



**Licensed Practical Nursing  
Program  
Student Handbook**

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*This institution is authorized by:  
The Indiana Commission for Higher Education/  
The Indiana Board for Proprietary Education  
101 W. Ohio St., Suite 300, Indianapolis, IN*

# Academic Calendar

## Keystone Nursing Academy Academic Calendar

2025-2026

August 2025						
S	M	T	W	T	F	S
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3	4	5	6	7	8	9
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31						

September 2025						
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October 2025						
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November 2025						
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December 2025						
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January 2026						
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February 2026						
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March 2026						
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April 2026						
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May 2026						
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31						

June 2026						
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July 2026						
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August 2026						
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September 2026						
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QUARTER 1
QUARTER 2
QUARTER 3
QUARTER 4
PROGRAM HOLIDAYS
* CLINICAL MAKEUP DAY

## **Accreditation**

Keystone Nursing Academy (“KNA”) is currently seeking accreditation from the Indiana State Board of Nursing (ISBN) to offer a licensed practical nursing (LPN) program. Licensed practical nurses are defined by the Indiana State Board of nursing as a person “who holds a valid license issued under” the administrative code set forth by the Indiana State Board of Nursing and “who functions at the direction of: (1) a registered nurse; (2) a physician with an unlimited license to practice medicine or osteopathic medicine; (3) a licensed dentist; (4) a licensed chiropractor; (5) a licensed optometrist; or (6) a licensed podiatrist in the performance of activities commonly performed by practical nurses and requiring special knowledge or skill.”<sup>1</sup>

## **History**

Keystone Nursing Academy was established in 2022 as a non-profit organization under the Indiana Nonprofit Corporation Act of 1991. KNA received institutional authorization from the Indiana Commission for Higher Education on March 23, 2023. On June 19<sup>th</sup>, 2023, the Indiana Board of Proprietary Education granted KNA approval to offer a diploma in practical nursing. Following this process, KNA submitted its “Letter of Intent” to open a licensed practical nursing program to the Indiana State Board of Nursing (ISBN) on June 19<sup>th</sup>, 2023. KNA is pending initial accreditation by ISBN.

Keystone Nursing Academy’s institutional eligibility and program offerings are determined by a comprehensive review of all applicable state and federal laws, codes, rules, regulations, authoritative body guidance, and/or accreditation requirements. KNA recognizes the following as institutional programs whose mission, goals, and objectives are consistent with the institution:

- Certified Nurse Aide (CNA) Program
- Qualified Medication Aide (QMA) Program
- Licensed Practical Nurse (LPN) Program

## **Philosophy**

Keystone Nursing Academy believes that each nurse can give back to the profession through individual willingness to impart knowledge, encourage learning, and to motivate others with the hope of positively impacting coworkers, clients, and the profession through dedication to lifelong education and process improvements supported by evidence-based knowledge. We believe each nurse must accept the privilege to use skills and knowledge to help those in need of competent and confident care.

## **Mission**

The mission of Keystone Nursing Academy is to provide a pathway for those seeking a diploma in licensed practical nursing by providing learning experiences immersed in a

supportive community of healthcare professionals. In pursuit of this mission, Keystone Nursing Academy dedicates itself to preparing the student for licensure examination by implementing a program that provides high quality education based upon ongoing program evaluation, student success rates, and evidence-based research. Keystone Nursing Academy pursues the promotion of the role of nursing through the preparation of caregivers who will be competent, empathetic, compassionate, and who will maintain honesty and integrity while remaining respectful of all cultures and the individual choices of each client.

## **Equal Opportunity Statement**

Keystone Nursing Academy does not discriminate program admission or employment based on sex, sexual orientation, gender identity or expression, religion, race, national origin, ethnicity, disability, physical attributes, or age. Keystone Nursing Academy asks that individuals in need of reasonable accommodations identify such requests.

## **Licensed Practical Nursing Program**

### **Licensure to Practice as a Licensed Practical Nurse**

Keystone Nursing Academy has received authorization from the Indiana Board of Proprietary Education to offer a diploma program in practical nursing. The Licensed Practical Nursing (LPN) Program prepares students for practical nurse licensure.

Keystone Nursing Academy's licensed practical nursing program is designed to prepare students to practice as professional licensed practical nurses. Keystone Nursing Academy students who successfully complete all requirements for graduation will be eligible to apply to the Indiana State Board of Nursing for licensure examination.

### **Graduate Outcomes**

Upon completion of the practical nursing program, graduates of Keystone Nursing Academy will be prepared to:

1. Utilize the nursing process to assess, plan, implement, and evaluate the goals, health outcomes, and nursing care of clients while practicing within the legal boundaries of the profession.
2. Demonstrate appropriate communication modalities to collaborate with the interdisciplinary team to develop and implement a client-centered plan of care.
3. Demonstrate competent clinical judgment by utilizing evidence-based practice to provide safe and efficient client-centered care and take personal responsibility for nursing actions by accepting only those delegated tasks for which the individual is prepared, qualified, and licensed to perform.
4. Prioritize the implementation of interventions by collecting and incorporating assessment data and good time management to provide care.

5. Provide preventative interventions by connecting the client with resources for healing, health promotion, and health maintenance, and assist the client to establish, reevaluate, and modify health goals.
6. Model professionalism while incorporating diversity, equity, and inclusion into client-centered, compassionate care.
7. Maintain the privacy, confidentiality, and dignity of all clients while providing compassionate, culturally competent, and non-discriminatory care.
8. Continue to pursue educational opportunities as a means of sustaining and growing competence within the nursing profession and pursue direction from fellow members of the health care team as needed when implementing nursing practices.
9. Identify unprofessional behaviors or actions which may endanger the safety and health of clients and notify the appropriate governing body.
10. Incorporate a broad base of scientific knowledge to develop competent clinical judgment and successfully complete the practical nursing licensure examination.

### **Licensed Practical Nursing Program Curriculum Outline**

Class Days: Monday through Thursday 9:30 a.m.- 2:30 p.m.

Clinical Days: Designated days during the 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> quarters at times designated by the clinical facility.

#### **Quarter 1: 12 weeks**

Anatomy & Physiology I	4 credit hours	40 clock hours
Medical Terminology	1 credit hour	10 clock hours
Basic Math & Dosage Calculations	2 credit hours	20 clock hours
Introduction to Computer Software/EMR	1 credit hour	10 clock hours
Fundamentals of Nursing Practice	4 credit hours	40 clock hours
Fundamentals of Nursing Practice Lab	1.5 credit hour	30 clock hours
	13.5 credit hours	150 clock hours

#### **Quarter 2: 12 weeks**

Anatomy & Physiology II	2 credit hours	20 clock hours
Pharmacology I	2 credit hours	20 clock hours
Adult/ Geriatric Medical-Surgical Nursing I	2 credit hours	20 clock hours
Adult/ Geriatric Medical-Surgical Nursing I Lab	1.5 credit hours	30 clock hours
Health Assessment	3 credit hours	30 clock hours
Adult/Geriatric Medical-Surgical Nursing I Clinical (LTC facilities)	2 credit hours	60 clock hours
	12.5 credit hours	180 clock hours



### Quarter 3: 11 weeks

Pharmacology II	2 credit hours	20 clock hours
Adult/ Geriatric Medical-Surgical Nursing IIa	2 credit hours	20 clock hours
Adult/ Geriatric Medical-Surgical Nursing IIb	1 credit hour	10 clock hours
Adult/ Geriatric Medical-Surgical Nursing II Lab	1.5 credit hours	30 clock hours
Adult/ Geriatric Medical-Surgical Nursing II Clinical (Acute care and/or LTC facilities)	2 credit hours	60 clock hours
Community Nursing	3 credit hours	30 clock hours
	11.5 credit hours	170 clock hours

### Quarter 4: 14 weeks

Maternal-Child Nursing	5 credit hours	50 clock hours
Maternal-Child Nursing Clinical (Acute care and/or pediatric facility)	2 credit hours	60 clock hours
Mental Health Nursing	3 credit hours	30 clock hours
Mental Health Nursing Clinical	1 credit hour	30 clock hours
Practice Issues for Practical Nursing	1 credit hour	10 clock hours
Critical Thinking & Clinical Judgment	2 credit hours	10 clock hours lecture 20 clock hours simulation
Comprehensive Review and NCLEX Preparation	3 credit hours	30 clock hours
	17 credit hours	240 clock hours

Total Credits: 54.5

Total Clock Hours: 740

### **Academic Facilities**

Keystone Nursing Academy's academic institution is located at 8455 Keystone Crossing, Indianapolis, Indiana. The facility is open to students from 8:30am to 4:30pm on a Monday through Friday basis, excluding holidays. Current and prospective students may contact KNA's faculty by calling (317) 663-7881; clerical and support staff are readily available to ensure the needs of our students are addressed in a timely fashion.

The library consists of printed materials, as well as laptops, which students may use to access online resources. Additional online library periodical resources are available, along with articles contained within the Cochrane Library and Medscape Nurses databases and MedlinePlus, an online medical library supported by the National Library of Medicine and the National Institute of Health.

Simulation laboratories are open to students from 8:30am to 9:30am and 2:30pm to 4:30 pm on Monday and Tuesday and from 8:30am to 4:30pm on Friday.

## **Clinical Facilities**

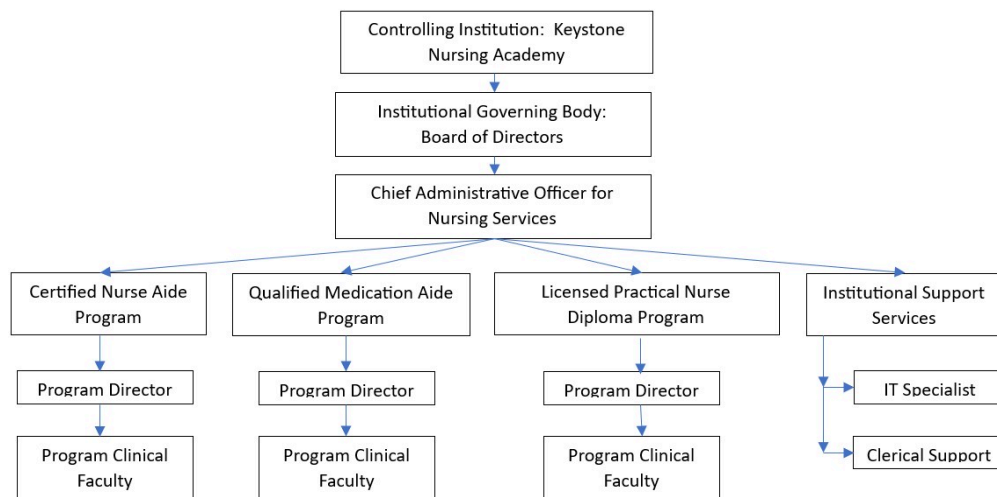
Students of Keystone Nursing Academy will have the opportunity to be immersed in a multitude of various clinical experiences that will allow students the opportunity to gain exposure to excellent educational opportunities. Keystone Nursing Academy currently has 15 collaborative clinical sites, including hospital, skilled nursing, rehabilitation, hospice, and residential settings, that will afford students opportunities for experiences in medication administration, intravenous therapy, behavioral and mental health nursing, dementia care, adult and geriatric nursing, medical-surgical nursing, pediatric nursing, maternal-child nursing, rehabilitation nursing, phlebotomy, wound care, central line management, daily collaboration with on-site primary care providers, advanced airway management, gastrostomy tube management, and management of urinary catheters, urostomies, and colostomies.

Keystone Nursing Academy's clinical facility sites include the following:

- Alexandria Care Center, 1912 S. Park Ave., Alexandria, IN 46001
- Brooke Knoll Village, 1108 Kingwood Dr., Avon, IN 46123
- Crown Pointe of Carmel, 11610 Technology Dr., Carmel, IN 46032
- Especially Kidz Health & Rehab, 2325 S. Miller St., Shelbyville, IN 46176
- Grand Valley Health & Rehab, 621 Grand Valley Blvd., Martinsville, IN 46151
- Summit Place West, 55 Mission Dr., Indianapolis, IN 46214
- Willow Crossing Health and Rehabilitation Center, 3550 Central Ave., Columbus, IN 47203
- Witham Memorial Hospital, 2605 N. Lebanon St., Lebanon, IN 46052
- The Belmont Health & Rehab, 504 Belmont Dr., Columbus, IN 47201
- Camelot Care Center, 1555 Commerce St., Logansport, IN 46947
- Persimmon Ridge Rehabilitation Center, 200 N. Park St., Portland, IN 47371
- Pineknoll Rehabilitation Center, 160 N. Middle School Rd., Winchester, IN 47394
- Twin City Health Care, 627 E. North H. St., Gas City, IN 46933
- Vermillion Convalescent Center, 1705 S. Main St., Clinton, IN 47842
- Westridge Health Care Center, 125 W. Margaret Dr., Terre Haute, IN 47802

## **Organization and Administration**

Keystone Nursing Academy and its Board of Directors delegates authority to its Chief Administrative Officer for Nursing Services who, in turn, delegates authority to the Program Director.



## Financial Information

### Tuition

The licensed practical nursing program at Keystone Nursing Academy offers only a full-time study option at this time. The total cost of tuition for the program is \$18,000. A deposit in the amount of \$4,500 is due to Keystone Nursing Academy 30 days prior to the start of the program. Subsequent tuition payments are due monthly by the 5<sup>th</sup> of each month throughout the one academic year (four quarters) program. Failure to meet the tuition deadlines may result in the removal of the student from current courses, which may breach the attendance policy.

Tuition paid to Keystone Nursing Academy includes student resources, such as textbooks, laptops, uniforms, other materials and equipment utilized for educational training, student physical examination, influenza vaccination, drug screens, PPD skin test, criminal background check, technology and library fees, liability insurance, and CPR certification.

Several entities sponsor tuition for nursing students. Students are encouraged to contact local agencies in order to seek potential opportunities for financial assistance, as Keystone Nursing Academy does not accept financial aid.

Quarterly Licensed Practical Nurse Program Costs by Quarter	
Tuition	\$4,500.00 per quarter or \$18,000 for the entirety of the LPN program
Cost Per Credit Hour	\$349.51

## **Indiana Onsite Uniform Refund Policy**

In compliance with the policy set forth by the Indiana Commission for Higher Education/Indiana Board for Proprietary Education, postsecondary educational institutions shall pay a refund to the student in the amount calculated under the refund policy specified in this section or as otherwise approved by the Commission/Board. The institution must make the proper refund no later than thirty-one (31) days of the student's request for cancellation or withdrawal.

The following refund policy applies to each resident postsecondary educational institution:

1. A student is entitled to a full refund if one or more of the following criteria are met:
  - a. The student cancels the institutional student contract or enrollment agreement within six business days after signing.
  - b. The student does not meet the postsecondary educational institution's minimum admission requirements.
  - c. The student's enrollment was procured as a result of a misrepresentation in the written materials utilized by the postsecondary educational institution.
  - d. If the student has not visited the postsecondary educational institution prior to enrollment, and, upon touring the institution or attending the regularly scheduled orientation/classes, the student withdrew from the program within three days.
2. A student withdrawing from an instructional program, after starting the instructional program at a postsecondary educational institution and attending one week or less, is entitled to a refund of 90 percent of the cost of the financial obligation, less an application/enrollment fee of ten percent of the total tuition, not to exceed one hundred dollars.
3. A student withdrawing from an instructional program, after attending more than one week but equal to or less than 25 percent of the duration of the instructional program, is entitled to a refund of 75 percent of the cost of the financial obligation, less an application/enrollment fee of ten percent of the total tuition, not to exceed one hundred dollars.
4. A student withdrawing from an instructional program, after attending more than 25 percent but equal to or less than 50 percent of the duration of the instructional program, is entitled to a refund of 50 percent of the cost of the financial obligation, less an application/enrollment fee of ten percent of the total tuition, not to exceed one hundred dollars.
5. A student withdrawing from an instructional program, after attending more than 50 percent but equal to or less than 60 percent of the duration of the instructional program, is entitled to a refund of 40 percent of the cost of the financial obligation, less an application/enrollment fee of ten percent of the total tuition, not to exceed one hundred dollars.
6. A student withdrawing from an institutional program, after attending more than 60 percent of the duration of the instructional program, is not entitled to a refund.

