses Association (NSNA) is an organization whose purpose is to “aid in the development of the individual student and to urge students of nursing, as future health professionals, to be aware of and to contribute to the health care of all people.” The association is an autonomous, student-financed and student-run organization.

The local SNA at HFC chapter was established in January, 1980. Monthly meetings, bulletin boards, and newsletter and informal get-togethers are the vehicles of communication. A faculty member is available for consultation. Activities include, but are not limited to, fundraisers, blood pressure drives, procuring speakers and attending the state convention.
Working together and getting to know a larger segment of the nursing student body is a big plus. Fund raising projects assist the SNA Scholarship and Needy Nurse Fund for HFC nursing students.

A nursing student who attends 8 SNA meetings/year and is involved in at least 3 activities will receive additional bonus points added to the total points in theory class (above the 80% passing rate).

**COMMITTEES**

Students are encouraged to influence the Nursing Program through participation as members of the Nursing Program Committees. Noted below are the Nursing committees available for student membership. At the beginning of the semester, students are solicited in course sections for their interest in participating.

**Nursing Student – Faculty Committee**

This committee was established in 1970 to encourage the development of a closer bond of understanding between students and faculty. Its purpose is:

1. To provide a channel of communication between students and faculty.
2. To provide an informal group setting in which students and faculty representatives may exchange suggestions, observations and reactions concerning the nursing curriculum.
3. To provide an opportunity for students to participate in curriculum development, implementation and evaluation.

Student representatives are elected from each course section of first and second year students. Faculty committee members coordinate and facilitate the committee’s monthly meetings.

**Nursing Program Advisory Committee**

Two students active in the Student-Faculty Committee and/or HFC SNA are selected by the Associate Dean of Health Sciences to membership on the Nursing Program Advisory Committee. The functions of this committee are to provide advice on matters such as curriculum, evaluation tools, levels of instruction, changes in community needs, admission policies, quality of graduates, progress of students, addition or deletion of clinical facilities, community relations and budget items. The committee meets two times a year. Representatives are 2 (two) first-and/or second-year nursing students.

**Instructional Technology & Resources**

The purpose of this committee is to act as a liaison between the HFC college library, the Learning Lab, and the Division of Nursing regarding the purchase and evaluation of new and existing materials and holdings. These functions include, but are not limited to, establishing guidelines which facilitate optimal use of available resources, dissemination and preview of new learning resources, and recommending acquisition of new learning resources. **Student Membership: allowed and encouraged.**
Curriculum Committee

The purpose of this committee is to review recommendations and requests on respective curriculum matters. These functions will include, but are not limited to, philosophy, conceptual framework, course objectives, course revisions, degree requirements, curriculum threads and program outcomes. **Student Membership: allowed and encouraged.**

Evaluation Committee

The purpose of this committee is to review and recommend the ongoing, systematic, and comprehensive evaluation process for the nursing program. These functions include, but are not limited to, development and revision of the tools used to facilitate measurement, collect and maintain evaluation data for use in decision-making for program improvement. **Student Membership: allowed and encouraged.**

Accreditation Committee

The purpose of this committee is to facilitate and monitor the Nursing Program systematic plan and to facilitate ACEN accreditation preparations. **Student Membership: allowed and encouraged.**

HFC GENERAL STUDENT POLICIES

STUDENT COMPLAINTS

During the course study at Henry Ford College, students may encounter problems requiring review by academic and administrative personnel. For issues that are addressed in the Henry Ford College Student Policies and Procedures ([https://www.hfcc.edu/current-students/student-policies](https://www.hfcc.edu/current-students/student-policies)), the student will follow those policies. These include issues regarding: academic performance; final course grade or classroom assignments, and violations of the student code of conduct or academic dishonesty. The Nursing Program reserves the right to address all issues regarding clinical policies, procedures, regulation, and performance evaluation. In such issues, the Nursing Program due process policy may be indicated. An appeal may be initiated using the Nursing Program Student Due Process Procedure.

Nursing Program Clinical Due Process Procedure

**Purpose**

The Henry Ford College (HFC) Nursing Program faculty accepts their responsibility for maintaining accountability to develop a program of learning, standards, and policies to prepare students to function at the Associate Degree Nursing level by the time of graduation.
Since it is the faculty’s goal to treat all students in a fair and just manner as they progress toward their educational goal, the following due process procedures has been developed for clinical failure (which includes PSL skill evaluations). All clinical failures do automatically result in an involuntary withdrawal from the nursing program.

The due process procedure is written to enable student recourse within the system to address a clinical failure. It is imperative that the student understands that the due process procedure is initiated by the student only after an attempt has been made to resolve the problem at the involved instructor(s) level.

The following guidelines are utilized when seeking resolution of a complaint resulting from student involuntary withdrawal from the Nursing Program, due to clinical unsafe practice, or unsatisfactory clinical performance.

Use of the due process is not intended for instances in which the student’s clinical failure or unsafe clinical performance is related to multiple absences that interfere with meeting objectives of the current clinical rotation.

If a student is unsure as to how to proceed with due process, he/she may seek guidance from the Associate Dean of Health Sciences. The guidance provided to the student will only be regarding the procedural route and not discussion of the student’s complaint.

**General Guidelines**

1. **It is the responsibility of the student to initiate the due process procedure within the specified guidelines and time constraints.**
2. Specified time period as detailed throughout this document, unless defined otherwise, refer to nursing faculty workdays of the contractual year (from faculty reporting day in August through May graduation) excluding college scheduled vacation days. College business days refer to the normal operating college business days excluding scheduled vacation days (personal and college)
3. Students, faculty, and the Associate Dean of Health Sciences must adhere to the steps of the process. Failure of the student to adhere to the step-by-step written procedural requirements violates and terminates the due process procedure and constitutes a waiver of any further review of the student’s complaint. Failure of the faculty to respond within five (5) business days allows the student to approach the next person in the process.
4. It is not permissible for non-involved parties (e.g. friends, family members, other students, and other faculty) to be present during the conferences outlined in this document, including the Committee on Student Appeals hearing. The purpose of the scheduled conferences throughout the procedure is to seek clarification of the factual happenings.
5. Neither the college nor the student may have an attorney present throughout the proceedings, including the Committee and Student Appeals hearing.
6. When due process is initiated and pending, the student will not be permitted to progress in the program until completion of the due process appeal.
7. If the due process appeal is denied, and the student is eligible, the student must re-take the entire course, including both class and clinical components.
**Procedure**

For a clinical/PSL due process proceeding, the student must contact the involved instructor(s) with the problem defined in writing within ten (10) business days of the receipt of written notification of involuntary withdrawal from the Nursing Program from their exit interview. The student will use the form Due Process Statement of Problem and write his/her statement under Section 1: Course Instructor(s). This form is obtained from the Nursing main office. The submitted form must be presented to the nursing office in a sealed envelope/folder labeled “Due Process”. The written statement of the problem shall state, concisely and without argument, the facts upon which the complaint is based. The involved instructor has five (5) business days to schedule a conference to clarify the student’s statement of the problem and to reply in writing to the student. The written reply will be delivered by certified, receipt-requested U.S. mail to the address that the student indicated on the Due Process Statement of Problem. The written reply will be mailed by the fifth business day from the reception of the student’s written statement.

If the student does not accept the decision of the course instructor(s), the student will continue the due process procedure up the chain identified. The student has three (3) business days from the reception of the written decision to contact in writing the Nursing Program Coordinator. At the time the student contacts the Nursing Program Coordinator, the student must submit a copy of the written record of proceedings to date by the student and instructor(s), as well as written statement by the student of the reason the student does not accept the decision of the instructor(s). The student will write the statement on the Due Process Statement of Problem under Section 2: Nursing Program Coordinator. All forms are to be submitted to the Nursing office in a sealed envelope/folder labeled “Due Process”. The Nursing Program Coordinator has five (5) business days to schedule a conference or conferences with involved student and instructor(s) to clarify the problem and provide a recommendation in writing to the student. The written reply will be delivered by certified, receipt requested U.S. mail to the address the student has indicated on the Due Process Statement of Problem. The written reply will be mailed by the fifth business day from the reception of the student’s written statement.

If the student does not accept the Nursing Program Coordinator’s decision, the next person in the process is the Associate Dean of Health Sciences. The student has three (3) business days from reception of the Nursing Program Coordinator’s written decision to contact in writing the Associate Dean of Health Sciences. At the time the student contacts the Associate Dean of Health Sciences, the student must submit a copy of the written record of proceedings to date by the student instructor(s), and Nursing Program Coordinator, as well as written statement by the student stating the reason the student does not accept the decision rendered to date. The Student will write the statement on the Due Process Statement of Problem under Section 3: Associate Dean of Health Sciences. All forms are to be submitted to the Nursing office in a sealed envelope/folder labeled “Due Process”. The Associate Dean of Health Sciences has five (5) college business days to schedule a conference or conferences with the involved student and instructor(s) to clarify the problem and place a recommendation in writing to the student. The written reply will be delivered by certified, receipt-requested U.S. mail to the address the student has indicated on the Due Process Statement of Problem. The written reply will be mailed out by the fifth college business day from the receipt of the student’s written statement. The decision of the Associate Dean of Health Sciences is the Final step prior to the Committee on Student Appeals hearing.
If the above procedure does not bring a satisfactory resolution to the student, he/she may decide to appeal the decision to the Nursing Program Committee on Student Appeals.

**COMPOSITION OF NURSING PROGRAM COMMITTEE ON STUDENT APPEALS**

**Chairperson:** Vice President of Academic Affairs  
**Ex-officio Member:** Associate Dean of Health Sciences

**Faculty:** Four (4) representatives and four (4) alternates from full time Nursing time faculty  
**Students:** Four (4) representatives and four (4) alternates from full-time nursing students

- **NSG 117 Course**  
  One (1) regular member  
  One (1) alternate member

- **NSG 150 & NSG 155 Courses**  
  One (1) regular member  
  One (1) alternate member

- **NSG 221 & NSG 222 Courses**  
  One (1) regular member  
  One (1) alternate member

- **NSG 250 & NSG 255 Courses**  
  One (1) regular member  
  One (1) alternate member

**STUDENT APPEALS**

**Procedures** The following guidelines will be used to initiate an appeal hearing:

1. The student will obtain from the Associate Dean of Health Sciences a copy of the Committee on Student Appeals Form and fill it out. The student has seven (7) business days from receipt of written final decision from the Associate Dean of Health Sciences to obtain and submit the form to the Vice President of Academic Affairs. **All documentation is to be submitted in a sealed envelope/folder marked “Student Appeals”**

2. Upon reception of Committee on Student Appeals Form, the Vice President of Academic Affairs will convene the Committee of Student Appeals and schedule a hearing at the convenience of all involved parties. **All attempts will be made to schedule the hearing in a timely manner.**
3. The Nursing Program Committee on Student Appeals will consist of nine (9) persons: four full-time nursing students, four full-time nursing faculty, and the Vice President of Academic Affairs. The committee is an Ad Hoc committee and selection of faculty is made based on committee members who were not directly involved in the due process procedure. The Vice President of Academic Affairs will chair the hearing and vote only in the case of a tie vote.

