



NURSING PROGRAM HANDBOOK

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Lakewood, WA 98499

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Welcome from the Dean of Nursing Programs

On behalf of the Nursing faculty and staff, welcome to the Clover Park Technical College (CPTC) PN and LPN-RN Nursing Programs! We are committed to providing you with a quality educational experience and are here to guide and support you on your path to become a compassionate, empathetic caregiver.

The Clover Park Technical College Nursing Program has a rich history, which has expanded over fifty years. The Practical Nurse program was started in 1961 with just one instructor. Today, Clover Park Nursing Programs include Nursing Assistant, Practical Nurse program and the LPN-RN programs with numerous dedicated faculty.

Our nursing program is designed to improve your critical-thinking skills, develop evidence-based practice and guide you in the art and science of nursing. You will have the opportunity to learn theory in the classroom and practice newly learned skills in the comfort of the laboratory setting. Under the supervision of clinical faculty, you will participate in the care of patients at local industry partner facilities as well as utilize simulation to practice clinical skills. All of these components will help prepare you for the national licensure exams (NCLEX).

We are excited that you have chosen Clover Park Technical College Nursing Programs as the next step in your future. Remember, we are here to encourage you, lead you, and walk your academic path with you. The work will be hard, but you ARE up for the task!

Welcome and get ready for your next adventure!

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Introduction to the Nursing Program Student Handbook

As you dive into your nursing education, we want to ensure that you have all of the information needed to be successful in the nursing program. This handbook is supplement to the college catalog and the general policies that govern Clover Park Technical College. The purpose of this handbook is to provide you with information specific to the policies and procedures of the nursing programs at CPTC and to provide you as a student with information specific to the rights and responsibilities that you have while attending the program. The handbook provides resources and guidance for the student to meet program requirements. The student is encouraged to refer to this handbook frequently.

Program and Policy Changes

Our student handbook is used to communicate important guidelines to our students. It is very important that students have the ability to help develop and have input in the current and future policies, procedures and guidelines outlined in this document. Students will have that ability by way of their class representatives to make any concerns known. Class representatives are invited to participate in team meetings where we discuss these policies and other important programmatic issues. Meetings are one – two times per month.

Each student, who wishes to enroll in either nursing program, will be required to sign an affidavit of understanding indicating that they have read, understand and agree to abide by all nursing program policies and procedures.

These policies are all subject to change. Students will be notified in writing of any revision prior to implementation. If you have any questions regarding a specific class, please speak with the faculty member of that course. Our primary goal of this program is to see your successful completion of nursing school and to become a fellow member of the nursing profession.

Clover Park Technical College – Program Learning Outcomes Alignment

This document aligns the Program Learning Outcomes (PLOs) for the Clover Park Technical College Practical Nursing (LPN) and LPN–RN Transition programs with the Washington Administrative Code and Revised Code of Washington (WAC 246-840-700, RCW 18.70.040, 18.79.060). The alignment reflects differentiation in role expectations, autonomy, and professional judgment while emphasizing shared nursing values, the nursing process, and the ethical standards guiding safe and competent practice.



The Nursing Programs Vision

We are committed to cultivating tomorrow's nursing leaders. Our graduates will be culturally conscious, confident, progressive nurses who compassionately care for themselves and our diverse community.

Nursing Programs Mission

Our mission is to provide a student-centered career pathway through holistic professional nursing education.

Program Approach to Teaching and Learning

Clover Park Technical College's Nursing Program embraces a holistic, person-centered philosophy that values critical thinking, cultural humility, ethical decision-making, and interprofessional collaboration. Nursing students are prepared to practice safely within their legal scope as defined in RCW 18.79.060 and WAC 246-840-700 for LPN and RCW 18.79.040 and WAC 246-940-700 for RN, contribute to team-based care, and uphold the public trust inherent in the nursing profession.

Legal and Regulatory Alignment

This document references WAC 246-840-700, which defines standards of nursing conduct and practice for both the professional Registered Nurse (RN) and the Licensed Practical Nurse (LPN). These standards include three primary areas of responsibility:

- Standard I – The Nursing Process (Assessment, Diagnosis, Planning, Implementation, and Evaluation)
- Standard II – Delegation and Supervision
- Standard III – Health Teaching

In addition, Sections (3) and (4) of the WAC define communication, documentation, accountability, and professional ethics as shared standards across all nursing roles.

Differentiation by Role (WAC 246-840-700)

Program Learning Domain (Aligned with WAC 246-840-700)	LPN Expected Outcomes	RN Expected Outcomes
Nursing Process (Standard I)	Assist in implementing the nursing process by collecting basic data, reporting findings, and contributing to the development of nursing diagnoses and care plans under direction (WAC 246-840-700(2)(b)(i)).	Initiate and analyze data collection to formulate nursing diagnoses, plan and implement care, and evaluate client responses independently (WAC 246-840-700(2)(a)(i)).
Delegation and Supervision (Standard II)	Under direction, provide safe care by performing delegated tasks and reporting outcomes of care to the supervising RN or provider. May delegate selected tasks to competent individuals in defined	Ensure client safety by delegating nursing functions to qualified personnel, supervising delegated tasks, and evaluating outcomes of care (WAC 246-840-700(2)(a)(ii)).



	settings (WAC 246-840-700(2)(b)(ii)).	
Health Teaching (Standard III)	Assist in health teaching by providing routine instruction and reinforcing standard health information consistent with the plan of care (WAC 246-840-700(2)(b)(iii)).	Assess learning needs, design and implement teaching plans, and evaluate client and family understanding (WAC 246-840-700(2)(a)(iii)).
Communication and Documentation (Section 3)	Communicate significant client changes to appropriate team members in a timely manner and accurately document nursing care provided (WAC 246-840-700(3)(a)-(b)).	Ensure timely communication and documentation of comprehensive assessments, interventions, and evaluations in the client record (WAC 246-840-700(3)(a)-(b)).
Client Advocacy and Ethics (Sections 3–4)	Act as a client advocate in maintaining health, respecting confidentiality, and reporting concerns within scope (WAC 246-840-700(3)(c) & (4)(e)).	Act as a client advocate by promoting patient rights, protecting confidentiality, and integrating ethical decision-making into care and policy (WAC 246-840-700(3)(c) & (4)(e)).
Accountability and Professional Growth (Section 4)	Practice within the limits of education and demonstrated competence, seeking supervision when performing unfamiliar procedures (WAC 246-840-700(4)(b)-(c)).	Maintain accountability for independent nursing decisions, pursue ongoing professional development, and integrate evidence-based practice (WAC 246-840-700(4)(a)-(d)).
Safety and Quality Improvement	Recognize, report, and act to prevent risks or unsafe conditions in the healthcare setting.	Evaluate and improve safety practices through critical analysis, leadership, and application of quality improvement principles.
Teamwork and Collaboration	Collaborate effectively with members of the healthcare team to provide coordinated and compassionate care.	Lead and coordinate interprofessional teams to achieve optimal patient outcomes through communication and shared decision-making.

Shared Program Learning Outcomes

- 1. Individual-Centered Care:** Utilize critical thinking to provide excellent individual-centered care to our diverse community.
- 2. Professional Nursing Practice:** Demonstrate professional nursing standards through continuous learning and self-care.
- 3. Leadership and Collaboration:** Create an inclusive and collaborative environment through the development of leadership qualities and culturally conscious attitudes.



4. **Information and Technology:** Implement evidence-based information and technology that supports healthcare teams and their decision-making process.
5. **Safety:** Integrate the nursing process to promote safe, high-quality care of individuals and their communities.
6. **Communication:** Employ strong therapeutic communication skills to promote the health and wellness of individuals in various settings.

Program Outcome Metrics

These outcomes will be measured by these program success indicators:

1. Program Completion Rate within 18 months of program start:
 - a. PN Students $\geq$ 80%
 - b. LPN-RN Students $\geq$ 90%
2. NCLEX pass rate of at least 80% for both PN and RN graduates.
3. 80% graduates reporting that they are working as Licensed Practical Nurses within 6 – 12 months of graduation.
4. 85% graduates reporting they are working as a Registered Nursing within 6 – 12 months of graduation.
5. Graduates reporting satisfaction with the CPTC nursing program – 90% of those responding
6. Community stakeholders, employers, and clinical partners reporting satisfaction with graduates from the CPTC Practical Nurse program – Advisory Board members report satisfaction with graduates they have employed.

NLN Commission for Nursing Education Accreditation

The Clover Park Technical College Nursing Programs adhere to the National League for Nursing Commission for Nursing Education Accreditation (NLN-CNEA) standards. These standards, aligned with RCWs 18.79.040 and 18.79.060 and WAC 246-840-700, ensure that graduates provide safe, evidence-based, and patient-centered care within the scope of their professional license.

Washington State Board of Nursing 111 Israel Rd SE, Tumwater, WA 98501

Phone: (360) 236-4703 **Fax:** 360-236-4738 **Email:** nursing@doh.wa.gov

Website: <https://nursing.wa.gov/>

The Clover Park Technical College LPN-Associate Degree in Nursing Program holds pre-accreditation from the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC, 20037. 202-909-2487. <https://cnea.nln.org/>



The Clover Park Technical College Practical Nursing Program holds initial accreditation from the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC 20037. 202-909-2487. <https://cnea.nln.org/>

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Curriculum Framework

The Clover Park Technical College Nursing curriculum is built on the NLN framework, QSEN competencies, Bloom's Taxonomy, the Washington State Department of Health Scope of Practice Decision Tree (2017), and the Washington State Administrative Code for Nursing Education (WAC 246-840-500 to 246-840-583). The curriculum is organized into three areas:

- **Theory:** Focuses on developing independent care, sound nursing judgments, evidence-based practice, and collaborative, holistic care.
- **Skills:** Provides hands-on training in a laboratory setting to build essential practical nursing skills.
- **Clinical & Simulation:** Offers opportunities to integrate theory and practice through direct client care experiences.

Each course builds progressively toward the end-of-program student learning outcomes (EPSLOs) for both nursing pathways, with the nursing process as the cornerstone of instruction. Course outcomes are measured using effective, varied, and valid assessments that support both the Nursing Program and the college's overall goals.

National League of Nursing. (2014, September). Retrieved from <http://www.nln.org/professional-development-programs/teaching-resources/practical-nursing>
QSEN.org. (2020). QSEN Competencies. Retrieved February 11, 2020, from <https://qsen.org/competencies/pre-licensure-ksas/>
Washington State Department of Health. (2017, March 3). Scope of Practice Decision Tree. Retrieved from <https://www.doh.wa.gov/Portals/1/Documents/Pubs/669305.pdf>
Washington State Legislature. (2019, December 19). PRACTICAL AND REGISTERED NURSING. Retrieved February 11, 2020, from <https://apps.leg.wa.gov/WAC/default.aspx?cite=246-840>

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General CPTC Policies and Guidelines

CPTC Student Handbook

The nursing program at Clover Park Technical College adheres to and complies with all policies, procedures and guidelines that are outlined in the [CPTC Student Handbook](#). It is important as a student of CPTC to be familiar with the following policies:



Discrimination and Sexual Harassment (Title IX)

Clover Park Technical College provides equal opportunity and access in education and employment and does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, ethnicity, creed, color, sex, gender, gender identity, citizenship status, national origin, age, marital status, religious preference, the presence of any sensory, mental or physical disability, reliance on public assistance, sexual orientation, veteran status, political opinions or affiliations, or genetic information under any of its programs, activities or services.

CPTC complies with all Washington State anti-discrimination laws (RCW 49.60) and the following federal laws relating to equal opportunity: Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age of Discrimination Act of 1975, and the Americans with Disabilities Act (ADA) of 1990.

The following individual has been designated to handle inquiries regarding nondiscrimination, equal opportunity, affirmative action or the ADA policies for Title IX/504 compliance issues:

HR Director/Title IX Coordinator
4500 Steilacoom Blvd. SW
Lakewood, WA 98499
Bldg. 17, 114
(253) 589-5533

To view the College's complete policy and complaint procedures related to nondiscrimination, please visit the CPTC Policies and Procedures webpage: www.cptc.edu/policies

Disability Resources for Students (DRS)

CPTC is committed to providing accommodations to students with documented disabilities. Accommodations are determined on a student-by-student basis and should be requested, when possible, six weeks in advance of the beginning of the quarter. Lack of advance notice may delay the availability of an accommodation. Complete CPTC policies and procedures related to disability resources for students are available online.

Student Concerns

It is the policy of Clover Park Technical College to provide students with an opportunity to resolve any alleged violation of college academic policy, procedure or regulation, or to resolve any alleged case of inequitable treatment. The college encourages informal resolution of disputes whenever possible, which means following the nursing program policy surrounding student concerns and also maintains fair and equitable procedures for formally expressing and resolving concerns. (See [Academic Concern Process](#)) Student rights are protected in the concern/appeal process and the college must ensure that a student will not suffer repercussions because they choose to file a concern/ appeal in good faith. All concerns can be reported by visiting <https://www.cptc.edu/better-cptc> and filling out the applicable concern form. The form will be automatically sent to the appropriate person/office to respond to and investigate the concern in a timely manner.



Inclement Weather

CPTC rarely closes for weather. For potential closures, monitor local media and the CPTC website—college closures differ from local school district closures. Notifications (via website, email, voicemail, or text) are typically posted by 5 a.m. For updated information, visit the website or call 253-589-5707.

On days with delayed opening or early cancellation, all classes and clinicals follow the adjusted schedule. Students should attend class if conditions permit; if not, they must notify their instructors as specified in the syllabus.

If a class or clinical is cancelled, the instructor will assign makeup work to recover missed learning opportunities. Completion of these assignments is required to pass the course. More details are available at [CPTC Emergency Management](#).



Clover Park Technical College Nursing Program Information

To successfully begin in the nursing program, there are things that you will need to know. We want to communicate with you, our students, in various ways so that we know you have the information you need to finish the program. Below is information that will get you started on the correct path.

Expenses

PN Program

Practical Nursing Certificate- <i>Estimated</i> Tuition Costs and Fees		
	Resident	Non-Resident
Tuition	\$4,500	\$10,610
Nursing Fees	\$3,150	\$3, 150
Other College Fees	\$580	\$580
Supplies	\$500	\$500
Total	\$8,730	\$14,730

RN Program

LPN-RN Program (Associate's)- <i>Estimated</i> Tuition Costs and Fees		
	Resident	Non-Resident
Tuition	\$4,900	\$12, 470
Nursing Fees	\$2,850	\$2,850
Other College Fees	\$570	\$570
Supplies	\$500	\$500
Total	\$8,820	\$16,390

Financial assistance is available for students and can be found at <https://www.cptc.edu/financial-aid>.

Textbooks

The CPTC nursing program utilizes ATI for most all courses. However, occasionally, a faculty member may want a student to purchase a textbook. If this is the case, please purchase the most updated edition of the textbook. Additional information is typically found in the syllabus and any questions related to this can be directed to your nursing faculty. If a student chooses to use an older edition of the textbook, the student is held responsible for any discrepancies in testing, research, or papers related to the use of the older edition. The term “held responsible” means the student may lose points on a test or paper due to using information from the older edition rather than purchasing the edition used in the course.



Classroom dress and appearance

Please be sure to wear appropriate clothing while on campus. Even if you are in lecture class, you never know who may visit. Being comfortable is good but be sure to watch low cut shirts or pants that show your undergarments.

Lab/Simulation/Clinical dress and appearance

The complete official CPTC student uniform is to be worn whenever the student is on duty at a clinical site, unless instructed differently by the instructor. The student will be required to wear the uniform during simulation, lab class, or make-up experiences in the lab or any facility in relation to the program. The uniform is to be worn only for nursing program activities.

Communication

General

- Students are responsible for communicating with the Instructional Program Assistant, any changes in their name, address, personal email address or telephone number within 10 business days. This ensures that we have the appropriate information on file in case of emergencies.
- Communication amongst faculty, staff and students in the nursing program will be conducted through official **CPTC email address** and the **Canvas Learning management** system. It is a professional expectation that all parties check their emails and canvas accounts regularly and respond responsibility (at least every 48 hours, weekends do not count).
- Students are welcome to request an appointment with their faculty by using either email or speaking face-to-face with them. Please remember that all faculty have many students and that they want you to be successful. Grace and patience are always appreciated.

Chain of Command

All students are expected to address issues in writing regarding exams, homework assignments, grades, clinical, lab, or simulation with the assigned faculty member. In writing can include email. If the issue is not resolved, then the student is expected to address those issues with the Lead Faculty of the nursing program. The lead faculty for the nursing program is Irada Dadashova. Her email is irada.dadashova@cptc.edu.

If the issue is still unresolved, then the student should take their concerns to the Dean of the Nursing Program. All issues must be addressed in person or an agreed upon space such as zoom. Students should email requesting a meeting to address issues. Just as in industry, we expect students to follow the chain of command. Not doing so can create additional unintended issues. Not following the chain of command may result in disciplinary action in the form of the programs progressive guidance policy.

Canvas

Faculty and staff use the **Canvas** learning management systems to post course syllabi, class schedules, course documents and communicate with student(s). Written communication will occur through student email and/or Canvas. It is strongly suggested that you print out course documents **prior** to



coming to class. Faculty will not routinely provide printed handouts of presentations or course materials. If you do not have access to a computer or internet at home, there are computers and printers available for student use in the library. Please do not ask staff members to copy or print documents for you.

Student Representatives

Clover Park Technical College nursing program values the input of students in the systematic evaluation process. Student Representatives from each cohort are invited to actively participate in the nursing program team meetings and are helpful in giving the program feedback on their experiences. These students exchange information between the nursing department team and their cohort. The process for choosing student representatives is as follows:

- Halfway through quarter 1- four students will be selected from their cohort to serve as student representatives.
 - Students will be chosen by faculty.
 - The program will reach out to the chosen students and have 2-3 back-up candidates.
 - Student representative candidates will have time to think about this appointment and decide if they are interested.
 - Students must maintain a GPA above 3.0 every quarter and maintain a high level of professionalism.
- Student representatives will be asked to participate in team meetings and will also be a part of the student nursing club as officers, if the nursing club is active. Representatives may divide the duties as needed.
- If a student is unable to continue to serve as student representative the cohort will be asked to select a new representative.

Letters of Recommendation and References

Students are often in need of a letter of recommendation or a reference ([Appendix F](#)) from faculty for scholarships, educational advancement, or employment opportunities. Students should first obtain consent from the faculty member and then submit an updated/current resume and information on how/to whom the letter should be addressed. Students should allow a minimum of 14 days for preparation of the recommendation.