## **Liability Insurance**

Students enrolled in the nursing program are covered by Keystone Nursing Academy's liability insurance while participating in planned program activities

Keystone Nursing Academy maintains professional liability insurance that covers KNA, students, and instructors of KNA with limits in the amount of \$1,000,000 per occurrence and \$3,000,000 aggregate. This coverage extends to clinical experience at an institution other than Keystone Nursing Academy when it is a part of the training program. Each student may obtain additional individual liability insurance. This coverage does not apply to employment situations, job shadowing experiences, or externships.

## **Nursing Program Admission and Enrollment**

### **Admission to the Nursing Program**

Keystone Nursing Academy will begin accepting applications for enrollment to the practical nursing program six months before the beginning of the next available cohort. Applications are due ninety days prior to the start of the cohort, and admission determinations will be made a minimum of sixty days prior to the beginning of the cohort. Enrollment in each nursing program is based on several factors and is determined by the Indiana State Board of Nursing.

1. Prior to application to the nursing program, applicants must be graduated from a state-approved high school or its equivalent and submit a complete transcript *or* have qualified for equivalency to high school graduation on the basis of satisfactory completion of the general equivalency degree test (GED). An official copy of the applicant's high school transcript or GED test results demonstrating satisfactory completion must be submitted no less than 30 calendar days prior to the start of the LPN program.
2. Applicants must complete an application form for admission to the nursing program by the pre-announced deadline to enroll in the next scheduled program.
3. Initial admission eligibility is determined by the following:
  - a. Completion of HESI Admission Assessment Exams with scores of greater than or equal to 70% on each exam.
    - i. An applicant will have a total of three (3) attempts per calendar year to take the HESI Admission Assessment Exams.
    - ii. The initial HESI Admission Assessment Exams will be of no cost to the applicant, if scheduled through Keystone Nursing Academy.
    - iii. The HESI Admission Assessment Exams may also be taken at a Prometric testing center. If testing at a Prometric testing center, the applicant will be responsible for all testing fees and for providing Keystone Nursing Academy with results.

- iv. The highest score from each HESI Admission Assessment Exam attempt will be used to calculate the applicant's total points toward admission.
  - v. Applicants must wait a minimum of thirty (30) days in between each HESI Admission Assessment Exam attempt.
  - vi. Applicants will have three (3) hours to complete all HESI Admission Assessment Exams administered on site at Keystone Nursing Academy.
  - vii. HESI Admission Assessment Exams scores are considered valid for up to one (1) year from the original test date.
4. Admission to the nursing program is selective and determined using a weight-based points system. Applicants will be ranked based on their combined total score of the possible 125 points using the criteria below.

<b>HESI Admission Assessment Exam Scores (Maximum of 100 of points or 80% of the weight-based points system)</b>		
HESI Exam	Point Calculation	Maximum Points Possible
<i>English Language (Reading Comprehension)</i>	>95% = 40 points 90-94% = 35 points 85-89% = 30 points 80-84% = 25 points 75-79% = 20 points 70-74% = 15 points <69% = 0 points	40
<i>English Language (Vocabulary and General Knowledge)</i>	>95% = 35 points 90-94% = 30 points 85-89% = 25 points 80-84% = 20 points 75-79% = 15 points 70-74% = 10 points <69% = 0 points	35
<i>Math (Basic Math Skills)</i>	>90% = 25 points 85-89% = 20 points 80-84% = 15 points 75-79% = 10 points 70-74% = 5 points <69% = 0 points	25
<b>Healthcare Experience (Maximum of 25 points or 20% of the weight-based points system)</b>		

<b>Healthcare-Associated License (Maximum of 25 points)</b>	
Years of Experience	Points Awarded
<i>1-3</i>	<i>5</i>
<i>4-6</i>	<i>10</i>
<i>7-9</i>	<i>15</i>
<i>10-12</i>	<i>20</i>
<i>&gt;13</i>	<i>25</i>
<b>Healthcare-Associated Certification (Maximum of 15 points)</b>	
Years of Experience	Points Awarded
<i>1-3</i>	<i>3</i>
<i>4-6</i>	<i>6</i>
<i>7-9</i>	<i>9</i>
<i>10-12</i>	<i>12</i>
<i>&gt;13</i>	<i>15</i>
<b>Clinical Healthcare Experience without Licensure/ Certification (Maximum of 10 points)</b>	
Years of Experience	Points Awarded
<i>1-2</i>	<i>2</i>
<i>4-6</i>	<i>4</i>
<i>7-9</i>	<i>6</i>
<i>10-12</i>	<i>8</i>
<i>&gt;13</i>	<i>10</i>

In the event a tie occurs between applicants, the applicant whose overall HESI Admission Assessment Exams scores are highest will be prioritized in the selection process. In the unlikely event that a tie continues to occur following this consideration, the Program Director or designee will make the final decision as to who the selected candidate shall be.

5. Upon acceptance into the nursing program, the following requirements must be fulfilled prior to the start of the program:
  - a. Completion of health appraisal form
  - b. PPD skin test, IGRA, or chest x-ray completed within the last year
  - c. 12-panel drug screen
  - d. A certified criminal background check

Please note that some of Keystone Nursing Academy's collaborative clinical sites require proof of immunization prior to a student attending clinical. Students may be given the opportunity to receive some vaccinations during the program's orientation process prior to the start date of the program. The following will be required of each student no later than 60 days prior to the start of clinical rotations:

- a. Hepatitis B vaccination record or titer
- b. COVID-19 vaccination record or exemption
- c. MMR vaccination record or titer
- d. Varicella vaccination record or titer
- e. Tdap vaccination record
- f. Influenza vaccination

### **Transfer of Credits**

Students who wish to transfer to Keystone Nursing Academy from another institution will be evaluated based upon the same admission criteria as other applicants. No special consideration will be given to transfer students during the admission process, as Keystone Nursing Academy does not permit the transfer of credits from other institutions of higher learning.

### **Criminal History Background Check and Drug Screen**

Criminal history background checks and drug screens are required upon acceptance into the nursing program, as students are required to complete clinical rotations and provide client care in order to meet program requirements. Students with an unsatisfactory criminal background or with unacceptable drug screen results will forfeit their entrance into the nursing program. Students with unacceptable drug screen results will be eligible to reapply for the next cohort.

Students with concerns regarding previous convictions which may preclude licensure and eligibility may apply for Prelicensure Determination through the Indiana State Board of Nursing by visiting <https://www.in.gov/pla/licensure-preapproval/>.

Students are required to notify the Program Director, or designee in writing within three (3) calendar days of: (1) any arrest, conviction, or entry of a guilty plea for any criminal offense, or anything that may or does result in placement on the Medicare & Medicaid Exclusion List OIG Exclusion list; or (2) immediately upon reporting to educational activities following such

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events, whichever is earlier. This reporting obligation includes drug or alcohol related offenses (including DUI) but does not apply to traffic tickets or citations. Failure to report under this policy subjects a student to dismissal from the program. Changes in the criminal background status of a student that occur during the program may result in the dismissal of the student from the program.

All criminal charges and/or convictions noted on a student's criminal background check will be reported to the clinical site within sixty (60) days prior to the start of the student's clinical rotation at the site. Clinical sites reserve the right to deny clinical placements to students based upon prior criminal charges and/or convictions. KNA will attempt to find alternate clinical placement for a student; however, alternate placement is not guaranteed, and denial of clinical placement by a collaborative facility may impede a student's progression through the program.

### **Drug and Alcohol Policy**

The use or possession of alcohol or drugs during educational or clinical activities is prohibited by Keystone Nursing Academy. If a student is suspected of being under the influence of drugs or alcohol, they will be required to leave the educational site, they will be considered unfit to participate in educational activities. The student should be dissuaded from driving a motor vehicle and be advised that law enforcement will be notified if driving occurs. Assistance will be offered to secure safe transportation to an alternate location.

KNA reserves the right to ask students to submit to random drug screens at any time during enrollment in the nursing program for reasonable suspicion. Reasonable suspicion for the use of drugs or alcohol may be indicated by a student's behavior, body language, speech, odor, impaired ability to participate in activities, or physiological signs associated with drug or alcohol use. Students who are suspected to be under the influence of drugs or alcohol or have a positive drug screen during the course of the program may be subject to dismissal from the program.

Students using a prescription drug that may impair mental or motor functions and affect the student's ability to perform duties safely must report the use of that prescription drug to faculty prior to reporting to an educational activity after its use. For the safety of all, persons using such prescription medications may be temporarily excused from educational activities until released as fit for duty by the prescribing physician. Keystone Nursing Academy reserves the right to have a physician it selects determine if a medication produces hazardous effects or to restrict the quantity the student may bring to educational activities.

### **Immunizations**

Requests for exemptions from required immunizations are allowed on the basis of medical contraindications or religious beliefs. Students should submit appropriate documentation from health care providers or documentation of religious restrictions with requests for immunization exemptions.

Students who are exempt from or decline immunizations may be subject to additional requirements within the clinical setting in order to reduce the risk of potential disease transmission. Additional requirements will be determined by Keystone Nursing Academy faculty and/or the clinical site. The clinical site may deny the student access to participating in clinical experiences, which may impact the student's ability to successfully complete the clinical course.

## **Academic Experience**

### **General Guidelines for Student Safety**

All students are required to follow all policies, procedures, and safety protocols. A student should report to faculty any conditions which may impact their health or ability to participate in educational activities, including, but not limited to, injuries, pregnancy, immunosuppression, illness, surgeries, seizure disorders, diabetes, or medical restrictions. In some circumstances, students may be asked to provide medical clearance documentation from their health care provider in order to participate in clinical experiences.

### **Professional Conduct**

Keystone Nursing Academy has established the following set of professional behaviors to promote the development of knowledge and skills in preparation for obtaining positions in the profession of nursing:

- Adhere to all policies and procedures of Keystone Nursing Academy and clinical sites.
- Arrive for educational activities on time.
- Establish responsibility and accountability in all educational activities.
- Exhibit effective communication and collaboration with peers, faculty, clients, and clinical site personnel.
- Display behaviors and interactions with peers, faculty, clients, and clinical site personnel that demonstrates respect and protects dignity and individual rights.
- Maintain the confidentiality and privacy of all information pertaining to clients by adhering to laws outlined by the Health Insurance Portability and Accountability Act (HIPAA) of 1996. An overview of HIPAA is located in the Appendices.
- Ensure that clients receive timely, quality, non-discriminatory, and ethical care.
- Adhere to provisions outlined by the American Nurses Association Code of Ethics. The Code of Ethics is located in the Appendices.
- Practice within the scope defined by the Indiana Nurse Practice Act. The Indiana Nurse Practice Act, as it pertains to licensed practical nurses, is located in the Appendices.

### **Student Laptops**

Student laptops are required for all classroom educational activities. In many courses, an electronic textbook replaces a physical textbook. Students whose laptops become lost, damaged, or stolen are responsible for replacing the laptop at their own expense. Failure of the student to

bring their laptop to a class in which the laptop is required may result in being considered absent from the class.

### **Attendance for Educational Activities**

- Educational activities include on-site classes, skills simulation hours, and clinical hours.
- Punctuality is mandatory.
- Students are expected to schedule employment and other obligations to accommodate educational activities.
- Students are considered tardy if they arrive to the educational activity after the instructor begins the educational activity, or if they remove themselves from the educational activity prior to the instructor ending the activity.
- Students are considered absent if they fail to attend educational activities, or if they miss more than thirty (30) minutes of the educational activity.
- No more than one absence per course per quarter is permitted.
- The accumulation of two tardies is considered an absence.
- In the event that a student will be absent, they must personally inform the instructor. It is not acceptable for another student to inform the instructor of another individual's absence.
- Failure to appropriately notify faculty of an absence may result in dismissal from the program.
- The student may be considered absent if they fail to bring their laptop to a class in which it is required.
- Keystone Nursing Academy may remove any student from an educational activity who is deemed by the judgment of faculty to impair safety.
- Absences and tardiness will be reflected in students' evaluations.
- Specific days which are assigned to clinical or skills simulation activities are determined in part by availability of clinical sites. Keystone Nursing Academy will strive to provide students with appropriate advanced notice of schedule changes. However, students should be prepared to accommodate potential changes in scheduling.
- Supplementary classroom or skills simulation hours may be scheduled by students during the week for practicing skills or for remediation.
- Visitors, such as family, children, or pets, are not permitted to attend educational activities with students and may not attend class or visit the clinical education site.

### **Academic Progression/Probation/Program Withdraw/Readmission/Failure**

#### **Academic Progression**

If a student fails to receive a "C" or better or withdraws from a course, or the program, the student may have one attempt to repeat the course. The student may continue to progress in other courses of study that do not require the successful

completion of the course in which the student did not receive a “C” or better or from which the student withdrew. Additionally, the student must re-enroll and attempt to successfully complete the unsuccessful course within two (2) years. Should a student fail to successfully complete any course with a “C” or better or withdraws from a course on a second attempt, the student shall be withdrawn from the program. One should note that a “C-” is not considered a passing grade.

### **Academic Probation**

If a student fails to receive a “C” or better, withdraws from a course with a failing grade, receives an unsatisfactory Clinical Performance Evaluation, or has been readmitted to a course for a second attempt, the student will be placed on “Academic Probation.” The student will remain on academic probation until the successful completion of the required course **and** achievement of a cumulative GPA of 2.5 or higher. Should a student withdraw with a failing grade or fail to successfully complete any course with a “C” or better on a second attempt, the student shall be withdrawn from the program. One should note that a “C-” is not considered a passing grade. Students on academic probation will be required to attend tutoring or complete additional remediation at the discretion of the Program Director or designee.

### **Program Withdraw**

Keystone Nursing Academy recommends that upon beginning the program, students remain in the program continuously until completion. However, KNA acknowledges that situations might arise in which a student is withdrawn from the program.

### **Voluntary**

In the event that a student must voluntarily withdraw from the program due to life circumstances that might prohibit a student’s successful progression/completion of a KNA program, the student must notify the Program Director or designee in writing of their need to withdraw whether that might be temporarily or permanently. All refunds shall be issued in accordance with the Indiana Onsite Uniform Refund Policy. Students who voluntarily withdraw from a KNA program are eligible for re-admission in accordance with the below information entitled “Readmission.”

### **Involuntary/Expulsion**

All students who are involuntarily withdrawn from one of KNA’s programs due to a failure to pay the associated program costs will not be made eligible for re-enrollment/re-admission to a program until the balance owed is settled in its entirety. Students who are withdrawn due to a failure to pay will be

allotted the opportunity to re-enroll in any course(s) at the next immediately available opportunity of the course(s).

If a student fails to receive a “C” or better in two or more courses or withdraws from two or more courses with a failing grade, the student will be withdrawn from the program. Students who are withdrawn under this circumstance will be allotted the opportunity to re-enroll in the courses at the next immediately available opportunity of the courses. The student must re-enroll and attempt to successfully complete the unsuccessful courses within two (2) years.