4. The accumulated record of the due process procedure and Committee on Student Appeals Form will be available to all members of the committee, the student, and the instructor(s) directly involved in the Committee in Student Appeals hearing.

5. All pertinent information (including unsatisfactory performance reports) in the student record will be available to all members of the committee, the student, and the instructor(s) directly involved in the Committee on Student Appeals hearing.

6. At the Committee on Student Appeals hearing, the involved student will be present and afforded an opportunity to present his/her position. The involved instructor(s) will have the opportunity to be present and to speak. Observers, uninvolved persons, and/or legal representatives will not be allowed to be present. Members of the Committee on Student Appeals will have an opportunity to ask questions and to seek clarification of facts.

7. At the conclusion of the Committee on Student Appeals hearing, a date will be set by the committee chair to reach a final decision. The decision of the Committee on Student Appeals will be put in writing within seven (7) college business days of the committee hearing and distributed to all involved parties. The written reply will be delivered to the student by certified, receipt-requested U.S. mail to the address the student indicated in the Committee on Student Appeals Form.

8. The decision of the Committee on Student Appeals is final and binding for all involved parties.

**SMOKING POLICY**


On January 1, 2012, Henry Ford College became smoke free at all campus locations. Providing a smoke free campus promotes a healthy environment in which students, faculty, administrators, and staff can learn and work. Smoking is permissible in personal vehicles and in a few designated locations only. School of Nursing has one designated smoking area. HFC promotes an awareness campaign to help students comply with the policy and to inform them about free resources to help them quit or reduce smoking.

**INTEGRITY IN NURSING**

Academic Dishonesty can seriously lower the standard of professional nursing practice, harm the integrity of the academic nursing community, and impair the quality of the health care system.
The nursing student who cheats during academic exercises and who manages to obtain passing grades, graduate, pass state boards, and become licensed, may not be capable of practicing competently. This scenario presents potential risks to patients and to the reputation of the profession. Dishonest practices may take the form of falsely documenting medications, procedures, and observations. Insufficient knowledge about basic nursing principle and theory could also jeopardize safe practice. Negligent and/or dangerous clinical practices place patient safety at risk. This could lead to legal action against the nurse or the institution, increase the cost of care, and adversely affect nursing’s professional and public image.

Policy on Academic Dishonesty (Cheating)

Henry Ford College considers academic dishonesty to be a serious offense. It is the policy of the college that determination of the fact of academic dishonesty an appropriate action shall be a matter of individual instructor judgment. The instructor may administer a penalty up to and including failure in the particular course. It is the professional obligation of the faculty to enforce academic integrity in their courses. Academic dishonesty is an activity intended to improve a student’s grade fraudulently. It includes, but is not limited to, the following:

1. Unauthorized acquisition of tests or alteration of grades
2. Unauthorized use of notes, books, or other prohibited materials during an examination
3. Student misrepresentation to obtain restricted or faculty materials
4. Open cheating during an examination
5. Permitting another person to take a test in the student’s place or receiving unauthorized assistance with any work for which academic credit is received
6. Providing unauthorized assistance with any work for which academic credit is received
7. Revision of graded work in a attempt to receive additional credit fraudulently
8. Plagiarism or using another person’s work without acknowledgment
9. Any other conduct intended to obtain academic credit fraudulently or dishonestly
10. Use of electronic devices (cell phone, ipod/ mp3, tablet, video) shall be prohibited

If an instructor fails a student in a course for academic dishonesty, the instructor will immediately notify, in writing, the division/department head, the student, and the Registrar of the infraction, and retain copies of all notifications.

The Registrar will maintain a record of all such violations. If a student fails two courses as a result of academic dishonesty, he/she will be dismissed from the College for two academic years. In addition, a notation of the reason for academic dismissal will be placed on the student’s transcript. The notation may be expunged at the discretion of the appropriate Vice President/Dean if a student petitions for its removal after at least a two-year period has elapsed since the disciplinary action.

If a student believes that the accusation of academic dishonesty is false, he/she may appeal through the HFC Student Complaint Policies and Procedures.
Academic dishonesty refers to plagiarism and other forms of cheating which results in students giving or receiving unauthorized assistance in an academic exercise. This also includes all forms of work submitted for course requirements and receiving credit for work which is not one’s own.

Plagiarism is the deliberate appropriate or imitation of the language, ideas, thoughts, of another author, and representation of them as one’s original work. Plagiarism on any written papers, including Nursing Care Plans, is in violation of the Nursing Program academic honesty policy.

Cheating on exams can include looking on another student’s answer sheet, using notes during an exam, having another person take the exam, or exchanging information with another while taking the exam. Cheating also includes divulging any question on examinations to any individual. The unauthorized possession, reproduction, or disclosure of any examination materials, including the nature or content of examination questions, before, during, or after an examination violates the Nursing Program academics honesty policy. Submitting the same work in more than one course, or repeated courses, without permission from the involved instructors may result in dismissal from the College. A violation of this type will result in following HFC College policy on Academic Dishonesty. Nursing students may subsequently be denied re-admission to the nursing program.

Professionalism

All nursing students must adhere to the conduct expectations outlined in the Michigan Nurse Practice Act, the American Nurse Association Code for Nurses, and the behaviors outlined in the Nursing Student Handbook. It is the intent of these policies to insure client safety and professional conduct by appropriate ethical-legal behavior on the part of all nursing students. All nursing students are expected to be responsible for their actions and exhibit professional behavior in the classroom, the clinical agency, the campus and the community in general. Students represent the nursing program, the college, and the nursing profession.

As student nurses, learning to care for clients and families, professional behavior is a MUST. Violations of professional conduct will not be tolerated. If an instructor believes that a student’s behavior is inappropriate and/or unprofessional, the student will be asked to leave the clinical or lecture area. In addition, further disciplinary action may be instituted. (See student Unprofessional Behavior Report)

Student Professional Behavior

Students in the nursing program are expected to show courtesy and respect for all people. Any disregard for fellow students, faculty, staff, administration, or patients will not be tolerated. Unprofessional behavior may include, but is not limited to, the following:

1. Repeatedly coming late to the clinical or lecture area. (Reference clinical absence policy)
2. Loud voice or other excessive noises (i.e. pagers, cell phones) in the classroom/hallways/clinical areas.
3. Interrupting classroom presentations by having loud side conversation with peers or refusing to engage in learning activities.

4. Making improper or inappropriate statements or asking inappropriate questions that could be the basis for lawsuits.

5. Demeaning or inappropriate language, jokes or gestures or conversation to fellow students, faculty, staff, and administration that is embarrassing and may be considered harassment. A student can be requested to leave class or clinical if such behavior occurs during such sessions.

6. Disregarding the chain of command. Students are expected to resolve concerns/issues by following the chain of command: immediate theory/clinical instructor, Nursing Program Coordinator, Associated Dean of Health Sciences. Students should NOT attempt to resolve concerns/issues by contacting clinical agency personnel.

**Student Unprofessional Behavior Report**

A student Unprofessional Behavior Report will be generated by faculty or staff of the Nursing Division and shared with the student. The student will be required to meet with the Associated Dean of Health Sciences. The initial report will become a part of the student’s active file but will be expunged from the file upon graduation if no additional unprofessional behavior is documented. Any additional Unprofessional Behavior Reports on the same behavior or additional behaviors will cause the reports to become a permanent part of the student’s file.

Any student engaging in unprofessional behavior as identified in the Nursing Student Handbook may be subject to disciplinary action. Depending on the circumstances, this action could result in a suspension from the course or an administrative withdrawal from the course or Nursing Program. Students may appeal the decision as outlined in the HFC Student Policy and Procedures guidelines.

**Legal Professional Standards**

Professional requirements stipulate nurses will refrain from abusive use of substances both legal and illegal. The capability to sustain long periods of concentration to make decisions such as selecting correct techniques, equipment, and safety measures to assure maximum care and safety for clients is critical. A person under the influence of alcohol or consciousness-altering drugs could not meet the above criterion. Further, there are professional standards which must be followed when abuse is suspected. Nursing students are expected to refrain from the use of all illegal substances. If a student is suspected of illegal substance use on HFC campus, college policy will be followed. Immediate dismissal from the Nursing Program may result. Further, being under the influence of alcohol or any other substance resulting in impairment of judgment will place the student in jeopardy of removal from the clinical area and may result in dismissal from the program. **In addition, threats and assaults may lead to legal action.**
Individuals who have been found guilty of a felony may not be eligible to write the NCLEX-RN examination. Students are advised to reference [http://michigan.gov/lara](http://michigan.gov/lara), the Michigan Department of Licensing and Regulatory Affairs or directly contact the Michigan Board of Nursing with questions regarding eligibility for RN licensure in Michigan.

**Criminal Background Check and Drug Test Procedures**

Clinical institutions require criminal background checks and drug screens on all affiliating students. The Nursing Program policy is as follows:

Consistent with Section 20173 of Michigan Public Health Code and the requirements of clinical rotation partners, a criminal background check is required for all students in the Nursing Program. A drug screen is required prior to entering any clinical rotation and is required as part of the admission process.

Applicants will be required to sign an Affidavit Regarding Criminal History, pending completion of the criminal background check and will also be required to sign the Criminal Background Check Authorization Form.

In addition to a background check, fingerprinting is required for program admission.

Once a student is admitted to the program, and undergoes the initial background check, he/she is required to immediately inform the Associate Dean of Health Sciences if he/she is subsequently arrested for or convicted of any of the criminal offenses covered by Michigan Public Health Code Section 2073.

Students in the nursing program are also required to take a drug screen according to procedures approved by the College and at a facility approved by the College.

Individuals who do not pass a criminal background check and/or who do not pass (or refuse) a drug screen will not be allowed admission into the Nursing Program. Students who are subsequently (following program admission) arrested for or convicted of criminal offences covered by Michigan Public Health Code Section 20173 will immediately be withdrawn from the Nursing Program. These students will be denied re-admission or continuance in the Nursing Program. The student/applicant is responsible for costs associated with fingerprinting, criminal background check, and drug screen.

**American Nurses’ Association Code for Nurses**

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 the integrity and safety, to maintain competence and to continue personal and professional growth.

6. The nurse participation in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision 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, 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.

