

**COLLEGE  
OF  
SAINT MARY**



**NURSING PROGRAM  
STUDENT MANUAL**

**2011**

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### ***Administrative Policies***

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Dear Student,

This manual has been developed to give you easy access to the policies by which decisions are made in the Division of Health Professions. These policies will outline requirements, expectations, and answer questions about the Nursing programs. It is important that you read, understand, and refer to this manual when planning your curriculum, making decisions, and have any questions regarding the policy requirements and expectations in your nursing program.

The introductory pages give an overview of the nursing curriculum and philosophy of the nursing programs. The manual serves as a guideline for the plan of study and description of the expectations of the program.

When policies are revised and represent significant change, the manual available online will reflect these changes. Questions about these policies should be addressed to your academic advisor. The advisor will then direct you to the correct program director or other members of the faculty as needed. Any questions may come directly to the program director if the academic advisor is not available.

These policies are in addition to those of College of Saint Mary as listed in the College Catalog.

Kathleen Zajic RN, MSN, EdD  
Director, ASN/BSN Nursing Programs

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Nursing Program Student Manual

I have been notified that a copy of the Nursing Program Student Manual (containing Curriculum Material and Policies) is located on the CSM website: [www.csm.edu](http://www.csm.edu) (click "Academics", then select "Undergraduate Programs", click "Nursing" then click "Important Links") and <https://my.csm.edu/communities/Nursing%20News/Pages/default.aspx>. I will read the policies in full this week and direct any questions about the policies to my instructor, academic advisor, program director, or division chairperson.

I understand that I am expected to read and abide by the policies. My signature indicates my willingness to comply with these regulations as stated in the policy manual.

Signed: \_\_\_\_\_  
(Student)

Print your name here: \_\_\_\_\_

Date: \_\_\_\_\_

*Policies are subject to revision. Students are expected to review the handbook at the beginning of each semester to be aware of any policy revisions.*

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**STUDENT AFFILIATION AGREEMENT**  
For Health Care Agencies

I, the undersigned, a student enrolled in a Health Professions Program at College of Saint Mary, abide by the policies enforced by the College of Saint Mary and do hereby agree to the following:

1. To be available for practicum/clinical/fieldwork activities to a schedule mutually agreed to between College of Saint Mary and the agency.
2. To abide by the rules, regulations and policies of the agency.
3. To abide by the dress code of the agency.
4. To abide by existing laws and agency policies regarding the confidentiality of all information related to patients, staff and facility and which prohibits reproduction of any protected health information for purposes of removal from the agency.
5. To follow all safety procedures in force for the agency.
6. To hold the agency harmless for possible losses incurred as a result of accident, injury or illness that may occur to the student while on affiliation in the agency.
7. To obtain express written permission from both the College and the agency prior to submitting for publication any material obtained as a result of education training.

This agreement will be in effect for the duration of the student's enrollment in the CSM Nursing Program.

\_\_\_\_\_  
Student (PLEASE PRINT)

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_

This document will be filed in the Student Academic Advisor File.

## A STUDENT'S GUIDE TO HIPAA

### Just What is HIPAA?

In 1996, Congress recognized the need for national patient privacy standards and set a 3-year deadline to enact such protections as part of the "Health Insurance Portability and Accountability Act of 1996" (HIPAA). At Alegent Health, our efforts will primarily focus on Title II – which mandates regulations that govern *Privacy, Security, and Electronic Transactions*.

The Privacy Rule, for the first time, creates national standards to protect individuals' medical records and other protected health information (PHI). PHI includes any information about a person's condition and anything about the care or payment received for it.

Examples of PHI include:

- appointments
- diagnostic lab results
- symptoms
- treatments
- blood type
- procedures
- medical records
- patient's bills
- procedure coding
- aggregate data which includes patient identifiable information.

All patients have the right to have confidential care provided. No one wants to receive services and have that information be available and/or given to others without a right or a need to know. *It is your responsibility to protect this sensitive personal information.*

Patient confidentiality begins from the moment you receive the first information in regard to a patient. Confidential information should not be discussed with anyone except on a professional need-to-know basis in order to further the delivery of patient care. Releasing confidential patient information, whether intentional or accidental is in conflict with the professional guidelines of any medical/healthcare entity.

This agreement will be in effect for the duration of the student's enrollment in the CSM Nursing Program.

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Student's Name (Please Print)

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Student's Signature

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Date

## ASSOCIATE AND BACHELOR OF SCIENCE DEGREES IN NURSING

### WHAT DO NURSES DO....

RNs with associate degrees typically provide direct care to individual clients in a variety of health care settings. RNs with baccalaureates are prepared to be first-line managers, and those students who already manage build on their experience. Baccalaureate prepared RNs can practice in community health and become RN managers in extended care, clinics and home care agencies, as well as in the hospital setting.

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### THE PROGRAMS

Nursing education at College of Saint Mary began in 1969 with the establishment of the Associate of Science degree (ASN) program. In 1983, the Bachelor of Science in Nursing (BSN) program was added. The ASN program is fully accredited by the National League for Nursing Accrediting Commission (NLNAC) and approved by the Nebraska State Board of Nursing. Upon completion, ASN graduates are eligible to apply to take the National Council Licensing Exam for Registered Nurses (NCLEX-RN®). The BSN program is also fully accredited by the National League for Nursing Accrediting Commission ( 3342 Peach tree Road NE, Suite 500 Atlanta, GA 30326).