All students who are involuntarily withdrawn, or expelled, due to a violation of the Student Code of Conduct, a program-specific student handbook, or any of KNA’s institutional policies shall not be eligible for re-enrollment/re-admission in any of KNA’s programs at any time. In the presence of a witness, the Program Director, or designee shall, in both written form using the “Notification of Expulsion and Right to Appeal” document and in verbal form, notify the student who is to be expelled from the institution of the student’s right to appeal the Program Director’s decision. Written notice shall include the following:

- Date of violation
- Description of the violation
- Reference to code, handbook, or policy/procedure violation
- Documentation that the student was previously made aware of the referenced code, handbook, or policy/procedure (i.e., signed acknowledgment forms)
- Date of expulsion
- Procedure for appealing an expulsion

### **Appealing an Expulsion**

If the student wishes to appeal the Program Director’s decision, the student must submit a completed “Request for Reconsideration of an Expulsion” form to the Chief Administrative Officer of Nursing Services within ten (10) calendar days of receipt of the Program Director’s notification of expulsion. Should the student fail to submit the “Request for Reconsideration of an Expulsion” within the allotted time frame or fail to appear at the appeals hearing, the student forfeits all rights administratively to contest and appeal the expulsion.

Within two (2) business days of having received the appropriate documentation, the student shall receive from the Chief Administrative Officer of Nursing Services notification (in both verbal and written form) of a scheduled in-person or virtual hearing.

This meeting shall occur within three to five days from receipt of notification from the Chief Administrative Officer of Nursing Services.

At the time of the meeting, neither the student nor the Program Director shall be permitted to present any new evidence to support either position that is not contained within either party's documentation. The Chief Administrative Officer of Nursing Services will provide both the Program Director and the student with an opportunity to read their description of the event(s) and supportive references contained within the documentation. The Chief Administrative Officer of Nursing Services reserves the right to question both parties to gather any additional information they deem necessary to render its decision. If either the Program Director or the student identify witnesses to the alleged violation, each is responsible to name said witnesses in their documentation and submit a written statement of events from said witness with their initial documentation. The Chief Administrative Officer of Nursing Services, at their sole discretion, may choose to allow for witnesses to appear at the appeals hearing.

Following completion of the hearing, the Chief Administrative Officer of Nursing Services will deliberate for no more than one (1) hour. The Chief Administrative Officer of Nursing Services will then render their decision both verbally and in writing to the student and the Program Director. Should the Chief Administrative Officer of Nursing Services' decision reverse the Program Director's decision to expel, the Chief Administrative Officer of Nursing Services will provide the student a comprehensive list of all missed assignments and clinical hours that occurred during the appeals process. The student will be granted ten (10) business days to complete all missed assignments. If the student was unable to attend clinical hours during the appeals process, the Program Director shall meet with the student within two (2) business days of a favorable determination to arrange for missed clinical hours to be completed on an agreed upon schedule in no more than fifteen (15) business days. Should the Chief Administrative Officer of Nursing Services' decision determine that the student is to be expelled from the institution, this decision is effective from the date of the alleged violation. The student shall be immediately removed from all coursework. Any student expelled from the institution will not be eligible for a refund of any costs associated with any portion of the coursework for which the student is disenrolled. Should the student have pre-paid tuition for future coursework for which the student is no longer permitted to complete, a refund for associated fees with the future coursework will be issued in accordance with the institution's refund policy.

Of note, during the appeals process, the student will maintain access to all course information. KNA recommends that the student continues to complete and prepare for submission of all required assignments that were due throughout the appeals process. Requests for extensions for submission of required assignments beyond the ten (10)

business days for missed assignments or fifteen (15) business days for completing clinical hours will not be granted.

### **Readmission**

Keystone Nursing Academy recommends that once students begin the program, they remain enrolled continuously until completion. In order to be eligible for readmission, the student must reapply to the KNA program of their choosing. Re-admission to KNA shall be evaluated as though the student is being admitted for the first time. Should the student be readmitted to a program in which they have previously withdrawn, the student will receive credit for all successfully completed courses within the last two (2) years and progress accordingly. Students who seek readmission to KNA in a program different from that of their original enrollment will not receive credit for any previously completed coursework. Students wishing to readmit to the licensed practical nurse program after having previously been removed from the program due to their failure to successfully progress will be evaluated on a case-by-case basis. Students who fail to successfully progress in the licensed practical nurse program may not be readmitted for a period of one year following their removal from the program. These students must submit to the Program Director, or designee a personal statement with an action plan designed to ensure their future success in the LPN program. The Program Director, or designee will notify the student in writing of their decision regarding readmission. Should the student disagree with the Program Director, or designee's decision, they must follow the "Student Concerns" process to appeal this decision. KNA makes readmission to the institution available to a student only once. All past due balances must be paid in full prior to readmission.

### **Grounds for Involuntary Dismissal**

A student who violates procedures or policies, engages in misconduct, or fails to adhere to Keystone Nursing Academy's instruction to discontinue misconduct or inappropriate behavior will be subject to dismissal from the educational activity or from the program. See the section titled "Program Withdraw: Involuntary/Expulsion". Inappropriate behaviors and misconduct include, but are not limited to, the following:

- Engaging in academic dishonesty. Academic dishonesty may include:
  - o Engaging in plagiarism. Plagiarism includes using or incorporating another author's ideas, words, language, designs, or other work into the student's own without appropriate paraphrasing or quotation and/or acknowledgement of the original author.
  - o Attempting to access or use materials intended to assist in taking an exam or quiz, such as electronic devices or written materials.
  - o Attempting to complete an assignment for another student.

- o Utilizing or consulting generative artificial intelligence (AI) tools or software of any kind to complete an assignment. Use of AI will be considered plagiarism.
- Failure to follow policies and procedures or the instructions of the faculty member or clinical site supervisor or impeding upon the safety of students, faculty, clients, or clinical site personnel.
- Performance of unapproved skills or tasks during the clinical experience.
- Interfering, attempting to interfere, or impeding upon another student's access to educational activities and/or ability to learn.
- Unsatisfactory change in the student's criminal background history.
- Failure to report changes in the student's criminal background history.
- Positive drug screen or suspicion of being under the influence of drugs or alcohol.
- Failure to appropriately notify faculty of absences.
- Engagement in client abuse, neglect, or abandonment, or failure to report suspected abuse, neglect, or abandonment.
- Unsuccessfully maintaining a GPA of 2.0 following a period of academic probation
- Absences exceeding one per course per quarter.
- Nonpayment of tuition resulting in a breach of the attendance policy.
- Failure to report personal relationships with faculty.
- Refusal to submit to a search request based upon reasonable suspicion.

### **Exams**

All exams will be conducted in-person and under the supervision of nursing faculty staff members utilizing electronic testing to ensure exam security. Exams will be comprised of NCLEX Next Generation format questions. Additionally, upon the completion of course content related to dosage calculation, each nursing course exam will contain no less than 5% of dosage calculation related questions.

Prior to testing, students are to place all personal belongings in the designated area. No electronic devices of any kind are permitted in the testing area, including smart/AI glasses and all watches. Additionally, students are not allowed to wear hats during an exam and/or have snacks or drinks in the testing area without prior approval. If a student requires access to an electronic device for health reasons they must meet with the Program Director or designee prior to the first exam to discuss accommodations. Students may only use the calculators, pencils, and scrap paper provided by KNA. Additionally, students may be asked to remove jackets or show forearms if wearing long sleeves.

Exams will have time limits designated by the faculty. Any questions not answered within the allotted time will be considered incorrect. Any students with an Individualized Education Plan (IEP) will be accommodated accordingly.

Students may not leave the testing room at any time until the exam or quiz has been completed. Should a student exit the testing room prior to completing an exam or quiz, the



student's exam or quiz will be considered completed, and the student will receive credit for only the completed portions of the exam or quiz.

Students who will be absent from class on the day of an exam must, prior to the exam date, arrange a time with the instructor to make up the missed exam. The missed exam must be made up within seven business days of the original exam date. No scores for any student will be released until all students have taken the exam.

Students will have the opportunity to review exams and quizzes after all students have completed the exam or quiz and after review by the instructor. Student review of missed items will take place in person with an instructor. Students may take brief notes of missed content areas, but may not note questions verbatim or take photographs of the exam or quiz. The notes must be shown to the faculty member prior to the student leaving the area.

After review of a test, students may challenge questions to be removed from the test or alternative answers accepted. The student must, in writing, explain why they believe the alternative answer is correct or why the chosen answer is incorrect. The challenge must include sources from approved course material and be completed within 10 business days of the release of students' scores.

### **ATI Content Mastery Series PN Assessments**

At the completion of each nursing course, the student will take the ATI Content Mastery Series PN Proctored Assessment for the course.

In preparation for the Proctored Assessment, the student must:

1. Complete Practice Assessment A
2. Complete a focused review/remediation for missed topics on Practice Assessment A
3. Complete Practice Assessment B with a minimum score of 85% (Practice Assessment B may be taken multiple times)

During the focused review, the student will complete remediation for each topic missed on the Practice Assessment. Remediation consists of the student identifying a minimum of three critical points relevant to each missed question topic and creating a summary of why the student feels that the question was missed. An outline for remediation is provided in the course syllabi.

Both Practice Assessments and associated focused review/remediation must be completed prior to the Proctored Assessment.

A focused review/remediation is also required for all students following the Proctored Assessment. A student who achieves a Proficiency Level of 1 or below on the Proctored Assessment must retake the Proctored Assessment by the end of the quarter. The Proctored Assessment Retake may be completed without remediation; however, the student will not receive any remediation points.

Failure to complete assessments and focused reviews/remediations as noted above will result in no points being awarded.

The total points achieved from the preparation, proctored assessments, and focused reviews/remediation will count for 100 points of the student's grade.

A maximum of 100 points can be achieved by:

1. Preparing for the assessment
2. Achieving Proficiency Level 3
3. Completing remediation for missed topics

The following table details how points may be achieved. No partial points will be awarded in any category.

ATI Practice Assessment A	Remediation (Active Learning) 30 pts	ATI Practice Assessment B	Recommended Remediation	ATI Proctored Assessment	Remediation (Active Learning) 30 pts	ATI Proctored Assessment Retake	Total Possible Points
Score 90-100%	Minimum 1 hour focused review + remediation	Score 90-100%	Minimum 1 hour focused review	Proficiency Level 3- 40 pts	Minimum 1 hour focused review + remediation	Not required	100/100
Score 80-89%	Minimum 2 hours focused review + remediation	Score 80-89%	Minimum 2 hours focused review	Proficiency Level 2- 30 pts	Minimum 2 hours focused review + remediation	Not required	90/100
Score 70-79%	Minimum 3 hours focused review + remediation	Score 70-79%	Minimum 3 hours focused review	Proficiency Level 1- 10 pts	Minimum 3 hours focused review + remediation	Retake Required On retake, if student achieves: Proficiency Level 2- 10 pts Proficiency Level 1- 7 pts Below Proficiency Level 1- 0 pts	80/100
Score below 69%	Minimum 4 hours focused review + remediation	Score below 69%	Minimum 4 hours focused review	Below Proficiency Level 1- 0 pts	Minimum 4 hours focused review + remediation	Retake Required On retake, if student achieves: Proficiency Level 2- 10 pts Proficiency Level 1- 7 pts Below Proficiency Level 1- 0 pts	70/100

### **PN Content Mastery Series Proficiency Level Definitions**

#### **Proficiency Level 1:**

- The student is expected to minimally meet the NCLEX-PN standards in the content area.
- The student should demonstrate a level of knowledge in the content area that is required to show academic readiness for advancing content.

- The student should be able to meet the absolute minimum standards for performance in the content area.

#### Proficiency Level 2:

- The student is expected to clearly meet the NCLEX-PN standards in the content area.
- The student should demonstrate a high level of knowledge in the content area that is more than satisfactory to show academic readiness for subsequent advancing content.
- The student should exceed minimum standards for performance in the content area.

#### Proficiency Level 3:

- The student is expected to exceed the NCLEX-PN standards in the content area.
- The student should demonstrate a high level of knowledge in the content area that confidently shows academic readiness for subsequent advancing content.
- The student should exceed the majority of standards for performance in the content area.

### **Accommodated Testing**

Keystone Nursing Academy will accommodate qualified students with a diagnosed need for accommodated testing. Students must provide documentation from a medical provider or diagnostician of reason for need for accommodated testing and necessary modifications. Students may also provide an IEP. The student must provide any necessary modified equipment and the manufacturer's instructions for use of the equipment.

### **ATI Live Review**

An ATI Live Review will be held onsite at the end of the fourth quarter as a part of the Comprehensive Review and NCLEX Preparation course. The Live Review will consist of three days of NCLEX preparation presented by one of ATI's NCLEX specialist nurse educators. Students will be made aware of the date and time of the Live Review in advance. While the Live Review will be held on normal class days, the times may vary from normal class times.

Attendance of all three days of the Live Review is mandatory for all students in order to complete the course. Any request for absence during the Live Review must be approved by the Program Director in advance. Students are required to sign in on the official attendance roster daily and participate in the review by engaging with the educator, participating in review activities, and adhering to the recommended study plan.

Students are required to bring a printed copy of their ATI Comprehensive Predictor report on the first day of the Live Review.

### **Late Assignments**

Please note that assignment due dates are determined by faculty, who have the ability to adjust assignment due dates as appropriate. Students should communicate with faculty in advance if it is known that a student will not be able to submit an assignment by its respective due date. Late assignments will be subject to a reduction of one (1) letter grade for each day past the original assignment due date.

### **Scheduling Make-up Time for Missed Educational Activities**

It is the responsibility of the student to make arrangements with the instructor to schedule time for making up educational activities missed due to absence. It is at the discretion of the course instructor as to the scheduling of missed educational activities based upon instructor availability. Make-up activities may be scheduled on days or at times that are not reflective of typical days and times of the educational activities.

*All* required clinical hours must be made up in order for a student to continue in the program. Failure of students to make up missed educational activities may result in the reduction of the course letter grade. A student's absence from more than two clinical days will result in withdrawal from the course.

### **On-Site Educational Activity Cancellation due to Inclement Weather or Instructor Illness**

In the event Keystone Nursing Academy must close due to inclement weather or instructor illness, an email regarding the closure will be sent to students and may include alternative educational activities to be completed independently by the student. In less severe instances of inclement weather or instructor illness, cancellation of class is left to the discretion of the individual instructor. In this case, every effort will be made to contact each class member via email or text.

### **Grading Scales**

Keystone Nursing Academy does not round grading results.

Keystone Nursing Academy does not offer extra credit points.

The following standard grading scale will be used for all Keystone Nursing Academy courses:

A 93-100%	A- 90-92%	
B+ 87-89%	B 83-86%	B- 80-82%
C+ 77-79%	C 73-76%	C- 70-72%
D+ 67-69%	D 63-66%	D- 60-62
F 59% or below		

The following scale will be used to determine grade point average:

A 4.0	A- 3.7	
B+ 3.3	B 3.0	B- 2.7
C+ 2.3	C 2.0	C- 1.7
D+ 1.3	D 1.0	D- 0.7
F 0.0		

### **Graduation Requirements**

- Completion of one academic year (four quarters) program (52.5 credits), which includes a minimum of 210 clinical hours and 110 simulation laboratory hours.
- Cumulative GPA of 2.0 or higher.
- Students must complete all requirements for graduation in order to participate in commencement exercises.

### **Laboratory/ Simulation Experience**

Laboratory and simulation experiences give students the opportunity to practice and demonstrate nursing skills and participate in a variety of client care scenarios. These experiences provide a safe clinical learning environment in which missteps are viewed as learning opportunities. Students will be required to demonstrate competency in nursing skills related to didactic content and participate in simulation experiences. At times, simulation experiences may be assigned to replace clinical hours to facilitate student exposure to experiences which may not be attainable through traditional clinical experiences.

### **Skills Modules**

Prior to each skills laboratory, students are required to complete the assigned Assessment Technology Institute (ATI) skills modules. Failure to complete the assigned modules will result in the student being excused from the lab, and the student will be counted as absent from the laboratory day.

Completion of the module includes the pre-test, module content, and post-test. Additionally, students must meet the time expectation for each module. Time expectations are the minimum amount of time to be spent in the module. Students are encouraged to take additional time as needed, and total time spent will be verified. The student must meet the minimum time requirement and score at least 80% on the post-test to attend the laboratory day.