(American Nurses Association, 2001)

**Client Confidentiality**

The nursing faculty at Henry Ford College adheres to the American Nurses’ Association Standards of Practice, Code of Ethics, and the current HIPAA law. Faculty uses the following guidelines in the interpretation of confidentiality to determine safe, ethical nursing practice that ensures patient information is safeguarded:

A breach of confidentiality includes the following but is not limited to:

1. Revealing information about a client to another person who is not involved with the direct provision of care to the identified client.

2. Revealing events or partial information about a client or clinical experience to another person (such as a relative or friend)

3. Revealing information about a client or clinical situation to other persons involved in the client’s care in an area where the discussion may be overheard by others (such as other health care workers, visitors or client’s family members).

4. Photocopying of any part of a client’s record, medication forms or chart data.

5. Identification of a client by name, hospital number, or social security number on any written notes or forms which leave the clinical area setting.

6. Revealing information about a client or clinical situation via any form of social media.

A situation involving poor judgment about the sharing of information about client constitutes unsafe nursing practice. Each situation will be reviewed by faculty. Grounds for dismissal from the Nursing Program are probable if evidence demonstrates lack of confidentiality regarding patient information in any form.
BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF NURSING

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.

2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.

3. Each institution has a duty to develop policies and procedures which provide and safeguard the students’ freedom to learn.

4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, lifestyle, disability, or economic status.

5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

8. The student should have the right to have a responsible voice in the determination of his/her curriculum.

9. Institutions should have a carefully considered policy as to the information which should be a part of a student’s permanent educational record and as to the conditions of this disclosure.

10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

11. Students should be allowed to invite and to hear any person of their own choosing within the institution’s acceptable realm, thereby taking the responsibility of furthering their education.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student counsel, student membership or representation on faculty committees.

13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.

15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.

16. Students have the right to belong or refuse to belong to any organization of their choice.

17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.

18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.

19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.

20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.

21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

**NURSING STUDENT POLICIES**

**Grading System for Nursing Courses**

Nursing courses are graded according to the following scale:

A = 92-100%  **Superior** achievement as demonstrated by ability to master materials of the course.

B = 85-91.999%  **Highly Satisfactory** work in the required courses.

C = 80-84.999%  **Proficiency in most** of the course requirements.

D = 73-79.999%  **Some Proficiency** in course requirements accompanied by some unacceptable deficiencies. Not fully qualified to take an advanced course, nor to continue a sequence, nor to graduate if last course in nursing.

E = Below 73%  Course requirements are **not met**.

**Note:** A grade of “D” or “E” is issued to students who receive an unsatisfactory clinical grade or PSL evaluation failure, even though a grade of “A”, “B”, or “C” is achieved in the theory component of a course.
Course grades will be computed by dividing the total number of points possible on all graded assignments, into the total number of points the student has earned. This will generate a percentage grade. There will be NO rounding off. The resulting percentage will then be converted into a letter grade based on the Nursing Program Grading Scale.

A passing grade in the nursing course requires the following:
1. a theory grade of “C” or above (80% minimum);
2. a “satisfactory” in the clinical (including lab) component. (Note that the clinical component of a nursing course is evaluated as satisfactory/pass or unsatisfactory/failure);
3. successful completion of the Math Dosage Competency Exam at 90% or above;
4. completion of any additional specific course requirements (ie portfolio requirement, HESI exams).

All units or course requirements must be completed before a grade for the course will be given. Students with incomplete grades are not eligible for progression until requirements are met. Course faculty will determine completion date for completing course requirements. Students fail the course if the course requirements are not met by the identified date and they will then be withdrawn from the Nursing Program and require an exit interview. (Reference withdraw policy)

Performance Report

Students who fail to maintain satisfactory performance in theory, lab, or clinical will receive a performance report. Performance Reports inform failing students that unless performance improves by given date, their position in the program is jeopardized. It allows for clarification of weaknesses, student self-reflection and instructor counseling. This report contains plans for remediation. Students are expected to assume initiative in completing remediation.

Never Attended

Students who have not attended their class/clinical by the second week of the semester will be assigned a “Never Attended” (NA) flag on their record and will not be able to join the class. This flag cannot be removed. The NA flag is intended to notify the Financial Aid Office of non-attendance by a student who is receiving federal funding. The NA flag may affect a student’s financial aid.

PROGRESSION AND GRADUATION

A. Nursing courses are offered in a strict sequence, students are admitted to the Nursing Program in a specific graduating cohort based on the semester they were admitted. If a student steps out of this sequence for medical, personal, or academic reasons, readmission is required.
B. The minimum passing grade for all nursing courses is a “C” (80% or above). This includes the last course in the sequence, NSG 255.

C. Any theory grade below “C”, an unsatisfactory in clinical or PSL evaluation, a failure in math competency, breach of client confidentiality or any critical incident, constitutes a course failure. Students are withdrawn from the Program and require an exit interview. (See withdrawal policy)

D. Beginning in Winter 2011, students will not be allowed to progress to NSG 150 or 155 if one or the other has not been successfully completed.

E. NSG 221 is a prerequisite to NSG 222 and must be successfully completed before progression to NSG 222. If NSG 222 is not successfully completed, returning students must retest the math competency from NSG 221 before readmission to NSG 222.

F. Students who receive a failure in a nursing course are required to repeat the course. Any two course failures (the same or different nursing courses) in any nursing course(s) requires withdrawal from the Nursing Program and. The student would be eligible for Academic Forgiveness after a period of 5 years from the date of the second failure. At that time, the student can apply to the Nursing Program. They will be required to apply for admission to the Nursing Program under the current program admission requirements in place at the time of application.

G. A “C-” or lower in any non-nursing course is considered a failure and the student should retake the course. Two failures in any courses will prevent entry to or progression in the Nursing Program. Students are responsible for knowing this and withdrawing when such an incident occurs. Nursing staff and administration will also monitor this. Whenever the situation is found to exist, the rule will apply.

H. Progression is made on the recommendation of the faculty, based on the student’s ability to:

1. Maintain current BLS certification (online not allowed), TB (PPD or negative CXR), maintain current health insurance and any other clinical agency requirements. Students must submit proof to the HFC Nursing Program Office based on timeline given for each semester. Failure to provide current documentation will result in removal from course.
2. Achieve the minimum grade of “C” (2.7 cumulative GPA to enter the program, 2.5 GPA to re-enter the nursing program) for required liberal art and all Nursing courses. Transfer cumulative GPA may be used to enter or re-enter the Nursing program if less than 12 credit hours have been attempted at Henry Ford College. Once 12 credit hours have been achieved at HFC, the new cumulative GPA is established. This new HFC cumulative GPA will be used for all readmission considerations.
3. Maintain satisfactory performance on all previous clinical requirements.
4. Demonstrates competency in Math each semester as specified by course faculty.
5. Adhere to Program requirements as outlines in the Nursing Student Handbook.

I. Students are informed about criteria used for student evaluation at the beginning of each course for both classroom and/or clinical components. Students are given feedback at periodic intervals during the sequence on their performance, both classroom and clinical, so they have opportunities to improve or change their behavior.
J. The faculty reserves the right to terminate a student from the program at any time for failure to meet any of the school’s requirements – scholastic, professional, or personal. A student who is guilty of a breach of confidentiality or unethical behavior will not be considered for readmission.

K. Completion of all general HFC requirements is necessary for graduation.

L. Prior to the beginning of the fourth semester, it is the student’s responsibility to get their college transcript in order and to see that all transfer credits are accepted and meet the HFC college degree requirements. Nursing Program requirements are met when all courses identified on the Curricular Master Plan are successfully completed. Transfer courses from other colleges or universities must be equivalent to those required for the Nursing Program. If all the Nursing Program requirements are not met by the end of the fourth semester, Certification of Completion of the Nursing Program will not be forwarded to the Michigan Board of Nursing in Lansing and the student will be ineligible to take the national licensure exam.

Program Duration Limits
All Nursing Courses taken at HFC must be successfully completed within a total of three (3) consecutive years. BIO 233/234 (Anatomy and Physiology) or transfer Anatomy and Physiology Laboratory courses, which were taken five or more years prior to enrollment into the first semester nursing courses, must be repeated.

Withdrawal
A student may withdraw one time only from a nursing course, and therefore, the Nursing Program, for either medical or catastrophic personal reasons. Documentation to substantiate the reason will be required. Students are advised to inform their instructors when such events occur and to schedule an exit interview with the Nursing Program Coordinator. If the withdraw occurs prior to the 60% point of the course, the student must withdraw themselves from the related course in WebAdvisor. If the withdrawal occurs after the course 60% point, the student cannot withdrawal from the course in WebAdvisor. If a student meets criteria for either a personal or medical withdrawal and provides adequate documentation, he/she will be given a “drop” by the course instructor. A student who takes the final exam in a course is ineligible for a medical or personal withdrawal and is given the grade earned.

For the exit interview, the student will need to provide withdrawal documentation. In the exit interview the student will complete a program withdrawal form and be counseled regarding their status in the Nursing Program. The exit interview is required in order for the student to be considered for readmission if readmission is possible and desired.

Academic Failure
To pass a nursing course, students must successfully complete all course requirements. This includes classroom or theory components (i.e. projects, written work, assignments, exams, HESI requirements), math competency, PSL evaluations and clinical portions of the course. Failing theory, clinical, PSL evaluation, or the math competency exam, constitutes a nursing course failure.

In the case of a clinical or PSL evaluation failure, at the time of the failure, the student is immediately removed from clinical (and PSL), but may continue to attend lecture if they so choose. Students are not allowed to take course exams following the failure. Students who fail clinical or a PSL evaluation prior to the 60% point of a course, must withdrawal from the related course in WebAdvisor. This withdraw will be replaced by a grade once the instructor assigns course grades. If the failure is after the 60% point in the course the student will not be able to self-withdraw in
WebAdvisor. Students who fail clinical or a PSL evaluation are assigned a failing grade (D or E) for the course even if they are passing the theory portion. The student must schedule an exit interview with the Nursing Program Coordinator.

Students who fail a course math dosage competency must withdraw from the related course. If the failure occurs prior to the 60% point in the course, the student must withdraw themselves in WebAdvisor. If the failure is after the 60% point in the course the student will not be able to self-withdraw in WebAdvisor. Students with a math competency failure will be given a “drop” by their instructor. A Math competency failure is considered a nursing course failure even though a drop is assigned by the instructor. Students must schedule an exit interview with the Nursing Program Coordinator.

A student who is withdrawn from the Nursing Program for reasons not outlined here must be deemed eligible for readmission by the Associate Dean of Health Careers. In cases where the student is allowed to readmit, they must have an exit interview with the Associate Dean of Health Sciences or his/her designee. The readmission policy will apply.