### ASSOCIATE DEGREE

Students complete a curriculum, which includes a combination of nursing, core requirements, and supporting courses. Clinical practice begins in the first semester of the Nursing 2 track and extends throughout the program. Transportation to clinical facilities is the responsibility of the student. Students also utilize on-campus laboratories, computer simulation, and audio-tutorial equipment. Graduates are required to complete a minimum of 72 credit hours, 30 of which must be completed at College of Saint Mary and then are eligible to apply to write the licensure examination to practice as registered nurses as described in Nebraska Statutes Relating to Nursing – 71-1, 132.14. Information concerning Nebraska statutes relating to nursing and licensure laws are available at: <http://www.dhhs.ne.gov/crl/nursing/rn-lpn/rules.htm>

### BACHELORS DEGREE

The BSN nursing curriculum builds on the associate degree. This means the student will complete the associate degree and the NCLEX to become a licensed RN before continuing to the Bachelor's degree level. The program is designed to be completed in two academic years of full time study for those completing the ASN Nursing 2 Track. The ASN Nursing 3 Track students, providing all non-nursing electives and BSN prerequisites are completed, can complete the BSN nursing curriculum in one additional year of full-time study. Part-time study over a longer period is also available. Students complete a curriculum, which includes upper division nursing, core requirements and support courses. Clinical practice is an integral part of the curriculum and includes independent clinical experience. Most students complete a supporting field in Natural Sciences.

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### REQUIREMENTS FOR ALL CLINICAL/PRACTICUM COURSES PRIOR TO ENROLLMENT

1. **Performance Standards:** Successful completion of clinical nursing courses depends on the ability to think critically and to use nursing process, which includes communication, motor and interpersonal abilities (Nursing Student Policy 1.2 ). Technological adaptations can be made for some disabilities; however, a student must perform in a safe and reasonably independent manner. It is not acceptable to use a trained intermediary, as a student's judgment may be influenced by someone else's observations.
2. **CPR Certification:** Prerequisite to and concurrent with all clinical and practicum courses (Nursing Student Policy 1.3).
3. **Health Record Requirements:** Prerequisite to and concurrent with all clinical and practicum courses (Nursing Student Policy 1.3).
4. **Clinical Agency Requirements:** Prerequisite to and concurrent with all clinical and practicum courses. Meet standards set by clinical agency such as investigate background checks and drug screening (Nursing Student Policy 1.3).

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**ASSOCIATE DEGREE**

The Associate Degree program is designed to be completed in either one of two tracks: Nursing 2-Year Plan of Study or Nursing 3-Year Plan of Study. The plan of study is determined by admission criteria and may involve full or part-time study.

**NURSING 2 TRACK**

Criteria for admission into the Nursing 2 track for **\*recent high school graduates** are as follows:

- 1 year of high school chemistry
  - 1 semester of high school biology
  - grade-point average of 3.0 (B)
  - 23 composite score on ACT with a minimum of 21 in all subscores
- evidence of positive references for nursing
- 

**NURSING 3 TRACK**

Criteria for admission into Nursing 3 track for **\*recent high school graduates**:

- grade-point average of 2.75 (C+)
- 21 composite score on ACT with a minimum of 19 on all sub-scores

For progression to nursing classes:

The student must have a CSM college cumulative GPA of 2.5 and have completed a minimum of one science requirement and math elective by the end of Spring semester. A second science requirement must be completed prior to beginning nursing classes. (See Nursing Student Policy 2.6)

**\*Recent High School Graduate** refers to individuals who have graduated from high school within two years of application to nursing program.

**ASN APPLICANT WITH COLLEGE TRANSFER CREDIT:**

**CRITERIA:**

1. Cumulative grade-point average of at least 2.75 with a minimum of C in all natural and biological sciences.
2. Completion of at least 18 semester hours which must include at least two science courses in the nursing curriculum. No developmental classes will be included in the 18 hour requirement.
3. Successful completion of English and math requirement.
4. Meet ACT and/ or TEAS program requirement scores
5. Evidence of positive references for nursing.

**DATA REQUIRED:**

1. Official college transcript.
2. Official college transcript.
3. College transcript; ACT and/or placement test scores
4. College transcript, ACT and/or placement test scores
5. Two references from employer or school officials

Undeclared Students must complete a total of eighteen credit hours (these eighteen hours must include two required science courses and math course and will exclude all developmental courses: MTH 098 and ENG 099). Students must maintain a 2.75 CSM GPA (transfer course from other colleges will not count towards GPA) and will then be eligible to complete application process for ASN program (see above for admission criteria).

LPN to ASN: LPN's can earn credit equivalent to the first semester of nursing curriculum through successful completion of Advance Challenge Exam and identified components of the first semester nursing theory/clinical courses (NUR 144). [LPN- ASN students must also meet Test of Essential Academic Skills \(TEAS\) test score requirements and have a cumulative GPA of 2.75 for admission consideration.](#)

**BACHELOR'S DEGREE**

Students pursuing a Bachelor's Degree in Nursing are initially accepted into the associate degree program and identified as baccalaureate intent. On completion of the associate degree, successful passage of the NCLEX-RN and subsequent unencumbered licensure as an RN, students are admitted fully into the Bachelor's degree program. Registered nurses who have completed other associate degree or diploma programs may apply directly for admission to the Bachelor's degree program.