The student shall take a screenshot or download a PDF of the completion transcript and turn it in to the drop box prior to the lab start time.

Students who do not successfully demonstrate a skills competency on the first attempt will be required to complete remediation and will have one additional attempt to successfully demonstrate the skill. Remediation will include: the instructor will immediately review with the student the mistakes made and the proper technique. The student must then repeat the ATI skill module, with a minimum of one hour of participation and 90% on the post-test. The student will then be eligible to reschedule and complete a second attempt. The same skill will be utilized for the second attempt, therefore there will be no preparation time given in the lab. If the skill is not completed safely on the second attempt, the student will fail the lab and will not be eligible to continue in the program.

### **Lab Final Exam**

The lab final exam will be a skills check-off and may include any skill covered throughout the program. The lab final may occur outside of normal lab times due to scheduling needs. The dates and times will be posted in advance, and students will select an individual time. If a student does not come at their designated time, or the student is late, it will be considered a failure for their first attempt. Students will have two attempts to successfully complete the selected skill. If the skill is not completed successfully on the second attempt, the student will fail the lab course and will not be eligible to continue in the program.

Students are expected to follow all other lab protocols during the final.

#### **Lab Final Exam Procedure:**

1. The student will randomly pick the skill they are to perform.
2. The student will be given 10 minutes to prepare and review. Students may bring written or printed notes.
3. When the student is ready to begin, they will inform the instructor. All actions are included in the evaluation. The instructor cannot answer questions or give cues to assist the student in completing the skill.
4. The instructor may assist the student in the capacity of an unlicensed assistive personnel (UAP), if requested. This includes retrieving additional supplies or assisting with positioning the manikin. The instructor will assist only if asked and must be given simple, clear instructions by the student.

5. The student is expected to complete the skill competently. This includes incorporating client identifiers, medication rights, client teaching, ensuring privacy and dignity, infection control, etc., along with correctly completing the steps of the skill.

If a student is unsuccessful in competently completing the skill, the instructor will review the missteps and proper technique. The student must complete the ATI skill module again, with a minimum time spent of 1 hour. The student must score at least 90% on the post-test. The student will then be eligible to reschedule and repeat the skill. The same skill will be utilized for the second attempt; therefore, no preparation time will be given in the lab.

### **Medication Administration during Laboratory/ Simulation Experiences**

During simulation and/or laboratory experiences, students might be required to demonstrate their ability to properly administer medications. It is important for the student to understand that each item being administered is a product designed to mimic the appearance of a particular drug formation. These products are not safe for ingestion, despite their lack of medicinal effect. Students are never to administer any product used in simulation/lab/clinical experiences to themselves or other students. Lastly, all liquids used to imitate medications, such as those in vials or other containers, are water or 0.9% NaCl (“normal saline”). All products designed to imitate a medication will be clearly marked as such.

### **Video Monitoring**

Simulation experiences in the lab may be videotaped or photographed for educational purposes. It is the responsibility of the student to notify the instructor or the Program Director or designee if there is an objection to video recording, photography, or use of photographs.

### **Professionalism during Simulation Experiences**

While utilizing the simulation lab, students will adhere to the following expectations and guidelines:

- No photos or videos may be taken.
- Students must wear uniforms, including name tags.
- Supplies must be opened carefully so that they may be repackaged and used again, if possible.
- Personal items, including cell phones, must be stored in the designated area; no personal items should be brought into the lab.
- Discussion of individual or group performances during laboratory/simulation experiences should not occur outside of the facility.
- Students may not discuss details of simulation scenarios outside of the lab in order to maintain the integrity of clinical simulations.

- Do not attempt to practice or operate simulation equipment without permission and guidance from faculty.
- Pens, markers, topical products, adhesive, etc. may not be used on the manikins, as they may cause permanent damage. Pens and markers should not be used around the manikins.
- If equipment is lost or damaged during the lab experience, the instructor must be notified immediately.
- Gloves must be worn at all times when touching the manikins, unless specifically told otherwise.

Simulation laboratories are open to students from 8:30am to 9:30am and 2:30pm to 4:30 pm on Monday and Tuesday and from 8:30am to 4:30pm on Friday.

## **Clinical Experience**

### **Clinical Expectations**

Keystone Nursing Academy maintains clinical site collaborative agreements with healthcare facilities throughout the state of Indiana. Each clinical site has been selected to expose the student to as many learning opportunities as possible.

Keystone Nursing Academy requires students to perform nursing skills safely and competently and to demonstrate personal accountability. Students should exhibit growth and improvement with the progression of the program by meeting clinical objectives. Should questions or doubts associated with the provision of client care arise, students are expected to immediately seek clarification from clinical instructors or appropriate clinical site staff.

Keystone Nursing Academy instructors or clinical site personnel who provide student supervision of the clinical experience are responsible for the assignment of client tasks to students based upon personal evaluation of the student's knowledge and skills. Students must successfully complete check off in the lab setting before performing skills in the clinical setting. Additionally, students may not complete tasks or perform skills which have not been approved by clinical supervisors. Students who perform unapproved tasks or skills may be dismissed from the clinical experience and are subject to dismissal from the nursing program. Student participation and performance in clinical experiences will be monitored for safety and supervisor intervention will occur if necessary.

Professional behavior is expected and required within the clinical setting. Students are required to ensure that client information is communicated timely, effectively, appropriately, and honestly. Student behavior that threatens the physical, psychosocial, or emotional health and/or safety of clients or clinical site personnel will not be tolerated. Psychosocial and emotional health may be threatened by creating an environment in which another individual feels anxious or distressed. Unsafe practice may also include lack of preparedness for clinical activities. A student who is unprepared for clinical or whose practice is considered to be unsafe will be



dismissed from the clinical experience. Repeated instances of unpreparedness or unsafe practices will result in the student being dismissed from the program.

Students must be punctual to all clinical experiences. Clinical experiences and the time of said experiences are designed to optimize the student experience. Students should be aware that clinical times are dependent upon individual facilities, and in order to gain the greatest clinical experience, flexibility with clinical times is a necessity. Designated clinical times ensure the student is exposed to the broadest number of activities related to the profession and practice of nursing, including but not limited to: shift-to-shift nursing report, medication administration, wound care, tracheostomy care, catheter care, communication with the interdisciplinary team including medical providers, family and healthcare representative engagement, provider rounds, etc.

Students will not perform any client care without having received adequate report from clinical facility staff. Students are expected to follow all policies and procedures established for respective clinical sites. Failure to adhere to clinical site policies and procedures may result in dismissal.

Students may not accept any form of gifts or gratuities from clients or visitors of clients.

The use of cell phones and cameras or recording devices is not permitted in client areas at clinical sites. Students are expected to leave phones and devices in their vehicles or areas at the clinical site designated to students.

Prior to administering medication in the clinical setting, students must successfully pass the ATI Dosage Calculations Test specific to the clinical course. Each course will have an ATI Dosage Calculations Test appropriate for the level and specialization.

Students performing documentation during clinical experiences using an electronic health record are required to utilize their assigned individual student username and password. Individual usernames and/or passwords are not to be shared with other students.

Keystone Nursing Academy expects students to exhibit professional attire and appearance while in the clinical setting. Guidelines for professional attire and appearance include:

1. Students are required to wear uniforms supplied by Keystone Nursing Academy. Students are expected to ensure that uniforms remain well-fitting, clean, and in good condition.
2. White shirts only may be worn under uniform tops.
3. Shoes should be clean and in good condition. Only closed-toed and closed-heeled shoes that are non-porous should be worn during clinical.
4. Students are expected to always wear their Keystone Nursing Academy identification badge on their uniform top during clinical experiences.

5. A stethoscope, black pen, and a watch with a second hand are considered part of the student's uniform, and should be brought to clinical with the student.
6. Students may wear one pair of stud earrings in the ears and wedding bands to the clinical site. No other jewelry or visible piercings are to be worn.
7. Hair is to be neat and clean. Extreme hair styles and unnatural hair colors are not permitted. Long hair should be tied back while participating in clinical experiences.
8. Facial hair should be neat and trimmed.
9. No perfumes, colognes, or fragrances should be worn.
10. Fingernails should be clean and trimmed to not extend beyond the tip of the finger. No acrylic or fake nails are to be worn. Only clear fingernail polish is to be worn.
11. Visible tattoos must be covered.

Students may be dismissed from clinicals under the following circumstances:

1. Failure of the student to adhere to the guidelines for attire and appearance.
2. Student illness.
3. Tardiness greater than 30 minutes.
4. Inability of the student to safely perform client care.
5. Failure of the student to follow the policies and procedures of the clinical site.
6. Failure of the student to follow the policies and procedures of Keystone Nursing Academy.
7. Falsification of client records or student/client experiences.
8. Failure to report errors in client assessments, treatments, or medication administration.
9. Theft or misappropriation of property belonging to the clinical site, clinical site personnel, clinical site visitors, or clients.

Students who are dismissed from clinical will be counted as absent. Depending on the reason for dismissal from clinical, the Keystone Nursing Academy make-up policy may apply or the student may be at risk for expulsion.

### **Student and Faculty Presence at the Clinical Facility**

Each of Keystone Nursing Academy's (KNA) clinical sites agrees to accommodate 20 licensed practical nursing (LPN) students on any one clinical date. However, the program is designed such that no more than ten students will be assigned to a single clinical location on any one date. In collaboration with the clinical site, KNA shall be responsible for identifying appropriate clients for student clinical experiences. A member of KNA's clinical faculty staff shall remain available in person for the duration of the clinical day.

At times, it may be necessary for students to be paired with a non-faculty clinical preceptor in order to obtain certain clinical experiences. A member of KNA's faculty, in

collaboration with the clinical site, will be responsible for identifying an appropriate non-faculty clinical preceptor.

KNA's clinical faculty staff shall be responsible for the learning experience of each student assigned to non-faculty clinical preceptors, engage with the clinical preceptor and the student at the beginning and end of each scheduled clinical experience at minimum and as otherwise necessary for the purpose of monitoring and evaluating the learning experience.

KNA requires that all non-faculty clinical preceptors have a current license as a registered nurse and a minimum of three years experience as a registered nurse. The non-faculty clinical preceptor shall acknowledge their specific function and responsibility by signing the "Non-Faculty Clinical Preceptor Agreement." KNA's designated clinical faculty member shall review the clinical objectives and provide the clinical preceptor with a written copy of the clinical objectives. In addition, a member of KNA's faculty shall remain available in person or via phone for the duration of the students' clinical experience.

### **Medication Administration during Clinical Experiences**

The following guidelines set forth by Keystone Nursing Academy are required of students when administering medications to clients within the clinical setting:

- Prior to administering medications in the clinical setting, students must successfully complete assigned medication administration simulations.
- Administration of medications is to take place under the direct supervision of a registered nurse who may be either a Keystone Nursing Academy instructor or registered nurse of the clinical site assigned to supervise the student. Students may *never* administer medications without the supervision of a registered nurse.
- Students will not participate in medication administration until they have first successfully passed the ATI Dosage Calculations Test pertaining to the corresponding course.
- Students will deliver medications and treatments within the scheduled time frame.
- Students must verbalize to the instructor or supervisor satisfactory knowledge of medications being administered, which may include a medication's indication, action, potential side effects, and/or nursing implications.
- Students must demonstrate the ability to verify a medication with the physician's order.
- Students must clarify with the instructor any questions related to medication administration.
- Students must adhere to the six rights of medication administration. (i.e., right client, right medication, right dose, right date/time, right route, and right documentation).
- Medications are never to be administered to yourself or other students under any circumstances.

## **Incidents**

If an incident occurs while the student is participating in educational activities associated with Keystone Nursing Academy, the student must immediately notify faculty of the incident. If an incident occurs within the clinical setting, students must also report the incident to appropriate clinical site personnel.

Keystone Nursing Academy faculty, clinical site personnel, and the student will complete an Incident Report as soon as possible following an incident which occurs in the clinical setting. Following the initial reporting of the incident, the student should decline to answer questions from other parties regarding the incident without the presence of clinical site personnel. The student and a member of Keystone Nursing Academy faculty will additionally complete a narrative Incident Report using the “Incident Report Form,” located in the Appendices.

The Incident Report will be kept confidential, and will not become a part of the student’s file. Depending upon the nature of the incident, the student may be advised to seek medical evaluation within 24 hours of the incident for recommended testing or follow-up management, if warranted. Students are entitled to a copy of the Incident Report upon request.

## **Evaluation of Clinical Facilities**

Keystone Nursing Academy utilizes student and faculty feedback, including appraisal of the clinical sites, to evaluate and revise the program. At the end of each clinical course, students and instructors anonymously evaluate the clinical site as a learning environment and the student/instructor experience.

Additionally, the LPN Program Director or designee is responsible for obtaining valuable, formal feedback from the clinical sites regarding KNA, its students, and the experiences of the clinical sites’ staff. Each clinical site utilized during the quarter will designate a nursing representative to serve on KNA’s Clinical Advisory Group. The Clinical Advisory Group will meet in the final week of each quarter to discuss opportunities for growth and improvement in their collaboration with KNA. Meetings may be held in person or virtually.

## **Virtual Clinical Experiences**

Virtual clinicals are used to supplement traditional clinical experiences for Keystone Nursing Academy students. KNA utilizes ATI and SwiftRiver for a variety of case studies, virtual simulations, and other learning opportunities. Expectations on virtual clinical days are the same as for in-person clinicals. Students are expected to be in the classroom, in uniform, with their computer, pre-assignments, and any other supplies at the start of the clinical day. Virtual clinicals will comprise no more than 25% of the total program clinical hours, and virtual clinicals will be counted in a ratio of one virtual hour to two traditional clinical hours.

### **Synchronous Virtual Clinical**

The virtual clinical day will begin with pre-briefing, where students will be expected to discuss the pre-assignment and any assigned reading. After the pre-briefing, the instructor will assign the SwiftRiver client, video case study, or other activity. The instructor will note if these are to be completed individually or as a group. For activities to be completed individually, the instructor will give a time for the debriefing to begin and identify break times. It will be at the discretion of the instructor if students may utilize the library or other areas to complete the activity.

### **Asynchronous Virtual Clinical**

The asynchronous virtual clinical day is completed by the student outside of class times and off campus. The time frame, generally a week, to complete the clinical will be assigned, and discussion boards on Google Classroom will be utilized. Students will complete the pre-brief discussion post prior to completing the assigned SwiftRiver client, video case study, or other activity. The expected time to complete the activity will be posted with the assignment. After completing the activity, the student will participate in the debriefing discussion post and submit to the instructor proof of time spent on the activity from ATI.

## **Student Services**

### **Student Success and Support Services**

Keystone Nursing Academy is dedicated to meeting the student's needs for successful learning and will work with students to assist in identifying and addressing academic concerns. Student and faculty evaluations will take place at the completion of each quarter. However, students may request meetings with instructors at any time. In addition, students have the right to access the contents of their personal student files under supervision as requested.

### **Student Organizations**

Keystone Nursing Academy encourages student engagement and participation in social and educational organizations outside of KNA. Student nurse organizations, such as the American Nurses Association's National Student Nurses Association, the American Association of Colleges of Nursing, the National Association of Licensed Practical Nurses, the National Student Nurses Association, Indiana Association of Nursing Students, and the National League of Nursing, benefit students by providing a nursing community of support and encouragement for educational opportunities, networking, career planning, and enhancing professionalism.

### **Counseling/Guidance/Job Placement**

Keystone Nursing Academy's Program Director is available to students for counseling and guidance on an at-will, continuous basis. Should the student require counseling/guidance, the student shall request an opportunity to meet with the Program Director in writing via email. The Program Director shall respond to all student requests within two (2) business days unless otherwise dictated by the urgency of the matter. The student and Program Director shall coordinate an opportunity for an in-person or virtual meeting at a date and time mutually agreed upon.