Student Employment

Students should carefully consider employment during the demanding nursing program. Full-time students are advised to limit work to 24 hours per week to avoid conflicts with academic responsibilities. Working more than 24 hours may hinder program success. Part-time employment, particularly in healthcare, is encouraged for relevant experience.

Clinical hours may include evenings, nights, and weekends, and the clinical rotation schedule is fixed. Night shifts before clinical are prohibited due to safety concerns; a minimum of 10 hours between shifts is required. Students found working night shifts before clinical will be sent home and face progressive disciplinary action.



In the final quarter, students must be available at all assigned times, as clinical and practicum hours cannot be adjusted to accommodate personal schedules.

Faculty and Program Evaluation

Student Evaluation of Faculty

Students have the opportunity to evaluate teaching and clinical faculty at the end of each quarter. Faculty will see statements made by students, but students are not explicitly identified. These evaluations are important to faculty, especially those in the tenure process and are reviewed by the Clover Park Technical College tenure committee and Board of Trustees. All faculty evaluations provide important feedback for program and curriculum improvements.

Student Evaluation of the Program

Students will have an opportunity to evaluate the program on two occasions. The first will be just prior to graduation through an exit survey, which will be given to graduating students. Furthermore, about 6-12 months after graduation, graduates of the program are contacted by Clover Park Technical College's Nursing Program for an alumni evaluation. It is important that all graduates provide this survey information as it is necessary for program accreditation, and this survey is the primary reason for requesting that the Nursing Instructional Program Assistant, Sean McCullough, sean.mccullough@cptc.edu be kept informed of changes in the primary email address.

Professionalism – Accountability, Behavior and Ethics

Student Accountability

The Washington State Nurse Practice Act requires all nursing practitioners to be fully accountable for their clinical decisions. Each student is responsible for their actions based on their preparation, and they do not operate under another nurse's licensure. Accountability means being answerable for one's decisions, actions, and behaviors. Nurses must maintain a commitment to patient safety and care and are legally and ethically liable for any unsafe practices.

At Clover Park Technical College, accountability means consistently learning and practicing nursing with integrity, responsiveness, and a caring attitude. As students develop their knowledge and skills, they assume professional responsibilities that align with ethical and legal standards, including guidelines set by organizations like the American Nurses Association. Students are expected to perform their duties safely and refer to the [Student Nurse Physical and Psychological Policy](#) for further guidance.

Nursing Ethics

All nurses should be familiar with the Provisions of the Code of Ethics, which is written by the American Nurses Association. The Code of Ethics is based upon belief about the nature of individuals, nursing, health, and society. Recipients and providers of nursing services are viewed as individuals and groups who possess basic rights and responsibilities and whose values and circumstances command respect at all times. Nursing encompasses the promotion and restoration of health, the prevention of illness, and the alleviation of suffering. The statements of the code and their interpretations provide guidance for conduct and relationships in carrying out nursing responsibilities consistent with the ethical obligations of the profession and quality in nursing care.



The provisions are as follows:

- The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
- The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
- The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
- The nurse through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
- The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Reference: American Nurses' Association Code of Ethics, 2015

Behaviors and Responsibilities

Students are expected to adhere to the following behaviors that fall within nursing standards, which include but are not limited to:

- Using critical thinking skills in determining one's actions in the clinical setting
- Demonstrating empathy in the care of others
- Accepting responsibility and accountability for one's own actions and legal/ethical issues, including preparing sufficiently for class and clinical
- Considering all information obtained regarding the patient's status as strictly confidential, in accordance with HIPAA (Health Insurance Portability and Accountability Act) policy. See [Social Media Policy](#).
- Adhering to the School's dress code and having a neat, clean appearance
- Attending orientations, class and clinical, arriving and leaving as scheduled
- Taking exams as scheduled and completing assignments on time, including patient/client care
- Being honest, respectful, sensitive and nonjudgmental of differences at all times
- Responding appropriately and in a timely fashion to constructive criticism and feedback from faculty, clinical site staff, and peers
- Giving prior notification in writing or voice mail to faculty if unable to meet commitments and following up with faculty regarding potential make up requirements
- Demonstrating teamwork and helping colleagues using empathy and care



- Respecting others' space and time through the demonstration of such actions as turning off cell phones, avoiding disruptive sidebar conversations, and refraining from texting others in class and clinical settings
- Being responsible for his/her own learning and helping promote an atmosphere that facilitates maximum learning for his/her classmates. See [ADA Accommodations Policy](#). A student will not obstruct the learning process of others by causing undue anxiety for any reason, including monopolizing instructor's time
- Recognize that nurses and nursing students have professional boundaries and that it is possible to be either over-involved or under-involved with patients. Strive to inspire the confidence of clients, treat everyone they encounter professionally, and promote the clients' independence
- Maintaining proper communication by checking email daily
- Demonstrating nursing standard behaviors and attitudes at all times

If students are found to not adhere to the standards listed above, the program faculty and staff will operate using just culture by following the progressive guidance policy outlined in this handbook.

Unacceptable Classroom and/or Clinical Site Behavior

The following are items that constitute unacceptable behaviors:

- Any conduct in the classroom, lab, simulation, or clinical area that is illegal or in conflict with accepted standards and ethics of the nursing profession and/or jeopardizes safety of self or others
- Contacting a clinical site directly without program approval.
- Violation of the Washington Administrative Codes (WAC) for nursing, which describes unprofessional conduct.
- Use of or being under the influence of alcohol or drugs during school, lab, simulation, or clinical hours. This includes prescription narcotic medications or marijuana.
- Failure to follow policies of CPTC, or failure to comply with requests from faculty and staff in accordance with CPTC policies.
- Any action which violates confidentiality of HIPAA rights of a patient/resident, a clinical facility or its staff, or another student.
- Failure to maintain "professional boundaries."
- Conflict with a staff member at a clinical site, which is reported to the faculty (i.e. refusal to follow directions for patient care, or inappropriate conduct).
- Failure to come to clinical prepared including inadequate knowledge of treatment, medications, or plan of care AND inappropriate dress and appearance.
- Unprofessional communication behaviors (examples: personal texting, Face Book; using profane language with patients, visitors, staff, or faculty)
- Failure to treat others with respect, honesty and dignity
- Failure to implement appropriate action to ensure safety of patients/clients
- Additional behavior(s) deemed unprofessional by faculty including being disruptive and or refusing to follow faculty directions.
- Misrepresentation of physical presence or participation in clinical experience
- Causing or potentially causing physical harm
- Interfering with the learning of others



- Repeated tardiness or absences without cause. See [Attendance Policy](#)
- Use of cell phone, or other electronic device, while on duty at clinical site without instructor approval.

Students may be referred to the CPTC Student Conduct Officer if the nursing progressive guidance policy has been exhausted.

Immediate Dismissal

Additionally, students could be immediately dismissed from the program for the following actions:

1. Falsifying of documentation (i.e. patient assessment, administration of medications, treatments, or any aspect of patient care) at the clinical facility or in report to the clinical instructor or nurse
2. Failure to report an error or omission in medication administration, patient care, or documentation
3. Failure to report patient care provided and/or assessment
4. Plagiarism or falsification of information in written clinical assignments
5. Passing medications without an instructor approval
6. Unethical or illegal conduct in the clinical area
7. Serious threat to a patients' safety
8. Unprofessional conduct, including violations of professional boundaries
9. Violation of standards of confidentiality in relation to patient, staff, clinical facility, or another student (HIPAA criteria)
10. Violation of patients' rights or dignity
11. Violation of nursing WACs describing unprofessional conduct
12. Functioning outside the student role
13. Demonstration of any other behavior/performance which is a serious violation of principles/practices taught in basic nursing courses
14. Performance of any aspect of a client's care without checking MD orders or patient care guidelines according to correct procedure
15. Performance of any procedure or medication administration requiring instructor supervision without the instructor being present
16. Performance of any nursing procedure that has not yet been taught and competency assessed in the classroom and/or nursing lab
17. Failure to complete basic nursing care for assigned clients

Student Progression, Failures and Testing

Registration and Scheduling

The CPTC nursing program is a limited enrollment program. The nursing programs controls who can register for nursing courses. Generally, the nursing faculty advisor, Khairo Bray will visit nursing classes to help students get registered for the next quarter. Please follow the calendar and schedule of clinical courses given by the nursing program and NOT the CPTC general schedule.



Student Grading

The student's assessment/evaluation is based on meeting individual course student learning objectives during the program and having met "End of Program Student Learning Outcomes (EPSLOs)" by the time he/she/they has/have completed the program. Students need to be aware that they will have multiple instructors throughout the program and each instructor has academic freedom in their course. It is important to read each course syllabus as policies will vary for each course. Students enrolled in the nursing program must maintain 78% or better grade point average and/or "Pass" in **each and every** nursing course in order to continue progression to the next quarter of the program.

All students attending the Nursing Program may be provided with academic support in quarter one and two of the program. To progress in the program, students will be required to take assessments at the beginning of quarter one, the end of quarter one and two, and attend additional support classes each week until a qualifying assessment score is obtained.

If a student fails a clinical rotation (including simulation), the student has failed the entire clinical course and may not be able participate in further clinical rotations that quarter. The student must apply for re-entry and take the entire clinical course, regardless of what point in the quarter the student failed their clinical rotation. A competency assessment may be required to determine if a student is safe in the patient care environment. ***Inability to pass this competency exam may result in student not being allowed to continue in course and/or re-enter program.***

Late Work Policy

Overview:

This policy outlines the guidelines for submitting assignments within courses in the nursing program. Recognizing the demanding nature of nursing education, we have established a flexible approach to accommodate unforeseen circumstances while maintaining academic integrity. This late work policy aims to strike a balance between **flexibility and accountability**, recognizing the unique demands of nursing education. Students are advised to manage their time effectively, plan, and seek assistance when facing challenges to ensure successful completion of the program. Additionally, **this late work policy does not include assignments related to skills in lab, simulation or clinical.**

Soft Due Dates:

Assignments will have weekly "soft" due dates, allowing students to submit work within a reasonable timeframe to keep students on track throughout the nursing program.

Soft due dates are weekly due dates where submissions are strongly recommended. These due dates will apply to weekly assignments and other regular assessments, subject to faculty discretion.

Late submissions will receive a penalty of 10% deduction for each week beyond the soft due date, up to a maximum penalty of 30%.

Hard Due Dates:

A hard due date will be enforced in week 4 for work assigned from week 1 to week 4. Another hard due date will be enforced in the last week of the quarter for work assigned from week 5 to the completion of the quarter. The hard due date signifies the end of the grace period for weekly assignments.



Submissions beyond the hard due date will receive zero credit.

Hard Due Dates for 4-Week Courses:

For courses delivered in a 4-week format, the hard due date structure will be modified as follows:

- A hard due date will be enforced on Monday of week 3 for work assigned during weeks 1 and 2.
- A second hard due date will be enforced on Tuesday of week 5 for all work assigned during weeks 3 and 4.
- ATI Proctored exams and their remediation assignments will follow the course remediation policy, as outlined below:
 - All students will remediate content from (insert name of proctored exam here) per the assignment instructions in the Canvas assignments.
 - Students who earn below the level one cut score on (insert name of proctored exam here) will need to remediate that content and then schedule a time to complete (insert name of proctored exam #2 here).
 - Retesting will occur in (insert weeks here), by appointment.
 - Students will then remediate content from (insert name of proctored exam #2 here), which will be due by (week).

Submissions beyond the hard due date will receive zero credit.

Exceptions:

In cases of documented medical emergencies or unforeseen personal circumstances, students may formally request an extension beyond the hard due date. The request must be submitted to the instructor as soon as possible. Instructors will review extension requests on a case-by-case basis and may grant an extension of up to one week for approved reasons.

Communication:

It is the responsibility of the student to communicate any challenges or difficulties affecting their ability to submit assignments on time. Instructors are encouraged to maintain open communication with students to address concerns and provide guidance on managing coursework.

Didactic Course Grading

1. The nursing program requires each student to maintain 78% (2.7) or better in **each** course. The nursing program follows CPTC's grading scale and can be found in the CPTC catalog:

Percentage	Letter Grade	Points
93-100	A	4.0
90- 92	A-	3.8
88-89	B+	3.3



Percentage	Letter Grade	Points
83-87	B	3.0
80-82	B-	2.7
78-79	C+	2.3
73-77	C	2.0
70-72	C-	1.7
66-69	D	1.0
65 and below	F	0.0

2. If the student's average falls below 78% during any course, the student should contact the instructors to discuss the grade. The instructors will assist the student to explore means for improvement (i.e., improvement in study habits, note taking, tutoring options, etc.).
3. Any student whose final grade in a course is below 78% may not register for courses offered during the next quarter. (See Policy on Re-entry)
4. The student is expected to maintain a record of their grades in each course in order to be aware of their standing. A student who is concerned or has questions about their progress may make an appointment to meet with the course instructors during office hours.
5. The syllabus for each course is the "contract" between the student and faculty and clarifies expectations for the course.
6. The Instructor of each academic course will specify the grading criteria for that course.

Finally, attendance is mandatory at the ATI review course in the third quarter for PN's and in the fifth quarter for RN's. Failure to attend all sessions may result in failure of a nursing course.

Clinical Grading

1. Grades are based on meeting course objectives (per the syllabus) using a clinical evaluation form for each rotation.
2. Students are rated as Satisfactory, Developing, Needs Improvement, or Unsatisfactory; an Unsatisfactory rating means failing that rotation and clinical course.
3. A competency assessment may be required at any time; failing it can prevent course continuation.
4. Performance is evaluated through direct observation, written assignments, and nursing staff feedback.
5. Instructors will notify students of unsatisfactory progress before the rotation's end, except in one-week rotations where warnings may not be feasible.
6. Based on performance or behavior, students may be removed from the clinical site or restricted in scope, affecting their ability to pass the course.
7. Instructors use professional judgment and the curriculum to determine evaluations.
8. All required written assignments must be completed satisfactorily to pass the experience.
9. If a student is asked to leave a clinical site by clinical partner for any reason, the student will automatically fail the clinical course. The progressive guidance policy will be followed for any other disciplinary actions.



Simulation Absence Policy

Simulations are an integral component of the nursing program, designed to provide students with realistic, hands-on experiences critical for developing clinical competence. Consistent attendance is essential for meeting course outcomes and ensuring readiness for clinical practice.

1. Attendance Expectations:
 - a. All nursing students are required to attend scheduled in-person simulations as outlined in the course syllabus. Absences must be communicated to the instructor prior to the simulation whenever possible.
2. Makeup Assignments for Missed Simulations:
 - a. Students who miss an in-person simulation will be required to complete a virtual simulation as a substitute learning experience.
 - b. The assigned virtual simulation will be aligned to the same outcomes as the missed in-person session and must be completed by the deadline set by faculty.
 - c. The score awarded during the virtual simulation will be the same score and clinical hours applied to the in person simulation experience. So for example, if you get a 75% on the virtual simulation, this grade would be applied to your score in canvas. Failure to complete the assigned virtual simulation by the deadline will result in a zero for the simulation and no clinical hours will be counted.
 - d. Only one virtual simulation per quarter per student will be allowed for make up.
3. Consequences for Multiple Absences:

Students who miss more than one simulation during the course will be subject to the following process:

 - a. A required meeting with the faculty and the School Lead to discuss barriers to attendance and create a remediation plan.
 - b. Risk of course failure if absences exceed the number permitted by the program's attendance policy.
4. Professionalism: Attendance and punctuality are key components of professional behavior in nursing. Unexcused absences or tardiness will be documented and may affect the student's evaluation under the "Professional Behaviors" section of the clinical evaluation form.

Note: This policy is aligned with the program's commitment to student success and patient safety, ensuring all students demonstrate competency in essential nursing skills. Students are encouraged to communicate openly with their faculty regarding challenges and seek support as needed to maintain attendance and meet course requirements.

Updated 6.11.2025

Grade Appeal Procedure

The nursing program complies with the grade appeal process of Clover Park Technical College, which can be found at <https://www.cptc.edu/student-concern-faq>.

Extra Credit: There is no extra credit offered in any nursing program course.

Graduation

Once students have successfully completed the end-of-program student learning outcomes as documented in the Clover Park Technical College Nursing Program curriculum, they are eligible to



graduate from the program. Graduates are strongly encouraged to participate in the Pinning Ceremony and in the general college graduation ceremony. Students MUST submit a “[Degree/Certificate Application](#)” by the deadline set by Clover Park Technical College in order for their degree or certificate to post to their transcripts prior to being eligible for WA State PN or RN licensure. Information on this process is given to students in their final quarter of the program.

Academic Withdrawal and Readmission

Students will be given the opportunity to re-enter the program so long as they were not dismissed due to an unprofessional behavior. Other situations such as medical reasons, family reasons or academic failure are acceptable for returning to the program. **Students will be given the opportunity to apply for a spot in the next cohort.** If too much time has passed since the student began the program, a student may need to show competence of skills in previous quarters to re-enter.

Program Dismissal

If a student has been dismissed from the CPTC nursing program because of an unprofessional or egregious behavior, failure to follow a plan of progressive guidance or their Behavioral Contract for performance improvement (See [Progressive Guidance Policy](#)), they will not be eligible to request readmission to the program.

Student Concerns

The nursing program faculty and staff recognize that students may have concerns about a variety of issues on occasion. Following the guidelines listed below will help expedite a resolution:

Instructional Concerns

The Nursing Program will adhere to the Clover Park Technical College academic concern process. Information on the process can be found at here on the [Student Concern Academic Flowchart](#).

Non-Instructional Concerns

1. Direct discussion with a faculty or staff member with whom the student has a grievance.
2. If a resolution cannot be reached, then a discussion with the nursing faculty lead.
3. If a resolution cannot be reached, a meeting can be requested with the Dean of Nursing Programs.
4. If a resolution cannot be reached, a meeting with Dean of Student Success may be requested.

NOTE: While we highly encourage students to use the appropriate chain of command when tackling grievances with faculty, students may always use the A [Better CPTC](#) form to submit an issue formally.

Student Grade Appeal Process

If a student feels their academic failure is due to a lack of the program’s policies and procedures being conducted equitably, the student may appeal their grades following the [Clover Park Technical College Process](#).