**CRITERIA**

1. Graduate of an NLNAC or accredited ADN program with a GPA of 2.5 OR graduate of a diploma or non-NLN accredited associate degree program and successful completion of the validation procedure\* \*
2. Registered nurse license in good standing in the State of Nebraska
3. Evidence of positive references for baccalaureate nursing
4. Physically and emotionally capable of meeting the objectives of the program

**DOCUMENTS REQUIRED FOR ADMISSION**

1. Official transcripts from high school, nursing program and any other colleges attended
2. Verification of unencumbered R.N. license

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3. Two letters of reference – one work related and one from nursing program, if graduated in last five years; otherwise two work related

\*\* Please contact the Nursing Division for further information regarding the validation procedure

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**COLLEGE OF SAINT MARY NURSING PROGRAMS**  
**TWO-YEAR ASSOCIATE DEGREE PLUS TWO-YEAR BACCALAUREATE DEGREE COMPLETION**

**Associate Degree - First Year**

<i>Fall Semester</i>	<i>Hrs.</i>	<i>Spring Semester</i>	<i>Hrs.</i>
BIO 200/201 Anatomy & Physiology I with lab	4	BIO 202/203 Anatomy & Physiology II with lab	4
CHM 100 Fundamentals of Chemistry	3	ENG 101 Composition	3
CHM 100L Fundamentals of Chemistry – Lab	1	NUR 201 or 202 Nursing Thru the Lifespan-Theory	4
NUR 100 Intro to Nursing Theory	4	NUR 211 Nursing Concepts	1
NUR 110 Nursing Concepts	1	NUR 271 or 272 Nursing Thru the Lifespan-Clin	3
NUR 170 Intro to Nursing Clinical	4	MTH elective (optional 112 or 242)	<u>3</u>
FYS First year Seminar	<u>1</u>		<b>18</b>
	<b>18</b>		
<b>Summer Session</b>			
BIO 230/231 Microbiology with lab	4		
ETH 200 Moral Reasoning	3		
PSY 101 Introduction to Psychology	<u>3</u>		
	<b>10</b>		

Associate Degree - Second Year

<i>Fall Semester</i>	<i>Hrs.</i>	<i>Spring Semester</i>	<i>Hrs.</i>
THL Theology	3	SOC 101 Intro to Soc	3
COM Speech	3	NUR 213 Nursing Concepts	1
NUR 201 or 202 Nursing Thru the Lifespan-Theory	4	NUR 253 Complex Nursing – Theory	4
NUR 212 Nursing Concepts	1	NUR 273 Complex Nursing – Clinical	4
NUR 271 or 272 Nursing Thru the Lifespan-Clin	3	<b>BIO 366 Pathophysiology</b>	<u>3</u>
NUR 224 Pharmacology	<u>2</u>		<b>15</b>
	<b>16</b>		

*Summer Option to take NCLEX-RN now through next year June*

*May Completion of ASN Program*

Baccalaureate Degree - Junior Year \*\*

<i>Fall Semester</i>	<i>Hrs.</i>	<i>Spring Semester</i>	<i>Hrs.</i>
<b>(BIS competency or BIS 101 ) or MTH 242</b>	<b>3</b>	<b>ENG Elective</b>	<b>3</b>
<b>ELA Elective</b>	<b>3</b>	<b>THL Elective</b>	<b>3</b>
<b>Open** Elective</b>	<b>3</b>	<b>ART/MUS Elective</b>	<b>3</b>
<b>PHL Elective</b>	<b>3</b>	<b>MTH 242 Statistics</b>	<b>3</b>
<b>NUR 372 Health Assessment *</b>	<b>3</b>		<b>12</b>
	<b>15</b>		

**Baccalaureate Degree - Senior Year**

<i>Fall Semester</i>	<i>Hrs.</i>	<i>Spring Semester</i>	<i>Hrs.</i>
<b>PED Elective</b>	<b>1</b>	<b>NUR 453 Leading &amp; Managing in Health Care</b>	<b>3</b>
<b>NUR 438 Nursing Theories &amp;, Research</b>	<b>4</b>	<b>NUR 463 Pract: Lead &amp; Manage.</b>	<b>2</b>
<b>NUR 452 Population based Community Health</b>	<b>3</b>	<b>NUR 455 Professional Roles &amp; Issues in Nursing</b>	<b>3</b>
<b>NUR 472 Pract: Pop-based Community</b>	<b>3</b>	<b>NUR 494 Capstone Senior Seminar</b>	<b>4</b>
<b>Interdisciplinary Cultural elective</b>	<b>3</b>	<b>HPS Elective</b>	<b>3</b>
	<b>14</b>		<b>15</b>

*\*Successful completion of this course validates 36 hours of nursing credit. (Transfer students will not have hours recorded until completion of capstone course prior to graduation.)*

*\*\*The student must complete a minimum of **128** credit hours, including all major, Core education requirements, and 18-hour supporting field or minor requirements for completion of Bachelor's Degree.*

*Students must be licensed as a Registered Nurse before enrolling in 400 level nursing courses.*

**NOTE:** Highlight italicized courses meet Core education requirements for a bachelor's degree and are beyond the associate degree core requirements.





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**NURSING PROGRAMS**  
**CURRICULUM MATERIAL**

## **NURSING PHILOSOPHY**

In accordance with the Mission and Purposes of College of Saint Mary, the nursing faculty believes that the Associate of Science in Nursing Degree and the Bachelor of Science in Nursing Degree programs arise from society's need for nurses who provide nursing care to people. To fulfill such a role, the graduate needs a general education that includes learning experiences that foster social and intellectual development of the individual. The Bachelor of Science Degree program builds upon the student's basic nursing program with upper division nursing courses and emphasizes a basis in the liberal arts.