Additionally, in the student's last semester of the licensed practical nurse program, the Program Director and student shall coordinate an opportunity for an in-person or virtual meeting at a date and time mutually agreed upon to discuss future job placement opportunities, continued education, and licensure application processes.

### **Housing**

Keystone Nursing Academy does not offer options for housing, as it is a commuter school.

### **Transportation**

It is the responsibility of the student to provide transportation to and from campus and clinical sites. Students are expected to adhere to assigned parking destinations at the main campus and clinical sites.

### **Student Health Insurance/ Health Services**

Keystone Nursing Academy does not offer student health insurance or health services. Health insurance is not required by the student for participation in the nursing program. Students are encouraged to enroll in available programs if uninsured. Resources are available to students upon request.

### **Student Concerns**

An open channel of communication is essential to a good educational atmosphere, productivity, and client service. This policy helps students, faculty, supervisors, and managers work together to address and resolve education-related issues in a positive and productive manner. This policy is not intended to address student concerns related to discrimination or inappropriate behavior based on legally protected categories, which should instead be reported in accordance with the procedures specified in the Equal Employment Opportunity and/or Anti-Harassment Policy.

Students are encouraged to present good faith concerns related to unfair grading policies, faculty failure to follow grading policy, and/or demonstration of faculty bias directly to KNA's faculty staff. If the student's concern cannot be resolved between KNA's faculty staff and the student, the faculty staff will assist the student in addressing the concern with the Program Director.

If the student is unable to reach a satisfactory resolution with the Program Director (or the student is uncomfortable addressing their concerns with the Program Director), the student must submit a completed "Student Concerns Form" to the Chief Administrative Officer of Nursing Services within ten (10) calendar days of the concern.

Within two (2) business days of having received the appropriate documentation, the student shall receive from the Chief Administrative Officer of Nursing Services notification (in both verbal and written form) of a scheduled in-person or virtual meeting in the presence of Chief Administrative Officer of Nursing Services. This meeting shall occur within three to five business days from receipt of notification from the Chief Administrative Officer of Nursing Services.

## **General Policies**

### **Anti-Harassment**

Keystone Nursing Academy is committed to providing an environment free of inappropriate treatment of any student because of a student's race, color, sex, sexual orientation, gender identity, religion, age, national origin, disability, or any other legally protected category. To be unlawful, conduct must be so severe and pervasive that it unreasonably interferes with a student's ability to continue to participate in educational activities. Keystone Nursing Academy does not, however, condone or tolerate any harassing or otherwise inappropriate conduct based on any legally protected category. Moreover, Keystone Nursing Academy is committed to protecting students from inappropriate conduct whether from other students or faculty.

Inappropriate conduct may include:

1. Epithets, slurs, stereotyping, or threatening, intimidating, or hostile acts that relate to race, color, sex, age, religion, national origin, disability, or other legally protected category.
2. Written or graphic material that denigrates or shows hostility or aversion toward an individual or group because of race, color, sex, age, religion, national origin, disability, or other legally protected category.

Specifically, Keystone Nursing Academy is committed to providing an environment free of inappropriate conduct of a sexual nature. Such conduct may include a range of subtle and not so subtle behaviors and may involve individuals of the same or different gender. Such conduct also may include, among other things:

1. Unsolicited and unwelcome comments or conduct of a sexual nature or that are demeaning to women or men as a group (for example, offensive or vulgar jokes, name-calling, comments about one's body or sex life, stereotyping based on a person's sex, touching, leering, ogling, patting, pinching, indecent exposure, physical gestures, or displaying sexually explicit photographs or objects that interfere with a reasonable person's activities).
2. Unsolicited and unwelcomed demands or requests for sexual favors or social or sexual encounters.
3. The use of a student's submission to or rejection of sexual conduct as the basis for making, influencing, or affecting a decision that has an impact upon the terms and conditions of the individual's standing or progression within the nursing program.

If you believe you, or any other student, is being subjected to behavior that is not consistent with these policies, you must immediately report your concern to the Program Director, or designee.

### **Preferred Self-Identification**

Keystone Nursing Academy encourages the disclosure and use of preferred names and gender pronouns in order to create an inclusive, respectful, and open educational environment. While legal names must be utilized for official records, preferred names may otherwise be utilized for communication.

### **Violence**

The safety and security of students and faculty is of the utmost importance. Abusive, threatening, intimidating, malicious, or violent behavior directed toward anyone on campus or during educational activities will not be tolerated. Every individual must involve the Program Director, or designee at the earliest notice of this type of behavior. To minimize the potential risk of personal injury or property damage, Keystone Nursing Academy will take decisive and appropriate action in response to inappropriate behavior. This may include, but is not limited to, heightened security, dismissal of involved students from the program, and/or criminal prosecution.

### **Weapons and Firearms**

You may not bring a firearm or ammunition onto campus or clinical site properties unless you legally possess the firearm and/or ammunition, and the firearm or ammunition is stored in your vehicle's locked trunk (if your vehicle has a trunk release in the driver's cabin, your vehicle must also be locked), kept in the glove compartment of your locked vehicle, or stored out of plain sight in your locked vehicle. Weapons other than firearms and ammunition are prohibited on all campus and clinical site properties, including within personal vehicles.



## **Personal Relationships**

Faculty and students involved in a personal/romantic/sexual relationship and/or cohabitation must promptly report the relationship to the Program Director, or designee so that appropriate steps may be taken to avoid the potential for the personal relationship or cohabitation to adversely affect anyone. Failure to report dating, a personal/romantic/sexual relationship or cohabitation may result in immediate discharge of the faculty member or dismissal of the student from the program.

The Program Director is responsible for the implementation of this policy and determining whether a relationship constitutes a violation. Any questions as to whether a particular relationship violates this policy should be directed to the Program Director, or designee. Exceptions may be made for relationships that would otherwise violate this policy only if the relationship exists at the effective date of this policy, and the parties involved immediately report the relationship as required above.

Keystone Nursing Academy also prohibits relationships between all employees, students, and persons served and anyone engaged in a business relationship with Keystone Nursing Academy. If in doubt about the appropriateness of any relationship, please talk to the Program Director, or designee.

## **Solicitation or Distribution**

Keystone Nursing Academy prohibits solicitation by students or faculty for any activity during the hours of educational activities. “Hours of educational activities” does not include scheduled breaks or meal periods. There shall be no distribution of literature (that is, printed matter of any kind) by students or faculty during the hours of educational activities or in academic or clinical facilities any time.

Those who are not students or faculty are prohibited from soliciting or distributing literature on Keystone Nursing Academy property at any time.

## **Tobacco-Free Policy**

Keystone Nursing Academy is committed to providing a safe and healthy environment for employees, clients, students, and others. Use of tobacco in any form is prohibited on Keystone Nursing Academy or affiliated facilities’ properties, except in areas specifically designated by management where tobacco use is permitted during non-educational hours (i.e., on breaks).

The above prohibition applies to all tobacco-related activities, including lighting, smoking, carrying or otherwise possessing a lighted or smoldering cigar, cigarette, pipe, or any other smoking paraphernalia, including use of personal vaporizers and electronic nicotine delivery systems, and using any smokeless tobacco products.

## **Communicable Disease Reporting**

In order to ensure the safety and health of students, faculty, clients, clinical facility staff, and others, any student who believes that they have been exposed to or contracted a communicable disease with the potential to be transmissible to others in the academic or clinical setting must immediately report the symptoms or disease to the Program Director or designee. The student may be required to be evaluated by a physician to determine appropriateness for educational activities. Reports of communicable diseases will remain confidential.

A student with a known communicable disease is required to take appropriate action to ensure the safety and well-being of other students, faculty, clients, and others and is forbidden to engage in activities which pose a risk for disease transmission. A student with known communicable disease may continue with educational activities as long as the illness does not interfere with the student's ability to function in the academic or clinical setting, does not pose a risk to the student or others, and the student complies with mandatory screenings, vaccinations, infection control practices, and physician- recommended restrictions.

KNA retains the right to follow any and all applicable clinical or legal guidance or recommendations of public health organizations specific to communicable diseases and implement clinical or legal guidance or public health organization recommendations as appropriate. Clinical facilities will be informed of the communicable disease status of students, and reserve the right to dismiss a student from the clinical experience.

During certain outbreaks, pandemics, or endemics, students may be required to undergo mandatory screening, evaluations, or testing on a regular basis.

## **Searches**

Keystone Nursing Academy may conduct searches to monitor compliance with rules concerning safety and security of faculty, students, and property, drugs and alcohol, and possession of other prohibited items. "Prohibited items" include (but are not limited to) illegal drugs, alcoholic beverages, prescription drugs or medications not used or possessed in compliance with a current valid prescription, weapons, obscene, harassing, demeaning, or violent materials, and property in the possession or control of a student or faculty member who does not have the owner's authorization to possess or control the property. "Control" means knowing where a particular item is, having placed an item where it is currently located, or having any influence over its continued placement. Keystone Nursing Academy may also search students' work areas, personal vehicles if driven to work or parked on KNA property, and other personal items such as cell phones, electronic devices, bags, purses, briefcases, backpacks, lunch boxes, and other containers. A request to search is not an accusation of improper conduct.

There is no general or specific expectation of privacy in the academic or clinical setting. Assume that what you do while present in the academic or clinical setting is not private. Any area may be searched at any time, with or without the student's presence. Do not bring to or

store anything in the academic or clinical facilities unless prepared to disclose and/or possibly turn over to management and/or law enforcement.

All students are subject to this policy, but any search may be restricted to one or more specific individuals, depending upon the situation. Searches may be done on a random basis or based upon reasonable suspicion. “Reasonable suspicion” means circumstances suggesting to a reasonable person that there is a possibility that one or more individuals may be in possession of a prohibited item. Searches will respect faculty or students’ privacy, confidentiality, and personal dignity to the extent possible.

No student will ever be required to submit to a search. However, a student who refuses to submit to a search request may face disciplinary action up to and including dismissal from the educational program and may involve law enforcement depending on the circumstances.

# Appendices

## Course Descriptions

### Quarter 1

Course	Hours	Description/ Required Prerequisites
Anatomy & Physiology I	4 credit hours; 40 didactic hours	This course provides comprehensive education on the anatomy and physiology of the human body. Study areas include organization of the body, chemical and cellular basis of life, hematology, and tissue, integumentary, skeletal, muscular, nervous, sensory, cardiovascular, and lymphatic systems.
Medical Terminology	1 credit hour; 10 didactic hours	This course culminates a working medical vocabulary by building upon word roots, prefixes, and suffixes, and includes body systems, diagnostic tests, procedures, and medical reports in addition to commonly used medical abbreviations.
Basic Math and Dosage Calculations	2 credit hours; 20 didactic hours	This course reviews basic and advanced math skills and incorporates critical thinking in order for students to accurately and safely calculate medication dosages and perform unit conversions across multiple systems of measurement.
Introduction to Computer Software/ EMR	1 credit hour; 10 didactic hours	This course provides an introduction to the role of nursing informatics and technology in communication and collaboration of client care. Students will develop and hone documentation and care organization skills with hands-on experiences using MatrixCare skilled nursing software and ATI Electronic Health Record.
Fundamentals of Nursing Practice	4 credit hours; 40 didactic hours	This course provides the student with the knowledge of the fundamental concepts and skills necessary to develop a foundation for nursing processes and roles rooted in cultural competency, professionalism, and collaboration. An emphasis is placed on health promotion, disease prevention, communication, safety, infection control, priority setting, and clinical decision-making. Students will learn core concepts of body functions and assessment findings associated with sleep, fluid and electrolyte balance, mobility, elimination, pain, tissue integrity, and ventilation and perfusion. Students will demonstrate and grow their knowledge and skills in nursing practice through adjunct laboratory hours.
Fundamentals of Nursing Practice Lab	1.5 credit hours; 30 laboratory hours	This course corresponds with the Fundamentals of Nursing Practice didactic course and provides the student with the knowledge of the fundamental concepts and skills necessary to develop a foundation for nursing processes rooted in evidence-based practices and guidelines. Students will demonstrate and grow their knowledge and

		skills in nursing practice through adjunct laboratory and simulation hours.
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## Quarter 2

Course	Hours	Description/ Required Prerequisites
Anatomy & Physiology II	2 credit hours; 20 didactic hours	This course is a continuation of Anatomy and Physiology I, with an emphasis on structure and function of the digestive, respiratory, urinary, and reproductive systems, as well as a focus on nutrition, genetics, and human growth and development.  <i>Required Prerequisite(s): Anatomy and Physiology I</i>
Pharmacology I	2 credit hours; 20 didactic hours	This course provides an overview of the principles of pharmacology, pharmacokinetics, pharmacodynamics, nursing processes, and drug administration and response variations throughout the lifespan. Students will learn pharmacologic treatment modalities to include the therapeutic indications, mechanism of action, and effect of specific classes of medications.
Adult/ Geriatric Medical-Surgical Nursing I	2 credit hours; 20 didactic hours	This course encourages the integration and application of fundamental nursing concepts and the role of the nurse in the care of adult and geriatric clients in subacute settings experiencing alterations in gas exchange and homeostasis, as well as alterations in the endocrine, digestive, renal, urinary, hematologic, and immune systems. Students will demonstrate and expand their skills through supportive classroom experiences and demonstrate the ability to apply the nursing process through the use of clinical judgement to provide client-centered care.  <i>Required Prerequisite(s): Fundamentals of Nursing Practice; Anatomy &amp; Physiology I</i>
Adult/ Geriatric Medical-Surgical Nursing I Lab	1.5 credit hours; 30 laboratory hours	This course corresponds with the Adult/ Geriatric Medical-Surgical Nursing I didactic course which concentrates on the holistic assessment of adult and geriatric clients through the incorporation of lecture focused on health education and promotion, cultural competence, and physical assessment with classroom, laboratory, and simulation activities and clinical experiences in skilled nursing, rehabilitation, and long-term care facilities.  <i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Anatomy and Physiology I</i>
Health Assessment	3 credit hours; 30 didactic hours	This course concentrates on the holistic assessment of clients through the incorporation of lectures focused on health education and promotion, cultural competence, and physical assessment with classroom simulation activities and clinical experiences in skilled nursing, rehabilitation, and long-term care facilities.