A student who fails a nursing course will be removed from that graduating cohort of the Nursing program and will be required to follow the Readmission Policy to return to another cohort of the Nursing program.

In the exit interview the student will complete a program withdrawal form and be counseled regarding their status in the Nursing Program. The exit interview is required in order for the student to be considered for readmission if readmission is possible and desired.

**Readmission Policy**

1. Students are required to have an exit interview when they leave the program for medical, personal or academic reasons to be considered for readmission. Students who did not have an exit interview must meet with the Associate Dean of Health Sciences or his/her designee before any readmission to any nursing courses will be considered.
2. Any student who withdrew for documented health reasons must provide written medical clearance with their request for readmission, to be eligible for readmission to the Nursing Program.
3. A student who fails a nursing course may be readmitted to the Nursing Program one time and only if they meet the required cumulative GPA of 2.5 at the time of readmission (see Progression and Graduation for description of cumulative GPA).
4. A student who fails a second nursing course (the same or a different course) will be terminated from the Nursing Program. This student will be eligible for Academic Forgiveness after a period of five (5) years from the date of the second failure. To return to the Nursing Program after the five (5) period, the student must reapply and meet all new requirements for admission to the Nursing Program.
5. Final approval of the Associate Dean of Health Sciences is required before any student is granted permission to re-enter the Nursing Program. In considering student’s request for readmission, the Associate Dean reviews the student’s overall academic performance and GPA, attendance, PSL and clinical performance. Poor clinical performance or patterns of irresponsible or unprofessional behavior weigh heavily against the student.
6. Students re-entering the Nursing Program will be randomly placed into a class section and clinical rotation by the Associate Dean of Health Sciences or his/her designee based on a “space available format”. Students are not guaranteed a seat in the subsequent semester.
ONLINE REGISTRATION FOR NURSING COURSES

1. All students register online for nursing classes and are granted ‘permission’ to do so based on being eligible for progression and having submitted the appropriate health information to the Nursing Program office. Nursing students are required to provide current documentation of TB testing, BLSC cards, flu (if applicable) and Tdap vaccines to the Nursing Program office by published deadlines. Students must also successfully complete the required ACEMAPP assessments (if expired) so that their “certification period” is valid through the end of the semester for which the student is registering. BLSC courses taken online will not be accepted.

2. Registration dates are never the same as general college registration dates, and are significantly shorter in duration, always refer to the k-drive, Hawkmail announcements and the Program webpage for these dates and times.

3. Section changes are never permitted after registration is closed.

4. Students are placed in clinical site rotations at the discretion of the Nursing Program staff.

5. Students who fail to submit the appropriate documentation as outlined above by the deadline date are not eligible for clinical assignment and therefore, program continuation. Students are not allowed to register until all requirements are met. If late registration is allowed/required, the student will be randomly placed into remaining open course section and clinical seats by the Associate Dean of Health Sciences or his/her designee.

EXAMINATION POLICIES/PROCEDURES

A. Tests in individual courses will be given on the days and times specified by instructors.

B. Students are required to be present at all scheduled semester and final examinations. The final examination period in nursing includes clinical evaluations, Standardized Tests and the written final examination. Students should keep this in mind when making plans. Students are responsible for being available the entire examination period.

C. In case of an emergency that will result in the absence for an exam it is the student’s responsibility to contact the instructor regarding makeup the day before or at least one hour prior to the exam. Late taking of exams may be subject to grade penalty. Documentation verifying the emergency may be requested. The instructor reserves the right to set the time and date for make-up exams.

D. Examination questions are based on units and course objectives. Answers are validated in required texts, assigned reading, and class session content.

E. For computer testing, opening another web browser page during an online exam will be considered academic dishonesty.

F. Standardized examinations (HESI) must all be taken and passed by all active students. Students whose exams do not meet the required passing score must remediate and re-test.
G. There will be **NO** retakes of classroom examinations.

### MATH DOSAGE COMPETENCY

A. Students are tested for **math dosage competency** in designated courses prior to passing medications in the clinical area. Students have three (3) attempts to successfully pass the math dosage competency examination. Students are to take the examination at the scheduled time. Students who are absent receive a grade of "**zero**" and forfeit the right to re-take the examination. Failure to achieve 90% on the math dosage competency examination results in immediate withdrawal from the associated nursing course and the Nursing Program. Refer to Academic Failure Information.

B. The student must provide their own simple, nonprogrammable calculator for math dosage competency exams. No sharing of calculators will be permitted. A simple, nonprogrammable calculator may be used in theory exams containing math problems. Cell phone calculators will not be permitted.

### During Test Taking:

A. Students must place all belongings at the back/front of the classroom. Instructors will provide details. Cell phones, iPods, mp3 players, pagers, and other electronic devices must be turned off and not on the student’s person. No hats, jackets or sunglasses may be worn during testing.

B. Only **number 2** black pencil(s) with an attached eraser (most mechanical pencils are not #2 and will not be read correctly), a highlighter, and a calculator, if required, are allowed during testing.

C. While taking the test, answers are to be circled in the test booklet before transferring them to the SCANTRON card. NO CREDIT will be given for transcription errors. Erasures must be thorough. Read instructions for marking Scantron cards.

D. Instructors will provide details regarding the method to seek information from the proctor during a test. No questions related to the test content will be allowed during the test.

E. At the completion of a test, students who choose to leave the room are **NOT** to congregate outside of the test room. It is unethical and considered cheating to discuss the test content with any student prior to completion of testing by ALL sections (See Academic Dishonesty). Upon completion, students will leave the testing area and return at the designated lecture time.

F. Students will have one (1) minute per question plus an additional 15 minutes for each test. The student is responsible for monitoring the time. Additional time may be given for the Fluid and Electrolyte test in N155, and the Cardiovascular test in N221.

G. Upon completion of the test, submit test booklet and SCANTRON card to the instructor.

H. Any student caught cheating will have their exam taken, receive a zero for the test, and be requested to leave the room immediately.
After Testing:

A. A missing test booklet or incomplete test booklet will result in the involved student receiving a grade of zero.
B. After all grading is completed by ALL sections; any discussion of the test questions can be done with the instructor(s) by appointment. The following rules apply:

- A student will be seen alone or in small groups, behind closed doors to review the most recent test, prior to taking the next test in the course.
- Students may not have cell phones, tape recorders, writing tablet/pen or pencil to take notes during the review.
- **Once the subsequent course test is administered, students will not be able to review a prior test.**
- Final exams will not be reviewed.
C. Faculty determines the number of days that will take place before students receive their grades for any examination.

Calculation of Scores:

A. Students must pass theory courses based on test scores and mandatory graded course work alone. Bonus points (i.e.: passing math competency on 1st attempt, participation in SNA, etc.) that may be awarded at the instructors discretion can be added to the student’s total points earned only after the student has passed the course successfully without them. There will be no rounding off. Additional points for any reason may be used to add to passing grades.

B. All scores from all tests will be added together and divided by the total number of questions asked (minus dropped questions) to determine the percentage grade.

C. Students who receive a grade below a “C” on any course test are expected to schedule a meeting with the appropriate instructor, review examinations as they occur, and plan remediation. At midterm, Performance Reports are generated for students who are below a “C” grade (see Performance Report).

Instructions for Marking Scantron Sheets

Accurate scoring is based on the following:

A. Marking instrument
B. Quality of mark
C. Completion of demographic data

Results can be less than satisfactory if:

1. The wrong marking instrument is used (A quality #2 pencil must be used, mechanical pencils must be “Scantron certified”).
2. The mark is not dark and does not fill the box.
3. Erasures are not complete and may be read as a mark.

4. Bent cards are used.

5. Marks are left in margins.

6. Stray marks appear anywhere on Scantron sheets.

7. There is failure to mark an answer choice for each item.

8. Students mark more than one answer choice for an item, unless the question clearly states “select all that apply.”

9. Students circle any item number on the Scantron (Circle question you wish to return to on your test booklet, not Scantron).

10. Student fails to mark the Scantron appropriately and completely when filling in demographic data, such as student ID number.

**STANDARDIZED TESTING (Elsevier/HESI)**

Standardized tests are administered pre-entry to the program and across the curriculum at the completion of most nursing courses. Health Education Systems Inc. (HESI) is a standardized customized testing product for nursing students currently being utilized at HFC. Your cooperation and full attention is expected during the scheduled exams, and they are mandatory. If you do not complete the HESI exam scheduled in a specific course, you will receive an incomplete as a grade. The nursing faculty considers the testing to be a valuable learning experience for the student and a method to evaluate the student learning. Success on the HESI RN Exit Exam has statistically proven to be an indicator of success on the NCLEX. For online testing, students are expected to work independently.

The Faculty has initiated the following policies to assure students meet or exceed the national pass score as identified for each specific HESI Exam. Students who do not meet the required HESI exam score will be required to remediate and retake the HESI exam prior to the end of the semester. All students are advised to remediate areas identified in their personal assessment report. Students who do not meet the minimum score identified must complete the online remedial work prior to re-testing. Re-testing will be done during final exam week. Students must keep final exam week available for this and other program requirements.

**Purpose:** The tests are used to:
1. Measure criteria for entrance to the program [Nurse Admission Test (NAT)]
2. Measure critical thinking skills.
3. Measure the level of achievements of students as compared to class and national norms
4. Help students identify areas of strengths and weaknesses

5. Acquaint students with a comprehensive nurse exam that tests the students’ overall
   i. knowledge in key areas of the nursing curriculum. In many ways, the HESI Exit Exam
ii. is similar to the National Council of Licensing Examination for the Registered Nurse

iii. (NCLEX-RN)

6. Provide experience with computerized test taking.

**Guidelines:**

1. Mandatory HESI testing will require time in addition to the regularly scheduled class times. Nursing lab faculty along with course faculty, schedule the tests and will inform student of the testing dates and times. Students must complete testing within scheduled dates and times as this will affect the availability of online remediation to those who may not have been successful on their first attempt at the exam.

2. All testing is to be completed in the computer lab on HFC Nursing Campus during the scheduled dates and times.

3. The timed test will be administered according to the exact time indicated by HESI. Timing for the exam will be activated when the student enters the computerized test.

4. See course modules/syllabus for required HESI tests.

5. Non-programmable calculators are allowed for the Pharmacology HESI test (during N221) or you may utilize the onscreen calculator.