Each person is an individual with natural rights, dignity, worth, and potential. An individual has basic needs that are psychosocial, cultural, intellectual, developmental, spiritual, environmental and physical. Health and illness are viewed as a continuum. The responsibility for one's state of wellness lies within each individual. A person's response to need fulfillment results in varying degrees of health or illness.

Education is one process whereby the capacities and potential of the individual are developed. Learning is the outcome of this educative process and is manifested by changes in behavior that persist. These changes occur in the way the learner thinks, feels and acts. Education involves the active efforts of the learner through which identified goals are achieved. Each learner is responsible for his/her own learning. While considering the diverse ages, backgrounds and life experiences of the learner, the teacher facilitates the learner's efforts and evaluates achievement of mutually identified or established goals.

Learning is influenced by conditions in the environment . A conducive learning environment includes the following attitudes and conditions: an environment which fosters open discourse, respect for the dignity of each individual, opportunity for creativity, freedom of expression, recognition and acceptance of responsibility, participation in decision making, promotion of constructive citizenship and cooperative relationships. Fiscal, physical and other learning resources promote achievement of learning outcomes.

Nursing is an essential humanitarian service. The nurse collaborates with interdisciplinary team members to assist recipients of health care to achieve an optimal level of wellness or a dignified death. The recipients of nursing may be individuals, families, groups, communities or societies. The nurse utilizes the nursing process while assuming the nursing roles as provider of care, manager of care and member of the nursing profession.

Nursing is an applied science and an art. Professional nursing functions are based on knowledge of principles and theories from nursing and other natural and behavioral sciences. These theories from nursing and other disciplines are synthesized to form the framework for implementing the nursing process.

Nursing practice includes a broad spectrum of activities that range from basic nursing knowledge, skills and attitudes to those that require a complex organization of these components (NLNAC, 2008). Therefore, various kinds of educational programs are needed for preparation of nurses to respond to differing levels of health care needs. Nursing education, consistent with the Institute of Medicine

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(IOM) core competencies and Agency for Healthcare Research and Quality (AHRQ) prepares students to deliver safe client – centered care, as members of an interdisciplinary team emphasizing evidence based practice, quality improvement approaches and informatics. (IOM, 2003, AHRQ 2008).

Nursing education strives to assist the student to develop a philosophy of nursing that is consistent with the American Nursing Association (ANA) Code of Ethics (Fowler, 2008). The graduates appreciate the dynamic nature of nursing and accept responsibility for continued personal and professional growth.

The focus of associate degree education in nursing is the acquisition of knowledge, skills and attitudes, demonstration of competence while providing holistic client care. Graduates, of the associate degree program, base nursing actions on knowledge and principles from nursing courses and the natural/ behavioral sciences. They effectively utilize a variety of communication techniques, in collaboration with the interdisciplinary team to meet client needs. The associate degree graduate assumes responsibility and accountability for provision of nursing care.

The Associate Degree Curriculum is focused on client needs and operationalized through concepts, which include: categories of human functioning, human development, communication, the teaching/learning process, nursing process, the discipline of nursing, management, family and community. Graduates utilize critical thinking and the nursing process to assess each client, arrive at a nursing diagnosis, plan and implement appropriate nursing care and evaluate the client's response to nursing interventions according to outcome criteria.

The focus of baccalaureate education in nursing (the Bachelor of Science Degree) includes upper division nursing courses and a broader base in general education. Care is provided to clients who may be individuals, families, groups and communities with a major emphasis on health promotion in more complex situations. The educational program provides diverse learning through incorporation of theory, practicum and service learning opportunities to broaden student's knowledge, skills, attitudes and civic responsibilities. Concepts addressed within the baccalaureate curriculum include human development, communication, and the teaching/learning process, nursing process, research, management, family and community.

Baccalaureate graduates function in a variety of health care settings. As members of the healthcare team, they may assume a leadership role and function as a manager of client care. In fulfilling the role as a member of the healthcare team, the baccalaureate graduates provide direct or indirect nursing care to individuals, families, groups and communities consistent with professional nursing standards. Graduates assume individual accountability and responsibility for the development of comprehensive plans of care and related outcomes. Baccalaureate graduates have an understanding of evidence based practice, nursing research, and quality improvement processes. Graduates are prepared to pursue advanced study in nursing.

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Associate and Baccalaureate graduates provide quality nursing care within their scope of practice that reflects an approach based on the psychosocial, intellectual, developmental, spiritual, environmental and physical needs of the individual at any age and/or level of wellness (State of Nebraska, Rules and Regulations Governing the Approval of Nursing Programs in Nebraska, 2006).

## **Nursing Curriculum Organizing Framework**

The organizing framework reflects the philosophy and goals of ASN and BSN Nursing Programs at College of Saint Mary. The Nursing Programs' curriculum is systematically designed and organized to provide a structural framework, which guides faculty and students in their professional nursing education endeavor.

**Major concepts** fundamental to the integrated ASN and BSN curriculum include philosophical beliefs about: 1.) Individual, 2.) Health--illness continuum, 3.) Education, 4.) Nursing and 5.) Nursing Education. Nursing faculty use these concepts as a foundational platform from which strands are introduced to develop the knowledge, skills and attitudes necessary for educating nursing students.