Student Dismissal Appeal Process

If a student feels their dismissal from the program was not supported by the CPTC nursing program policies or procedures, they may appeal their dismissal in writing within five days of receipt of their dismissal letter to the Dean of Nursing Programs and Dean of Student Success. Each Dean will review if the dismissal was in accordance with program policies and guidelines. The student must include the following information in their appeal:

1. The factors of which the dismissal was based (Why student was dismissed; what behaviors did you fail to do or meet to result in a dismissal from the program).
2. The factors of which the student is making their appeal (Why the student believes they should be re-instated; what policies and procedures the student believes were not followed).

The student will be notified in writing of the outcome of their appeal. The decision rendered by the Dean of Nursing Programs and Dean of Student Success and applicable nursing faculty will be considered the final decision.

If the dismissal, or the appealed dismissal, is upheld, it is the student's responsibility to withdraw from all classes as soon as possible.

Additional information about Clover Park's complaint processes can be found here at [Students Concerns/Academic Appeal](#).

Testing Procedures and Expectations

Testing Guidelines

- Individual Work: Quizzes, tests, and exams assess individual knowledge. Unauthorized collaboration is cheating per CPTC policy.
- Personal Items: Leave backpacks, handbags, and cellphones at the front or sides of the room. Necessary supplies (scratch paper, white boards, calculators) are provided.
- Materials & Confidentiality: No study materials are allowed during exams. Exam content must remain confidential—no sharing online or discussing.
- Computer Use: Use computers solely for the exam; no tampering allowed.
- No Outside Help: Do not seek help during exams via any method, including during breaks.
- Behavior: Disruptive behavior is prohibited.

Classroom Testing:

- Exams have a designated time; late arrivals receive time at the instructor's discretion.
- If you cannot take a scheduled exam, notify your instructor via email and schedule a makeup. For planned absences, arrange the exam 2-3 days prior; for emergencies, within 7 days.
- Tests may only be reviewed after all students have completed them (see [Testing Policy](#)).

Standardized Testing:

- Quarterly proctored exams (on-site or at-home) provide national performance benchmarks.
- Test scores may influence re-entry decisions for students seeking readmission after a withdrawal.



Clinical Site Requirements

When students apply to the program, they must submit proof of the following clinical requirements.

1. Current **American Heart Association Basic Life Support – Health Care Provider** CPR Card. This card must be current throughout your enrollment in the program.
2. Current immunizations – All immunizations must be completed at the time of application to the program.
 - A. **Measles, Mumps, & Rubella (MMR)**
 - a. 2 MMR doses of vaccinations **or**
 - b. Proof of immunity by titer of each of the three components-Rubella, Mumps & Measles. (Lab report required)
 - B. **Varicella (Chicken Pox)**
 - a. 2 doses of the Varicella i. vaccinations **or**
 - b. Positive antibody titer (lab report required)
 - C. **Hepatitis B**
 - a. 2-3 vaccinations **and**
 - b. Positive HepB sAB antibody titer (lab report required)
 - D. **TB Skin Test (2 Step) Provide one of the following:**
 - a. Negative 2 step test (2 separate tests done 1-3 weeks apart) within the past 12 months (you must show placement date and read date for both of the 2 steps)
 - b. **Or** Past negative 2 step test PLUS all subsequent annuals (latest test must have been done with the past 12 months) or
 - c. If positive results, clear Chest X-Ray report within the past 3 years and a current year symptom-free report from your healthcare provider or
 - d. Negative QuantiFERON Gold Blood test. You must submit a copy of the laboratory report to meet this requirement.
 - E. **Tetanus, Diphtheria & Pertussis (TDaP)**
 - a. There must be documentation of a TDaP vaccination. If the TDaP vaccine was administered more than 10 years ago, you must also submit a recent TD booster.
 - F. **Influenza**
 - a. Submit documentation of a seasonal flu shot administered after October of the current year.
 - G. **COVID**
 - a. Clinical sites now require the student to be fully vaccinated with the COVID vaccine. **Fully vaccinated means completion of vaccine and a period of two weeks has passed after the last dose of the vaccine.**
3. Each student nurse will be given a list of required immunizations during the application process.
4. Proof of compliance is required before students are eligible to begin the program.
5. A complete immunization record is required for the student clinical passport. Students should keep a personal copy of all immunization records and not request copies from the nursing program office during the program or after graduation.



6. Updated proof of current immunizations is required yearly.
7. Proof of Personal Health Insurance and/or “Student Injury Only Insurance Plan”.
8. Site Specific Documentation will be collected as needed.
9. Drug screening results (if applicable)
10. Accommodation documentation must be updated quarterly and provided to each instructor and/or clinical site prior to asking for implementation of accommodation.
11. Release of Information
 - a. Students must complete a **Consent for Release of Information** ([Appendix A](#)) to allow the program to submit required clinical onboarding documents and information to the clinical partners for the purpose of health screening and security clearance. Information that will be released includes, but is not limited to: immunization status, background check results, personal demographic and contact information, and proof of training completion compliance (i.e. CPR).
12. Background check
 - a. All students must complete the Department of Social and Health Services (DSHS) background check AND the Washington State Patrol Background check. Long term care facilities are required to run the DSHS background check on students. Disqualifying crimes for long term care can be found at: [DSHS WA](https://www.dshs.wa.gov/sesa/background-check-central-unit/disqualifying-list-crimes-and-negative-actions) (<https://www.dshs.wa.gov/sesa/background-check-central-unit/disqualifying-list-crimes-and-negative-actions>). Students must complete an online DSHS application available at: [Fortress WA](https://fortress.wa.gov/dshs/bcs/) (<https://fortress.wa.gov/dshs/bcs/>). Upon completion of the form, the required DSHS code and your date of birth will be forwarded to the facility.
 - b. Returning students must pass a background check through CPNW, which includes Washington State Patrol and possibly a DSHS background check. This will be run yearly while a student is in the program. Additional background checks may be completed as required by clinical partners.

Please Note:

Immunizations, CPR and background check must be current, up-to-date, and not expired during the entire time you are in the program. If the student does not maintain current documentation, the student will not be allowed to participate in clinical experiences, which may result in a failing grade for that clinical course.

The only acceptable CPR course is Basic Life Support for HealthCare Provider approved by the American Heart Association. Students will not be allowed to attend clinical without a valid, current and approved CPR card, and up-to-date immunizations (including a current PPD Test).

Clinical Guidelines

- All clinical assignments are coordinated by the CPTC Nursing Clinical Placement Coordinator. Students must not contact facilities directly or alter schedules; failure to comply may result in clinical failure.

During Clinical Rotations:



1. Patient assignments are determined by the clinical instructor and facility supervisor.
2. Faculty oversee and evaluate student performance through scheduled meetings (pre-, mid-, and post-rotation).
3. Clinical dates and times may change without prior notice.
4. Adhere to appearance requirements (name tag, uniform) as listed on CANVAS.
5. Assignments may involve travel up to 50 miles and include shifts from 5:45 a.m. to 11:00 p.m.
6. Schedule changes require approval from the program dean.
7. Full participation in unit activities is required; non-clinical homework is prohibited during rotations.
8. Attendance at pre- and post-conferences is mandatory.
9. Students must manage their own lunch; leaving the facility requires instructor approval.
10. Tobacco use is prohibited and may lead to removal and failure.
11. Personal items are at your own risk as no lockers are provided; label items clearly.
12. Cell phones and personal electronics are prohibited on the floor without instructor approval.
13. Clinical schedules adhere to school holidays and closures.



Medication Administration

The administration of medications in a patient care setting is a fundamental role of the nurse. The Clover Park Technical College Nursing Program is committed to the education of its students to safely and properly administer medications in the clinical practice setting.

Students must demonstrate competency in laboratory setting before performing skill on live patient. The role of nursing instructor on clinical site is to provide direct and/or indirect supervision of students in all clinical activities and to ensure patient safety.

Prior to administration of any medication, students are instructed throughout the program in theory, lab and clinical/simulation rotations on the following principles of medication administration:

- 1) Complete a drug profile for *each* medication to be administered that includes the following information:
 - a. generic and trade name of drug
 - b. classification of the drug
 - c. action of the drug
 - d. side effects
 - e. drug interactions
 - f. nursing implications
 - g. client teaching
- 2) Correct reading and verification of the transcription of doctor's orders by comparing the MAR to the original doctor's order prior to preparation or administration of medications.
- 3) Check for and verify client allergies.
- 4) Obtain a current set of vital signs (i.e. blood pressure and pulse if giving lopressor) and pertinent laboratory tests available (i.e. blood sugars if giving Insulin, etc.).
- 5) Utilize the 3-safety checks when preparing medications for administration.
- 6) Utilize the 5-rights of medication administration for each medication prepared and given to a client. (You should be able to recite the 5-rights if asked).
- 7) Utilize the 3-safety checks to correctly identify the client by asking client to state his/her name, date of birth, and comparing the medical records number on the name band to the MAR each time before administration. In Geriatrics, verification will be made with staff who knows client. In clinics ask for date of birth with name.
- 8) Demonstrate the ability to calculate medication doses.
- 9) Accurately prepare injections choosing the correct syringe and needle size for the age, condition, and selected method and site.
- 10) Safe use of Automated Drug Dispensing Services (ADDD) as outlined in WAC 246-945-450, such as Pyxis, and other medication dispensing systems. This may be in combination with appropriate training at the varying clinical sites.
- 11) Performs client teaching for each medication, as requested.
- 12) Remain at the bedside while client takes medications.
- 13) Be supervised at all times while providing medications.
- 14) Document medications immediately following administration on MAR and applicable chart forms according to facility policy.
- 15) Make pertinent observations after medication administration (i.e. effectiveness of pain medication) with appropriate follow-up documentation.



Students Errors and Alleged Diversion

In the event of a medication error, a near miss involving medication administration, or an alleged drug diversion by a student nurse, the policy on “Reporting Clinical Errors, Near Misses, and Just Culture” will be followed. See [Clinical Error and Near Miss Reporting Policy](#).

Nurse Technician

Per WAC 246-840-(840-905), students are able to obtain a position as a nurse technician after satisfactory completion of at least one academic term of a nursing program.

To be eligible for employment as a nursing technician a student must meet the following criteria:

- (1) Satisfactory completion of at least one academic term (quarter or semester) of a nursing program approved by the commission. The term must have included a clinical component.
- (2) Currently enrolled in a nursing commission approved program will be considered to include:
 - (a) All periods of regularly planned educational programs and all school scheduled vacations and holidays;
 - (b) Thirty days after graduation from an approved program; or
 - (c) Sixty days after graduation if the student has received a determination from the secretary that there is good cause to continue the registration period.
 - (d) Current enrollment does not include:
 - 1) Leaves of absence or withdrawal, temporary or permanent, from the nursing educational program.
 - 2) Students who are awaiting the opportunity to reenroll in nursing courses.

Infectious Disease

Nursing is a dangerous profession. Risks include, but are not limited to HIV/AIDS, Hepatitis B & C, Tuberculosis, Influenza, C-differential, Staphylococcus, Streptococcus and other viral or bacterial pathogens. The goal is to accept the risk and then train to minimize risk. Nevertheless, risks remain. A student must be willing to accept the risks. Healthcare personnel will not be excused from caring for a patient with a communicable disease on their own request. Healthcare workers who may be immunosuppressed or have a clinical condition, which may confer an increased risk should provide a written statement to that effect from their private physician.

Students may be required to care for patients who are unidentified carriers of infectious diseases. Therefore, to minimize exposure to pathogens, students must follow the universal precautions as currently recommended and expected when taking care of patients at the bedside.

Nursing Physical/Functional Job Requirements per Industry Standards

Nurses have expectations that must be adhered to in order to perform the job as a nurse. The following are the physical/functional requirements expected by the students at CPTC to perform as a student nurse. The percent (%) equals the amount of time the nurse is expected to perform these skills:

Requirement	Frequency	Percentage of time
Posture/movement/balancing	Continuously	66-100%



<i>Requirement</i>	<i>Frequency</i>	<i>Percentage of time</i>
Hand/finger dexterity	Continuously	66-100%
Eye/hand coordination	Continuously	66-100%
Reaching/grasping (below shoulder level)	Continuously	66-100%
Repetitive motions (substantial movement of wrists, hands, fingers)	Continuously	66-100%
Standing/walking	Continuously	66-100%
Hearing/seeing/smelling/talking	Continuously	66-100%
Contact with physician/patient/family	Continuously	66-100%
High attention to detail/mental focus	Continuously	66-100%
Noise	Continuously	66-100%
Stringent hygiene standards	Continuously	66-100%
Fast pace/high stress environment	Frequently	34-65%
Crouching/crawling/kneeling/squatting	Frequently	34-65%
Pushing/pulling (10-30 pounds)	Frequently	34-65%
Day/night/weekend/flexible shifts	Frequently	34-65%
Exposure to blood-borne and other pathogens	Frequently	34-65%
Chemical hazards	Frequently	34-65%
Climbing stairs	Occasionally	1-33%
Reaching/grasping (overhead/extension)	Occasionally	1-33%
Sitting	Occasionally	1-33%
Stooping (bend at waist)	Occasionally	1-33%
Twisting (back/neck/waist/knees)	Occasionally	1-33%
Acute medical situations	Occasionally	1-33%
Frequent training/retraining	Frequently	66-100%
Management of people/resources	Occasionally	1-33%
On-call/overtime/shift reduced or cut	Occasionally	1-33%
Regular travel between facilities	Occasionally	1-33%
Mechanical hazards	Occasionally	1-33%
Electrical hazards	Occasionally	1-33%
Fumes/odors/gases/mist	Occasionally	1-33%
Temperature extremes (hot/cold)	Occasionally	1-33%
Inside/outside environmental conditions	Occasionally	1-33%

CPTC Nursing Program Policies

AI Policy

Purpose & Scope

This policy outlines the expectations, permissions, and responsibilities for students using generative AI tools (e.g., ChatGPT, Bard, Claude, GitHub Copilot) in coursework, assessments, and other academic tasks. It aims to strike a balance between academic integrity, learning objectives, transparency, and student creativity and innovation.

This policy applies to:

- All students enrolled in CPTC Nursing courses
- All assignments, exams, projects, papers, presentations, digital media, code, and other student work
- Any generative AI tool, whether text, image, audio, or multi-modal

Definitions

- **Generative AI / AI tool:** a system that can generate novel content (text, code, image, video, audio) in response to prompts, including large language models, code assistants, text-to-image systems, etc.
- **AI-assisted content:** content (a portion or transformation) created or significantly influenced by an AI tool.
- **Student submission / original work:** the final deliverable (or draft) turned in for grading or evaluation, excluding clearly acknowledged AI contributions.

Permissible Uses (When allowed)

	Level of AI Use	Full Description	Disclosure Requirements
0	NO AI Use	This assessment is completed entirely without AI assistance. AI must not be used at any point during the assessment. This level ensures that the student relies solely on their own knowledge and understanding, and skills	No AI disclosure required May require an academic honesty pledge. AI was not used
1	AI-Assisted Idea generation and structuring	No AI content is allowed in the final submission. AI can be used in the assessment for brainstorming, creating structures, and generating ideas for improving work	AI disclosure statement must be included, disclosing how AI was used. Links to AI chats may be required with the final submission
2	AI-Assisted Editing	No new content can be created using AI. AI can be used to make improvements to the clarity or quality of student-created work to improve the final output	AI disclosure statement must be included, disclosing how AI was used.

			Links to AI chats may be required with the final submission
3	AI for Specified Task Completion	AI is used to complete certain elements of the task, as specified by the instructor. This level requires critical engagement with AI-generated content and evaluation of its output. You are responsible for providing human oversight and evaluation of all AI-generated content	All AI-created content must be cited using proper APA format. Links to AI chats may be required with the final submission
4	Full AI Use with Human Oversight	You may use AI throughout your assessment to support your own work in any way you deem necessary. AI should be a “co-pilot” to enhance human creativity. You are responsible for providing human oversight and evaluation of all AI-generated content.	You must cite the use of AI using proper APA format. Links to AI chats may be required with the final submission

Table 1: Adapted by Vera Cubero for the North Carolina Department of Public Instruction (NCDPI) from the work of Dr. Leon Furze, Dr. Mike Perkins, Dr. Jasper Roe FHEA, & Dr. Jason Mcvaugh [Link to Original Work](#) Creative Commons Licensed BY (attribution) NC (Non-Commercial) SA (Share Alike) To remix this for your use case, you may make an editable copy, using this [TEMPLATE LINK](#).

- Instructors can set the acceptable use level for each assignment, as long as it is stated in the syllabus or instructions.
- **Unless otherwise stated within the assignment, all submissions will fall under level 2 on the permissible use chart.**

Disclosure, Attribution, & Transparency

Whenever AI is used (even in part), the student must:

1. **Disclose** which part(s) of the work were generated or assisted by AI, and how AI was used.
2. **Cite** the AI tool. Use the following link to the APA site for AI citation to guide your work: <https://apastyle.apa.org/blog/cite-generative-ai-references> Example of in-text, parenthetical citation (ChatGPT 1, 2025), and for a second use in the assignment (ChatGPT 2, 2025), and so on.
3. Include a Works Cited or References page in APA format showing prompts used and revisions made. Students are responsible for verifying **and correcting** any factual, logical, or grammatical errors.

Examples of attribution language may include:

“Portions of this text were generated with ChatGPT (OpenAI). I revised and edited the output to reflect my own analysis and style.”

Prohibited Uses

Unless explicitly permitted, students must **not** do the following:

- Submit AI-generated content (text, code, images, etc.) as their own work without disclosure
- Use AI tools during closed-book exams or assessments that do not permit external assistance



- Use AI to fabricate (make up) data, references, citations, or sources Input personally identifiable, sensitive, or private data (e.g., patient records, peers' personal info) into AI tools
- Use AI in ways that violate copyright, privacy, or institutional policies.

Misuse & Consequences

- Violations of this policy may be considered for breaches of academic integrity/plagiarism and handled under existing misconduct procedures.
- Possible consequences include deduction of grade, assignment failure, course failure, or further disciplinary action, depending on severity, determined on a case-by-case basis.
- Heavy use of AI could lead to failure of NCLEX examination, and the program will not be held responsible.
- Instructors may require the student to resubmit work without AI assistance, provide drafts or logs, or meet for a review.