**HESI Exam Remediation and Re-testing:**

HESI Testing and Remediation is online, the NCLEX exam preparation testing package that is utilized by the students throughout the HFC Nursing program is available online. The HESI Nursing Specialty Exams are used to evaluate student’s mastery of important nursing concepts. There will be an exam at the end of designated courses reflective of the material that was presented during that course. These exams consist of scored test items and pilot items, and are intended to measure the student’s ability to apply concepts related to a specific clinical nursing content area. Specialty exams are 50 questions long. The RN Exit Exam is a 160 question test. All questions on the exams are secured and all content is evaluated and validated. Detailed diagnostic reports are available for both the students and instructors. **The required competency score for each exam is 900, if a score of less than 650 is obtained, the student is required to complete remediation and take a second version of the exam.**

Personalized remediation materials based on each student’s test results are provided following each exam. Remediation begins immediately after completing the exam by viewing the rationales offered. This allows the student to see which questions were answered incorrectly, the correct answer and the rationales as to why this is the correct answer. This is only available during the proctored test session and must be viewed before closing the exam window. This is the first step in the remediation process. Approximately 24-48 hours after the exam is closed by faculty, personalized online remediation will be available for students. This is the schedule of which exam is given in each course:

NSG 150 Psychiatric Mental Health
NSG 155 Fundamentals
NSG 221 Pharmacology
NSG 222 Medical-Surgical Nursing
NSG 250 Maternal/Pediatric Nursing
NSG 255 RN Exit Exam
Written Work:
The general guidelines are to be followed by students when submitting nursing care plans, client assessments, class papers, etc. Please also refer to individual course material for remediation.

1. All written work utilizes the American Psychological Association (APA) format.

2. All written work must be legible, in black ink or typed, to be accepted.

3. All written work must use correct grammar, punctuation and spelling. All work should be carefully proofread and paginated.

4. Written work is to be stapled or clipped together when submitted. Do not fold or mutilate upper left-hand corner. Do not use papers ripped from spiral binders. Sloppy, wrinkled, or stained papers are not accepted.

5. The instructor will provide specific directions when written work must be redone.

6. If you are required to rewrite any paper work, do not destroy the original. Staple the original work to rewritten work.

7. Return written work according to the instructor’s directions.

8. All written work is due at the time established by the individual instructor. Late work may be subject to a grade penalty and/or performance report. A final grade in the course will not be given until all written work is submitted and graded as satisfactory.

9. Plagiarism: The Nursing Program cannot condone dishonesty in written work submitted by students. A student committing plagiarism or cheating on a written assignment is subject to an “E” or unsatisfactory on that specific written work, and may be subject to further actions as outlined in the Nursing or HFC academic dishonesty policy.

10. Students are required to keep their corrected written clinical paperwork and standardized testing results in a portfolio. The portfolio shall be maintained by the student and be available upon request at any time for review by any faculty member and/or the Associate Dean of Health Sciences the entire time the student is in the program. This portfolio is useful in demonstrating student progress, is helpful in evaluating problems areas, and provides verification that students are meeting the required clinical paperwork requirements. Throughout the program, some courses have a professional portfolio assignment. This often includes examples of model clinical paperwork and other documents that are submitted and graded as a whole.

11. Students that fail to maintain their portfolio or complete required clinical paperwork as directed may be subject to disciplinary action including a written performance report and/or receiving an incomplete for the course.

12. Clinical Documents: Students are required to organize and maintain copies of documentation which includes verification of influenza vaccination, TB testing results, current BCLS certification and ACEMAPP transcript. Students are expected to have this documentation with them and available during every clinical day. Failure to have this information available in the clinical area upon request may result in disciplinary action.
including a written performance report or dismissal from the clinical area until the documentation is made available.

EMPLOYMENT

1. The Nursing Program recognizes the need for some students to be employed. If students are to complete the program within the appropriate time span, priorities must be determined. The instructor can be helpful to students with decisions about time management and setting priorities.

2. Nursing students who are employed as nursing assistants, techs, externs, or patient care assistants (PCA) may not wear the Henry Ford College insignia while employed. HFC malpractice insurance is not effective during such employment. Students may not give medications or perform any duties not listed in their job description in the agency while employed.

3. The LPN-RN nursing student may perform such activities as the employing agency allows LPNs to perform. The previous statements concerning insignia and malpractice insurance apply to LPNs also: i.e., Henry Ford College insignia may not be worn and nursing student malpractice insurance does not cover employment incidents.

4. Nursing students are advised to familiarize themselves with the Michigan Nurse Practice Act so that they will recognize the full scope and responsibility of nursing practice. Students must realize that they are held legally liable for their actions. Therefore, they should not accept responsibilities nor perform nursing actions beyond their knowledge and skills.

5. It is suggested that students limit their work hours. Class schedules are not structured to accommodate work schedules. Class schedules are typically Monday through Friday, however, clinical rotations can include weekday or weekend days and varied shifts (hours). It is unacceptable to miss class or clinical due to work commitments.

HEALTH REQUIREMENTS

Prior to entering the Nursing Program, students are required to have a physical exam, a tuberculin skin test (chest x-ray if Tuberculin skin test is positive), and evidence of Rubeola, Rubella, Mumps, Varicella immunity (titers). Students must have had a Tdap immunization and flu vaccine (during ‘flu season’) in compliance with current standards before starting the program. Hepatitis immunity, the immunization series, or a signed refusal is also required. Admission to or progression in the Nursing Program will be delayed or cancelled if the above documentation is not submitted to the Nursing Program office by the published deadline date(s). Students are not permitted in any clinical area without proof of the above. Current BLS-C certification and current TB status is also required to attend clinical rotations and must be valid through the end of the current semester. Student are advised to keep copies of all documentation submitted.

Any student who has a positive TB skin test must notify the Nursing Office immediately. The student is required to see a physician for further evaluation within 72 hours of detecting a positive PPD.
Students are not permitted in the clinical area with any infections disease including influenza and common cold.

**Students in the nursing program must understand that they will be involved in the direct care of clients and must not judge nor expect to choose which clients they will serve. Refusal to serve assigned patients will be grounds for dismissal. In order to be considered for admission to or retention in the program, applicants must possess:**

- Sufficient visual acuity necessary for accurate assessment and safe nursing care to clients, such as, physical assessment, preparation and administration of all medications and direct observation of clients.
- Sufficient auditory perception to receive verbal communication from clients and members of the health team and to assess client health status while using equipment and interpreting other noise stimuli (cardiac monitors, stethoscopes, intravenous infusion pumps, dopplers, fire alarms, call lights and cries for help).
- Sufficient gross/fine motor coordination to respond promptly and implement skills required in meeting health care needs of clients, including manipulation of equipment and supplies.
- Sufficient physical abilities to move around client’s rooms, work in treatment areas and administer cardiopulmonary procedures.
- Sufficient strength to perform physical activities frequently requiring the ability to lift, push, pull objects more than fifty pounds and transfer objects and persons of more than one hundred pounds.
- Sufficient communication skills (speech, reading, writing) to interact with clients and communicate their health status and needs promptly and effectively.
- Sufficient intellectual and emotional capability to plan and implement care for clients.
- Sufficient psychological stability essential to perform at the required levels in the clinical portions of the nursing program.
- Ability to sustain long periods of concentration to make decisions regarding correct techniques, use of equipment, and proper care of clients. A person under the influence of alcohol or consciousness-altering drugs could not meet the above criterion.
- Sufficient physical stamina to remain standing for long periods of time.

Students with disabilities necessitating special consideration are asked to notify the instructor and the HFC office of Assisted Learning at the beginning of the course and/or anytime circumstances change.

**CLASSROOM EXPECTATIONS OF NURSING STUDENTS**

**Absences**

The class attendance policy of the Nursing Program follows that outlined in the College catalog. Specifically:

1. **All HFC students are expected to attend all sessions of the classes for which they are enrolled.** Regular class attendance is necessary for students to receive maximum benefits from classes. Penalties may be imposed by the individual instructor for absences or tardiness.

2. **As a matter of courtesy, students should consider contacting their instructor directly to explain the reason for an absence.**
3. Permission for absences in connection with participation in authorized College activities is based on course performance to date. It is the responsibility of the student to make up missed course work.

4. Students are required to be present at scheduled semester and final examinations. In case of an emergency, it is the responsibility of the student to contact the instructor before the day/time of the exam. Date and time of make-up will be scheduled by faculty and may be subject to grade penalty.

5. In the event of jury summons that conflicts with class attendance, the current instructor should be notified.

6. The final examination period in nursing includes the written final examination and standardized testing. Students should keep this in mind when making plans. Students are responsible for being available the entire examination period.

Classroom Courtesy and Expectations
Some adults have reactive airway conditions and may respond to odors in the classroom. Therefore, it is expected that students do not wear perfumes, cologne or fragrances on campus.

Nursing classes follow HFC college student policies and procedures.

Taping a class requires prior permission of each instructor in every course.

Talking with classmates during class is disturbing and discourteous to everyone; offenders may be asked to leave.

Eating is NOT permitted in the classroom. Non-alcoholic beverages are permitted in the classroom provided they are in a bottle with a cap or covered container. Notify faculty or staff immediately of any spillage.

In congruence with the respectful campus policy, children are not permitted in class or unattended in any areas of the Henry Ford College School of Nursing at any time.

Electronic Device Policy:
Use of cellular phones, pagers, video cameras, MP3 players, radios and similar devices is prohibited in the classroom. The use of a notebook or laptop computer during lectures is considered acceptable, but is prohibited in the event of a quiz, test or exam. If you are expecting an emergency call, please leave the office phone number (313-845-9635 or 845-6305) during normal business hours and you will be immediately contacted by office personnel. After 4:00 pm, leave the security office number for emergencies (313-845-4012).

CLINICAL AND LAB EXPECTATIONS OF NURSING STUDENTS
Today’s clients are informed consumers who expect quality care from professional health care providers. Professional nurse behavior demonstrates the quality of that care. Integral to the
student nurse’s professional behavior is his/her appearance. Appearance that is professional conveys competence and helps the client to feel confident in the abilities of the nurse.

**RIGHTS OF CLIENTS**

**A. RIGHT TO CONSIDERATE, RESPECTFUL, AND SAFE CARE**

1. The student is expected to come to the clinical area prepared within the limits of the present course and any previous courses. Students should be able to exhibit:
   a. judgment regarding their OWN learning needs.
   b. sufficient independence for own learning in lab/clinical.
   c. sufficient study and practice of selected skills in the PSL before going into clinical area.
   d. appropriate preparation for the day’s clinical/lab assignment.
2. Demonstrate the ability to apply theory content to clinical practice. Students should be able to exhibit:
   a. sufficient thought processes to appropriately plan and demonstrate skills for “holistic” client care.
   b. the ability to utilize available resources as needs arise.
3. Application of skills with assigned client(s) requires evidence of adequate practice in the PSL (student DO NOT subject client(s) to initial “practicing;” that belongs in the PSL).