**Integrative strands** are components that are interwoven throughout the nursing curriculum. The integrative strands in the Nursing Programs at College of Saint Mary are as follows:

- Nursing Process (ASN and BSN)
- Categories of Human Functioning (only in ASN curriculum)
- Communication (ASN and BSN)
- Human Development (ASN and BSN)
- Teaching/Learning (ASN and BSN)
- Discipline of Nursing (ASN)
- Management (ASN and BSN)
- Family (ASN and BSN)
- Community (ASN and BSN)
- Research (BSN)

Nursing courses incorporate strands as ASN and BSN students sequentially progress from one level to the next in their programs of study. Program Outcomes reflect the philosophy and the organizing framework. Program Outcomes guide nursing faculty in course development and selecting clinical learning experiences.

**Associate Degree Nursing  
Program Outcomes**

Upon completion of the Associate Degree Nursing Program, the student will be able to demonstrate the following outcomes.

1. Incorporate an understanding of the identified categories of human functioning into the planned nursing care of individuals with multi-system alterations.
2. Use the nursing process when providing care for individuals with multi-system alterations in human functioning.
3. Use effective communication skills and principles when interacting with the individual client and significant others and in collaboration with other health team members.
4. Apply knowledge of human development when caring for clients and when interacting as a member of the health care team.
5. Use teaching/learning principles as related to self in the educational process, as a member of the health care team and as a provider of client care.
6. Examine the role of the associate degree nurse as a member of the discipline of nursing.
7. Incorporate selected management principles and skills while functioning within the role of the associate degree nurse.
8. Use concepts of family in the provision of nursing care to individual clients.
9. Identify community resources when appropriate for clients.

**Associate Degree Nursing Curriculum Strands**

The following are the organizing strands of the Associate Degree Nursing curriculum developed and reviewed by nursing faculty.

**A. CATEGORIES OF HUMAN FUNCTIONING**

The focus of the ASN level of the curriculum is on the client's capacity or ability to maintain essential life functions. Maslow's hierarchy of human needs is taken into consideration in prioritizing lower to higher-level alterations in human functioning. Alterations in any category of human functioning affect health status. Human beings have the right to choose their position in the need hierarchy. This choice is dependent upon the individual's interactions with others and the environment.

The categories of human functioning include: protection; sensory/perceptual; comfort, rest, activity, mobility; nutrition; growth and development; fluid-gas transport; psychosocial/cultural/spiritual; and elimination. (National Council, 2002) The ASN curriculum focuses on alterations in these categories. The nursing student cares for individuals with simple to complex needs as a member of the health care team.

**B. NURSING PROCESS**

The nursing process is central to all nursing actions. It is applicable in any setting within any frame of reference, concept, theory or philosophy. It is flexible and adaptable to a number of variables, yet sufficiently structured to provide a base from which all nursing actions can proceed. Although nursing process is an organizing concept in the curriculum, the degree or depth of utilization of the process varies with the level of the student.

A systematic rational method of planning and providing individual nursing care. The phases are assessing, diagnosing, planning, implementing and evaluating. (Berman, A., Snyder, S. 2012).

**C. COMMUNICATION**

An interactive process, that occurs when a person (the sender) sends a verbal or nonverbal message to another person (receiver) and receives feedback (Kelly 2008).

The communication process and communication skills can be taught on a continuum from simple to complex. Communication begins with personal and interpersonal skills and progresses to include facets of health teaching in the ASN curriculum.

**D. HUMAN DEVELOPMENT**

Human development is a dynamic life-long process with specific stages of individual development. A nurse must understand this process in order to comprehend the uniqueness of the individual, motivation for health, and reaction to illness. Stress or illness may affect this developmental process.

The ASN curriculum utilizes Erikson's psychosocial and developmental theory to introduce developmental concepts with the emphasis on the individual client and the nursing process. Other selected theories are utilized where appropriate. Development

at this level refers to an individual's increasing capacity, skill and functioning related to growth (Berman and Snyder 2012).

**E. TEACHING / LEARNING**

Teaching is a system of activities intended to produce learning. Learning is accomplished through interaction with one's environment, is influenced by one's experiences and results in insight and a change in behavior, perception, or attitude that persists. The development and application of the teaching/learning process is useful in understanding personal learning as well as in appreciating and enhancing the potential of the process of learning in the individual. The teaching/learning process includes the use of clearly written objectives, structured content and planned methods. Both formative and summative evaluations are utilized as part of the critical process to promote learning (Berman and Snyder 2012).

The ASN curriculum focuses on basic principles of teaching/learning and their use in client care. Maslow's hierarchy of needs is used to determine client needs. Nursing process is then used to meet the individual client's teaching/learning needs. The focus of teaching includes both individual clients and their significant others.

**F. DISCIPLINE OF NURSING**

The discipline of nursing encompasses a multifaceted and complex set of issues. Nurses must understand the many arenas influencing the practice of nursing in order to meet the challenging present and future demands of the profession. This involves issues affecting nursing to include social, ethical, legal, economic, political and technological, as well as professional nursing roles.

The ASN curriculum focuses on developing an awareness of the importance of the discipline of nursing including the changing nature of nursing/health care, the roles of the associate degree nurse, and legal and ethical issues.