		<i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Anatomy and Physiology I</i>
Adult/ Geriatric Medical-Surgical Nursing I Nursing Clinical	2 credit hours; 60 clinical hours	<p>This course corresponds with the Adult/ Geriatric Medical-Surgical Nursing I didactic course and Adult/ Geriatric Medical-Surgical Nursing I Lab in which students will continue to improve dexterity in the application of fundamental concepts and the nursing process to clients with conditions affecting gas exchange, homeostasis, and alterations in the endocrine, digestive, renal, urinary, hematologic, and immune systems. Simulation hours and clinical experiences in hospital, rehabilitation, skilled nursing, and long-term care settings further enrich the learning experience of the student.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Basic Math and Dosage Calculations; Introduction to Computer Software/ EMR; Anatomy and Physiology I</i></p>



### **Quarter 3**

Course	Hours	Description/ Required Prerequisites
Pharmacology II	2 credit hours; 20 didactic hours	<p>This course is a continuation of Pharmacology I, which provides reinforcement of the principles of pharmacology, pharmacokinetics, pharmacodynamics, nursing processes, and drug administration and response variations throughout the lifespan. Students will learn pharmacologic treatment modalities to include the therapeutic indications, mechanism of action, and effect of specific classes of medications.</p> <p><i>Prerequisite(s): Pharmacology I</i></p>
Adult/ Geriatric Medical-Surgical Nursing IIa	2 credit hours; 20 didactic hours	<p>This course encourages the integration and application of fundamental nursing concepts and the nursing process to the care of adult and geriatric clients in subacute settings experiencing alterations in mobility, sensory perception, tissue integrity, cognitive function, and sexual function, as well as those clients experiencing cancer and alterations of the neurological and cardiovascular systems. Students will additionally become familiar with the role of the nurse in client care during the preoperative, perioperative, and postoperative periods.</p> <p><i>Prerequisite(s): Fundamentals of Nursing Practice; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II; Adult/ Geriatric Medical Surgical Nursing I; Health Assessment</i></p>
Adult/ Geriatric Medical-Surgical Nursing IIb	1 credit hour; 10 didactic hours	<p>This course is a continuation of Adult/ Geriatric Medical-Surgical Nursing I and IIa in which students will continue to improve dexterity in the application of fundamental concepts and the nursing process to clients with alterations affecting the neurologic system, and those with alterations in gas exchange, perfusion, and hormonal regulation. Students will additionally be introduced to aspects of critical and emergency nursing care. Simulation hours and clinical experiences in hospital, rehabilitation, skilled nursing, and long-term care settings further enrich the learning experience of the student.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II; Adult/ Geriatric Medical Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing IIa; Health Assessment</i></p>
Adult/ Geriatric Medical-Surgical Nursing II Lab	1.5 credit hours; 30 laboratory hours	<p>This course is a continuation of Adult/ Geriatric Medical-Surgical Nursing I and corresponds with the Adult/ Geriatric Medical-Surgical Nursing IIa and Adult/ Geriatric Medical-Surgical Nursing IIb didactic courses and Adult/ Geriatric Medical-Surgical</p>

		<p>Nursing II Clinical which concentrates on the holistic assessment of clients through the incorporation of lecture focused on health education and promotion, cultural competence, and physical assessment with classroom, laboratory, and simulation activities and clinical experiences in skilled nursing, rehabilitation, and long-term care facilities.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Simulation Lab; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing I Lab; Health Assessment</i></p>
Adult/ Geriatric Medical-Surgical Nursing II Clinical	2 credit hours; 60 clinical hours	<p>This course corresponds with the Adult/ Geriatric Medical-Surgical Nursing IIa and Adult/ Geriatric Medical-Surgical Nursing IIb didactic courses and Adult/ Geriatric Medical- Surgical Nursing II Lab and is a continuation of Adult/ Geriatric Medical-Surgical Nursing I in which students will continue to improve dexterity in the application of fundamental concepts and the nursing process to clients with conditions affecting the immune, gastrointestinal, musculoskeletal, endocrine, reproductive, integumentary, and nervous systems. Simulation hours and clinical experiences in hospital, rehabilitation, skilled nursing, and long-term care settings further enrich the learning experience of the student.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Basic Math and Dosage Calculations; Introduction to Computer Software/ EMR; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing I Lab; Health Assessment; Adult/ Geriatric Nursing I Clinical; Pharmacology I</i></p>
Community Nursing	3 credit hours; 30 didactic hours	<p>This course discusses the key concepts and policies of public health and community nursing and the role of the nurse in considering social determinants of health, health inequities, and evidence-based practice in providing care to various communities. Special emphasis is placed on client advocacy, infectious and communicable diseases, and abuse and violence.</p> <p><i>Required Prerequisites: Fundamentals of Nursing Practice</i></p>

## Quarter 4

Course	Hours	Description/ Required Prerequisites
Maternal-Child Nursing	5 credit hours; 50 didactic hours	<p>This course concentrates on nursing care of women, infants, children, and families during the prepartum, antepartum, and postpartum periods. Growth and development from infancy through adolescence, including complications and conditions requiring nursing care, are also emphasized. Clinical hours spent in hospital and pediatric skilled nursing facilities supplement learning experiences and allow the student to integrate knowledge and skills.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Health Assessment; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric Medical-Surgical Nursing IIb; Pharmacology I; Pharmacology II</i></p>
Maternal-Child Nursing Clinical	2 credit hours; 60 clinical hours	<p>This course corresponds with the Maternal-Child Nursing didactic course and focuses on the clinical care of women, infants, children, and families during the prepartum, antepartum, and postpartum periods. Simulation and clinical experiences in hospital and pediatric skilled nursing facilities settings enhance student experiences.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Basic Math and Dosage Calculations; Introduction to Computer Software/EMR; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II;; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing I Clinical; Adult/ Geriatric Medical- Surgical Nursing; Health Assessment; Adult/Geriatric Medical- Surgical Nursing II Clinical;; Pharmacology I; Pharmacology II; Medical-Surgical Nursing IIa; Medical-Surgical Nursing IIb; Medical-Surgical Nursing II Clinical; Adult/ Geriatric Medical-Surgical Nursing II Lab</i></p>
Mental Health Nursing	3 credit hours; 30 didactic hours	<p>This course explores foundational concepts of mental health nursing, including pharmacologic and nonpharmacologic management, mental health disorders, expected management outcomes, and behaviors of clients with mental health conditions. Special adjunct simulation and clinical experiences in acute care and skilled settings promote student learning experiences.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II;; Health Assessment; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric Medical-Surgical Nursing IIb; Pharmacology I; Pharmacology II</i></p>

Mental Health Nursing Clinical	1 credit hour; 30 clinical hours	<p>This course corresponds with the Mental Health Nursing course which explores foundational concepts of mental health nursing, including pharmacologic and nonpharmacologic management, mental health disorders, expected management outcomes, and behaviors of clients with mental health conditions. Clinical and simulation experiences in acute care and skilled settings promote student learning experiences.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Basic Math and Dosage Calculations; Introduction to Computer Software/EMR; Anatomy &amp; Physiology I; Anatomy &amp; Physiology II;; Adult/ Geriatric Medical-Surgical Nursing I; Health Assessment; Adult/ Geriatric Medical-Surgical Nursing I Lab; Adult/Geriatric Nursing Clinical; Pharmacology I; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric Medical-Surgical Nursing IIb; Adult/ Geriatric Medical-Surgical Nursing II Lab; Adult/Geriatric Nursing Clinical II; Pharmacology II; Community Nursing</i></p>
Practice Issues for Practical Nursing	1 credit hour; 10 didactic hours	<p>This course incorporates foundations of professionalism, civility, nursing theory, research, and evidence-based practices and introduces the student to ethical and legal considerations which may apply to the nursing process. Effective communication, collaboration, civility, and leadership skills are discussed as they apply to holistic nursing care. Special attention is placed on preparing the nurse for entering the workforce.</p> <p><i>Required Prerequisite(s): Fundamentals of Nursing Practice; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric Medical-Surgical Nursing IIb; Health Assessment; Introduction to Computer Software/ EMR; Pharmacology I; Pharmacology II</i></p>
Critical Thinking and Clinical Judgment	2 credit hours; 10 didactic hours; 20 simulation hours	<p>This course encourages students to culminate the nursing knowledge and skills learned throughout the program and utilize critical thinking and clinical judgment to demonstrate safe and effective client-centered care through simulation scenarios.</p> <p><i>Required Prerequisite(s): Anatomy and Physiology I; Anatomy &amp; Physiology II; Basic Math and Dosage Calculations; Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Pharmacology I; Pharmacology II; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing I Lab; Health Assessment; Adult/ Geriatric Medical- Surgical Nursing I Clinical; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric</i></p>

		<i>Medical-Surgical Nursing IIb; Adult/ Geriatric Medical-Surgical Nursing II Clinical; Adult/ Geriatric Medical-Surgical Nursing II Lab; Community Nursing</i>
Comprehensive Review and NCLEX Preparation	3 credit hours; 30 didactic hours	<p>This course provides a comprehensive review of essential program content to prepare students for licensure examination</p> <p><i>Required Prerequisite(s): Anatomy and Physiology I; Anatomy &amp; Physiology II; Basic Math and Dosage Calculations; Fundamentals of Nursing Practice; Fundamentals of Nursing Practice Lab; Pharmacology I; Pharmacology II; Adult/ Geriatric Medical-Surgical Nursing I; Adult/ Geriatric Medical-Surgical Nursing I Lab; Health Assessment; Adult/Geriatric Medical-Surgical Nursing Clinical; Adult/ Geriatric Medical-Surgical Nursing IIa; Adult/ Geriatric Medical-Surgical Nursing IIb; Adult/ Geriatric Medical-Surgical Nursing II Clinical; Adult/ Geriatric Medical-Surgical Nursing II Lab; Community Nursing; Mental Health Nursing; Practice Issues for Practical Nursing</i></p>

## **Indiana Nurse Practice Act Licensed Practical Nurses**

### **Rule 3. Licensed Practical Nursing**

848 IAC 2-3-1 Responsibility to apply the nursing process

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 1. The licensed practical nurse shall do the following:

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(1) Know and utilize the nursing process in planning, implementing, and evaluating health services and nursing care to the individual patient or client.

(2) Collaborate with other members of the health team in providing for patient/client participation in health promotion, maintenance, and restoration.

(3) Seek educational resources and create learning experiences to enhance and maintain current knowledge and skills for his or her continuing competence in nursing practice and individual professional growth.

(4) Assess the health status of the patient/client, in conjunction with other members of the health care team, for analysis and identification of health goals.

(5) Evaluate with the patient/client the status of goal achievement as a basis for reassessment, reordering of priorities, and new goal setting for contribution to the modification of the plan of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-1; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.:25 IR 939; readopted filed Jul 19, 2007, 12:54 p.m.: 20070808-IR-848070058RFA)

848 IAC 2-3-2 Responsibility as a member of the health team

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 2. The licensed practical nurse shall do the following:

(1) Function within the legal boundaries of practical nursing practice based on the knowledge of statutes and rules governing nursing.

(2) Accept responsibility for individual nursing actions and continued competence.

(3) Communicate, collaborate, and function with other members of the health care team to provide safe and effective care.

(4) Seek education and supervision as necessary from registered nurses and/or other members of the health care team when implementing nursing techniques or practices.

(5) Respect the dignity and rights of the patient/client regardless of socioeconomic status, personal attributes, or nature of health problems.

(6) Maintain each patient/client's right to privacy by protecting confidential information unless obligated, by law, to disclose the information.

(7) Provide nursing care without discrimination on the basis of diagnosis, age, sex, race, creed, or color.

(8) Accept only those delegated nursing measures which he or she knows he or she is prepared, qualified, and licensed to perform.

(9) Respect and safeguard the property of patient/client, family, significant others, and the employer.

(10) Notify, in writing, the appropriate party which may include:

(A) the office of the attorney general, consumer protection division;

(B) his or her employer or contracting agency; or

(C) the board;

of any unprofessional conduct which may jeopardize the patient/client safety.

(11) Participate in the review and evaluation of the quality and effectiveness of nursing care.

(Indiana State Board of Nursing; 848 IAC 2-3-2; filed Oct 25, 1991, 5:00 p.m.: 15 IR 244; readopted filed Nov 6, 2001, 4:18 p.m.:25 IR 939; readopted filed Jul 19, 2007, 12:54 p.m.: 20070808-IR-848070058RFA)

848 IAC 2-3-3 Unprofessional conduct

Authority: IC 25-23-1-7

Affected: IC 25-23

Sec. 3. Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and

prevailing licensed practical nursing practices, which could jeopardize the health, safety, and welfare of the public shall constitute unprofessional conduct. These behaviors shall include, but are not limited to, the following:

- (1) Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.
- (2) Performing any nursing technique or procedure for which the nurse is unprepared by education or experience.
- (3) Disregarding a patient/client's dignity, right to privacy, or right to confidentiality.
- (4) Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.
- (5) Abusing a patient/client verbally, physically, emotionally, or sexually.
- (6) Falsifying, omitting, or destroying documentation of nursing actions on the official patient/client record.
- (7) Abandoning or knowingly neglecting patients/clients requiring nursing care.
- (8) Accepting delegated nursing measures that he or she knows that he or she is not prepared, qualified, or licensed to perform.

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- (9) Providing one's license/temporary permit to another individual for any reason.
- (10) Failing to practice nursing in accordance with prevailing practical nursing standards due to physical or psychological impairment.
- (11) Diverting prescription drugs for own or another person's use.
- (12) Misappropriating money or property from a patient/client or employee.
- (13) Failing to notify, in writing, the appropriate party which may include:
  - (A) the office of the attorney general, consumer protection division;
  - (B) his or her employer or contracting agency; or
  - (C) the board;

of any unprofessional conduct which may jeopardize patient/client safety.

(Indiana State Board of Nursing; 848 IAC 2-3-3; filed Oct 25, 1991, 5:00 p.m.: 15 IR 245; readopted filed Nov 6, 2001, 4:18 p.m.:25 IR 939; readopted filed Jul 19, 2007, 12:54 p.m.: 20070808-IR-848070058RFA

Source: Indiana State Board of Nursing. *Compilation of the Indiana code and Indiana administrative code*. (2013). Retrieved from <https://www.in.gov/doe/files/indiana-nurse-practice-act-2013>.

## American Nurses Association Code of Ethics for Nurses

**Provision 1** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

**Provision 2** The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

**Provision 3** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

**Provision 4** The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.

**Provision 5** 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.

**Provision 6** 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.

**Provision 7** 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.

**Provision 8** The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

**Provision 9** 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.

Source: American Nurses Association. (2015). Code of ethics with interpretive statements. Silver Spring, MD: Author. Retrieved from <http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.htm>



## Universal Precautions

### Introduction

Universal precautions were introduced by the Centers for Disease Control (CDC) in 1985, mostly in response to the human immunodeficiency virus (HIV) epidemic. Universal precautions are a standard set of guidelines to prevent the transmission of bloodborne pathogens from exposure to blood and other potentially infectious materials (OPIM). OPIM is defined by the Occupational Safety and Health Administration (OSHA) as:

- The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
- Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
- HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Universal precautions do not apply to sputum, feces, sweat, vomit, tears, urine, or nasal secretions unless they are visibly contaminated with blood because their transmission of Hepatitis B or HIV is extremely low or non-existent.

In 1987, the CDC introduced another set of guidelines termed Body Substance Isolation. These guidelines advocated avoiding direct physical contact with “all moist and potentially infectious body substances,” even if blood is not visible. A limitation of this guideline was that it emphasized handwashing after removing gloves only if the hands were visibly soiled.

In 1996, the CDC Guideline for Isolation Precautions in Hospitals, prepared by the Healthcare Infection Control Practices Advisory Committee (HICPAC), combined the major features for Universal Precaution and Body Substance Isolation into what is now referred to as Standard Precautions. These guidelines also introduced three transmission-based precautions: airborne, droplet, and contact. All transmission-based precautions are to be used in conjunction with standard precautions.

### Standard Precautions

Standard precautions apply to the care of all patients, irrespective of their disease state. These precautions apply when there is a risk of potential exposure to (1) blood; (2) all body fluids, secretions, and excretions, *except sweat*, regardless of whether or not they contain visible blood; (3) non-intact skin, and (4) mucous membranes. This includes hand hygiene and personal protective equipment (PPE), with hand hygiene being the single most important means to prevent transmission of disease.

Personal protective equipment serves as a barrier to protect the skin, mucous membranes, airway, and clothing. It includes gowns, gloves, masks, and face shields or goggles.

The following list of standard precautions is not all-inclusive and contains some of the most commonly used recommendations for healthcare workers.

## **Hand Hygiene**

Handwashing with soap and water for at least 40 to 60 seconds, making sure not to use clean hands to turn off the faucet, must be performed if hands are visibly soiled, after using the restroom, or if potential exposure to spore-forming organisms.

Hand rubbing with alcohol applied generously to cover hands completely should be performed, and hands rubbed until dry.

### **Hand Hygiene Indications**

- Before and after any direct patient contact and between patients, whether or not gloves are worn.
- Immediately after gloves are removed.
- Before handling an invasive device.
- After touching blood, body fluids, secretions, excretions, non-intact skin, and contaminated items, even when gloves are worn.
- During patient care, when moving from a contaminated to a clean body site of the patient.
- After contact with inanimate objects in the immediate vicinity of the patient.

## **Gloves**

Must be worn when touching blood, body fluids, secretions, excretions, mucous membranes, or non-intact skin. Change when there is contact with potentially infected material in the same patient to avoid cross-contamination. Remove before touching surfaces and clean items. Wearing gloves does not mitigate the need for proper hand hygiene.