**B. RIGHT TO CONTINUITY OF CARE**

1. The client(s) is (are) entitled to attentive, ongoing care.
2. The client(s) is (are) NOT expected to have daily care and other activities disrupted in order to provide “experience” for students.

**C. RIGHT TO REFUSE CARE BY STUDENTS**

Client has right to:
1. Refuse a student being assigned to his care without giving a reason.
2. Have own needs and care take priority over learner’s needs.

**DRESS CODE**

The dress code was established by nursing students in collaboration with the nursing administration and faculty. Having neat, clean and appropriate appearance in the clinical area is of utmost importance for presenting a professional image and providing optimal care for clients.

**General Requirements**

1. **ALL NURSING STUDENTS** will comply with the HFC Nursing Program’s professional standard dress code.
2. Instructors are responsible for enforcing the dress code.
3. Students NOT appropriately dressed will be issued a Performance Report and will be required to address the deficiency by the next scheduled clinical day. Subsequent infractions will result in an Unprofessional Behavior Report, dismissal from the clinical area and will require the student to meet with the Associate Dean prior to returning to the clinical area. This will be considered a clinical absence.
4. Students are to purchase at least two HFC uniforms. Students will be notified of the ordering information and dates. New, unused uniforms should be returned for full refund.

5. All students will wear the HFC uniform which consists of navy blue slacks and a matching shirt with the HFC nursing logo embroidered on the left chest area. Students must also order one jacket, available in navy blue with long sleeves. **NO OTHER UNIFORM MAY BE WORN.**

6. All uniforms must be clean, pressed, and in good repair.

7. Uniforms must be sufficiently sized to allow ease of movement without straining seams/buttons when standing or sitting.

8. Students will be required to wear the approved HFC uniform, including a navy blue lab jacket and HFC-issued Student ID badge, on scheduled PSL and clinical days and as directed by the instructor.

9. Students are required to wear an HFC-issued Student Identification (ID) Badge while on campus at all times, including in the PSL, and in the clinical area. With exception, students may be required to obtain and wear a separate ID badge according to clinical facility requirements in addition to the HFC Student ID badge.

### Uniform Expectations

<table>
<thead>
<tr>
<th>ACCEPTABLE/REQUIRED</th>
<th>UNACCEPTABLE/NOT ALLOWED</th>
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<tbody>
<tr>
<td><strong>Uniform</strong></td>
<td></td>
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<tr>
<td>A. Follows general requirements for clinical and PSL.</td>
<td>A. Non-compliance with general requirements</td>
</tr>
<tr>
<td>B. Appropriate undergarments must be worn.</td>
<td>B. Undershirts, if worn, must be navy blue in color and may be long or short sleeved.</td>
</tr>
<tr>
<td>C. HFC-issued Student ID badge to be worn while on campus, including the PSL, and the clinical area. Students may be required to obtain/wear an ID badge issued by particular clinical facility in addition to the HFC Student ID</td>
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<tr>
<td><strong>Hosiery</strong></td>
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</tr>
<tr>
<td>A. White socks/hosiery.</td>
<td>A. Any other color socks/hose, absence of socks.</td>
</tr>
<tr>
<td><strong>Shoes</strong></td>
<td></td>
</tr>
<tr>
<td>A. Solid white leather shoes that are comfortable, safe and appropriately styled (<strong>closed heel and toes</strong>)</td>
<td>A. Sandals, clogs, moccasins, canvas tennis shoes, or high heels greater than 1 1/2” from the floor.</td>
</tr>
<tr>
<td>B. Shoes and laces must be clean and in good repair.</td>
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<tr>
<td><strong>Jewelry</strong></td>
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<tr>
<td>A. Plain wedding bands and duty watch.</td>
<td>A. Rings or watches with diamond or other stones.</td>
</tr>
<tr>
<td>B. If earrings are worn, only one pair of small, plain gold, silver, or white posts.</td>
<td>B. Any other jewelry.</td>
</tr>
<tr>
<td>C. Visible body piercing other than ears, i.e. nose, eyebrow, tongue, etc.</td>
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<tr>
<td>ACCEPTABLE/REQUIRED</td>
<td>UNACCEPTABLE/NOT ALLOWED</td>
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<tr>
<td><strong>Hair</strong></td>
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<tr>
<td>A. Hair should be clean, well-groomed and neat.</td>
<td>A. Extreme hair dying.</td>
</tr>
<tr>
<td>B. Should be worn off the shoulders or collar line.</td>
<td>B. Bright colored hair ornaments.</td>
</tr>
<tr>
<td>C. In order to maintain medical asepsis, all students with long hair must have it pulled back off the face and secured so it will not fall into sterile or clean fields during nursing activities.</td>
<td></td>
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<tr>
<td>D. Religion based hair covering and headbands: only solid neutral colors, no embellishments</td>
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</tr>
<tr>
<td>E. Beards, mustaches, and side burns must be clean, short, and neatly trimmed.</td>
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<tr>
<td><strong>Fingernails</strong></td>
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</tr>
<tr>
<td>A. Fingernails should be short (not more than 1/8” beyond end of finger tip), smooth and clean. Long nails can harbor debris and microorganisms.</td>
<td>A. Finger nails that extend more than 1/8” beyond the tip of the finger.</td>
</tr>
<tr>
<td>B. Nails in natural state only.</td>
<td>B. Artificial/added nails or tips (Research has documented presence of fungi growing under artificial nails)</td>
</tr>
<tr>
<td>C. In order to maintain medical asepsis, all students with long hair must have it pulled back off the face and secured so it will not fall into sterile or clean fields during nursing activities.</td>
<td>C. Nail polish</td>
</tr>
<tr>
<td><strong>Make-up</strong></td>
<td>A. Excessive make-up</td>
</tr>
<tr>
<td>Should be natural looking and should contribute to the overall appearance of good taste.</td>
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<tr>
<td><strong>Hygiene</strong></td>
<td></td>
</tr>
<tr>
<td>A. Students should take showers and use deodorant.</td>
<td>A. Perfumed deodorants. There are increasing numbers of clients with sensitivities to perfumes.</td>
</tr>
<tr>
<td>B. Students should be free of odors.</td>
<td>B. Perfumes, after-shaves, hair spray, cigarette smoke, etc.</td>
</tr>
<tr>
<td>A. Student should have tattoos covered.</td>
<td>C. Visible tattoos</td>
</tr>
<tr>
<td><strong>Others</strong></td>
<td></td>
</tr>
<tr>
<td>A. In the Psychiatric Units where street clothes are worn, the following rules apply:</td>
<td>A. Gum chewing or candy in client areas.</td>
</tr>
<tr>
<td>1. Attire shall be compatible with agency policy and ensure student safety.</td>
<td>D. Cell phones/beepers/mp3 players are not allowed in the clinical setting.</td>
</tr>
<tr>
<td>2. Low/medium heel (not greater than 1 1/2” from the floor), comfortable walking shoes shall be worn.</td>
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<tr>
<td>3. Females shall wear hosiery or socks; males must wear socks.</td>
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<tr>
<td>4. Street clothes such as dresses, pants suits, color-coordinated shirts or tops and slacks are worn. These shall be neat, clean, and conservative.</td>
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<tr>
<td>5. HFC student ID and acceptable badge</td>
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</tbody>
</table>
Additional Items: Students are required to have the following supplies with them in clinical and lab:

A. A watch with a sweep second hand
B. Black pen, pencil, and pocket-size notebook
C. Bandage scissors, 5 ½” – May not be required for psychiatric clinical.
D. Stethoscope
E. Penlight
F. HFC student I.D. Badge

CLINICAL ROTATIONS

Clinical rotations are planned to provide a quality learning experience for each student. HFC uses most of the major clinical agencies in Southeast Michigan that are within a 60 minute drive from HFC main campus. The Master Rotation schedule considers:

A. Individual student learning needs
B. Provision of well-rounded, educational experience with variety in clinical sites and units
C. Agency availability, requirements, and policies
D. Faculty availability

1. Students are expected to be available for a clinical assignment between the hours of 6:00 am and 12:00 midnight, Monday through Friday during the semester.
2. Alternative clinical assignment times such as a Saturday or a week-end rotation may be required.
3. Students are responsible for attaining clinical forms for paperwork required by each nursing course. The forms are available for the student to download and print from the “K” drive and the Nursing Program website.

All ACEMAPP assessments and health requirements must be met in order to be placed into a clinical rotation.

Transportation

Students must assume all responsibility for their own transportation on and off campus. Clinical assignments are not made according to car pools or student’s geographical location. Faculty cannot transport students to or from the clinical site.
Clinical Attendance/Absences

The PSL and clinical experiences assist in the application of knowledge and skills learned in each nursing course, as student’s progress through the nursing curriculum. A minimum number of clinical hours are required to achieve the course objectives, meet standards established by the Michigan State Board of Nursing (MSBN), and comply with ACEN criteria.

Students are expected to attend and participate in all scheduled PSL, observational, and clinical experiences. In order to understand the client’s perception of care, during the PSL activities, it is expected that students will participate in both the nurse and client roles.

The Henry Ford College Nursing program has zero tolerance for clinical absences. Recognizing that there may be extenuating circumstances or an illness which could prevent a student from attending clinical; two absences will be permitted throughout the entire nursing program. Students may submit documentation for reason of absence to be placed in their file. Any student with more than two absences will result in the student being withdrawn from their current nursing course(s).

Note: If a student’s absences exceed two because of extenuating circumstances, the decision to remove the student from the program would be made by a panel of 3 full-time faculty members (the course Instructor, the Dean (or designee), and 1 other full-time instructor) to determine and vote if the student’s third absence would warrant consideration for keeping the student in the program. A student would only be allowed to exercise this process once during the entire program, and would have to provide written documentation to support reason for absence to be reviewed by the faculty.

In the event of a PSL/clinical absence, the following procedure is to be followed:

1. Call the nursing office, 313-845-6305 or 9635, at least 1 hour before the assigned PSL or clinical time.
2. Call the clinical instructor as directed (number provided by faculty) at least 1 hour before the assigned clinical/PSL assigned time.
3. A no-show without prior notification for a PSL Evaluation is considered a failed PSL evaluation and cannot be made up.
4. Generate a tardy/absence form and present it to your clinical instructor.
5. Submit to the Nursing Program office, any documentation you would like on file related to your absence. Keep copies of all documentation submitted.