**G. MANAGEMENT**

Management is working with and through individuals and groups to accomplish organizational goals. (Kelly, 2008). Nursing management emphasizes the interdisciplinary nature of management in current practice. The nurse manager's task is to plan, organize, direct and control available financial, material and human resources in order to provide the most effective care possible to groups of patients and their families. The management process, like the nursing process, includes gathering data, identifying problems, making plans, executing plans and evaluating results.

The ASN curriculum focuses on basic management skills which are needed to plan and implement care for the individual clients and working as a member of the health care team.

**H. FAMILY**

A social system consisting of two or more people who define themselves as a family and who share bonds of emotional closeness. (Clark 2008). The family is the basic unit in which health care and health behaviors are managed. An individual is best understood in the context of the family because a change in one family member affects all family members.

The ASN curriculum focuses on the client's family as an influencing factor affecting the individual's ability to adapt to alterations in categories of human functioning.

I. COMMUNITY

A community is a group with common interests ,whose members know and interact with one another and who function collectively within a defined social structure to address common concerns. (Clark, 2008).

The nurse, as a health provider to both the family and community, assists the consumer to effectively achieve the highest level of health. The ASN curriculum focuses on knowledge, attitudes, awareness of community resources, and skills essential for providing care to the individual client.

### **LEVELING OF ASSOCIATE DEGREE IN NURSING PROGRAM OUTCOMES**

The Associate of Science in Nursing Program is divided into three levels. The proficient level outcomes are reached during the final semester of nursing courses. This level represents the skills desired of a graduate ready to enter nursing practice. Attainment of the intermediate level outcomes occurs during the second and third semesters of nursing courses. The beginning level outcomes are achieved by the end of the first semester of nursing courses.

At the time of successful completion of the identified levels, the student will complete the following outcomes.

OUTCOME I: CATEGORIES OF HUMAN FUNCTIONING

PROFICIENT LEVEL

Incorporate an understanding of the identified categories of human functioning into the planned nursing care of individuals with multi-system alterations.

INTERMEDIATE LEVEL

Demonstrate knowledge of human functioning when planning and providing care to individuals.

Individualize the nursing process to the client with alterations in human functioning across the life span.

Relate understanding of the categories of human functioning to nursing care of the client at different stages of the life span.

BEGINNING LEVEL

Identify alterations in human functioning.

OUTCOME II: NURSING PROCESS

PROFICIENT LEVEL

Use the nursing process when providing care for individuals with multi-system alterations in human functioning.

INTERMEDIATE LEVEL

Use the nursing process when providing care to individuals through the life span.

Modify standardized care plans to meet the needs of individuals.

BEGINNING LEVEL

Use the nursing process in selected situations.

OUTCOME III: COMMUNICATION

PROFICIENT LEVEL

Use effective communication skills and principles when interacting with the individual client and significant others and in collaboration with other health team members.

INTERMEDIATE LEVEL

Use effective communication skills and principles geared toward the developmental level of individuals through the life span, their significant others and health team members.

Use basic therapeutic communication in dealing with individuals, family and significant others.

**BEGINNING LEVEL**

Use basic effective verbal, nonverbal and written communication when dealing with selected individuals.

**OUTCOME IV: HUMAN DEVELOPMENT**

**PROFICIENT LEVEL**

Apply knowledge of human development when caring for clients and when interacting as a member of the health care team.

**INTERMEDIATE LEVEL**

Use knowledge of the process of human development when caring for clients of various ages with alterations in human functioning.

**BEGINNING LEVEL**

Identify selected principles of human development.

**OUTCOME V: TEACHING / LEARNING**

**PROFICIENT LEVEL**

Use teaching/learning principles as related to self in the educational process, as a member of the health care team and as a provider of client care.

**INTERMEDIATE LEVEL**

Implement teaching/learning principles with clients through the life span and their family/significant other.

**BEGINNING LEVEL**

Identify basic principles of teaching/learning.

**OUTCOME VI: DISCIPLINE OF NURSING**

**PROFICIENT LEVEL**

Examine the role of the associate degree nurse as a member of the discipline of nursing.

**INTERMEDIATE LEVEL**

Define the scope and practice of nursing in selected settings.

**BEGINNING LEVEL**

Identify the scope and practice of nursing as it pertains to the student.

**OUTCOME VII: MANAGEMENT**

**PROFICIENT LEVEL**

Incorporate selected management principles and skills while functioning within the role of the associate degree nurse.

**INTERMEDIATE LEVEL**

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Implement basic management principles in caring for individual clients and their families.

**BEGINNING LEVEL**

Use basic management principles with self and with selected clients.

**OUTCOME VIII: FAMILY**

**PROFICIENT LEVEL**

Use concepts of family in the provision of nursing care to individual clients.

**INTERMEDIATE LEVEL**

Use selected concepts of family when caring for clients through the life span.

**BEGINNING LEVEL**

Define the individual as a member of a family.

**OUTCOME IX: COMMUNITY**

**PROFICIENT LEVEL**

Identify community resources appropriate for clients.

**INTERMEDIATE LEVEL**

Identify community resources available for selected clients.

**BEGINNING LEVEL**

Acknowledge connections between the individual and the community.