Faculty use of AI

Faculty may use generative AI tools to support instruction, create learning materials, or improve feedback provided to students. When AI is used, instructors are responsible for reviewing and verifying all AI-generated content for accuracy, tone, and alignment with course outcomes. Faculty will avoid entering student names, grades, or personal information into AI systems. Instructors are encouraged to disclose in their syllabi or assignment guidelines how AI tools are used to support course design or feedback, so students understand the role of AI in their learning environment. Each instructor may determine the appropriate AI use level for assignments, provided that expectations are communicated clearly to students.

Revised: 11.23.25

CLOVER PARK
TECHNICAL COLLEGE
ADA Accommodations Policy

The nursing program follows the CPTC policy on disability resources and accommodation. CPTC wants to help all students succeed. Disability Resources for Students (DRS) is dedicated to ensuring access and inclusion to academic programs and college-sponsored events for students at Clover Park Technical College. DRS serves students with temporary and/or permanent physical, health, learning, sensory and/or psychological disabilities. Access and inclusion is a collaborative effort.

Procedure

It is important for students requesting accommodation to do so in a timely manner as some requests can take several weeks to arrange. Students requesting services for the first time are required to meet with CPTC's DRS Coordinator 253-589-5548 or [Disability Resources](mailto:disabilityresources@cptc.edu) (disabilityresources@cptc.edu). Students will need to provide documentation from a qualified professional verifying the existence of a disability and its potential impact on academic success. Accommodations are determined on an individual basis based on the documentation provided. Possible accommodations include but are not limited to:

- Exam accommodations
 - Alternatively formatted class materials such as textbooks in Word docs, PDFs, MP3, Braille and/or large print
 - Sign Language interpreting
 - Alternative classroom furnishing
1. Students are responsible for providing documentation of accommodation need to each instructor for each course they are requesting the accommodation at the beginning of each quarter they are enrolled in or as soon as the accommodation letter is completed by the DRS Coordinator.
 2. Accommodation documentation must be updated quarterly and provided to each instructor prior to asking for implementation of accommodation.
 3. Please be aware that accommodations are not retroactive

The complete Clover Park Technical College Policies and Procedures for Reasonable Accommodations for Students with Disabilities under ADA/504 is available through the DRS coordinator

Please note accommodations offered while in the program may or may not be offered by NCLEX administrators. Approval for NCLEX accommodation should be initiated well in advance as this could significantly delay taking of the NCLEX.

Revised 4.6.2020, Reviewed 1.6.2020, 4.6.2020, 7.6.2020, 9.28.2020, 1.4.2021, 4.4.2021, 7.6.2021, 9/18/2022, 08/21/2023, 08/16/2024, 03/16/2025



Clover Park Technical College serves a very diverse population. The nursing program experiences and encourages diversity within the program.

1. Beginning in school year 24 – 25, students will be admitted based on a holistic admissions process developed by the faculty. Information about this process will be available at least 90 before the application cycle opens.
2. Up to 60 PN students are admitted in the fall and spring of each year.
3. Up to 24 LPN-RN students are admitted in the fall and spring of each year.
4. Students being admitted to the program must attend a mandatory orientation, which is held prior to the start of the program.
5. Students seeking admission by transfer from another approved nursing education program, or readmission for completion of the program, shall meet the equivalent of the program's current standards.

Procedure

Please refer to website for further information [Nursing Program](#)
(<http://www.cptc.edu/programs/nursing>)

Questions? Contact: [Nursing Program Contact](#) (nursingprogram@cptc.edu)

Reviewed 1.6.2020, 4.6.2020, 7.6.2020, 9.28.2020, 1.4.2021, 4.4.2021, 7.6.2021, 9.18.2022,
03/16/2025

Revised 4.24.2020, 08/21/2023, 08/16/2024



ATI Assessment, Remediation, and Professional Growth Policy

Purpose and Philosophy

The purpose of this policy is to establish consistent expectations for ATI Content Mastery Series (CMS) assessments, remediation, student accountability, and NCLEX preparation across the Practical Nursing and LPN-to-RN programs.

The Nursing Department views ATI assessments as formative learning tools designed to identify strengths and opportunities for improvement. ATI assessments are not intended to function as high-stakes barriers to progression. The department believes that safe nursing practice requires self-reflection, accountability, continuous improvement, and the ability to identify and address knowledge gaps throughout one's career.

ATI assessment activities shall comprise no more than 10% of any course grade unless otherwise approved by the Nursing Department.

Scope

This policy applies to all nursing students enrolled in courses utilizing ATI Content Mastery Series assessments within the PN and LPN-to-RN programs.

Definitions

ATI CMS Assessment: Standardized ATI Content Mastery Series assessment.

Focused Review: ATI-generated individualized review plan.

Personalized Success Plan: Required remediation assignment completed after CMS testing.

Level 3: Exceeds standard.

Level 2: Meets standard.

Level 1: Below standard.

Below Level 1: Intensive intervention recommended.

Remediation: Structured learning activities designed to strengthen knowledge and clinical judgment.

Assessment Structure

Students may complete Practice Assessment A, Practice Assessment B, and a CMS Proctored Assessment as part of any course within the Clover Park Technical College PN or LPN-RN curriculum.

Practice Assessment A:

- Baseline assessment
- Identifies strengths and weaknesses
- Generates Focused Review content

Practice Assessment B:



- Reinforces learning
- Evaluates remediation efforts
- Supports readiness for the proctored assessment

CMS Proctored Assessment:

- Benchmark assessment
- Identifies areas of content mastery and learning needs
- Guides individualized remediation planning

Students are expected to participate honestly and independently in all ATI activities.

ATI Proficiency Levels

Level 3 – Exceeds Standard

Level 2 – Meets Standard

Level 1 – Below Standard

Below Level 1 – Intensive Intervention Recommended

ATI proficiency levels are one indicator of readiness and shall be interpreted alongside course performance, simulation performance, clinical evaluations, and faculty assessment.

Universal Remediation Requirement

All students must complete remediation following any initial CMS proctored assessment regardless of proficiency level.

Required components for all remediation:

1. Review ATI Individual Performance Profile (if generated)
2. Complete ATI Student Assessment Performance Reflection
3. Complete ATI Personalized Success Plan
4. Complete required remediation activities (as indicated by course)
5. Submit documentation by established deadlines

ATI Personalized Success Plan

The Personalized Success Plan is the primary remediation assignment.

Required elements:

- Assessment analysis
- Identification of strengths
- Identification of ATI Topics to Review
- Reflection on preparation strategies
- Clinical application of identified concepts
- SMART goal development
- Future study plan



- Resource selection and rationale

Students are expected to create realistic plans demonstrating ownership of learning and progression toward Level 2 proficiency or higher in all content areas.

Tiered Remediation Requirements

Level 3:

1. Review ATI Individual Performance Profile for topics to review and Focused Review content (if generated)
2. Complete ATI Student Assessment Performance Reflection
3. Complete ATI Personalized Success Plan

Level 2:

1. Review ATI Individual Performance Profile and Focused Review content for topics to review
2. Complete ATI Student Assessment Performance Reflection
3. Complete one approved remediation activity (as indicated by course)
4. Complete ATI Personalized Success Plan

Total time spent in remediation activities should reflect approximately 2 hours of content engagement. Students should be prepared to produce evidence of ATI engagement and remediation activities if requested by faculty.

Level 1:

1. Review ATI Individual Performance Profile and Focused Review content for topics to review
2. Complete ATI Student Assessment Performance Reflection
3. Complete two approved remediation activities (as indicated by course)
4. Complete ATI Personalized Success Plan
5. Schedule and participate in a meeting with faculty to review performance and plans for future improvement

Total time spent in remediation activities should reflect approximately 3 hours of content engagement. Students should be prepared to produce evidence of ATI engagement and remediation activities if requested by faculty.

Below Level 1:

1. Review ATI Individual Performance Profile and Focused Review content for topics to review
2. Complete ATI Student Assessment Performance Reflection
3. Complete two approved remediation activities (as indicated by course)
4. Complete ATI Personalized Success Plan
5. Schedule and participate in a meeting with faculty to review performance and plans for future improvement

Total time spent in remediation activities should reflect approximately 4 hours of content engagement. Students should be prepared to produce evidence of ATI engagement and remediation activities if requested by faculty.



Approved Remediation Activities

ATI Resources:

- Focused Review Content Areas
- Review Modules
- ATI Pulse Recommended Tutorials
- Active Learning Templates
- Flashcard Hub

Practice Questions:

- BoardVitals (available in Q3 for PNs, Q5 for RNs)
- ATI Learning System quizzes
- Nurse Logic
- Claire AI Guided Review

Applied Learning Generated Through Claire AI and Faculty Resources:

- Case studies
- Concept maps
- Clinical judgment exercises
- Faculty-developed assignments (if available per course)

Faculty may require specific deliverables depending upon course needs.

Retesting Procedures

Students scoring Level 1 or Below Level 1 are required to retest after successful completion of remediation.

Retesting requirements:

- All assigned remediation must be completed prior to retesting.
- Documentation of remediation and all remediation assignments must be submitted and approved prior to retesting.
- Faculty meeting may be required.
- Retesting is intended to support growth and mastery.

The maximum attainable ATI course score following a retake will be capped at the Level 2 benchmark equivalent unless otherwise specified in course materials.

Early Alert and Student Success Intervention

Students may be referred for additional support when they:

- Score Level 1 or Below Level 1 on multiple CMS assessments
- Demonstrate repeated ATI performance concerns
- Fail to complete remediation



Possible interventions:

- Faculty mentoring
- Academic coaching
- Tutoring
- Study strategy development
- Individualized success plans
- Additional remediation or other intervention as decided by the faculty

Student Responsibilities

Students are responsible for:

- Completing ATI assessments honestly and independently, per CPTC and Nursing department academic integrity expectations
- Submitting practice assessments by due dates
- Completing required remediation fully and submitting it by the due date
- Maintaining remediation documentation
- Participating actively in remediation activities and faculty-directed interventions
- Seeking assistance when needed

Faculty Responsibilities

Faculty are responsible for:

- Communicating ATI expectations in course syllabi and during in-class sessions
- Applying the policy consistently
- Reviewing remediation when required
- Monitoring ATI outcomes per course specifications
- Referring students for support when indicated
- Protecting ATI test security

Academic Integrity and Test Security

ATI assessments are subject to CPTC Academic Integrity policies, Nursing Department testing policies, and ATI security requirements.

Students may not photograph, record, reproduce, distribute, share, or otherwise disclose ATI testing content. Violations may result in disciplinary action and ATI reporting.

Documentation Requirements

Evidence of remediation may include:

- ATI reports
- Focused Review completion
- Success Plan completion
- Quiz results
- Active Learning Templates
- Faculty-assigned deliverables



Faculty may audit remediation documentation at any time.

Continuous Quality Improvement

The Nursing Department shall annually review:

- ATI outcomes
- Remediation effectiveness
- Student success metrics
- NCLEX outcomes
- Faculty feedback
- Student feedback

Data will be used to revise curriculum, remediation processes, and departmental policies.

Implementation

This policy applies to both the Practical Nursing and LPN-to-RN programs and may be revised through departmental review and approval.

Appendices include:

K. ATI Personalized Success Plan

Created: 07/13/2026

Revised:

Reviewed: 08/10/2026



Attendance Policy

Absences and/or tardiness is not acceptable in the workplace and does not demonstrate professional behavior. Attendance is required for **all** clinical, simulation and lab days. Any absence must be approved by the instructor and may jeopardize progression in the program if this results in instructor being unable to adequately evaluate the student. Any clinical or simulation absences in the last week of the quarter must be approved by the nursing program dean and may require documentation. Extended absence of more than one day per quarter must also be approved by the nursing programs dean and may require written documentation. Absences of more than one day may require extending enrollment time in the program.

Procedure

Failure to adhere to the following guidelines could result in clinical failure:

1. In the event of illness, students must notify the clinical instructor 1 hour before the shift.
2. For community clinic rotations only, in the event of illness, the student should call the community instructor before their shift begins to report an absence at least 1 hour before shift.
3. Absences, including tardiness, may jeopardize progression in or successful completion of the program.
4. Unexcused absences may result in failure of the clinical course- Unexcused absences include
 - a. Tardy/late without prior notification of instructor
 - b. No call/no show to clinical, simulation or lab
 - c. Not in full uniform including but not limited to program appropriate, CPTC uniform patch, and ID badge
 - d. Screening management system not complete and up to date
 - e. Not checking schedule and knowing location of rotation prior to day of rotation

See course syllabi for specific course/facility objectives and student evaluations.

Revised 4.13.2020, 9.27.2022, 08/16/2024

Reviewed 1.13.2020, 4.13.2020, 7.13.2020, 10.5.2020, 1.11.2021, 4.11.2021, 7.13.2021, 03/16/2025



Clinical Practice Expectations Policy and Preceptorship

Clinical and Direct Patient Care Experiences

Faculty plan, oversee, and evaluate clinical experiences based on program outcomes, student preparation, and skill level. Students must meet WAC 246-840-531 clinical hour requirements:

- Licensed practical nursing: at least 300 hours
- Associate degree nursing: at least 500 hours

Procedure

Clinical Rotations

Students provide care in long-term, acute, and community settings, emphasizing safe practice, the nursing process, communication, documentation, and client teaching while working as part of a healthcare team under CPTC Nursing Program principles.

Faculty-to-Student Ratio

- Direct patient care: 1 faculty per 10 students
- Observational settings: 1 faculty per 15 students
- Lower ratios may be required for initial or complex learning and patient safety.

Preceptors (WAC 246-840-533)

- Each preceptor (with a valid license and at least one year experience in that specialty) is assigned to one student only and must not be a relative or friend.
- Interdisciplinary preceptors may also be used with proper orientation on course and student objectives.
- Preceptors may not be a member of the student's immediate family, as defined in RCW 42.17A.005(27); or have a financial, business, or professional relationship that is in conflict with the proper discharge of the preceptor's duties to impartially supervise and evaluate the nurse.
- Faculty supervise and evaluate students by meeting with mentors/preceptors and students before, mid-way, and after the clinical experience.

Revised 4.24.2020, 9.18.2020, 3/15/2022, 08/21/2023, 03/16/2025, 07/25/2025

Reviewed 1.13.2020, 4.13.2020, 7.13.2020, 10.5.2020, 1.11.2021, 4.11.2021, 7.13.2021, 9.18.2022, 08/16/2024



Distance Learning Guidelines

Distance learning—whether during emergencies or as part of hybrid education—must meet established learning outcomes and course quality. It is delivered via current software (e.g., Zoom, Microsoft Teams) with live lectures that include student-faculty interaction, though recordings may be provided for review. Assessments and outcomes mirror those of face-to-face classes.

Quality Assurance:

- Nursing course syllabi and curricula are reviewed annually by the curriculum committee, incorporating student and faculty feedback on both in-person and distance formats.
- Faculty observations occur at least annually (with additional quarterly observations for tenure-track faculty) using the CPTC Online Classroom Observation Assessment form.
- The Nursing Program Dean reviews these observations along with SETL feedback with each faculty member.

Security & Recording:

- Distance learning sessions require a waiting room and password to ensure only enrolled students and invited guests access the class.
- Recordings, shared via CANVAS, are restricted to the class section and must not include identifiable student information when shared externally.
- The syllabus must state that participation via video or voice constitutes consent to recording; students may use chat to avoid recording if desired.
- Proctored exams are conducted on campus to ensure testing security.

Support:

- Faculty and students receive training and support through Zoom and Microsoft Teams resources, the Learning Resource Center, and college IT assistance.
- The college IT department maintains the distance learning software platform.

Reference: WAC 246-840-546 “Distance learning nursing education course or courses offered by approved nursing programs” [Link](#).

Reviewed 1.27.2020, 4.27.2020, 7.20.2020, 10.19.2020, 1.25.2021, 4.25.2021, 7.20.2021, 08/16/2024

Revised 8.2020, 9.18.2022, 08/21/2023, 03/16/2025



Classroom Dress & Appearance

- Represent the nursing profession with neat, well-maintained attire.
- Avoid clothing that reveals excessive skin (e.g., cleavage, waist, gluteal area, undergarments) or displays offensive language/references.

Lab/Simulation/Clinical Dress

- Wear the complete CPTC uniform during all program activities.
 - PN students: Grape; LPN-RN students: Pewter.
- Uniforms must be used exclusively for nursing activities and maintained properly.
- Non-compliance may result in dismissal and absences.

Uniform Appearance Requirements

- Uniform Top: Must have the CPTC logo on the left shoulder; clean, pressed, and properly fitting.
- Patches: applied with fabric adhesive or sown on
- Pants: Fit like business attire; do not touch the floor.
- Undergarments: Must not be visible.
- Optional Jacket: Lab/warming jacket as needed.
- Hats (lab and simulation): at the instructor's discretion for cold temperatures.
- Hair: Should be tied back and above the shoulders to ensure safety in healthcare environment.
- Men's Grooming: facial hair as appropriate for FIT testing.
- Fingernails: Clean, trimmed ($\leq \frac{1}{4}$ inch past fingertips); nail polish limited to clear, French, or neutral shades; no artificial nails.
- Jewelry: Limited to a watch with a second hand, one wedding ring, and stud earrings (up to 6 mm); facial piercings limited to studs; all other visible piercings must be removed during clinical/lab.
- Identification: Must wear a CPTC photo ID badge at all times.
- Shoes: closed-toe, with socks, and slip-resistant.
- Scents & Hygiene: No strong scents; scent free environment.
- Other: No gum; required items include a stethoscope and a watch with a second hand.

Revised 3.7.19, 9.18.2022, 03/16/2025, 07/13/2026

Reviewed 1.27.2020, 4.27.2020, 7.20.2020, 10.19.2020, 1.25.2021, 4.25.2021, 7.20.2021, 08/21/2023, 08/16/2024, 08/10/2026

**Purpose:**

Ensure the safety of students and patients in all CPTC Nursing Program learning environments.

Procedure:

1. If there is reasonable suspicion a student is under the influence in class or clinical settings, an additional drug/alcohol screening may be conducted.
2. Refusal to test may result in dismissal.
3. Dismissed students cannot reapply unless they successfully complete a drug/alcohol rehabilitation program, with readmission subject to clinical agency placement.
4. Verified positive tests for alcohol, illegal drugs, or abuse of prescription/OTC medications will allow the student an opportunity to challenge results; if confirmed without medical justification, the student will be excluded from clinical activities and unable to meet program objectives.
5. A readmitted student who fails a subsequent test will be dropped and disqualified from readmission.
6. All testing information and related actions will remain confidential and be maintained by the Nursing Program Dean.

