

New or Revised Policies for Academic Year 2013-2014

De Anza nursing faculty makes every effort to keep students up to date with the policies governing nursing student issues. Since the Student Handbook is only updated once a year, it was decided that **new** or **revised** policies would be made available to students on-line.

It is the student's responsibility to check the posting of new or revised policies frequently in order that they become familiar with them. Any concerns that arise from reading the policies should be discussed and clarified by your instructor. You will be held accountable to these policies.

Please check these policies once a week in order to keep current with the changes. Areas of change in current policies will be highlighted in yellow.

1. CPR - REVISED
2. Dress Code – REVISED
3. Plan for Improvement (PI) - REVISED

1. CPR (SHB p. 19)

REVISED

CPR certification must be 'Healthcare Provider' classification **with a two-year certification** from the **American Heart Association**. Internet certification is NOT acceptable, as it does not provide the practical, hands-on experience essential for competent skill performance.

2. DRESS CODE (SHB p. 24)

REVISED

UNIFORM FOR WOMEN AND MEN

The uniform must be laundered daily after each wearing. The uniform must be free of wrinkles each time it is worn to the clinical area. The De Anza nursing top may not be worn outside of the clinical setting. Information about the source of the nursing top is available in the nursing lab, S83.

“Nursing shoes” are to be white and clean. Boots, canvas, cloth, open-heeled or open-toed shoes are not allowed. Low-top athletic shoes, leather or leather-like, may be worn if entirely white. Logos on nursing shoes need to be ‘whited out’. Shoelaces are to be totally white and clean. It is recommended that “nursing shoes” be worn only for clinical assignments.

White sweaters may be worn on the hospital units, but not when working directly with clients. Students may not wear sweaters or turtlenecks under the nursing top. The top pocket of the nursing top must remain empty at all times for the safety of clients.

A wristwatch with a second hand, a De Anza College nursing program nametag, a hemostat, a stethoscope, and a pair of bandage scissors are considered part of the uniform (exception: no scissors are carried in a psychiatric setting). Stethoscope covers and decorative pins and/or toys on uniforms or stethoscopes are unacceptable attire. Belt bags or “fanny packs” are not acceptable attire.

Minimal jewelry may be worn unless otherwise specified by the clinical agency. The principles involved are: medical asepsis, protection of the client from injury, readiness to participate fully in client care, and professional appearance.

Advanced placement students are required to wear the same uniform as the generic De Anza nursing students.

MAY NOT BE WORN:

- More than one earring in each ear lobe; earrings that dangle or hoop earrings; earrings or ear jewelry on any part of the ear except the lobe.
- Piercings other than religious or cultural symbols
- Bracelet/s
- Necklace/s
- More than two rings

Occasionally nursing students are assigned to a clinical or community setting where “uniforms” are not worn. When assigned to these areas, students are expected to be well groomed and conservatively attired. Conservative attire does not include tight fitting slacks such as stirrup or “stretch” pants, jeans, shorts or athletic wear.

Note: These guidelines for professional appearance not only apply during actual clinical hours, but also during any time which the student nurse enters an agency or setting

representing the college, e.g., gathering data, attending client care conferences, attending meetings, attending flu clinics, etc.

UNIFORM FOR WOMEN

An approved uniform is a white uniform skirt or white pants with an entirely white, collarless crew neck shirt worn under the burgundy De Anza nursing top. Shirt sleeve length is to be no more than three-quarter length. The burgundy De Anza nursing top must be completely zipped at all times. The pants are to be uniform pants, not denim, knit, cargo or scrub pants or other such variations, and should be neatly hemmed at the shoe level.

The uniform is to be of such length and size as to ensure modesty and freedom of movement, regardless of necessary nursing actions and/or postures.

The burgundy De Anza nursing top may not be worn outside the clinical setting. The white crew neck shirt worn under the burgundy top may be worn outside the clinical setting.

White or skin-tone stockings must be worn with the dress uniform; white socks may not be worn with the dress uniform. White or skin-tone stockings or white socks may be worn with the pants uniform.

UNIFORM FOR MEN

The De Anza approved uniform consists of white pants and a white shirt covered by the burgundy De Anza nursing top. The white shirt worn underneath should be crew neck, collarless, entirely white, and have sleeves no longer than three-quarter length. The burgundy De Anza nursing top must be completely zipped at all times. The pants are to be uniform pants, not denim, knit, cargo or scrub pants or other such variations, and should be neatly hemmed at the shoe level.

The burgundy De Anza nursing top may not be worn outside the clinical setting. The white crew neck shirt worn under the burgundy top may be worn outside the clinical setting.

White socks must be worn.