## **Mask, Goggles/Eye Visor, and/or Face Shield**

Wear a mask and eye protection or face shield during procedures that may spray or splash blood, body fluids, secretions, or excretions.

## **Gown**

Wear to protect skin or clothing during procedures that may spray or splash blood, body fluids, secretions, or excretions.

## **Needles and Other Sharps**

Do not break, bow, or directly manipulate used needles. Recapping is not recommended, but if necessary, “use a one-handed scoop technique only.” Discard all used sharps in appropriate puncture-resistant containers.

Of note, it is the institution’s policy to ensure that all needles maintained on its premises are stored in a locked cabinet. Needles are only to be obtained by a member of the nursing faculty staff and distributed to students as needed. Access to the secure location will be maintained by only KNA’s nursing faculty staff.

## **Clinical Significance**

Occupational exposure to blood and other potentially infectious materials (OPIM) is of such great concern that multiple government agencies have instituted guidelines and regulations regarding universal precautions. Knowledge and implementation of standard precautions are

vital to limiting the spread of infectious diseases. Their use requires the healthcare provider to be proactive in anticipating the types of exposure they may encounter with each patient, e.g., a trauma patient with arterial bleeding would require donning gloves, a mask with a face shield, and a gown. Regarding transmission-based precautions, the healthcare provider should be aware that some diseases require more than one type of transmission-based precautions, e.g., disseminated herpes zoster requires contact, airborne, and standard precautions.

### **Enhancing Healthcare Team Outcomes**

All healthcare workers, including nurse practitioners, are responsible for the prevention of infectious disorders. In 1996, the CDC Guideline for Isolation Precautions in Hospitals, prepared by the Healthcare Infection Control Practices Advisory Committee (HICPAC), combined the major features for Universal Precaution and Body Substance Isolation into what is now referred to as Standard Precautions. These guidelines also introduced three transmission-based precautions: airborne, droplet, and contact. All transmission-based precautions are to be used in conjunction with standard precautions. Every hospital has an interprofessional team that ensures proper adoption of the universal guidelines. Audits should randomly be performed, and healthcare workers who do not follow the guidelines should be reprimanded and sent for remedial education on infection prevention.

Source: Broussard, I.M. & Kahwaji, C. I. (2022). Universal precautions. *StatPearls*. Available from <https://www.ncbi-nlm-nih-gov.northernkentuckyuniversity.idm.oclc.org/books/NBK470223/>

## **Bloodborne Pathogens**

### **What are bloodborne pathogens?**

Bloodborne pathogens are infectious microorganisms in human blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B (HBV), hepatitis C (HCV) and human immunodeficiency virus (HIV). Needlesticks and other sharps-related injuries may expose workers to bloodborne pathogens. Workers in many occupations, including first responders, housekeeping personnel in some industries, nurses and other healthcare personnel, all may be at risk for exposure to bloodborne pathogens.

### **What can be done to control exposure to bloodborne pathogens?**

In order to reduce or eliminate the hazards of occupational exposure to bloodborne pathogens, an employer must implement an exposure control plan for the worksite with details on employee protection measures. The plan must also describe how an employer will use engineering and work practice controls, personal protective clothing and equipment, employee training, medical surveillance, hepatitis B vaccinations, and other provisions as required by OSHA's Bloodborne Pathogens Standard. Engineering controls are the primary means of eliminating or minimizing employee exposure and include the use of safer medical devices, such as needleless devices, shielded needle devices, and plastic capillary tubes.

Source: Occupational Safety and Health Administration. (2022). *Bloodborne pathogens and needlestick prevention*. Retrieved from <https://www.osha.gov/bloodborne-pathogens>

## What to Do Following Exposure to Bloodborne Pathogens

Provide immediate care to the exposure site.

- Wash puncture and small wounds with soap and water for 15 minutes. Be aware of wash station locations in your facility based on what shift you're working.
- Apply direct pressure to lacerations to control bleeding and seek medical attention.
- Flush mucous membranes with water:
  - Mouth: Rinse several times with water
  - Eyes:
    - Remove contact lenses.
    - If eye wash station available, flush eyes for 15 minutes.
    - If eye wash station not available, have a peer flush exposed eyes with 500 ml lactated ringers or normal saline.
    - If unable to do the above, then flush under the sink with water (preferably tepid) for 15 minutes or as tolerated. Keep the eyes open and rotate the eyeballs in all directions to remove contamination from around the eyes. Help may be needed to hold the eyelids open.

Evaluate exposure and report.

- Seek medical care to determine risk associated with exposure.
- Report blood and body fluid exposure immediately as it poses a risk of infection transmission.
- Reporting as soon as possible will assist obtaining a test from the source.
- Remember to complete an incident report (where applicable) so that a root cause investigation may occur that can result in preventing similar type incidents to others.

### Exposures posing risk of infection

- Percutaneous injury
- Mucous membrane exposure
- Non-intact skin exposure
- Bites resulting in blood exposure to either person involved

### Substances posing risk of infection transmission

- Blood
- Body fluids, including saliva and urine visibility contaminated with blood
- Other potentially infectious materials (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids) or tissue
- Concentrated virus or other bloodborne pathogen

Source: Centers for Disease Control and Prevention. (2019). What to do following a sharps injury. Retrieved from <https://www.cdc.gov/nora/councils/hcsa/stopsticks/whattodo.html>



## Incident Report

Date of Report: \_\_\_\_\_

Name of person exposed/injured: \_\_\_\_\_

Others involved (list): \_\_\_\_\_

Details of procedure being performed when incident occurred (Include where and how. If incident was related to sharp device, list type of device, how and when during use of device incident occurred):

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Details of incident (Include type and amount of fluid/material and severity of incident; depth of injury; amount of fluid injected if applicable; duration of contact and condition of skin):

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Action taken (Include whether or not the student was recommended to undergo testing. If testing was refused by the student, did they sign a form acknowledging that decision?):

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Follow-up: \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Faculty

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

## **Breaking Down the HIPAA Guidelines for Healthcare Professionals**

HIPAA is the preeminent regulatory standard governing the use and transmission of confidential patient information. Nearly every single entity involved in the healthcare industry—directly or tangentially—needs to comply with the HIPAA guidelines for healthcare professionals. Unfortunately, the various rules and requirements that dictate the HIPAA compliance guidelines can get cumbersome to navigate for organizations both small and large.

### **Understanding HIPAA guidelines for Healthcare Professionals**

Since its inception, there have been multiple changes to the HIPAA regulations—the HITECH act of 2009 being one of the most recent and influential ones. The Department of Health and Human Services (HHS) and the Office for Civil Rights (OCR) have jointly amended HIPAA over the years, adding and enforcing various ‘rules’ to protect the privacy, security, and integrity of patient information.

Healthcare organizations are required to comply with these rules to not only ensure the safe use of patient health information (PHI) but also avoid hefty penalties due to potential HIPAA violations. Whether you intend to ensure HIPAA compliance yourself or enlist professional help, it’s highly advisable to educate yourself on the various facets of HIPAA and its scope, especially regarding:

- What is HIPAA?
- What does PHI Include?
- Who needs to be HIPAA compliant?
- What are the four main HIPAA Rules?

### **What is HIPAA?**

The Health Insurance Portability & Accountability Act (HIPAA) of 1996 was enacted to ensure seamless health coverage for American citizens and establish regulatory standards for the usage and sharing of confidential patient information (i.e., Patient Health Information or PHI).

Any entity that handles, either directly or indirectly, PHI is required to abide by the regulations and standards set forth in HIPAA’s various rules. With the introduction of the Health Information Technology for Economic and Clinical Health (HITECH) Act, HIPAA also covers electronic PHI (ePHI), and the stipulated protections must be applied regardless of the data’s origin.

Through the operationalization of the privacy and security rules of the act, HIPAA provides standards for the use of technology and security safeguards to be used to adequately protect confidential health information.

### **What Does PHI Include?**

PHI basically constitutes any health information—physical or electronic—that can be used to successfully identify that patient. Broadly, any data that could be considered personally identifiable information (PII) *outside healthcare purposes* should be regarded as PHI *within the sector and related activity*. Adopting this mentality will help your organization adhere to HIPAA stipulations.

A potential misconception about HIPAA is that it exclusively pertains to medical details. However, because any the regulation is designed to secure all relevant data that can identify



someone as the patient in question, HIPAA extends to numerous activities, purposes, individuals, and third parties outside of strictly medical activity (e.g., insurance and payment processors).

For example, health records, details of physician visits, medical bills, payment information, privileged communication with physicians are all covered under the regulation.

### **Additional PHI Categories**

Some other categories of personally identifiable information (PII) that are part of medical records and other healthcare documents are:

- Geographical details of patients
- Birthdate excluding year of birth
- Phone numbers
- Email addresses
- Social security numbers
- Health plan details
- IP addresses
- Biometric data

Healthcare organizations store and process large amounts of PHI and PII in their daily transactions and are unilaterally covered under HIPAA's data protection guidelines. But even entities that indirectly come into contact with PHI are governed by the same rules and regulations.

### **Who needs to be HIPAA compliant?**

HIPAA aims to protect the sensitive and confidential health information of hundreds of millions of U.S. patients. However, due to the highly damaging consequences of a potential breach, HIPAA mandates that all covered entities (CEs) and their business associates (BAs) abide by the HIPAA guidelines while storing and sharing any identifiable patient information.

### **Covered Entities**

The U.S. Department of Health & Human Services (HHS) defines "covered entities" (CEs) as belonging to any one of the following categories:

- Health plans
- Health care clearinghouses
- Health care providers

Health plans are the payers or insurance companies that are in the business of regular transmission of patient billing and medical info to numerous providers and other vendors. From HMOs, health maintenance companies, and company health plans to Medicare and Medicaid, every health insurance payer is covered under HIPAA privacy rules.

Health care clearinghouses are the entities acting as intermediaries between different healthcare organizations, processing health care information received from one entity and sharing it in an industry-standard format with another one.

Finally, health care providers include a wide range of caregivers that capture patient data in terms of medical records, doctor-patient interactions, and other demographic information. Hospitals, clinics, independent physicians, diagnostic labs, pharmacies, and dentists serve as more commonly understood examples. Generally, if you provide services covered under an individual's health insurance, you should take steps to prevent HIPAA non-compliance.

If you're operating as any of the above, you're automatically bound by HIPAA's security and privacy standards and need to ensure your business processes are operating in a HIPAA-compliant environment.

### **The Four Main HIPAA rules**

As mentioned above, HIPAA has seen multiple rules established under its scope throughout its existence. These are intended to provide comprehensive PHI protection guidelines to CEs and BAs.

The four major HIPAA rules you should be aware of before establishing or outsourcing your HIPAA compliance program are:

- The Privacy Rule
- The Security Rule
- The Breach Notification Rule
- The Enforcement Rule

### **HIPAA Privacy Rule**

The HIPAA Privacy Rule represents the most fundamental set of guidelines organizations need to comply with. Its primary objective is to establish the conditions under which PHI can be shared or disclosed.

As per the HHS's Privacy Rule Summary, its most essential requirements are the following:

- **Restriction of disclosure** – Any covered entity or business associate must not access or disclose PHI unless:
  1. The subject of the PHI requests for it
  2. The HHS requests access to it
  3. One or more of the permitted use criteria are met (e.g., research, public interest, or benefit projects).
- **Limitation of disclosure** – CEs and BAs must share PHI only to the degree necessary, as laid down in the HHS's Minimum Necessary Requirement.

The HIPAA Privacy Rule requires healthcare organizations to control who can access PHI and under what conditions. It also provides patients the Right to Access to view their own PHI.

Another important stipulation within the **Privacy Rule** is the HIPAA Retention Requirements, which pertain to the retention of HIPAA medical records and HIPAA-related records by covered entities.

While the rule does not explicitly state any maximum retention period for medical records (as each entity is governed by its respective state laws), it does specify a minimum retention period of six years for all HIPAA-related documents from their creation date.

### **Challenging Privacy Rule and PHI Scenarios—Mental Health Example**

The scope of the **HIPAA Privacy Rule** also extends to mental health professionals due to its guidelines on the conditions under which confidential patient information can be shared. However, this translates to some specific HIPAA guidelines for mental health professionals.

Mental health therapists may share PHI with people involved in a person's care if the concerned patient:

- Has agreed to it
- Has not objected to it after being given the opportunity
- Has brought a partner or a parent to treatment to help schedule sessions and pick up prescriptions, thereby showing no objection
- Is unconscious, intoxicated, delirious, experiencing psychosis, or otherwise incapable of making independent decisions

### **HIPAA Security Rule**

While the Privacy Rule includes the protections given to every patient, the standards and requirements for the actual operationalization of these protections are laid out in the Security Rule.

As per the HHS's Security Rule Summary, there are three categories of requirements that covered entities need to ensure:

- **Administrative safeguards** – These include overarching controls governing the management of an organization's security processes, personnel, and approach to risk management.
- **Physical safeguards** – These refer to the physical controls related to the monitoring, restricting, access to spaces and devices by individuals.
- **Technical safeguards** – Lastly, these include comprehensive controls focused on cyberthreats posed by wireless networks, servers, and other IT infrastructure.

Implementing adequate cybersecurity solutions encompassing firewalls, network security, cloud security, data encryption, identity & access management, and other elements should be part of every organization's HIPAA compliance plan.

### **HIPAA Breach Notification Rule**

A HIPAA breach is defined as the unauthorized use, access, or disclosure of PHI under the Privacy Rule that compromises the security and privacy of PHI. The Breach Notification Rule lays down the specific requirements organizations need to fulfill in case a breach happens.

HHS's Breach Notification Requirements require covered entities to notify the appropriate authorities according to the following conditions:

- **Breaches affecting fewer than 500 people** – The organization must notify the HHS Secretary and affected individuals within 60 days of the end of the calendar year
- **Breaches affecting 500 people or more** – Organizations must notify the HHS Secretary and affected individuals within 60 days of discovering the violation. Depending on the scope of the breach, companies may also have to notify a prominent media outlet regarding the occurrence.

Today's advanced cyberthreats deem it necessary for organizations to proactively prepare against security breaches and implement robust threat detection and risk mitigation practices. In the absence of an efficient communication infrastructure, the post-incident mitigation will most likely regress into a haphazard mess that will do more harm than good.

### **HIPAA Enforcement Rule**

The Office of Civil Rights (OCR), in conjunction with the Department of Justice (DOJ), enforces the fines and penalties related to HIPAA violations. These are stipulated in the HIPAA

Enforcement Rule. As per the Rule, the financial penalties organizations are liable to pay are as follows:

- **Individual Fines** – Individual penalties can range from as low as \$100 to as much as \$50,000 for offenses committed amid willful neglect without corrective action taken.
- **Annual Limits** – The total amount of penalties a covered entity may be subject to over a calendar year, including all infractions, cannot exceed \$1.5 million.

Owing to the significant financial penalties and the potential irrecoverable damage to your organization's reputation and your customers' sensitive data, it's advisable to get professional help. You can turn to an expert compliance advisory services provider that can assist you in analyzing your security controls, advise corrective action to patch deficiencies, and manage end-to-end compliance requirements for you.

Source: RSI Security. (2022). *Breaking down the HIPAA guidelines for healthcare professionals*. Retrieved from <https://blog.rsisecurity.com/breaking-down-the-hipaa-guidelines-for-healthcare-professionals/>



## **Social Media/ Confidentiality Policy**

Social media can be a rewarding way to share life with your family and friends. However, use of social media also presents certain risks and carries certain responsibilities. All students must act professionally and refrain from behavior, both on and off the job, that could adversely impact Keystone Nursing Academy's mission. Students should treat fellow students, clients, faculty, and guests professionally at all times, including when posting and transmitting through social media.