Created 9.18.2022

Reviewed 08/21/2023, 08/16/2024, 03/16/2025



Graduation Policy

Only students who have completed all course requirements for their program and all college requirements will be eligible for graduation.

Procedure

Once CPTC transcript evaluator has reviewed student's record, the Nursing Program Dean will review for completion of program requirements, sign and submit required documentation for students to apply for NCLEX exam with the Washington State Board of Nursing.

Revised 1.4.19

Reviewed 1.27.2020, 4.27.20, 7.20.2020, 10.19.2020, 1.25.2021, 4.25.2021, 7.20.2021, 08/21/2023, 08/16/2024, 03/16/2025

**Purpose:**

This policy ensures that all nursing students protect patient privacy and comply with the Health Insurance Portability and Accountability Act (HIPAA). Violations can result in legal, professional, and educational consequences.

Scope:

This policy applies to all nursing students at Clover Park Technical College during classroom, clinical experiences, and any online activities, including use of the Canvas Learning Management System (LMS).

Policy Guidelines:**1. Confidentiality of PHI:**

- **Definition:** Protected Health Information (PHI) includes any individually identifiable health information, in written, electronic, or oral form.
- **Responsibility:** Students must safeguard all PHI encountered during clinical rotations, coursework, or other program-related activities. Do not discuss or disclose patient information outside of authorized educational or clinical settings.

2. Handling and Storage of PHI:

- **Secure Access:** Use secure methods to access and store electronic PHI. Log out of systems when not in use and protect devices with strong passwords.
- **Physical Security:** Do not leave documents containing PHI unattended. Store them in locked or secure locations.

3. Communication and Social Media:

- **Verbal and Written Communication:** Ensure that any discussion or transmission of PHI is conducted only through approved, secure channels.
- **Social Media:** Do not post or share any PHI or identifiable patient information on social media or any public forum.

4. Canvas Learning Management System (LMS):

- **Usage:** The Canvas LMS is provided as a secure platform for course materials, communications, and assignment submissions.
- **Security:** Do not upload or share any PHI on Canvas. Follow CPTC guidelines for handling sensitive information when using the LMS, and ensure that any patient-related content is anonymized or de-identified before posting.
- **Compliance:** Treat all discussions and submissions on Canvas with the same level of confidentiality and professionalism as in other academic and clinical settings.

5. Breach Prevention and Response:

- **Vigilance:** Be aware of potential risks such as unauthorized access, lost devices, or accidental disclosures.
- **Reporting:** Report any suspected or actual breaches of PHI to your clinical instructor and the Nursing Program Dean immediately.
- **Investigation:** If a violation is reported or discovered, a prompt investigation will be conducted.
- **Action:** Appropriate disciplinary, legal, and educational actions will be taken based on the findings of the investigation.

**Legal and Professional Consequences:**

- **Legal Liability:** HIPAA violations may result in civil and criminal penalties under federal law, including significant fines and potential imprisonment.
- **Professional Impact:** Breaches can damage patient trust, compromise CPTC's reputation, and negatively affect your future nursing career.
- **Educational Sanctions:** Violations may lead to disciplinary actions ranging from probation to dismissal from the nursing program.

Student Responsibilities:

- Understand and adhere to all aspects of HIPAA as outlined in this policy and the student handbook.
- Seek clarification or additional training if unsure about handling PHI.
- Maintain a professional attitude in all interactions with patients and during clinical or academic activities.

By complying with this policy, you contribute to the privacy and safety of patients while upholding the highest standards of professional and ethical conduct in nursing practice.

Created: 03/16/2025



Incident Reporting and Tracking Policy

Just Culture Policy and Procedure

Purpose:

Foster a "just culture" that encourages review of errors and near misses to identify root causes and systemic issues, ultimately reducing patient safety errors. This policy complies with WAC 246-840-513.

Definitions:

- **Near Miss:** An event caught just before harm occurred.
- **Error:** An act (omission or commission) that leads or could lead to an unintended result.
 - *Normal Human Error:* Inadvertent actions or lapses; addressed through counseling and discussion.
 - *At Risk Behavior:* Errors made when risk is underestimated; addressed with counseling, supervision, and a success plan.
 - *Reckless Behavior:* Conscious disregard of significant risk; may result in dismissal.
- **Unreasonable Risk of Harm:** Actions below the standard of care that may harm patients, regardless of actual harm.
- **Patient Harm:** Any impairment to a patient's physical, mental, emotional, or sexual well-being, including neglect or abuse.

Policy:

Faculty and students are expected to report all safety issues, errors, and near misses immediately to promote system improvement through learning and accountability without undue blame. Clinical instructors must notify the Nursing Dean within 24 hours of an incident.

Principles of Just Culture:

- Encourage honest reporting of errors and near misses.
- Hold individuals accountable only for actions within their control.
- Support critical analysis, constructive feedback, and continuous quality improvement.

Procedure:

1. Reporting:

- Report events involving patient harm, unreasonable risk, or controlled substance diversion to the commission within 48 hours.
- Maintain an incident log including:
 - Date and nature of the event
 - Names of involved student(s) or faculty
 - Responsible clinical faculty
 - Findings and root cause analysis
 - Corrective actions and remediation plans
- Clinical instructors must report incidents to the Nursing Dean within 24 hours.

2. Follow-Up:

- Use incident data to identify causes, prevent recurrences, enhance student learning, and drive ongoing program improvements.
- Report all errors, near misses, or divergence events to the Washington Board of Nursing within 48 hours.



Faculty and students must use the provided reporting tool (see [Appendix B](#)) and prioritize immediate patient care by notifying the primary RN and physician when necessary.

Reviewed 2.3.2020, 5.4.2020, 7.20.2020, 10.26.2020, 2.1.2021, 5.2.2021, 8.2.2021, 08/16/2024

Revised 9.18.2022, 08/23/2023, 03/16/2025

Leave of Absence (LOA) Policy

A student may request a leave of absence when life circumstances interfere with the student's ability to continue in the program; however, the **student must be passing all enrolled courses at the time of the request of the LOA**. LOA may be requested for life circumstances such as pregnancy, medical condition of self or family, spousal deployment, death of immediate family members or other unexpected occurrence.

Procedure

LOA may be requested one time during the program and may be granted for up to one year.

Request for LOA must be submitted in writing to the CPTC Nursing Program Dean with an explanation of the circumstances leading up to the request.

Students are responsible for contacting the nursing program dean when they are ready to return to school. Students may be required to demonstrate continued competency in skills and knowledge prior to being approved for registration.

Revised 1.7.2019

Reviewed 2.3.2020, 5.4.2020, 7.20.2020, 10.26.2020, 2.1.2021, 5.2.2021, 8.2.2021, 9.18.2022,
08/19/2024, 03/16/2025



Medical Policy for Nursing Students with Health Conditions

Clover Park Technical College Nursing Program Medical Policy for Nursing Students with Health Conditions

Purpose

The purpose of this policy is to ensure the safety of patients, students, faculty, and staff by establishing clear expectations and procedures for nursing students who have medical conditions that may interfere with their ability to safely perform the essential functions of a student nurse. This policy promotes inclusivity, compliance with the Americans with Disabilities Act (ADA), and adherence to the standards of safe clinical practice.

Scope

This policy applies to all applicants and enrolled students in the CPTC Nursing Program and Nursing Assistant Program.

Essential Functions of Student Nurses

All nursing students are expected to demonstrate the ability to:

- Perform safe and effective patient care in classroom, lab, and clinical settings.
- Maintain physical and mental stamina required for clinical shifts (see pages 30-31)
- Demonstrate sound judgment and clinical reasoning.
- Communicate effectively with patients, families, and the healthcare team.
- Adhere to infection control, safety, and professional practice standards.

Criteria for Admission

Health Disclosure

Applicants are not required to disclose specific medical diagnoses.
Applicants must attest that they can meet the essential functions of the program, with or without reasonable accommodation.

Health Clearance

Prior to enrollment, students must submit documentation of required immunizations and health screenings.
If any medical event occurs during the course of the program, students must provide clearance from a licensed healthcare provider to verify their ability to continue to participate in clinical activities.
“Medical event” is defined as any physical or psychological condition, illness, injury, procedure, hospitalization, or significant change in health status that may impact a student’s ability to safely perform essential program or clinical requirements. Includes, but is not limited to, surgeries, pregnancy-related conditions, acute or chronic illness, injuries, infections, changes in medication affecting function, and mental health conditions requiring evaluation or treatment.

Proof of Personal Health Insurance and/or “Student Injury Only Insurance Plan.”

Reasonable Accommodations

Applicants may request accommodations through the college’s Disability Services Resources Office. Accommodations must not compromise patient safety, essential program requirements, or clinical site policies.



Criteria for Students with Medical Conditions During the Program

1. Self-Reporting and Documentation

Students who develop or experience a medical condition that may impair their ability to safely participate in academic or clinical activities are required to notify the Nursing Program Dean and Program Lead prior to returning to classes and/or clinical rotations.

The student must provide documentation from a licensed healthcare provider that includes:

The nature of the limitation(s) (without requiring disclosure of diagnosis).

Recommended restrictions and accommodations.

Clearance or timeline for return to full duties, if applicable.

2. Temporary Restrictions or Absence

If a student's condition temporarily prevents safe participation, the student may be:

Placed on a modified academic or clinical assignment, if possible.

Granted a leave of absence, in accordance with program and institutional policies.

3. Reasonable Accommodations

Accommodations will be determined collaboratively by the Disability Services Office, faculty, and clinical partners.

Examples include:

Adjusted clinical schedules.

Assistive devices or adaptive technology.

Modified classroom or testing environments.

Accommodations will not include waiving essential patient care responsibilities or compromising safety standards.

4. Return to Program/Clinical Clearance

A student returning after a medical event must provide written medical clearance from a licensed healthcare provider verifying ability to resume full or modified participation in the program.

Clearance must confirm the student can meet the essential functions of a student nurse, with or without accommodation.

Ongoing Monitoring and Safety

Faculty and clinical instructors reserve the right to remove a student from the clinical setting if the student demonstrates unsafe practice or inability to perform essential duties due to a medical condition even with reasonable accommodations, in compliance with clinical site policies.

Continued enrollment will be contingent upon the student's ability to meet program requirements safely and consistently.

Nondiscrimination

This policy is implemented in compliance with the Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act, and applicable state and institutional regulations (i.e. Title IX regulations). No student shall be denied admission or continued enrollment solely based on a disability or medical condition.



Limitations of Accommodations

While the program and Disability Services Office will make every effort to provide reasonable accommodations, such accommodations cannot fundamentally alter essential program requirements or clinical competencies, compromise patient safety, or reduce required instructional or clinical hours.

Examples of non-reasonable accommodations include requests that would:

Require frequent absences or extended departures from class, lab, or clinical activities beyond the program's attendance requirements (e.g., routine 30-minute daily or every-other-day absences for treatment or medication).

Exempt a student from essential patient care responsibilities.

Shift essential duties to other students or staff.

Students who are unable to meet required contact hours or essential functions due to medical treatment needs may be advised to request a temporary leave of absence or defer progression until medically cleared to fully participate.



**Medical Release to Return to Lecture/Clinical/Lab/Simulation
Clover Park Technical College Nursing Program**

To be completed by Provider (Physician, Nurse Practitioner, Midwife, or Physician's Assistant)

The above-named student is a nursing student at Clover Park Technical College, enrolled in lecture and clinical/lab/sim courses. Some of these require providing patient care, usually in a hospital, outpatient, or community setting. This care may include (but is not limited to) walking, transferring patients from bed to chair, lifting (without restriction), bending, and may require significant physical activity for up to 12 hours at a time. Based upon your assessment, please complete the release below, sign and date.

FULL RELEASE

_____ The above-named student has been released by the provider named below to return to full duty.

LIGHT/MODIFIED DUTY

_____ The above-named student has been released by the provider named below with the following restrictions/accommodations:

Effective Return Date: _____

My signature indicates that I understand the nature of the work required by the student in lecture/clinical/lab/sim courses, and that my findings are based on my medical assessment of this student's physical capabilities as compared to the essential functions necessary in the lecture/clinical/lab/sim setting. (Refer to list of essential functions/duties)

I AGREE THAT: I have made my provider aware of the nature of activity in the lecture/clinical/lab/sim setting and my provider has signed this form. Further, I agree that the Clover Park Technical College Nursing Program can verify the signature on this form with the above-named provider.

References

Washington Administrative Code (WAC) 246-840-700 through 246-840-710: Standards of Nursing Competency and Conduct, Washington State Board of Nursing.

<https://apps.leg.wa.gov/wac/default.aspx?cite=246-840>

Americans with Disabilities Act (ADA) of 1990, as amended (2008).

U.S. Department of Justice. <https://www.ada.gov>

Section 504 of the Rehabilitation Act of 1973.

U.S. Department of Education, Office for Civil

Rights. <https://www2.ed.gov/about/offices/list/ocr/504faq.html>

Clover Park Technical College Disability Resources Office.

<https://www.cptc.edu/disability-resources>

Revised: 1/13/2026

CLOVER PARK
TECHNICAL COLLEGE

Pregnant Student Guidelines Policy

This policy outlines the guidelines and accommodations available for pregnant students at Clover Park Technical College. It ensures academic success, safety, and protection from harassment while complying with Title IX and relevant federal guidelines.

Reference:

For detailed guidelines, see “Supporting the Academic Success of Pregnant and Parenting Students” by the Department of Education, Office for Civil Rights (June 2013): [Link](#).

Medical Documentation & Academic Assistance

- Pregnant students must provide medical documentation (per Disability Services policies) to be considered for accommodations. All paperwork must be approved by the Nursing Program Dean.
- Students are encouraged to meet with the Dean to plan for academic success.
- Faculty must excuse absences for pregnancy/childbirth as long as a doctor deems them medically necessary, and returning students will resume their prior academic and extracurricular status.
- CPTC Nursing faculty do not require a doctor’s note for attending classes unless a student requests assistance or has a high-risk pregnancy. Instructors may ask about health limitations only if relevant to course requirements and will not demand a doctor’s note unless it is standard for all students.

Harassment

- The Nursing Program enforces zero tolerance for any harassment, particularly toward pregnant students. Harassment that interferes with a student’s ability to benefit from the program is a Title IX violation.

Accommodations

- With proper documentation, students who are pregnant or have given birth within six months are eligible for tailored accommodations based on the nature of the pregnancy, medical needs, and academic program.
- Accommodations may include schedule modifications, classroom adjustments (e.g., larger desks, extra breaks), and alternative options for making up missed work without imposing undue burden.
- Title IX requires that excused absences (with medical approval) be supported by alternatives such as retaking a semester, online credit recovery, or extended program timelines.

Procedure

Student Responsibilities:

Review the Student Pregnancy Policy.

Have a healthcare provider complete the required paperwork if accommodations are needed.



Submit the documentation to the Nursing Program Dean and provide approved letters to instructors.

Update documentation as pregnancy-related needs change.

Request assistance using the [Appendix C](#) - Pregnancy Accommodation Request Form.

Collaborate with instructors to develop an action plan for the semester with clear deadlines and expectations.

Instructor Responsibilities:

Develop an action plan with the student, possibly using an academic contract to track progress.

Occupational Hazards

Pregnant students will not be required to participate in activities involving known occupational hazards, including:

Infectious Diseases:

- a. Keep immunizations current (e.g., Hep B, Influenza, MMR, Varicella).
- b. Adhere to universal precautions and minimize contamination (e.g., changing out of clinical clothes before entering home).

Pharmaceutical Agents and Other Exposures:

- a. Avoid administering agents that can impact fetal development (e.g., antineoplastic agents, specific aerosolized agents, waste anesthetic gases, and certain teratogenic organic solvents).
- b. Modify clinical settings as needed to reduce exposure to ionizing radiation and high alert infectious diseases (e.g., CMV, Parvovirus B19, influenza).

Revised 3.7.2019, 03/16/2025

Reviewed 2.10.2020, 5.11.2020, 7.27.2020, 11.2.2020, 2.8.2021, 5.9.2021, 8.9.2021, 9.18.2022, 08/23/2023, 03/16/2024



Professional Conduct in Virtual Meetings Policy

Purpose

The purpose of this policy is to establish expectations for professional conduct during virtual meetings within the nursing program. Virtual meetings are considered an extension of the clinical and academic learning environment and require the same level of professionalism, engagement, and attention as in-person interactions.

This policy promotes safety, effective communication, and professional behavior consistent with the standards expected of nursing students in clinical practice and healthcare team environments.

Policy Statement

Students participating in Clover Park Technical College nursing programs are expected to engage in virtual meetings in a manner that reflects professional nursing behaviors. Virtual meetings may include, but are not limited to:

- Clinical debriefings
- Academic advising meetings
- Course conferences
- Remediation sessions
- Virtual office hours
- Program meetings or other faculty-scheduled interactions

Students must participate in these meetings from an environment that allows for **full attention, active engagement, and professional communication**.

Participation in virtual meetings while engaged in activities that compromise safety, attention, or professionalism is not permitted. This includes, but is not limited to:

- Operating a motor vehicle
- Engaging in other activities that divide attention or create safety risks
- Participating in environments that prevent meaningful engagement in the discussion

Virtual meetings are considered part of the professional learning environment and should be treated with the same expectations as attending class, clinical, or professional meetings in person.

Definitions

Virtual Meeting

Any real-time communication conducted through digital platforms (e.g., video conferencing, audio calls, or similar online meeting technologies) between students and nursing faculty or staff.

Professional Participation

Engagement in a manner that reflects attentiveness, appropriate communication, and respect for the learning environment and participants.

Student Expectations

Students are expected to:



- Join virtual meetings from a **stationary and safe environment** that allows full participation.
- Give their **full attention to the meeting**, minimizing distractions.
- Communicate in a manner consistent with **professional nursing standards**.
- Demonstrate behaviors consistent with **respect for colleagues, faculty, and the learning environment**.

Participation in a virtual meeting **while operating a motor vehicle or engaging in other unsafe or distracting activities is not permitted**. Students who join a meeting under these circumstances may be asked to disconnect and rejoin when they can participate appropriately.

Procedure

If a student joins a meeting while in an environment that does not allow safe or professional participation:

- Faculty may ask the student to disconnect from the meeting.
- The meeting may be rescheduled at faculty discretion.
- The incident may be documented as a professionalism concern.
- Repeated occurrences may be addressed through nursing program professionalism or conduct processes.