3. Plan for Improvement (PI) (SHB p. 34)

REVISED

The Nursing Program is designed to build knowledge, skills, and abilities from simple to complex. Growth is expected of students each quarter. There is the expectation that students will retain previously learned knowledge and skills and progressively build upon that base.

Plans for Improvement are utilized by the Faculty and students regarding significant concerns, which allow the student the opportunity to remediate and learn from mistakes so that they can successfully complete the course and the Nursing Program. Therefore, the actions or inactions that lead to a Plan for Improvement will vary depending on the specific course and quarter of the Nursing Program. The Plan for Improvement will include specific goals and a time-line for achievement. This PI will be discussed with the student within 2 working days of the incident and a copy of the PI will be given to the student within 5 working days. A Plan for Improvement may need to be assigned for the remainder of a student's time in a nursing program. It would be supervised by the Director of Nursing. A Plan for Improvement may be accompanied by a Reflection.

Example: Not recognizing a break in sterile technique is more understandable in Quarter 1 than in Quarter 2. Therefore, the same mistake might result in a Plan for Improvement in Quarter 2 but Quarter 1.

Example: Not remembering to identify the client before administering a medication may not be viewed as serious in Quarter 1 as it would in Quarter 2. The faculty believe that by Quarter 2, a student should automatically check a name band before medication administration.

Not realizing or recognizing an error and not taking steps to ensure the safety of the client will probably result in a Plan for Improvement.

Example: Leaving the side rails down and walking out of the room is significant and would probably result in at least a Plan for Improvement. Leaving the side rails down, realizing your error at the door, and returning to raise the side rails is less serious.

A student may receive a Plan for Improvement in the *middle* of a nursing course for the same mistake that they made in the *beginning* of the quarter and for which they did not receive a Plan for Improvement at the earlier time. Patterns of errors or inappropriate behaviors will result in a Plan for Improvement.

Example: Failure to follow guidelines or directions. This is more understandable at the beginning of a new course with a new instructor. However, it is not acceptable after a few weeks into the course.

Example: Not following through with a plan of care agreed on by the student and the instructor or staff nurse. Not performing the planned interventions and then not

reporting that it was not done (to instructor and staff nurse) is a very serious error.

Because a PI focuses on improvement and safe performance of the student, all faculty working with the student must be aware of the plan and its goals. The student must provide a copy and discuss all PI's with all clinical and theory instructors involved during the time frame in which the PI is in force. The discussion must include the student's plan to meet the terms of the PI. Failure to do so may cause the student to be withdrawn with penalty.

Example: Student receives a PI in Pediatrics clinical, first 6 weeks of quarter, that extends through end of Quarter 3. Student must provide copy and discuss PI with Pediatrics theory instructor (if different than clinical), OB theory and clinical instructor(s), and pharmacology theory and lab instructor(s).

Example: Student receives PI in Quarter 2 that extends through Quarter 4. Student must provide copy and discuss PI with all Quarter 2, 3 and 4 theory, clinical, pharmacology and critical thinking instructors.

There are times when a PI is not the appropriate course of action due to the seriousness of the error and/or insufficient time to improve the clinical deficiency in the course. In these situations, failure of the clinical course and withdrawal with penalty or disqualification may be recommended, depending on several factors such as the severity of the error, the type of the error, and the quarter in which the error occurs (See: Withdrawal With Penalty, Disqualification).

During a student's matriculation in the Nursing Program, any student who receives three (3) PI's for the same general reason will be Withdrawn with Penalty. Examples include, but are not limited to the following:

Example: Three PI's for being late to Clinical.

Example: Three PI's for errors in the medication administration process.

Example: Three PI's for any combination of inappropriate communications specified in the Nursing Student Handbook, such as: violating Confidentiality.

Example: Three PI's for violating the Dress Code.

A student may be withdrawn with penalty at any time the PI is in effect.

Implementation of "Three Strikes" Policy on PIs:

Instructors shall report all student PIs to the Director of Nursing, who shall maintain an up-to-date document listing of each PI given to each student throughout the student's matriculation in the Nursing Program.

If a student receives two PIs for the same reason (eg. medication administration process, which includes but is not limited to):

- lack of identifying a client prior to medication administration
- lack of aseptic technique during preparation or administration of medication
- not being able to provide adequate information about medications given to the instructor,

the Director of Nursing will send the student a warning letter (“second strike”) explaining that if he/she receives *another* PI for an error in *medication administration process*, the student will be withdrawn with penalty.

On the other hand, a student may receive many PIs for different reasons during the program without receiving a warning letter from the Director of Nursing. (eg. PI in Q1 for dress code infringements, PI in Q2 related to problems in the medication administration process and PI in Q3 for issues related to patient safety).

The Director of Nursing will give a verbal notice of the ‘second strike’ to the appropriate instructor(s).

Refer to Appendix: Plan for Improvement