Clinical Tardy

Students are expected to be at the assigned clinical area 10 minutes before the scheduled time. Tardiness and absences may result in an inability to meet essential course requirements and jeopardize the student’s status in the program. A tardy occurs when a student is not present at the assigned clinical area ten (10) minutes prior to the start of the clinical shift. In PSL, instructors may choose to define a tardy as a student not being signed in and seated at the start of the PSL session. A second tardy requires a computer make up session in N 141 equivalent in time to a single clinical/PSL day. A student who is not at clinical or PSL thirty (30) minutes after the expected arrival time is considered absent, not tardy.

In the event of a PSL/clinical tardy, the following procedure is to be followed:

1. Call the clinical instructor as directed (number provided by faculty) as early as possible to inform him/her of expected tardiness. There is no need to contact the Nursing office for a PSL or clinical tardy.
2. Generate a tardy/absence form and present it to your clinical instructor.
3. If a **second tardy** occurs in a single rotation, contact the Nursing Lab office 313-845-6306 and schedule a computer lab session equal to the time spent in one clinical day.

**K-DRIVE**

In order to save copying cost and for your convenience, we have placed commonly used documents on the K Drive. Below are the directions for retrieving the necessary documents.

1. Go to [www.my.hfcc.edu](http://www.my.hfcc.edu)
2. Select my HFC from the top bar
3. Select access K drive
4. Log in using your **Username and Password**
5. Select Net folders
6. Click on ACSKDRIVE
7. Using the arrows you must **SCROLL ACROSS/DOWN** and click on the **“Nursing Course Materials”** folder and select the course that pertains to you, i.e. NSG 155, NSG 221.
8. The **“Clinical Packets”** folder contains forms commonly used in the clinical area, such as the Client Assessment Guide, Nursing Care Plan, Pharmacology Data Sheets, etc. The **“Announcements”** folder will contain information more specific to the theory portion of the course, including specific information from course faculty regarding scheduling (course calendars), clinical assignments, and memorandums to students in a specific section of the course.
9. Some forms are “PDF” (read only), RTF or MS Word format and should be carefully reviewed. Print copies of the necessary forms and save “files” to your computer or jump drive for personal use.
10. The Nursing Program site will also house forms and information. Clinical forms can be found under **“Current Students”** tab. Go to [https://nursing.hfcc.edu/](https://nursing.hfcc.edu/)

**Evaluation of Clinical Practice**

Clinical practice is evaluated as “satisfactory” (pass) or “unsatisfactory” (fail) on the Formative/Summative Clinical Evaluation Tool.

The following scale is used to evaluate each criterion statement:

- **S** = Satisfactory criterion attainment
- **NI** = Needs Improvement
- **U** = Unsatisfactory criterion attainment
- **NO** = Not observed
- **NA** = Not applicable to this clinical week

All critical criteria statements are identified by an asterisk mark (*). These statements must be rated satisfactory to receive a “Satisfactory” course grade.

Satisfactory performance is behavior that demonstrates knowledge and skills related to the criteria outlined from course objectives without jeopardizing the client’s physical and/or psychological well-being.
Unsatisfactory performance is behavior that does not meet the criteria outlined from course objectives. In addition, any behavior that jeopardizes the client’s physical and/or psychological well-being will result in a clinical failure. A grade of “D” or “E” is issued for the associated nursing course even though a student may be achieving a grade of C or better in the theory course.

**If students are not adequately prepared for client care, they are not permitted to care for the assigned clients.** They will be asked to leave the clinical area which will be considered a clinical absence. Repetition of this behavior jeopardizes the student’s position in the program. Students who fail to maintain competency, by demonstrating “at risk” behaviors in the clinical/lab area, will receive a performance report.

**“AT RISK” Behaviors:**

A. Any performance that threatens the physical and/or psychological well-being of a client, placing the student in danger of failing the nursing course in which he/she is enrolled.

B. Students are held accountable for any real/potential threat to the client on every skill taught. If the instructor prevents an error, the student is still at fault.

C. A behavior or consistent behaviors that result in a threat to the client’s physical and/or psychological well-being is termed “at risk” behavior. Examples of “at risk” behavior(s) include, but are not limited to, the following:

1. Principles learned in prior semesters are violated. (Example: a breach in aseptic technique during tracheostomy care.)
2. Inappropriate verbal or non-verbal behavior in the presence of the client or the family.
3. Inadequate preparation for a clinical assignment.
4. Failure to maintain a safe environment: side rails down on non-ambulatory client.
5. No provision for means of communication with a client.
6. Neglecting to wash hands before and after nursing procedures.
7. Inability to properly administer medications according to the “Six Rights”.
8. Lack of progress in the clinical area.
10. Communicating negative value judgments to a client
11. No provision for privacy
12. Clinical absences and/or tardiness.
13. Failure to follow procedures for reporting PSL/clinical absence and/or tardiness.

Three “at risk” incidents during the semester are grounds for immediate termination from the nursing course (see clinical failure) in which the student is currently enrolled. In some instances a single “at risk” incident may result in immediate termination from the program.

**CRITICAL INCIDENT**

In the event of a critical incident, the clinical instructor or the Associate Dean of Health Sciences may require the student to leave the clinical area immediately. If deemed appropriate the student will be clinically failed or released from the Nursing Program. If it is prior to the 60% point in the course, the student will be advised to withdraw from the related nursing course. A failing grade may be assigned at by the instructor. If it is past the 60%
point in the course, the student will not be able to self-withdraw in WebAdvisor. Grade
determination will be made by the instructor. Examples of Critical incidents include action on
the part of the student that presents a serious and immediate threat to client safety,
insubordination, breach of ethics, or patient abandonment.

**Formative/Summative Clinical Evaluation**

The formative evaluation period varies from course to course. The time period will be
explained on the first day of class for each course.

This is the student's learning time. The student will be expected to:

- Complete all required agency orientation
- Get orientated to the clinical area
- Ask question about assignments
- Consult with clinical instructor often
- Provide direct client care per instructor directions
- Perform skills based on assignment
- Achieve competency in all required clinical objectives
- Follow the ADN program and agency policies
- Participate in pre and post conferences
- Complete the Formative/Summative Evaluation Tool weekly

Unsatisfactory clinical performance may/will typically require a Performance Report. This is
intended to clearly document the area(s) that require improvement and to allow for student
self-reflection and instructor counseling.

On clinical evaluation tools, all critical criteria statements are identified by an asterisk mark
(*). These statements must be rated satisfactory to receive a “Satisfactory” clinical grade.
At the end of the Summative Evaluation period, an “Unsatisfactory” clinical grade will result
in a failing course grade and withdrawal from the program.

A satisfactory rating during the Formative Evaluation DOES NOT guarantee a satisfactory
Summative Evaluation.

All Performance Reports and Formative/Summative Evaluation Tools are written and shared
with students. Students are expected to read and sign them. The signature signifies that the
student has the read the report/evaluation. On Performance Reports, students may add
comments of agreement, disagreement, explanation and/or plans for improvement. Students
are required to participate in all phases of their Formative/Summative evaluation through
weekly completion on the “student” section and at the summative evaluation conference by
submitting their own summative evaluation for filing.

**Standard of Clinical Conduct**

All nursing students must adhere to the conduct expectations outlined in the Michigan Nurse
Practice Act, the American Nurses Association Code of Nurses, and the behaviors outlined in
the Nursing Student Handbook. It is the intent of these policies to insure client safety and
professional conduct by appropriate ethical-legal behavior on the part of all nursing students.
All nursing students are expected to be responsible for their actions. A student’s failure to
abide by the outlined expectations at any time shall initiate faculty evaluation of a student’s continuation in the clinical rotation and therefore, the Nursing Program.

1. Emotional response which inhibits learning and/or functioning in the client care area will be cause for dismissal from the program.

2. While in the clinical area, students are held to the standards of care of the registered nurse.

3. Students are responsible to seek the assistance of the instructor in the clinical area. Students may give nursing care/medications in the presence of an instructor or with an assigned agent of the instructor only when so directed by the instructor.

4. Students will give nursing care only when an instructor is present in the assigned agency.

5. Students must be prepared in the clinical area to give responsible, safe nursing care or will be asked to leave the clinical area. This can jeopardize the student’s ability to successfully complete the program. Performance hazardous to client safety and/or endangering clients will be cause for dismissal from the program.

6. Students entering a clinical agency and believed to be under the influence of a substance that could endanger client safety will be asked to leave the client care area and to follow up according to agency policy. This will require follow up with the Associate Dean of Health Sciences and may necessitate the student’s dismissal from the Nursing Program. HFC policies will be followed.

7. Students must behave in a professional manner toward faculty, staff and clients. This behavior includes courtesy, honesty, ethical actions and responsible intercommunication skills. Behavior which interferes with clinical agency/staff/faculty relationships will be cause for dismissal from the nursing program.

8. Students must act to protect confidentiality in all situations. Breaches of confidentiality or HIPAA laws concerning fellow students or clients may result in dismissal in the nursing program.

9. Falsification of clients’ charts or records will result in dismissal from program.

10. Personal beliefs, values and bias are not to affect the quality of nursing care given. Consistent noncompliance with ethical-legal behavior will be cause for dismissal from the program.

11. Students must immediately report unsafe practice or conditions to their instructor.

12. Students are not allowed to remove any agency documents, original or copies, (i.e. lab results, medication sheets, etc.) from the clinical area under any circumstances. Violation of this policy will result in dismissal from the Nursing Program.

13. Student should refrain from chewing gum, eating candy, or drinking coffee while in the clinical area.

14. Students are not allowed to bring cell phones/beepers/MP3/Ipods to clinical area.
MANAGEMENT OF STUDENT EXPOSURE TO BLOOD AND/OR BODY FLUIDS

1. A Body Substance Exposure (BSE) is defined as an eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials that results from the performance of the student’s duties.

2. The student will report an exposure immediately to the clinical instructor.

3. All paperwork as described in the agency policy will be completed by the student under the supervision of the clinical instructor.

4. The clinical instructor will notify the college and send documentation of the incident to the Associate Dean of Health Sciences.

5. Students will be responsible for any expense incurred as a result of the exposure.

6. The student is responsible for continuing with follow-up and treatment as recommended.
Employers Expectations of Nursing Graduates

There are areas which employers consider in seeking references on our nursing graduates. Students should be aware of these early in the program. They are:

**Reliability**
Meets commitments, punctual, responsible for own actions, regular attendance.

**Professional Appearance**
Wears proper attire; is clean and well-groomed

**Flexibility**
Adapts to changing situations; openness; lack rigidity.

**Ability to Utilize Supervision**
Recognizes and seeks assistance as needed and utilizes it; accepts constructive criticism.

**Independence**
Demonstrates self-confidence; recognizes own limitations; self-motivated.

**Responsibility for Professional Growth**
Seeks additional learning experiences by additional research; demonstrates willingness to go beyond minimum requirements.