Rationale

Professional nursing practice requires full attention, sound judgment, and accountability for safety. Virtual meetings within the nursing program mirror the types of professional interactions nurses participate in throughout their careers, including interdisciplinary communication, telehealth encounters, and team collaboration.

Participating in virtual meetings while distracted or engaged in unsafe activities—such as operating a motor vehicle—places the student and others at risk and does not reflect the professional standards expected in nursing practice. Establishing clear expectations for professional participation helps students develop habits consistent with safe, accountable nursing practice.

Revised: 03/11/2026

Reviewed:



At Clover Park Technical College, we value our industry and our obligation to uphold the standards of that industry. Nursing standards including professional behaviors is important as we teach our students how to be successful in the world or nursing. As such, the purpose of this policy is to fall in line with industry standards around a progressive guidance policy that is outlined and clear with regards to the behaviors that are inappropriate for the professional nurse.

Procedure

The following are the steps of progressive guidance for unprofessional behaviors as outlined above for students in the nursing program.

Step 1: Counseling

If an instructor identifies a student who is performing in an unacceptable manner, the instructor will have a conversation with the student. This conversation will identify the unacceptable behavior as outline in the student handbook and assess the understanding of the nursing program policies as well as any other contributing factors. The student and faculty will come to an understanding of the appropriate behavior moving forward. An email outlining the conversation will be sent to the student and the faculty lead of the program.

Step 2: Verbal Warning

If an instructor identifies a student who is performing in an unacceptable manner and the student has already been counseled at any time during the program, the instructor will meet with the student to discuss the behavior or deficiency. The verbal warning will be shared in an email to the student, the faculty lead, and the dean of the nursing program. The intent of the verbal warning is to document and address student behaviors that could jeopardize patient safety or are areas where the student has demonstrated behavior that deviates from safe nursing standards.

Step 3: Written Warning

If the student fails to meet the standard of behavior or performance as outlined in the **Step 2** or receives another **verbal warning**, a **Written Warning Form (WWF)**: ([Appendix D](#)) will be issued, signed by the student and faculty and given to the Nursing Program Dean to be placed in the student's academic file. The student will meet with the faculty member issuing the Written Warning and the faculty lead. The student may have a person of their choosing to attend the meeting.

Step 4: Behavioral Contract

Failure of the student to correct the behavior as outlined in the written warning may result in a behavioral contract ([Appendix E](#)). The student will meet with the faculty lead, who will issue the Behavioral Contract and the Nursing Program Dean. The student may have a person of their choosing to attend the meeting.



Step 5: Dismissal

Failure to abide by the Behavioral Contract or repeated violations of professional behavior guidelines may be grounds for **dismissal** from the nursing program, as determined by a vote of the faculty. The student will be asked to attend a meeting with faculty and program dean to discuss alleged violation. They may have a person of their choosing attend the meeting. If dismissed from the program for professional behavior reasons, the student is not eligible to apply for readmission to the program.

Immediate Program Dismissal:

Some behaviors are so egregious to warrant immediate dismissal from the classroom or clinical site and may result in dismissal from the program. If dismissed from the program, the student may not reapply for admission. The list of egregious behaviors includes but is not limited to:

1. Failure to maintain safe care.
2. Inappropriate activity between student, staff, faculty, patient or patient family.
3. Theft
4. Patient abuse
5. Student statements and/or actions demonstrate the potential to cause harm to self or others.
6. Unprofessional behavior as stated in this handbook.
7. Disrespectful behavior toward faculty, fellow students, or staff in any industry or academic area.
8. Academic integrity violations
9. Failure to follow the other policies in the Student Handbook for the Nursing Department.

Created 9.18.2022

Updated 08/23/2023

Reviewed 08/19/2024, 03/16/2025



Students are allowed up to 3 attempts for successful completion of a skill during clinical and lab rotations. After each attempt, the student must remediate for 24 hours before re-approaching faculty for another attempt. The highest score of all attempts will be the final grade. If the student earns <78% of the total points for the skill, they must meet with the Faculty Lead and lab/clinical faculty to discuss a plan of action for success.

For each remediation attempt, there will be a 10% deduction from the total amount of points.

- 1st unsuccessful attempt: Additional support and resources

After the first failed attempt, faculty will have a face-to-face meeting and debrief with the student to review areas in need of improvement that contributed to the failure of the skill. Faculty will provide support and resources for the student to utilize during the 24-hour remediation period. *Observed practices are required for students to qualify for another skills attempt.*

- 2nd unsuccessful attempt: Formal Meeting

Faculty and student will meet with the Faculty Lead in a formal meeting. Together, faculty, student and Faculty Lead will provide feedback and create a plan of action utilizing the Remediation Form, providing support and resources for the student's reference prior to the final attempt. *Observed practices are required for students to qualify for another skills attempt.*

- 3rd unsuccessful attempt: No further progression

Student will receive a "Fail" for the skill and therefore not progress in lab/clinical. Student will need to re-enroll the same lab/clinical quarter at a later time, determined by availability in the program at the time of re-entry.

Remediation attempts not completed before the assignment deadline or the end of the quarter (at the latest) will result in a failure for the skill and therefore a failure for the clinical or lab course. Student will follow the same process as for a 3rd unsuccessful attempt above. Regardless of grade percentage in the course, all skills must be completed and passed to pass the course.

Created January 2023

Revised: 08/23/2023, 01/2024, 08/19/2024, 10/3/2024, 07/13/2026

Reviewed: 03/16/2025, 08/10/2026



Policy Statement: The CPTC Nursing Program upholds high academic and professional standards to ensure student competency and patient safety. This policy outlines the requirements for course repetition and program re-entry, adhering to CPTC and SBCTC guidelines.

Course Repeat Policy

- Students may enroll in the same course a maximum of three times, including withdrawals (W) and vanish (V) grades.
- The highest grade among the first three attempts will count toward GPA and earned credits; all attempts remain on the transcript.
- Students who do not successfully complete a course within three attempts may be dismissed from the program.
- Students repeating a course must meet with faculty to create a learning plan (see [Appendix J](#)), which may include additional assessments, tutoring, or lab sessions.
- Non-compliance with the learning plan may result in progressive disciplinary actions, including dismissal from the program.
- Financial aid and VA benefit recipients should verify funding eligibility for repeated courses.

Re-Entry Policy

Eligibility: Students may apply for re-entry if they:

- Voluntarily withdrew from the program, or
- Did not achieve a passing grade (78% or higher in didactic courses or pass/fail in clinical courses).

Procedure:

- Re-admission is contingent on space availability and is granted on a first-come, first-served basis.
- Students must notify the Nursing Dean via email of their intent to return.
- Required documentation includes a permission to register form or email and a CPNW extension form.
- Students must be current on all CPNW requirements, including immunizations, CPR certification, healthcare insurance, and background checks.

Clinical Re-Entry & Competency Assessment:

- Students who failed a clinical course due to patient safety concerns must undergo a competency assessment before re-entry.
- The assessment consists of clinical skill verification, proctored by two nursing faculty members (excluding the clinical instructor involved in the failure).
- Failure to demonstrate competency may require remediation before continuing in the program.



Program Completion Timeframe

- To ensure competency and patient safety, students must complete the Nursing Program within **24 months** of initial enrollment.
- Extensions beyond this timeframe may be considered under extenuating circumstances through an appeal to the Nursing Program Dean.
- Students exceeding this timeframe may be required to demonstrate competency through additional assessments or remediation before continuing in the program.

Appeals Process Students may submit a formal appeal to the Nursing Program Dean for reconsideration based on extenuating circumstances.

This policy ensures academic integrity, student competency, and the safety of patients under student care.

Revised 5.2.19, 11.18.19, 4.24.2020, 08/23/2023, 03/16/2025

Reviewed 2.24.2020, 5.26.2020, 8.3.2020, 11.16.2020, 2.22.2021, 5.23.2021, 8.23.2021, 08/19/2024



General Information:

The CPTC nursing curriculum enhances critical thinking, evidence-based practice, and clinical skills through classroom learning, simulation labs, and supervised clinical experiences—preparing students for the NCLEX. This policy, compliant with WAC 246-840-534, guides the use of simulation in nursing education.

Procedure

1. Resources & Faculty Training:

- A dedicated simulation budget, facilities, equipment, and technology are maintained.
- Upon hire, the new faculty members receive hands-on orientation to simulation equipment, spaces, and scenarios from experienced simulation faculty.
- All faculty responsible for simulation must complete approved Simulation Completion Training. This includes the
 1. Southern Indiana Clinical Simulation Online Certificate Program (30 contact hours) OR free online modules such as "Essentials in Clinical Simulations Across the Health Professions" via Coursera (modules 1, 2, 5, and 6, with proof of passing quizzes with at least an 80%).
 2. Simulation Orientation training modules assigned by the Simulation Coordinator within the first week of employment.
- Faculty are required to complete orientation modules prior to facilitating their first simulation.
- New simulation faculty are assigned an experienced mentor/preceptor for a three-week orientation period prior to their first simulation.
- All faculty teaching simulation that are not CHSE certified must engage in at least 8 hours of professional development in simulation methodologies every year.

2. Faculty-to-Student Ratios:

- The nursing program adheres to WAC 246-840-532: 1 faculty per 10 students for direct patient care simulations, and 1 faculty per 15 students in observational settings.

3. Student & Faculty Evaluation:

- Students evaluate each simulation via the learning management system and in end-of-quarter course evaluations.
- Faculty conduct debrief sessions at the end of each quarter to assess simulation effectiveness and adjust scenarios as needed.
- Faculty evaluate each simulation via a survey after every simulation based experience.

Debriefing

- Debriefing is “An activity that follows a simulation experience that is led by a facilitator. Participant reflective thinking is encouraged, and feedback is provided regarding the participant’s performance while various aspects of the completed simulation are discussed.” (The International Association for Clinical Simulation and Learning INACSL - Standard I: Terminology)

Methods of Debriefing Used

- **Plus/Delta:** Identify positive actions (+) and areas for improvement (Δ).
 - On a white board faculty create two columns entitled + and Δ. The students and debriefing facilitator write down behaviors or actions that were positive in the plus



column and behaviors or actions that should be changed or improved upon in the delta column.

- Example:

+	Δ
• Identified client • Consistent hand hygiene • Client teaching with medications and treatments	• No recapping needles • Disposing of sharps • Focus on clients concerns

- **Advocacy/Inquiry:** Combine facilitator observations with open-ended questions to understand student perspectives and underlying assumptions.
 - Facilitator seeks to understand the actions of students based on their frame of reference (schema).
 - Facilitators approach is genuine inquiry about the actions and frame of reference.
 - Facilitators uses advocacy-inquiry as a method of understanding actions and frame of reference.
 - During advocacy the facilitators states observations on students' performance (actions).
 - During inquiry the facilitator uses genuine inquiry or questioning to understand the student's current frame of reference.

Examples:

- An advocacy question, "I noticed that the team was staring at the monitor during the code instead of the client," paired with an inquiry such as, "What was running through each team members mind as you were evaluating the monitor?"
- An advocacy question, "I noticed that you decided not to give the prn medication that was ordered," paired with an inquiry such as, "Can help me understand your reasoning?" Or "I wonder what your treatment strategies and priorities were at the time?"
- **Debriefing for Meaningful Learning:** A structured reflection process that helps nursing students critically analyze simulation experiences, connect theory to practice, and enhance clinical reasoning skills in six phases(Engage, Explore, Explain, Elaborate, Evaluate, Extend). Through guided questioning, students are prompted to examine their clinical reasoning, decision-making, and emotional responses during the simulation. The facilitator uses open-ended questions to help learners uncover gaps in knowledge, challenge assumptions, and connect classroom theory to real-world nursing practice. DML supports the development of clinical judgment by fostering a safe environment where students can explore mistakes, successes, and alternative approaches to patient care. This method aligns with the goals of preparing nurses to think like nurses and make safe, evidence-based decisions.

Example of DML in Action:

Scenario: A student nurse administered insulin without checking the patient's blood glucose level first during a med pass simulation.

Phase	Example
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Engage	Faculty: “Thanks for participating today. This is a safe space to reflect and learn. Everyone makes mistakes in simulation—it’s how we grow as nurses.”
Explain	Faculty: “Tell me what was happening when you got ready to give insulin.” Student: “I saw the sliding scale order and gave the dose that matched. I didn’t stop to check the glucose reading.”
Elaborate	Faculty: “What were you thinking at that moment?” Student: “I assumed someone else had already done the glucose check, and I didn’t want to delay the med pass.”
Evaluate	Faculty: “Looking back, what impact could your decision have had on the patient?” Student: “It could have caused harm. I should’ve paused and verified the blood sugar myself.”
Extend	Faculty: “How will this experience change the way you approach med passes in clinical?” Student: “I’ll make sure to check and confirm glucose readings myself, even if I think someone else might have done it.”

- **Video Debriefing:**
 - Recordings are made during simulation scenarios for the purpose of facilitating learning and the debriefing process. These recordings are stored in a secure manner and will not be made available to anyone outside Clover Park Technical College without additional written approval of the participants. Students should be mindful of each other’s feelings when reviewing recorded simulation scenarios and act professionally.

Debriefing Methods Across the Curriculum

Practical Nursing			
Course	SIM #	Type of Debriefing	Video Recording
172	1	Plus/Delta Advocacy/Inquiry	None
	2	Plus/Delta Advocacy/Inquiry	None
	3	Plus/Delta Advocacy/Inquiry	Student may view other students in a simulation.
	4	Plus/Delta Advocacy/Inquiry	Student may view other students in a simulation.
	5	Plus/Delta Advocacy/Inquiry	Student may view other students in a simulation.
182	1	DML	None
	2	DML	Students may view a simulation they participated in.
	3	DML	Student may view other students in a simulation.
	4	DML	Student may view other students in a simulation.
192	1	DML	None



2	DML	None
3	DML	None
4	DML	None
5	DML	None

LPN-RN Transition Program			
Cours e	SIM	Type of Debriefing	Video Recording
272	1	Plus/Delta	Student may view other students in a simulation.
	2	Plus/Delta	Student may view other students in a simulation.
	3	Plus/Delta	Students may view a simulation they participated in.
282	1	Plus/Delta	Student may view other students in a simulation.
	2	Plus/Delta	Student may view other students in a simulation and one they participated in.
	3	Plus/Delta	Student may view other students in a simulation and one they participated in.
292	1	Plus/Delta	None
	2	Plus/Delta	None
	3	Plus/Delta	None

Simulation Process Guidelines

1. Assess learner needs and link simulations to course outcomes using appropriate fidelity.
2. Provide pre-simulation resources and conduct a thorough pre-briefing session.
3. Allow students to repeat simulations as time permits to reinforce learning.
4. Use real-time cues during simulations to enhance realism and guide learning outcomes.
5. Conduct comprehensive post-simulation debriefings to foster reflection, critical thinking, and feedback.
6. Record simulations (when possible) for student review and reflection assignments.

This policy ensures simulation activities are effective, realistic, and aligned with program objectives while providing faculty with approved, structured training to enhance teaching and assessment.

The following simulations are used throughout each nursing program as a replacement for clinical hours.

Practical Nursing Simulations:

Q1: 172								
Scenario	Patient Name	Medications	Course Outcomes					
			ICC	S	C	I&T	PNP	L&C
VSim 1: Vital signs		NA	X	X	X	X	X	X
Vsim 2: Health Assessment		NA	X		X		X	
Hypertension visit Setting: Clinic	Donna Wilson	Metoprolol 50 mg tablets, oral		X		X	X	
	John Doe	Lisinopril 25 mg tablets, oral Losartan Aspirin 81 mg tablets						
Tonsillectomy follow up Setting: Clinic	Noah Jones	Tylenol elixir	X	X	X			
Maternity unfolding Setting: Clinic, Delivery unit, Clinic	Prenatal visit 1 st trimester	Ariel Barkley	X	X	X			
	Prenatal visit 2 nd trimester	Cyrus Barkley						
	Prenatal visit 3 rd trimester	(newborn)						
	Labor and Delivery							
	Postpartum							

Q2: 182									
Scenario		Patient Name	Medications	Course Outcomes					
				ICC	S	C	I&T	PNP	L&C
Vsim Catheter simulation	Swift River: Adult Medical Surgical (Catheter insertion/management)		NA	X		X		X	
Multipatient 1 Diabetes simulation Setting: Medical-surgical unit	Type 1 Diabetes (Hypo-, Hyper-, Euglycemic)	Skylar Hansen	Novolog 100 units/mL Multivitamin 1 mg tablets Lantus 100 units/mL Glucagon 1 mg/mL vial, injection	X	X			X	X
	Gestational diabetes	Kendra Soto Tunix	Metformin 500 mg tablets						
Multipatient 2 Cardiac simulation Setting: OCED	CHF Exacerbation	Paula Cho	Lasix 10 mg PO Lisinopril 25 mg PO 1000 mL normal saline	X	X		X	X	X
	ACS, Chest pain, Code blue	Carl Shapiro	Nitroglycerin 0.4 mg sublingual tablet Morphine 2mg/mL IV Ondansetron 4mg/mL IV						
Multipatient 3 Respiratory simulation Setting: OCED	COPD Exacerbation	Vincent Brody	Albuterol inhalant Ipratropium bromide nebulizer Methylprednisolone 125 mg powder 10 mL normal saline vial Magnesium sulfate 1.5 g bag in 100 mL of normal saline Dextrose 5% in 0.45% NS 100 mL bag	X	X	X	X	X	
	Pediatric Asthma	Jason Jones							



Q3: 192									
Scenario		Patient Name	Medications	Course Outcomes					
				ICC	S	C	I&T	PNP	L&C
Visit 1	Pediatrics		N/A		X	X	X	X	
Multipatient 1 Acute care simulation	Asthma Exacerbation	Jennifer Hoffman	Ipratropium bromide 0.02% solution; inhalation ALBUTEROL 0.083% nebulizer solution 2.5 MG/ 3ML sodium chloride 0.9% 1000 mL IV bag	X	X			X	X
	Preoperative anxiety	Linda Waterfall	Hydroxyzine 25 mg tablet Lorazepam tablet; oral 2 mg						
	Small bowel obstruction, NG tube insertion and management	Sherrie Williams	Sodium chloride 0.9% 1000 mL IV bag Ondansetron 4 mg tablet sublingual						
Multipatient 2 Acute care & mental health	Suicide precautions	Li Na Chen	Venlafaxine 75 mg tablets Sertraline 25 mg tablets	X		X		X	
	Postoperative pain management	Sara Lin	Acetaminophen 325 mg tablets Amoxicillin 875/Clavulanic acid 125 mg tablets Ceftriaxone 1 gram IV Docusate 100 mg tablets Oxycodone/acetaminophen 5 mg/325 mg tablets						
	Contact precautions & Postop TKA	Jared Griffin	Tylenol 325 mg tablets PO Oxycodone-acetaminophen 5-325 mg tablets PO Clindamycin hydrochloride 600 mg IVPB Docusate sodium/sennosides 50/8.6 mg tablets						