**Baccalaureate Nursing Degree  
Program Outcomes**

Upon completion of the Baccalaureate Degree Nursing Program, the student will be able to demonstrate the following outcomes:

1. Use nursing process when providing care for clients.\*
2. Use communication principles and skills that demonstrate critical thinking, reflection, and problem-solving skills.
3. Assist clients\* to achieve optimal level of development.
4. Facilitate optimal transitions with emphasis on wellness and prevention of illness.
5. Incorporate learning theories, teaching principles, and principles of life long learning into professional practice.
6. Participate actively in the changing dimensions of nursing.
7. Apply research to practice at the baccalaureate level.
8. Apply concepts of leadership and management in nursing practice.
9. Utilize the concept of family in a variety of health care settings with major emphasis on preventative health care
10. Apply principles of community in nursing practice.

\*Clients defined to include individuals, families, groups and communities.

## Baccalaureate Nursing Curriculum Strands

The following are the organizing strands of the BSN curriculum. These organizing strands were developed based on review of entry level RN licensure and serve to build on a previous nursing theory base.

### A. NURSING PROCESS

The nursing process is central to all nursing actions. It is applicable in any setting within any frame of reference, concept, theory, or philosophy. It is flexible and adaptable to a number of variables, yet sufficiently structured to provide a base from which all nursing actions can proceed. Although nursing process is an organizing strand in the curriculum, the degree or depth of utilization of the process varies with the level of the student.

A systematic rational method of planning and providing individual nursing care. The phases are assessing, diagnosing, planning, implementing and evaluating. (Berman and Snyder 2012).

### B. COMMUNICATION

An interactive process, that occurs when a person (the sender) sends a verbal or nonverbal message to another person (receiver) and receives feedback (Kelly 2008).

At the BSN level, selected communication theories are utilized to analyze one's own communication process, communication within groups, and communication within organizational health care settings. Communication principles are then utilized to collaborate with health professionals in working with individuals, families, and groups within the community.

### C. HUMAN DEVELOPMENT

A nurse must understand the life cycle of the individual in order to comprehend the individual's development, motivation for health, and reaction to illness. Clients are in the process of development throughout life, and there are specific levels of client development. Interference may result in an alteration of the developmental process.

The BSN student builds on the knowledge of development as referring to the individual's increasing capacity, skill and functioning related to growth. At this level, development refers to any refinement, improvement, or expansion of a skill associated with a particular phase of the life span (Berman and Snyder 2012).

### D. TEACHING / LEARNING

Teaching is a system of activities intended to produce learning (Berman and Snyder 2012). Learning is accomplished through interaction with one's environment, is influenced by one's experience, and results in insight and a change in behavior, perception, or attitude that persists. The development and application of the teaching/learning process is useful in understanding personal learning as well as in appreciating and enhancing the potential of the process of learning in the individual.

The teaching/learning process includes the use of clearly written objectives, structured content, and planned methods. Both formative and summative evaluations are utilized as part of the critical process to promote learning.

The BSN student addresses the comparison and applications of selected learning theories. Teaching includes clients and their significant others, and broadens in scope to include groups and communities. Independent teaching/ learning activities are planned and implemented with individuals and groups within the community. The nurse is viewed as a teacher and a learner who is actively involved in the change process and in incorporating learning theories into nursing practice (College of Saint Mary Nursing Philosophy 2010).

E.. NURSING RESEARCH

Systematic inquiry designed to develop knowledge about issues of importance to the nursing profession (Polit & Beck 2008). The BSN student focuses on the nurse being a consumer of research. Research includes evaluation and application of research findings to practice.

F. MANAGEMENT

Management is accomplishing the goals of the group and organization through effective and efficient use of resources. The challenge for the nurse manager is to plan, organize, direct, and evaluate available human and material resources required to provide health care. (Kelly, 2008).

The BSN curriculum focuses on leadership and management concepts and skills required to serve as a leader in an organization, to use tools in examination of nursing care, and to allocate nursing resources. (Marquis, Huston 2009).

G. FAMILY

A social system consisting of two or more people who define themselves as a family and who share bonds of emotional closeness. (Clark 2008). The family is the basic unit in which health care and health behaviors are managed. An individual is best understood in the context of the family because a change in one family member affects all family members.

The BSN student focuses on the family as a client and the individual family members influencing each other's ability to adapt to change.

H. COMMUNITY

A community is a group common interests ,whose members know and interact with one another and who function collectively within a defined social structure to address common concerns. (Clark, 2008).

The nurse, as a health provider to both the family and community, assists the consumer to effectively achieve the highest level of health. The BSN student focuses

on providing care to the community by utilizing the nursing process in planning, providing, and evaluating care for clients, families, and the community.

## GLOSSARY OF TERMS

Terms defined in the philosophy and curriculum strands are not defined here.