**Judgment**
Makes sound decisions using appropriate data; utilizes problem-solving skills; demonstrates common sense.

**Quality of Care**
Assesses physical, social, emotional, environmental, cultural needs of clients and families. Develops and implements appropriate plan for care and appropriate technical skills.

**Organizational Ability**
Organizes time, effort, energies; demonstrates ability to set priorities with flexibility

**Teaching ability**
Determines learner readiness; develops neutral learner outcomes; develops appropriate plan, methods, depth, resources; provides for continuity of teaching; evaluates learner outcomes.

**Interpersonal Relationships**
Interacts appropriately with peers, co-workers, other healthcare disciplines, clients and families

**Communication Skills**
Uses appropriate written, oral, and non-verbal skills.

**Leadership Potential**
Contributes to classes, assumes extra responsibility for class work, unit team conferences, nursing and other organizations.

**PLEASE NOTE:** Clinical absences may be a predictor of employment practices, therefore faculty and administration may refuse to write a letter of reference or may include in the letter the number of clinical days completed in relation to the number of absences.
GRADUATION AND LICENSURE

Graduation

The Graduation commencement ceremony symbolizes the completion of a very rigorous program of study. This is a time when students and significant others come together to rejoice and celebrate this achievement. Graduation is usually held early in May. Students receive the leather binder at this time, while the actual diploma is mailed at a later date. Nursing graduates receive their nursing pin (if ordered) at the pinning ceremony.

Licensure

In order to practice nursing after completion of the HFC Nursing Program, the graduate must apply for a state license and successfully complete the National Council Licensure Examination for Registered Nurses (NCLEX-RN). Evidence of continuing education is required for renewal of the license.

The NCLEX is administered by computer testing; successful NCLEX is required for RN licensure. No temporary licenses are issued in Michigan. The purpose of the exam is to determine safe and competent nursing care. Information about how to apply for a license to practice is given to all students in their last semester of the Nursing Program. Procedures, fees, and deadlines are discussed. Information is also available at www.michigan.gov.

There will be delays in the application process should a student not successfully complete all Nursing Program and HFC degree requirements.

NCLEX-RN Live Review

All nursing graduates must attend the scheduled three or four-day live review course provided by the standardized testing company to assist their knowledge base in preparation for the NCLEX examination. The course is ordinarily scheduled at the end of the last semester. Students will be notified as quickly as possible about the date selected. DO NOT SCHEDULE IMPORTANT LIFE EVENTS UNTIL THE REVIEW COURSE IS COMPLETED AS ATTENDANCE IS MANDATORY.

DENIAL OF LICENSURE

The Michigan Board of Nursing may deny a RN license to an applicant who has been convicted of a crime or is addicted to drugs or alcohol. Students are advised to review the Michigan Board of Nursing licensure information available at www.mi.gov/lara
333.16221.amended Investigation of licensee, registrant, or applicant for licensure or registration; hearings, oaths, and testimony; report; grounds for proceeding under MCL 333.16226.

Sec. 16221. The department shall investigate any allegation that 1 or more of the grounds for disciplinary subcommittee action under this section exist, and may investigate activities related to the practice of a health profession by a licensee, a registrant, or an applicant for licensure or registration. The department may hold hearings, administer oaths, and order the taking of relevant testimony. After its investigation, the department shall provide a copy of the administrative complaint to the appropriate disciplinary subcommittee. The disciplinary subcommittee shall proceed under section 16226 if it finds that 1 or more of the following grounds exist:

(a) A violation of general duty, consisting of negligence or failure to exercise due care, including negligent delegation to or supervision of employees or other individuals, whether or not injury results, or any conduct, practice, or condition that impairs, or may impair, the ability to safely and skillfully practice the health profession.

(b) Personal disqualifications, consisting of 1 or more of the following:

(i) Incompetence.

(ii) Subject to sections 16165 to 16170a, substance use disorder as defined in section 100d of the mental health code, 1974 PA 258, MCL 330.1100d.

(iii) Mental or physical inability reasonably related to and adversely affecting the licensee's ability to practice in a safe and competent manner.

(iv) Declaration of mental incompetence by a court of competent jurisdiction.

(v) Conviction of a misdemeanor punishable by imprisonment for a maximum term of 2 years; conviction of a misdemeanor involving the illegal delivery, possession, or use of a controlled substance; or conviction of any felony other than a felony listed or described in another subparagraph of this subdivision. A certified copy of the court record is conclusive evidence of the conviction.

(vi) Lack of good moral character.

(vii) Conviction of a criminal offense under section 520e or 520g of the Michigan penal code, 1931 PA 328, MCL 750.520e and 750.520g. A certified copy of the court record is conclusive evidence of the conviction.

(viii) Conviction of a violation of section 492a of the Michigan penal code, 1931 PA 328, MCL 750.492a. A certified copy of the court record is conclusive evidence of the conviction.

(ix) Conviction of a misdemeanor or felony involving fraud in obtaining or attempting to obtain fees related to the practice of a health profession. A certified copy of the court record is conclusive evidence of the conviction.

(x) Final adverse administrative action by a licensure, registration, disciplinary, or certification board involving the holder of, or an applicant for, a license or registration regulated by another state or a territory of the United States, by the United States military, by the federal government, or by another country. A certified copy of the record of the board is conclusive evidence of the final action.

(xi) Conviction of a misdemeanor that is reasonably related to or that adversely affects the licensee's ability to practice in a safe and competent manner. A certified copy of the court record is conclusive evidence of the conviction.

(xii) Conviction of a violation of section 430 of the Michigan penal code, 1931 PA 328, MCL 750.430. A certified copy of the court record is conclusive evidence of the conviction.

(xiii) Conviction of a criminal offense under section 520b, 520c, 520d, or 520f of the Michigan penal code, 1931 PA 328, MCL 750.520b, 750.520c, 750.520d, and 750.520f. A certified copy of the court record is conclusive evidence of the conviction.

(c) Prohibited acts, consisting of 1 or more of the following:

(i) Fraud or deceit in obtaining or renewing a license or registration.

(ii) Permitting a license or registration to be used by an unauthorized person.

(iii) Practice outside the scope of a license.

(iv) Obtaining, possessing, or attempting to obtain or possess a controlled substance as defined in section 7104 or a drug as defined in section 7105 without lawful authority; or selling, prescribing, giving away, or administering drugs for other than lawful diagnostic or therapeutic purposes.
(d) Unethical business practices, consisting of 1 or more of the following:

(i) False or misleading advertising.

(ii) Dividing fees for referral of patients or accepting kickbacks on medical or surgical services, appliances, or medications purchased by or in behalf of patients.

(iii) Fraud or deceit in obtaining or attempting to obtain third party reimbursement.

(e) Unprofessional conduct, consisting of 1 or more of the following:

(i) Misrepresentation to a consumer or patient or in obtaining or attempting to obtain third party reimbursement in the course of professional practice.

(ii) Betrayal of a professional confidence.

(iii) Promotion for personal gain of an unnecessary drug, device, treatment, procedure, or service.

(iv) Either of the following:

(A) A requirement by a licensee other than a physician that an individual purchase or secure a drug, device, treatment, procedure, or service from another person, place, facility, or business in which the licensee has a financial interest.

(B) A referral by a physician for a designated health service that violates 42 USC 1395nn or a regulation promulgated under that section. For purposes of this subdivision, 42 USC 1395nn and the regulations promulgated under that section as they exist on June 3, 2002 are incorporated by reference. A disciplinary subcommittee shall apply 42 USC 1395nn and the regulations promulgated under that section regardless of the source of payment for the designated health service referred and rendered. If 42 USC 1395nn or a regulation promulgated under that section is revised after June 3, 2002, the department shall officially take notice of the revision. Within 30 days after taking notice of the revision, the department shall decide whether or not the revision pertains to referral by physicians for designated health services and continues to protect the public from inappropriate referrals by physicians. If the department decides that the revision does both of those things, the department may promulgate rules to incorporate the revision by reference. If the department does promulgate rules to incorporate the revision by reference, the department shall not make any changes to the revision. As used in this sub-subparagraph, "designated health service" means that term as defined in 42 USC 1395nn and the regulations promulgated under that section and "physician" means that term as defined in sections 17001 and 17501.

(v) For a physician who makes referrals under 42 USC 1395nn or a regulation promulgated under that section, refusing to accept a reasonable proportion of patients eligible for Medicaid and refusing to accept payment from Medicaid or Medicare as payment in full for a treatment, procedure, or service for which the physician refers the individual and in which the physician has a financial interest. A physician who owns all or part of a facility in which he or she provides surgical services is not subject to this subparagraph if a referred surgical procedure he or she performs in the facility is not reimbursed at a minimum of the appropriate Medicaid or Medicare outpatient fee schedule, including the combined technical and professional components.

(vi) Any conduct by a health professional with a patient while he or she is acting within the health profession for which he or she is licensed or registered, including conduct initiated by a patient or to which the patient consents, that is sexual or may reasonably be interpreted as sexual, including, but not limited to, sexual intercourse, kissing in a sexual manner, or touching of a body part for any purpose other than appropriate examination, treatment, or comfort.

(vii) Offering to provide practice-related services, such as drugs, in exchange for sexual favors.

(f) Failure to notify under section 16222(3) or (4).

(g) Failure to report a change of name or mailing address within 30 days after the change occurs.

(h) A violation, or aiding or abetting in a violation, of this article or of a rule promulgated under this article.

(i) Failure to comply with a subpoena issued pursuant to this part, failure to respond to a complaint issued under this article, article 7, or article 8, failure to appear at a compliance conference or an administrative hearing, or failure to report under section 16222(1) or 16223.

(j) Failure to pay an installment of an assessment levied under the insurance code of 1956, 1956 PA 218, MCL 500.100 to 500.8302, within 60 days after notice by the appropriate board.

(k) A violation of section 17013 or 17513.

(l) Failure to meet 1 or more of the requirements for licensure or registration under section 16174.

(m) A violation of section 17015, 17015a, 17017, 17515, or 17517.

(n) A violation of section 17016 or 17516.

(o) Failure to comply with section 9206(3).

(p) A violation of section 5654 or 5655.

(q) A violation of section 16274.
(r) A violation of section 17020 or 17520.
(s) A violation of the medical records access act, 2004 PA 47, MCL 333.26261 to 333.26271.
(t) A violation of section 17764(2).


**Compiler's note:** Section 3 of Act 174 of 1986 provides: “This amendatory act shall only apply to contested cases filed on or after July 1, 1986.”

Section 2 of Act 319 of 1986 provides: “Section 16221(e)(iv) of Act No. 368 of the Public Acts of 1978, as added by this amendatory act, shall take effect April 1, 1987.”

**Popular name:** Act 368