ICC: Individual Centered Care, S: Safety, C: Communication, I&T: Information & Technology, PNP: Professional Nursing Practice, L&C: Leadership & Collaboration

Practical Nursing Simulation Scenario & Outcomes Crosswalks

Q3: 192									
Scenario		Patient Name	Medications	Course Outcomes					
				ICC	S	C	I&T	PNP	L&C
			Enoxaparin 40 mg for injection Hydrochlorothiazide 25 mg tablets Ibuprofen 800 mg tablets Iron polysaccharide 150 mg tablets Normal saline flushes 10 mL						
Multipatient 3 Mental health unit	Suicide risk part 2: discharging	Li Na Chen	Desvenlafaxine 75 mg tablets Sertraline 25 mg tablets		X	X		X	
	TBI/PTSD, head injury	Randy Adams	Imitrex						
	Acute hallucinations and delusions	David Carter	Haloperidol Lorazepam Hydroxyzine						
Multipatient 4 Community clinic simulation	Uncontrolled diabetes and hypertension, limited access to testing strips	Loretta Simmons	Novolog insulin pen	X		X	X		
	STI Follow up and health department reporting	Briana Morales	Rocephin IM injection Doxycycline 100 mg tablets						
	Anemia & Contraceptive care	Tasha Green	Ferrous sulfate 325 mg tablets Depo-provera 150 mg injection						



LPN-RN Nursing Simulations:

Q2: 272								
Scenario	Patient Name	Medications	Course Outcomes Met					
			ICC	S	C	I&T	PNP	L&C
Pediatric Asthma Setting: Emergency Department	Jason Jones	Albuterol inhalant Methylprednisolone 125 mg powder 10 mL normal saline vial Magnesium sulfate 1.5 g bag in 100 mL of normal saline Dextrose 5% in 0.45% NS 100 mL bag	X	X	X		X	
Postpartum Hemorrhage Escape Room Setting: Antepartum unit	Ms. Orange	Prostaglandin/Hemabate/Carboprost Misoprostol Methylergonovine maleate Oxytocin			X	X		X
Preeclampsia Setting: Emergency Room	Jada Smith	Metoclopramide 5mg/mL vial Hydroxyzine 25mg/mL medication vial Acetaminophen 500 mg tablets Magnesium sulfate 2g/50 mL IV piggyback Lactated Ringers 1000 mL IV infusion bag Hydralazine 5 mg/mL vial	X	X			X	
Ectopic pregnancy	Rachel Peterson	Morphine 4 mg/mL vial Fentanyl 100 mcg/mL 1000 mL normal saline IV infusion bag		X	X	X		X



Q4: 282								
Scenario	Patient Name	Medications	Course Outcomes Met					
			ICC	S	C	I&T	PNP	L&C
Blood transfusion reaction (Unfolding) Setting: Inpatient medical-surgical unit	Lloyd Bennet	2 units of packed red blood cells Benadryl 50 mg/mL, 5 mL vial Acetaminophen 325 mg tablets 1000 mL Normal saline IV bag	X	X		X	X	X
Sepsis (Unfolding) Setting: Inpatient unit	Ruth Livingston	Lactated Ringers 1000 mL IV bag Enoxaparin sodium 40 mg injection Docusate sodium 100 mg tablets PO Oxycodone 5 mg tablets Acetaminophen 325 mg tablets 0.9% Normal saline 500 mL IV bag 0.9% Normal saline 1000 mL IV bag Vancomycin 1 gram in 1000 mL IV bag Piperacillin/tazobactam 450 mg/50mL IV bag Levophed 4 mg in 250 mL 0.9% Normal Saline bag, IV infusion		X	X		X	X
Colectomy to Code Blue (Unfolding) Setting: Inpatient post-op unit	Herbert Franklin	Lactated Ringers 1000 mL IV bag Enoxaparin sodium 40 mg injection Docusate sodium 100 mg tablets PO Oxycodone 5 mg tablets Acetaminophen 325 mg tablets 0.9% Normal saline 500 mL IV bag 0.9% Normal saline 1000 mL IV bag Vancomycin 1 gram in 1000 mL IV bag Piperacillin/tazobactam 450 mg/50mL IV bag		X	X			X

ICC: Individual Centered Care, S: Safety, C: Communication, I&T: Information & Technology, PNP: Professional Nursing Practice, L&C: Leadership & Collaboration

Q5: 292									
Scenario	Patient Name	Medications	Scenario	Course Outcomes Met					
				ICC	S	C	I&T	PNP	L&C
Multipatient 1 Setting: Inpatient medical surgical	MCC	Bill Murphy	Enalapril 1.25mg/mL vial, IV injection (Order is 5 mg q6hr IV push, ensure there is at least 10 mL in vial)	X	X			X	X
	Lap chole	Malani Raj	NPH 100 units/mL vial						
	Post CVA	Mark Johnson	Regular insulin 100 units/mL, vial, injection						
			Zofran 4mg/mL vial, injection						
Multipatient 2 Setting: Inpatient medical surgical	Surgical site infection	Lloyd Bennet	Morphine 4 mg/mL vial, 5 mL, injection						
	D/C to SNF	Mark Johnson	Glucagon 1 mg/mL vial, 5 mL, injection						
	COVID+ PNA	Tony Wallace	Glucose gel						
			Oxycodone 80 mg tablets		X	X	X		X
Multipatient 3 Setting: Inpatient PCU	Surgical admit, anxiety	Linda Waterfall	Morphine 4 mg/mL IV Push						
	COPD Exacerbation	Vincent Brody	Ondansetron 4 mg/mL vial						
	Head trauma, comatose	Michael Smith	Ketorolac 15mg/mL vial, 30 mg for IV infusion						
			0.9% sodium chloride 1000 mL bag						
			2 units of blood						
			Acetaminophen 325 mg tablets						
			Morphine 4 mg/mL vial						
			Vancomycin 1 gram/1000 mL IV bag						
			Dextrose 5% in 0.45% sodium chloride 1000 mL IV bag	X	X		X		
			Potassium chloride 20 mEq (KCl) for IV						
			Morphine 4 mg/mL vial, IV						
			D5½ normal saline with KCl 20 mEq/1000 mL infusing at 100 mL/hour						
			Albuterol (Proventil) 2.5 mg in 2.5 mL normal saline nebulizer						
			Methylprednisolone (Solu-Medrol) 125mg powder (to be reconstituted)						
			Dextrose 5% in Lactated Ringers 500 mL IV bag						
			Lorazepam 2mg/mL vial, IV						

ICC: Individual Centered Care, S: Safety, C: Communication, I&T: Information & Technology, PNP: Professional Nursing Practice, L&C: Leadership & Collaboration

Revised: 08/23/2023, 08/19/2024, 03/16/2025, 06/11/2025



Simulation and Clinical Assignment Timeline Policy

Purpose

The purpose of this policy is to establish clear and consistent expectations for simulation and clinical assignment timelines within the CPTC Nursing Program. Standardized timelines promote student success, maintain instructional quality, and allow faculty adequate time to provide meaningful feedback before students progress to subsequent simulations or clinical rotations.

This policy applies to all students enrolled in nursing courses that include simulation or clinical components, as well as all faculty responsible for teaching, grading, or coordinating these components.

Simulation

Definitions:

Pre-work means assignments that must be completed by the assigned due date to prepare for, and participate in, simulation.

Post-work means assignments that must be completed after the simulation to demonstrate achievement of outcomes and participation.

Timelines:

Pework Unlock Date- the date prework will be published in Canvas for students to complete:

Q1 LPN (NURS172): 7 days before sim

Q2 LPN (NURS182): 5 days before sim

Q3 LPN (NURS192): 3 days before sim

Q2 RN (NURS272): 5 days before sim

Q4 RN (NURS282): 3 days before sim

Q5 RN (NURS292): 3 days before sim

If prework is not available by the timeline above, students should contact the faculty assigned to lead the simulation within 24 hours.

Pre-work Due Date - the deadline for completing preparatory simulation work.

All pre-work assignments are due 24 hours before the start of simulation. For example, if your simulation is on Wednesday the 15th at 8am your prework is due on Tuesday the 14th at 8am. Failure to submit complete prework by the due date will prevent student participation in the simulation. If a simulation is missed for this reason without documented reason or timely communication with faculty, rescheduling or alternate simulations will not be offered.

Post-work Due Date – the deadline for completing post-simulation or follow-up activities.

All post-work should be submitted by 11:59 PM the day following completion of the simulation. All due dates must be published to students in Canvas at the start of each simulation day. For example, if your simulation is on Wednesday the 15th at 8am and ends on Wednesday the 15th at noon, your post-work is due by 11:59 pm on Thursday the 16th.

Simulation Timeline Requirements for Faculty



Individual faculty assigned to teach simulation are responsible for entering and communicating unlock and due dates for every simulation group they instruct. These actions ensure that students have appropriate access to simulation materials and preparatory activities.

Grading Expectations for Simulation Faculty

To support student learning and pre-brief preparation, faculty must grade simulation prework before the start of the simulation session. Challenges with or errors in content from prework should be reviewed during pre-brief. Post-work grading should follow established grading timelines.

Clinical

Timelines:

Clinical Assignment Due Dates- All major clinical assignments such as care plans are due within 72 hours after the final day of the student's clinical rotation or clinical week. For example, if your clinical ends on Friday the 17th at 7pm, your clinical assignments are due Monday the 20th by 11:59 pm.

Clinical Timeline Requirements for Faculty

Individual faculty assigned to teach clinical groups are responsible for entering and communicating unlock and due dates for every group they instruct. These actions ensure that students have appropriate access to simulation materials and preparatory activities.

Grading Expectations for Clinical Faculty

To support student learning, major assignments will be graded within 48 hours of the due date closing to allow students the opportunity to receive feedback that informs future assignments. Adjustments to due dates are up to the discretion of faculty based on student situation, clinical environment changes, etc.

Other Expectations for Faculty in Clinical and Simulation:

Provide timely feedback preparing students for upcoming clinical rotations and simulations.

Coordinate with course leads, master course holders, and faculty to adjust assignments when the expected turnaround time requires modification.

Course leads will monitor that grading is being completed in a timely manner: within 1-2 weeks after a due date, by week 4, by week 6 (with Navigate notifications for any student at risk for course failure), by week 8, and by the end of the quarter.

Student Responsibilities for Clinical and Simulation:

Monitor posted unlock and due dates for simulation and clinical assignments.

Communicate with assigned faculty regarding issues or concerns with access to prework within 24 hours of the assignment opening. Communicate challenges with assignment completion, etc before the assignment due date.

Complete all simulation pre- and post-work activities by the published deadlines.

Submit clinical assignments within the required 72-hour post-rotation window.

Use faculty feedback to improve performance in upcoming simulation sessions and clinical rotations.

Follow-up with faculty to clarify feedback.

Review and Revision

This policy will be reviewed annually and as needed to ensure alignment with program needs and instructional best practices.

Revised: 03/09/2026

Reviewed:



Student Record Keeping Policy

Documentation regarding immunizations, background checks and clinical onboarding will be maintained by the student in Certified Background. It is the responsibility of the student to monitor and keep all documentations current.

The Nursing program will maintain a file for each nursing student in a locked file cabinet. Student files shall be available to the Nursing Commission staff during one site- surveys and/or investigations. Files will be destroyed upon graduation or one year after student has discontinued program. These files will contain the following items:

- Student contact information
- Emergency contact information
- Affidavit of understanding
- Model release
- Consent for invasive procedures
- Release of information for affiliated clinical sites
- Letters of Recommendation/References Information Release
- Program application
- Clinical evaluations
- Progress improvement plan if any
- Incident reports if any
- Progress reports if any
- Accommodation requests if applicable

Procedure

During mandatory program orientation nursing student handbook and policies and procedures will be reviewed, students will be required to sign affidavit of understanding. Revisions of the policies and procedures will be sent to students via Canvas and students will be asked to sign a new affidavit of understanding.

Students will be provided information regarding use of record management profile during first quarter. Students who do not complete and/or maintain currency of all required documents will not be allowed to attend clinical, which will result in a failure of the clinical course.

The Nursing Program administration will keep a log of any event involving a student or faculty member that the program has reason to believe resulted in a patient harm, significant risk for patient harm, or diversion of legend drug or controlled substance to report to the state Nursing Commission according to the WAC 246-840-513. See [Incident Reporting and Tracking Policy](#).

Revised 9.18.2022

Reviewed 2.24.2020, 5.26.2020, 8.3.2020, 11.16.2020, 2.22.2020, 5.23.2021, 8.23.2021, 08/23/2023, 08/19/2024, 03/16/2025



Students Rights and Responsibilities Policy

Clover Park Technical College Nursing Program follows the CPTC student policy. This information can be accessed on the [CPTC website](#) under Chapter 5.

Revised 3.7.19, 08/23/2023

Reviewed 2.24.2020, 5.26.2020, 8.3.2020, 11.16.20, 2.22.2021, 5.23.2021, 8.23.2021, 08/19/2024, 03/16/2025

**Purpose:**

Ensure Nursing students maintain confidentiality, professionalism, and uphold CPTC's reputation in all online interactions. This applies to discussions about CPTC, clinical sites, and course activities and must comply with HIPAA and FERPA.

General Guidelines:

- **Definition:** Social media are online platforms (e.g., LinkedIn, Twitter, Facebook) that share user-generated content and blur personal and professional boundaries.
- **Representation:** Always represent CPTC fairly and accurately. Personal profiles must reflect a professional image, and your views should be clearly identified as your own, not those of CPTC.

Procedures:

- **Confidentiality:**
 - Do not post confidential or proprietary information about CPTC, staff, students, clinical sites, or patients.
 - Follow HIPAA guidelines—do not share identifiable patient information.
- **Copyright & Branding:**
 - Respect copyright and intellectual property.
 - Do not use CPTC logos, graphics, or the institution's name to promote products, causes, or political messages.
- **In-Person Conduct:**
 - No personal phone conversations, texting, or unauthorized recording in patient areas or classrooms.
 - Use computers solely for note-taking and approved activities.
- **Photography & Videography:**
 - Do not record or photograph professors, fellow students, or patients without written permission.
- **Online Conduct:**
 - Think twice before posting—online content is public, searchable, and permanent.
 - Avoid ethnic slurs, personal insults, obscenity, or any conduct unacceptable in a professional setting.
 - Address any criticism or concerns through the Nursing Program Dean rather than public online channels.

Consequences:

Violations, especially breaches of patient/client privacy, may result in HIPAA penalties and/or dismissal from the nursing program.

Reviewed 3.2.2020, 6.1.2020, 8.10.2020, 11.30.2020, 3.1.2021, 5.31.2021, 8.23.2021, 08/23/2023, 08/19/2024

Revised 8.29.18, 9.18.2022, 03/16/2025



Student Performance Evaluations Policy

Students are responsible for monitoring their progress and grades throughout the program and utilize resources or seek assistance as needed from faculty and/or staff.

Faculty are responsible for providing feedback to students and maintaining a *current* grade record in the learning management system.

Procedure

For in class lecture courses students' performance will be measured as indicated in the individual course syllabus and recorded in the learning management system. Students must earn a minimum of 78% in all didactic classes. For didactic classes, students will be notified in writing via an academic warning letter during mid quarter if their grade has fallen below passing. The student will be required to meet with the faculty member that issued the warning.

For clinical, lab or simulation courses students will be evaluated by the instructor at the completion of the rotation. Significant issues or concerns that have been identified by the faculty during the rotation will be addressed as they occur, and a progress report completed and filed in student record. Student must achieve "meets standards" in all competencies for all clinical rotations.

Revised 3.7.19, 08/19/2024

Reviewed 3.9.2020, 6.8.2020, 8.17.2020, 12.7.2020, 3.8.2021, 6.6.2021, 8.30.2021, 08/23/2023, 08/19/2024, 03/16/2025



The purpose of this policy is two-fold:

1. To give students the opportunity to spend some time thinking and decompressing after taking the exam and it gives the faculty the opportunity to review the exam and to review statistics.
2. The challenge piece of this policy is to allow students to have a voice in their learning and to keep an open, healthy, respectful dialogue going between faculty and students.

Procedure

1. **24 Hour rule following quiz or exam:** Students must refrain from contacting an instructor immediately after an exam or quiz with questions about the exam content, items, or results. Instructors must be given 24 hours following an exam or quiz to review the results and enter scores. Thus, there will be no discussion of exam items between students and faculty on the day of the exam.
2. Challenges to the answer on an exam must be presented to the instructor in person no sooner than 48 hours following the exam/quiz. Students will be required to provide documentation from the course materials that supports their chosen answer. Students must request an appointment with the instructor; challenges presented by email will not be accepted.

Created October 2022

Reviewed 08/23/2023, 08/19/2024, 03/16/2025



CLOVER PARK
TECHNICAL COLLEGE

Withdrawal and Dismissal Policy

Policy Statement

Students are expected to maintain professionalism, integrity, and adherence to CPTC Nursing Program standards. This policy defines the process for voluntary withdrawal and grounds for dismissal due to violations of program expectations.

Students may voluntarily withdraw from the program at any time. They are responsible for reviewing withdrawal deadlines, financial obligations, and refund policies outlined in the current college catalog. Withdrawal from any nursing course requires a formal request for re-entry. (See [Course Repeat & Re-Entry Policy](#).)

A student is considered withdrawn from the program if they:

- Stop attending class or clinical without an approved Leave of Absence, or
- Fail to register for the next quarter without notifying the program.

Students must demonstrate professionalism in all interactions, including patient care, documentation, medication administration, and communication with peers, faculty, and clinical staff. Violations of nursing ethics, professional behavior, or program policies may result in disciplinary action, including dismissal.

Procedure

1. Voluntary Withdrawal

- a. Students must formally notify the Nursing Program Dean of their intent to withdraw.
- b. They must follow the college's official withdrawal process, including checking financial aid and refund policies.
- c. Students seeking re-entry must follow the [Repeat and Re-Entry Policy](#) requirements.