In the rapidly expanding world of electronic communications, social media includes web logs or blogs, journals, or online diaries; personal websites; social networking (e.g., Facebook or Twitter) or affinity websites; or online chatrooms by way of example.

Students are prohibited from using Keystone Nursing Academy technology to access social media, unless they are accessing it for education-related reasons and with their faculty's approval.


The same principles and guidelines found in other Handbook policies and provisions apply to online activities. Ultimately, you are responsible for what you post online. While Keystone Nursing Academy respects your use of social media as a vehicle for social (and sometimes, business or educational) networking, please understand the following:

1. Do not present yourself as a representative of Keystone Nursing Academy. Social media indicating that you are a student of Keystone Nursing Academy must state that the opinions provided do not represent Keystone Nursing Academy's views. Content placed on social media regarding KNA or its board, faculty, or other students must be free of any suggestion that the views expressed are anything more than your personal opinion. In other words, the content must make clear the views are not those of Keystone Nursing Academy.
2. Do not place content on social media that violates Keystone Nursing Academy policies, including, but not limited to, its Equal Employment Opportunity/Anti-Harassment, Confidential Information, Workplace Violence, and Student Conduct policies. For example, postings including discriminatory or harassing remarks or threats of violence will result in discipline.
3. Do not publish confidential information, including, but not limited to, trade secrets, proprietary information, and all other non-public information and data about the Keystone

Nursing Academy's business or its faculty and students. If you are uncertain whether information is confidential, ask your Program Director, or designee.

# A Nurse's Guide to the **Use of Social Media**



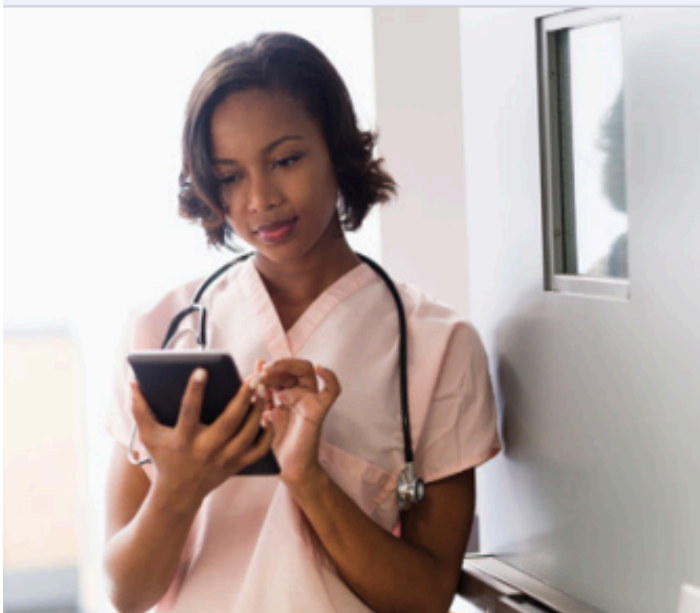


**A nurse must  
understand and apply  
these guidelines for the  
use of social media.**

**T**he use of social media and other electronic communication is expanding exponentially as the number of social media outlets, platforms and applications available continue to increase. Individuals use blogs, social networking sites, video sites, online chat rooms and forums to communicate both personally and professionally with others. Social media is an exciting and valuable tool when used wisely. The very nature of this medium, however, can pose a risk as it offers instantaneous posting opportunities that allow little time for reflective thought and carries the added burden that what is posted on the Internet is discoverable by a court of law even when it is long deleted.

Nurses are welcome to use social media in their personal lives. This may include having a Facebook page, a Twitter feed or blogging on various websites. Nurses can positively use electronic media to share workplace experiences, particularly those events that are challenging or emotionally charged, but it is imperative not to mention patients by name or provide any information or details that could possibly identify them in order to protect patients' right to privacy.





## SOCIAL MEDIA IN THE WORKPLACE

Social media can benefit health care in a variety of ways, including fostering professional connections, promoting timely communication with patients and family members, and educating and informing consumers and health care professionals. Social media provides nurses with a way to express their feelings, and reflect or seek support from friends, colleagues, peers or virtually anyone on the Internet. Journaling and reflective practice are recognized as effective tools in nursing practice, and the Internet provides an alternative media for nurses to engage in these helpful activities. Without a sense of caution, however, these understandable needs and potential benefits may result in the nurse disclosing too much information, and violating patient privacy and confidentiality.

Health care organizations that utilize electronic and social media typically have policies governing employee use of such media in the workplace. Components of these policies often address personal use of employer computers and equipment, personal computing during work hours, and the types of websites that can be accessed from employer computers. Health care organizations also maintain careful

control of websites maintained by or associated with the organization, limiting what may be posted to the site and by whom.

The employer's policies, however, typically do not address the nurse's use of social media to discuss workplace issues outside of work on home computers, personally owned phones and other handheld electronic devices. It is in this context that the nurse may face potentially serious consequences for the inappropriate use of social media.

*Jamie has been working in hospice care for the last six years and one of her patients, Maria, maintained a hospital-sponsored communication page to keep friends and family updated on her battle with cancer. One day, Maria posted about her depression. As her nurse, Jamie wanted to provide support, so she posted, "I know the last week has been difficult. Hopefully the new happy pill will help, along with the increased dose of morphine. I will see you on Wednesday." The site automatically listed the user's name with each comment. The next day, Jamie was shopping at the local grocery store when a friend stopped her to ask about Maria's condition. "I saw your post yesterday. I didn't know you were taking care of Maria," the friend said. "I hope that new medication helps with her pain."*

This is an example of a violation of confidentiality through social media. While Jamie had Maria's best intentions at heart by trying to offer her words of support, she inadvertently disclosed information about a patient on a social media site. Everyone who read that post now knows about Maria's medication and increase in morphine, violating her right to privacy and confidentiality. Instances of inappropriate use of electronic media by nurses such as this have been reported to boards of nursing (BONs) and, in some cases, to the media.

## CONFIDENTIALITY AND PRIVACY

To understand the limits of appropriate use of social media, it is important to have an understanding of confidentiality and privacy in the health care context.

Confidentiality and privacy are related, but distinct concepts:

- Any patient information learned by the nurse during the course of treatment must be safeguarded by that nurse.
- Such information may only be disclosed to other members of the health care team for the purpose of providing care for the patient.
- Confidential information should be shared only with the patient's informed consent, when legally required or where failure to disclose the information could result in significant harm. Beyond these very limited exceptions, a nurse is obligated to safeguard confidential information.

*As a licensed practical nurse for more than 20 years, Bob knew the importance of safeguarding a patient's privacy and confidentiality. One day, he used his personal cell phone to take photos of Claire, a resident in the group home where he worked. Bob received permission from Claire's brother to take the photo since she was unable to give consent due to her mental and physical condition. That evening, Bob ran into William, a former employee of the group home. While catching up, he showed William the photo of Claire and discussed her condition with him. The administrator of the group home later learned of Bob's actions and terminated his employment for breach of confidentiality.*

Bob thought it was okay for him to take Claire's photo because he had the consent of a family member. He also thought it was acceptable for him to discuss Claire's condition because William previously worked with Claire. So why was this behavior wrong? Because, first, merely asking Claire's brother for permission is not obtaining a valid consent. Second, confidential information should not be

disclosed to persons no longer involved in the care of a patient. Even though Bob made an honest mistake, confidentiality rules must be strictly enforced to protect a patient's right to privacy.

Privacy relates to the patient's expectation and right to be treated with dignity and respect. Effective nurse/patient relationships are built on trust. Patients need to be confident that their most personal information and their basic dignity will be protected by the nurse. Patients will be hesitant to disclose personal information if they fear it will

be disseminated beyond those who have a legitimate "need to know." Any breach of this trust, even inadvertent, damages the nurse/patient relationship and the general trustworthiness of the profession of nursing.

Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient privacy and confidentiality by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances. The definition of individually identifiable information includes any information that relates to the past, present or future physical or mental health of an individual, or provides enough information that leads someone to believe the information could be used to identify an individual.

Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways. Nurses may breach confidentiality or privacy with information they post via social media sites. Examples may include comments in which patients are described with enough sufficient detail to be identified, referring to patients in a degrading or demeaning manner, or posting videos or photos of patients.



**Privacy is the patient's expectation to be treated with dignity and respect. Confidentiality is safeguarding patient information.**

*Emily, a 20-year-old nursing student, wasn't aware of the potential repercussions that could occur when she took a photo of Tommy, a 3-year-old leukemia patient in a pediatric unit, on her personal cell phone. When Tommy's mom went to the cafeteria, Emily asked him if she could take his picture, and Tommy immediately said yes. Emily took his picture as she wheeled him into his room. She posted Tommy's photo on her Facebook page with this caption: "This is my 3-year-old leukemia patient who is bravely receiving chemotherapy! He is the reason I am so proud to be a nurse!" In the photo, Room 324 of the pediatric unit was visible. Days later, the dean of the nursing program called Emily into her office. A nurse from the hospital found the photo Emily posted of Tommy on Facebook and reported it to hospital officials who also contacted Emily's nursing program.*

While Emily never intended to breach the patient's confidentiality, the hospital faced a HIPAA violation. From Emily's post, people were able to identify Tommy as a cancer patient and the hospital where he was receiving treatment. School officials expelled Emily from the nursing program for breaching patient confidentiality and HIPAA violations. The nursing program was also barred from using the pediatric unit for their students. Emily's innocent, yet inappropriate, action of posting a patient's photo had repercussions for her, the nursing program and the hospital.

But what if Emily removed the photo hours later? If it's taken down, no harm, no foul, right? No. Anything that exists on a server is there forever and could be retrieved later, even after deletion; therefore, it would still be discoverable in a court of law. Further, someone could have taken a screenshot of her Facebook page and posted it on a public website. Patient information and photos should never be posted on social media websites. Even after being deleted, the photo is still on a server and possibly posted somewhere else on the Internet.

## POTENTIAL CONSEQUENCES

As we've seen with Jamie, Bob and Emily, potential consequences for inappropriate use of social and electronic media by nurses vary. Consequences depend, in part, on the particular nature of the nurse's conduct.

Instances of inappropriate use of social and electronic media may be reported to the BON. Laws outlining the basis for disciplinary action by a BON vary between jurisdictions. Depending on the laws of a jurisdiction, a BON may investigate reports of inappropriate disclosures on social media sites by a nurse on the grounds of:

- Unprofessional conduct;
- Unethical conduct;
- Moral turpitude (defined as conduct that is considered contrary to community standards of justice, honesty or good morals);
- Mismanagement of patient records;
- Revealing a privileged communication; and
- Breach of confidentiality.

If the allegations are found to be true, the nurse may face disciplinary action by the BON, including a reprimand or sanction, assessment of a monetary fine, or temporary or permanent loss of licensure.

Improper use of social media by nurses may violate state and federal laws established to protect patient privacy and confidentiality. Such violations may result in both civil and criminal penalties, including fines and possible jail time. A nurse may face personal liability and be individually sued for defamation, invasion of privacy or harassment. Particularly flagrant misconduct on social media websites may also raise liability under state or federal regulations focused on preventing patient abuse or exploitation.

If the nurse's conduct violates the policies of the employer, the nurse may face employment consequences, including termination. Additionally, the actions of the nurse may damage the reputation of the health care organization, or subject the organization to a lawsuit or regulatory consequences.



## SOCIAL MEDIA'S IMPACT ON PATIENT SAFETY AND CARE

Another concern arising from social media misuse is its effect on team-based patient care. Online comments by a nurse regarding co-workers, even if posted from home during nonwork hours, may constitute lateral violence. Lateral violence includes disruptive behaviors of intimidation and bullying, which may be perpetuated in person or via the Internet. This is sometimes referred to as "cyberbullying." Such activity is a cause for concern for current and future employers, and regulators because they negatively affect team-based care, thus creating patient-safety ramifications.

The line between speech protected by labor laws, the First Amendment and the ability of an employer to impose expectations on employees outside of work is still being determined.

Nonetheless, negative comments can be detrimental to a cohesive health care delivery team and may result in sanctions against the nurse.

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## COMMON MYTHS AND MISUNDERSTANDINGS OF SOCIAL MEDIA

While instances of intentional or malicious misuse of social media have occurred, in most cases, inappropriate disclosure is unintentional. A number of factors may contribute to a nurse inadvertently violating patient privacy and confidentiality while using social media, including:

- A mistaken belief that the communication or post is private and accessible only to the intended recipient. The nurse may fail to recognize that content once posted or sent can be disseminated to others.
- A mistaken belief that content deleted from a site is no longer accessible. The moment something is posted, it lives on a server that can always be discoverable in a court of law.
- A mistaken belief that it is harmless if private information about patients is disclosed if the communication is accessed only by the intended recipient. This is still a breach of confidentiality.
- A mistaken belief that it is acceptable to discuss or refer to patients if they are not identified by name, but referred to by a nickname, room number, diagnosis or condition. The patient can still be identified so this too is a breach of confidentiality and demonstrates disrespect for patient privacy.
- Confusion between a patient's right to disclose personal information about himself or herself and the need for health care providers to refrain from disclosing patient information without a care-related need for the disclosure.

The ease of posting and the commonplace nature of sharing information via social media may appear to blur the line between one's personal and professional lives. The quick, easy and efficient technology enabling use of social media reduces not only the time it takes to post, but also the time to consider whether the post is appropriate and what ramifications may come from posting inappropriate content.

## HOW TO AVOID DISCLOSING CONFIDENTIAL PATIENT INFORMATION

With awareness and caution, nurses can avoid inadvertently disclosing confidential or private information about patients. The following guidelines are intended to minimize the risks of using social media:

- Nurses must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
- Nurses are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Nurses must not share, post or otherwise disseminate any information or images about a patient or information gained in the nurse/patient relationship with anyone unless there is a patient care-related need to disclose the information or other legal obligations to do so.
- Nurses must not identify patients by name, or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Nurses must not refer to patients in a disparaging manner, even if the patient is not identified.
- Nurses must not take photos or videos of patients on personal devices, including cell phones. Nurses should follow employer policies for taking photographs or videos of patients for treatment or other legitimate purposes using employer-provided devices.
- Nurses must maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has an obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact



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Like in-person relationships, the nurse has an obligation to establish, communicate and enforce professional boundaries with patients in the online environment.

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with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.<sup>1</sup> Nurses must consult employer policies or an appropriate leader within the organization for guidance regarding work related postings.

- Nurses must promptly report any identified breach of confidentiality or privacy.
- Nurses must be aware of and comply with employer policies regarding use of employer-owned computers, cameras and other electronic devices, and use of personal devices in the workplace.
- Nurses must not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Nurses must not post content or otherwise speak on behalf of the employer unless authorized to do so, and must follow all applicable policies of the employer.

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<sup>1</sup> Nurses may want to consult NCSBN's "A Nurse's Guide to Professional Boundaries" for more information on this issue.



## CONCLUSION

Social media has tremendous potential for strengthening personal relationships and providing valuable information to health care consumers, as well as affording nurses a valuable opportunity to interface with colleagues from around the world. Nurses need to be aware of the potential consequences of disclosing patient-related information via social media, and mindful of employer policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, nurses may enjoy the personal and professional benefits of social media without violating patient privacy and confidentiality.

## NCSBN SOCIAL MEDIA RESOURCES

NCSBN offers additional resources pertaining to social media including the "Social Media Guidelines for Nurses" video, at [ncsbn.org](https://www.ncsbn.org) that highlights guidelines for nurses and nursing students for using social media responsibly. This video summarizes key points of these guidelines along with dramatization of potential scenarios of inappropriate social media use.



## THE NURSE'S CHALLENGE

- Be aware.
- Be cognizant of feelings and behavior.
- Be observant of the behavior of other professionals.
- Always act in the best interest of the patient.

To find the board of nursing in your state/territory,  
visit [ncsbn.org/contactbon](https://www.ncsbn.org/contactbon).

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