2. Grounds for Dismissal

- a. Failure to adhere to nursing ethics, professional standards, or program policies.
- b. Violations of academic integrity or unsafe clinical practice.
- c. Repeated non-compliance with behavioral or academic expectations outlined in the **Nursing Program Handbook**.

3. Dismissal Process

- a. Faculty and the Nursing Program Dean will review violations using the policies outlined in the **Nursing Program Handbook**.
- b. Students facing dismissal will be notified in writing and may request an appeal based on extenuating circumstances.

Revised 9.18.2022, 03/16/2025

Reviewed 3.16.2020, 6.15.2020, 8.17.2020, 12.14.2020, 3.15.2021, 6.13.2021, 8.30.21, 08/23/2023, 08/19/2024



Appendix A – Release of Information

CLOVER PARK TECHNICAL COLLEGE RELEASE OF INFORMATION

Student Name _____

Student ID Number _____

Date of Birth _____

I hereby authorize Clover Park Technical College and/or its staff to provide all information contractually required by affiliated clinical sites.

I hereby release Clover Park Technical College and its staff from all legal responsibility or liability that may arise from the act here authorized.

This release of information is valid for the length of time I am in my program from the date of the student's signature.

Date: _____

Signature of Student



Appendix B – Clinical Incident Tool

To be completed by faculty following a clinical incident or near miss event for determination of necessary action plan.

Instructor Name: _____ Student Name: _____ Date of event: _____

Part 1: Review of student behavior surrounding incident

	Human error/mistake (systems error or lapse in performance)	At Risk Behavior (unintentional risk taking, risk was mistakenly justified or not known at the time of behavior)		Reckless/Careless Behavior (intentional, excessive risk taking, conscious choice to disregard known expected behavior)	Score
Criteria	1	2	3	4	
Prior incidents on file	No previous incidents or errors on file. No evidence of past reckless behavior.	One prior incident of at risk behavior, not similar to current situation.	Prior counsel for similar at risk behavior or error.	2 or more previously documented incidents of similar nature	
Program level expectations	Practiced to level of education. Had knowledge and ability to perform task.	Practiced beyond current level of skill and knowledge due to pressure or perceived pressure from qualified supervising nurse.	Practiced beyond current level of skill and knowledge without direct supervision of nurse. Not aware of educational boundaries.	Evidence of intentional practice above level of current status in the program, knowledge, and skills training.	
Adherence to nursing practice standard, policy, or provider order	Unintentional deviation from policy –OR- no policy/standard/provider order available.	Policy or standard was not followed due to cultural norm, common for staff to deviate from policy, or order was misinterpreted.	Policy, standard, or provider order was in place but student perceived need to deviate for expectations of staff, patient, or faculty. Student failed to clarify expectations or utilize other resources.	Intentionally disregarded known policy, procedure, provider order, or nursing care standard.	
Decision to act	Action was accidental, unintentional, or inadvertent	Student was faced with need to take immediate action or make decision in emergent situation.	Non-emergent situation and student decided to pursue action without weighing risk to patient.	Student put own interest before patient need or safety. Egregious behavior that would not be performed by a prudent nurse.	
Accountability	Self-disclosed error, displayed honesty and identified plan to prevent repeated error	Admitted to incident readily when questioned.	Admitted to incident reluctantly or much later when confronted with evidence. Made excuses or placed blame on other circumstances to justify situation.	Denied responsibility or took action to conceal incident. Uncooperative with investigation or post-incident procedures.	
Total Score					

Part 2: Mark all that apply

MITIGATING FACTORS	AGGRAVATING FACTORS
---------------------------	----------------------------



Communication breakdown (shift report, language barriers, misunderstanding/terminology)	Student action or behavior demonstrated violence, cruel or heinous act
Missing/unavailable resources or supplies	Created excessive risk for more than one patient or staff member
Unclear policies, procedures, provider orders	Threatening, bullying, intimidating behavior
Chaotic environment, frequent emergencies or interruptions	Prior disciplinary actions or warnings on file
Lack of orientation, training, or education	Other:
Patient factors- combative, threatening, agitated, confused	
Unit climate factors- staff conflicts, inadequate staffing	
Other:	

Score from page 1 Criteria: ____ Number of Mitigating factors: ____ Number of Aggravating factors: ____

Part 3: Plan of Action

Criteria Score 5-7 OR 3 or more mitigating factors AND no aggravating factors Action: Console	Provide comfort to student, no blame assigned. Review student action and resultant outcome. Discuss how to avoid error in the future. Identify systems issues that may need to be addressed.
Criteria Score 8-10 AND 2 or more mitigating factors AND no aggravating factors Action: Counsel	Discussion with student regarding any at-risk behaviors. Increased clinical supervision and support in similar situations.
Criteria Score 8-15 AND no mitigating factors AND no aggravating factors Action: Remediation & complete Clinical Support Plan	Completion of Clinical Student Support Plan and review of progress with faculty. Additional supervision during clinical experiences.
Criteria Score 16-20 OR 1 or more aggravating factors Action: Disciplinary	Completion of Professional Behavior Letter of Warning and refer to Nursing Program Student Handbook regarding professional behavior violations. Student may be dismissed from program.

Faculty Signature: _____ Date: _____

Deliver completed form to Nursing Program Dean



Appendix C - Pregnancy Academic Accommodation Form

Student's Name: _____

The request for temporary medical accommodation must be submitted with the following stipulations. Failure to fully complete procedures may delay any assistance being requested.

- Documentation must be on **doctor's letterhead** and have a medical diagnosis (pregnancy).
- Documentation must be signed by a medical doctor or appropriate specialist
- Documentation must include a "due date"

It is important to note that a change in accommodations may occur due to the progression of the pregnancy. Any requests for different accommodations must be submitted with additional documentation justifying/verifying the adjustment.

Please select the accommodations requested:

Excused absence	Separate table and chair
Temporary disability parking	Frequent bathroom breaks
Limited exposure to chemicals	No lifting over ten pounds
Frequent breaks to walk around	Permission to leave class suddenly
Permission to eat/drink in class	No prolonged standing
Excused for tardiness	

Additional Accommodations:

Is the student classified in the "high risk pregnancy category? Yes _____ No _____

Students who have disclosed they are pregnant will not be asked to participate in known occupational hazards for pregnant women.



Appendix D – Written Warning Form

Written Warning Form (WWF) – Progressive Guidance, Step 3

Student:	Date:
Course:	Faculty:
Brief Description of the Problem/Situation:	
Nature of the Problem- Specify	Supporting Evidence & Handbook Reference
• Attendance • Tardiness • Absent without 1 hour notice • Clinical Absence (after 1st absence in school year) • Other Absenteeism issue	
• Unsafe Practice- Clinical, Lab, or Simulation environment • Unprofessional communication with instructor, nurse, or patient • No evidence of preparation for patient care • Other:	
Other Professional Conduct Issue (identify from list in handbook)	
Other: Such as, but not limited to refusal to meet with faculty regarding midterm grades, failed exam, or professional misconduct	
OPTIONAL	
Recommendations for Improvement: • Improve academic or clinical preparation • Life style changes • Reduce work hours • Communication skills work (written/verbal/non-verbal) • Other:	

**Support Referrals:**

- Campus support/student services
- Writing center
- Peer support/study group
- Disability/access services
- Program/course Faculty
- Learning Resource center
- Other:

MANDATORY**Mandatory Remediation (as determined by instructor or faculty lead):**

- No further absences or late arrivals
- Meet with faculty or Dean on regular basis until success achieved in course
- No further episodes of lack of preparation
- Other specific requirements:

What is necessary to progress in the course/program? (skill to be passed, simulation repeat, points needed in course):

**Student is responsible to complete any mandatory remediation items by _____
(date)**

Failure to do so will result in a Behavioral Contract - Step 4- Progressive Guidance

Student Comments:

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Outcome:

Passed Course

Failed Course

Behavioral Contract (Step 4 Progressive Guidance)

Withdrew from Course/program



Appendix E – Behavioral Contract

Student Behavioral Contract – Progressive Guidance, Step 4

Student Name: _____

Telephone: _____ **E-mail:** _____

Nursing Instructor: _____

Nursing Course: _____ **Date:** _____

Initial Meeting Attendees: _____

Copies: ☐ Student ☐ Dean ☐ Instructor ☐ Student File

Initial Meeting Issues/Concerns
Situation

Contributing Factors

Short-Term Goals (i.e. “within 3 weeks”)



Long-Term Goals (i.e. "by end of current quarter")

Plan of Action (including follow-up date)

Departmental Supportive Measures



Referrals

_____ I agree to abide by the plan of action outlined on this document and work towards my stated goals.
I understand a violation of these terms, or another warning for either unprofessional behavior or academic
performance may result in dismissal from the nursing program.

Printed Name

Date

Signature

Evaluation of Resolution (completed by Nursing Program Dean)



Appendix F – Letter of Recommendation/References Information Release

I hereby authorize Clover Park Technical College to provide the following information for this letter of recommendation:

Release of information required:

_____ Information about specific course taken
_____ Grades/GPA
_____ Other non-directory information

Release of information student approval optional:

_____ Observations with or of the student(s) in class participation
_____ Personal acquaintance with or of the student(s)
_____ Program of Study
_____ Dates of enrollment
_____ Degree/Certificate received
_____ Honors
_____ Other Directory information listed below

Student Name (please print)

Student Signature

Date

Directory Information at Clover Park includes: Student name, major field of study, eligibility and participation in officially recognized activities, organizations, date of attendance (quarter start and end dates only, not daily class attendance), honor roll, full/part-time enrollment status and degrees/awards received.



Appendix G – Emergency Contact Form

CONTACT INFORMATION

Please Print Clearly

Student Name: _____

Address: _____

Email: _____

Phone: _____

Emergency Contact Information (need at least one)

Name: _____

Phone: _____

Name: _____

Phone: _____

Student Signature: _____

Date: _____



Appendix H – Affidavit of Understanding

Policies for the nursing program are intended to assist the student to succeed in the nursing program and to prepare you for a nursing career as a Licensed Practical Nurse (LPN) or Registered Nurse (RN).

Please sign below to indicate that you have received and read the attached information, and that you will comply with the statement below:

I acknowledge that I have read and understand the policies and procedures in the current Clover Park Technical College Nursing Program Handbook. I have received a copy of the policy handbook and have had the opportunity to ask questions. I understand that non-compliance with policies may result in dismissal from the program. A copy of the current Nursing Program Handbook is maintained on CANVAS. I understand these policies may be revised during my enrollment in the nursing program. Students will be advised of the changes and new affidavits will be signed when any revisions are made. I understand as a nursing student I must be able to attend clinical rotations as assigned. These rotations may occur any day, anytime between 5:00 am to 11:30 pm. Clinical schedules may not be published until the beginning of the quarter and changes may occur throughout the quarter.

I understand that clinical placement is dependent on approval of my placement at that facility. This approval may be impacted by non-compliance with immunizations and other onboarding requirements, issues identified on background check and/or prior employment at the facility. Denial for placement at any facility may impact ability to complete the nursing program.

*I understand that I will be required to submit required documentation of current/up-to-date immunizations, a current **American Heart Association Basic Life Support – Health Care Provider** CPR card. This must be completed within the first two weeks of enrollment in the program.*

I agree to abide by the published policies in the CPTC catalog available on the website.

Signature

Date

Print your name

This form must be signed and returned to the Nursing Program office for placement in your student information file.



Appendix I – Remediation Form

Student:	Date:
Course:	Faculty:
Skill Attempt: of 3	
Failed skill:	Contributing factors:
Please attach skill check off form to this document for reference.	
NEXT STEPS: PLAN OF ACTION	
Recommendations for Improvement: • Improve academic or clinical preparation • Life style changes • Reduce work hours • Communication skills work (written/verbal/non-verbal) • Other:	
Support Referrals: • Campus support/student services • Peer support/study group • Disability/access services • Program/course Faculty • Learning Resource center • Other:	
MANDATORY	
Mandatory Remediation (as determined by instructor or faculty lead):	
What is necessary to progress in the course/program? (skill to be passed, simulation repeat, points needed in course):	



Student is responsible to complete any mandatory remediation items by _____ (date) Failure to do so will result in failure of vital clinical skill and, as a result, clinical rotation
Student Comments:

I agree to the remediation and action plan as outlined above and the timeline in which this must occur.
I understand failure to remediate by the deadline as specified may result in failure of the skill and
therefore clinical.

Faculty Signature_____

Date_____

Student Signature_____

Date_____



Appendix J – Learning Plan

Student Name: _____
Student ID: _____
Course Name & Number: _____
Instructor: _____
Date of Learning Plan Submission: _____

1. Reason for Course Repetition

(Briefly explain why the course is being repeated, including any challenges faced previously.)

2. Areas for Improvement

(Identify key concepts, skills, or competencies that need reinforcement.)

3. Action Plan for Success

(Outline specific strategies the student will use to improve performance.)

☒ **Study Strategies & Resources:**

- ☐ Attend tutoring sessions (if available) (Specify: _____)
- ☐ Participate in study groups (Specify: _____)
- ☐ Utilize faculty office hours (Specify: _____)
- ☐ Engage in additional lab practice (Specify: _____)
- ☐ Other: _____

☒ **Time Management & Study Schedule:**

- Study hours per week: _____
- Planned completion dates for key assignments: _____
- Exam preparation strategies: _____

☒ **Skill Development & Competency Retention:**

- Hands-on practice plans: _____
- Simulation or lab requirements: _____
- Additional assessments (if required): _____

4. Faculty Support Plan

(Describe the faculty or advisor support that will be utilized.)

5. Progress Checkpoints & Accountability

☒ **Check-in Dates with Faculty and Faculty Counselor:**

1. _____
2. _____
3. _____

☒ **Midterm Progress Review Date:** _____

6. Student Commitment



I, **(Student Name)**, commit to following this learning plan and utilizing available resources to ensure my success in this course.

Student Signature: _____ **Date:** _____

Faculty/Advisor Signature: _____ **Date:** _____

Created: 03/16/2025



Appendix K – ATI Personalized Success Plan

ATI Personalized Success Plan Assignment

The purpose of this assignment is to help you become an active participant in your own learning by using ATI assessment data to guide your growth and development. Through reflection, remediation, and goal setting, you will identify strengths, address knowledge gaps, and create a plan for continued improvement. This assignment is intended to support progressive achievement of ATI benchmarks, strengthen NCLEX readiness, and foster the self-assessment and lifelong learning skills expected of professional nurses.

Part I: Assessment Data

What course did you complete this assessment in: _____

What is the name of the ATI assessment you completed: _____

When did you complete this ATI assessment: _____

What ATI proficiency level did you achieve: Level 3 / Level 2 / Level 1 / Below Level 1

What percentage did you achieve on the assessment: _____

How much time did you spend testing: _____

Part II: Preparation Reflection

What strategies did you use to prepare for the assessment?

Check all that apply:

- ☐ Completed Practice Assessment A
- ☐ Completed Practice Assessment B
- ☐ Reviewed ATI Review Modules
- ☐ Completed ATI Focused Review
- ☐ Completed ATI Post-Study Quiz
- ☐ Completed Active Learning Templates
- ☐ Used ATI Learning System
- ☐ Used BoardVitals
- ☐ Used ATI Pulse recommendations
- ☐ Used Claire AI
- ☐ Participated in a study group
- ☐ Reviewed course notes
- ☐ Reviewed lecture recordings
- ☐ Attended office hours

List three preparation strategies that helped you the most:

1. _____
2. _____
3. _____

List three preparation strategies that were ineffective:



1. _____
2. _____
3. _____

List three changes for future preparation:

1. _____
2. _____
3. _____

Part III: Performance Analysis

List three strengths and at least five opportunities for improvement identified from ATI Topics to Review.

Strengths:

1. _____
2. _____
3. _____

Opportunities for Improvement:

1. _____
2. _____
3. _____
4. _____
5. _____

Part IV: Clinical Application

Select three content areas from your ATI Topics to Review and explain why the concept is important to safe nursing practice and how lack of understanding could impact patient outcomes.

1. _____
2. _____
3. _____

Part V: Personalized ATI Success Plan

Using the results of your ATI assessment, create a plan to strengthen your nursing knowledge, clinical judgment, test-taking skills, and NCLEX readiness. Your plan should be specific, realistic, and based on the strengths and opportunities for improvement identified in your ATI Individual Performance Profile.

1. Review your ATI Topics to Review and identify the three content areas that need the most attention.

Priority Topic #1: _____

Priority Topic #2: _____

Priority Topic #3: _____

2. Based on your ATI assessment results, write five SMART goals that will help you improve your understanding of nursing content and prepare for future ATI assessments and the NCLEX.

A SMART goal should be:



- Specific – Clearly states what you will do
- Measurable – Includes a number, frequency, or other measurable outcome
- Achievable – Realistic for your schedule and resources
- Relevant – Addresses an identified learning need
- Time-Bound – Includes a completion date or timeframe

Example SMART Goals

- I will complete 30 BoardVitals questions related to pharmacology three times per week and review all rationales for the next four weeks.
- I will complete one ATI Active Learning Template for each of my three priority topics by the end of next week.
- I will attend one faculty office hour before my next ATI assessment to review areas of confusion.

My SMART Goals

1. _____
2. _____
3. _____
4. _____
5. _____

3. For each priority topic, identify what resource you will use, how often you will use it, and how you will know you are improving.

Priority Topic	ATI or Study Resource	Frequency	Time Commitment	Evidence of Improvement
Example: Pharmacology	BoardVitals Pharmacology Questions	3 times/week	30 minutes	Quiz scores improve to 75% or higher

4. Build a weekly study schedule. Estimate how much time you can realistically dedicate to ATI preparation each week before your next assessment.

Study Activity	Days per Week	Time per Study Session
Total planned study time per week:		

Part VI: Faculty Review and Approval

Faculty Review Required:

- ☐ Yes. I achieved a score of level one or below level one on my ATI CMS assessment.
- ☐ No. I achieved a score of level two or level three on my ATI CMS assessment

If faculty review is required, please have your faculty complete the section below:



This ATI Personalized Success Plan is:

- ☐ Approved
- ☐ Revision Required

Faculty Feedback (mandatory if revision is required):

Faculty Initials: _____

Date: _____

Created: 07/13/2026

Revised:

Reviewed: 08/10/2026