Categories of Human Functioning:	<p>A theoretical framework, which focuses on the client's ability to maintain essential life functions. The ability to function adequately in each of the categories (protective; sensory-perceptual; comfort, rest, activity and mobility; nutrition, growth and development; fluid-gas transport; psychosocial/cultural functions; and elimination) results in a healthy person. Alterations in any category affect health. (NCLEX Program Reports, Content Dimension Reports 10/2009 to 3/2010)</p> <p>(1) <b>Protective</b> (safety): Functions related to protection and defense of the body are classified in the protective category. Physical safety is dependent on protection from infection, injury, accidents, exposure and abuse. Measures utilized to reduce these threats, such as assessing for side effects of medications and providing perioperative care, are incorporated in this category.</p> <p>(2) <b>Sensory-Perceptual</b> (cognitive perceptual): Functions related to cognitive, sensory, perceptual stimuli and the health concerns that develop from overload and deprivations are the basis of this category. Content related to the ability to speak, hear, taste, touch, smell, comprehend and remember are included. Alterations in the central and peripheral nervous system and the senses account for the major health problems included in this category.</p> <p>(3) <b>Comfort, Rest, Activity and Mobility</b> (activity, sleep and rest): Topics related to maintaining activities of daily living and the perception of comfort and rest/sleep are the principle components in this category. Alterations are related to factors that interfere with the neuromuscular system.</p> <p>(4) <b>Nutrition</b> (nutritional-metabolic): The consumption of food and fluid and the ability to meet the metabolic needs of the body fall under this category. Normal growth and development influence this category, as do disorders that interfere with ingestion, digestion and metabolism.</p> <p>(5) <b>Growth and Development</b>: Basic concepts of maturation from conception through the life span are included in the growth and development category. Childbearing and child rearing are viewed as part of development; thus, any alterations in these areas are included in this category.</p>
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- (6) **Fluid-Gas Transport:** The ability for an exchange of gases in the lungs and at the cellular level forms an essential category. Alterations exist when the cardiopulmonary and hematological systems are affected.
- (7) **Psychosocial-Cultural Functions:** (psychosocial dimensions): Human interaction, whether it is within the individual, between two or more people or in a large group, is the basis for this category. Self-concept, therapeutic communication, ethical-legal issues, spiritual needs, grieving and dying are all stages of this category.
- (8) **Elimination:** Excretory functions of the bowel and bladder are the components of this category. Alterations in gastrointestinal or urinary patterns are the main causes of health problems in elimination.

Client(s):	An individual, family, group, community, who Engages the advice or services of another person qualified to provide this service. Clients assume the primary responsibility for their health in collaboration with the health professional. The term <i>client</i> is preferred to <i>patient</i> , because it implies autonomy and self-direction, rather than a dependent role. (Berman and Snyder 2012)
Client centering care:	An approach in which clients are viewed as whole :it is not merely about delivering services where the client is located. Client centered care involves advocacy, empowerment, and respecting the client's autonomy, voice, self- determination and participation in decision-making. (Registered Nurses' Association of Ontario, 2006)
Clinical competence:	The habitual capability and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served. (Epstein and Hundert, 2002).
Collaboration:	To function effectively within nursing and inter-disciplinary teams, fostering open communication, mutual respect and shared decision-making to achieve quality client care. (Institute of medicine (IOM), 2003).
Competence:	The application of knowledge and the interpersonal, decision-making, and psychomotor skills expected for the nurse's practice role, within the context of public health, welfare, and safety (NCSBN, 1996-2001, PARA 2).
Critical Thinking:	The intellectually discipline process of actively and skillfully conceptualizing, applying, analyzing, synthesizing and/or evaluating information from, or generated by, observation, experience, reflection, reasoning or communication, as a guide to belief and action (Kelly, 2008).

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- Culturally Competent: Within the delivered care the nurse understands and attends to the total context of the client's situation and uses a complex combination of knowledge, attitudes, and skills (Berman and Snyder 2012).
- Delegation: "Transferring to a competent individual the authority to perform a selected nursing task in a selected situation. The nurse retains accountability for the delegation." (National Council of State Boards of Nursing, [http://www.ncsbn.org/public/resources/ncsbn\\_Delegation.htm](http://www.ncsbn.org/public/resources/ncsbn_Delegation.htm) retrieved March 13, 2003)
- Ethics: The study of the nature and justification of principles that guide human behaviors and are applied to special areas in which moral problems arise (Hitchcock, *et al.* 2003)
- Evidence-based practice: Conscientious, explicit, and judicious use of theory-derived, research-based information in making decision about care deliver to individuals or groups of individuals and in consideration of individual needs and preferences (Kelly, 2008).
- Factors Related to Health:
- a. Cultural Factors:  
They provide people with a set of rules by which to govern their lives. They serve as a basis for attitudes, beliefs, and behaviors. They help guide actions and decisions. They give direction to people's lives and help them solve common problems. They influence how individuals perceive and react to other individuals. They help determine basic attitudes regarding persona, social, and philosophical issues. They reflect a person's identity and provide a basis of self-evaluation. (Luckmann, 1999)
  - b. Environmental Factors:  
Those factors external to the individual which impact the individual, family, group, and community external to the individual. This includes the home-work setting, leisure environment, and community at large (e.g., job, noise, pollution).
  - c. Intellectual Factors:  
"those abilities to learn, reason, think abstractly, "those capacities for knowledge and understanding." (Berman and Snyder 2012)
  - d. Physical Factors:  
"Concerning or pertaining to the body." (Thomas, 2001)
  - e. Others, influence on health:  
Factors occurring as a result of the relationship between one or more individuals (*i.e.*, interactions with human resources and family, friends, care givers or significant others.)

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- f. Psychological Factors:  
Factors influencing health include mind-body interactions and self-concept. Increasing attention is being given to the mind's ability to direct the body's functioning. (Berman and Snyder 2012)
- g. Self:  
Many factors occur within the individual and include the major ones of development, family and culture, stressors, resources, history of success and failure, and illness. (Berman and Snyder 2012)
- h. Spiritual Factors:  
Trying to be in harmony with the universe, strives for answers about the infinite and especially comes into focus or sustaining power when the person faces emotional stress, physical illness, or death. It goes outside a person's own power. (Berman and Snyder 2012)

Graduation Rate	Number of students who graduate within a defined period of time (NLNAC 2008). Acceptable mean "completion rate" is 70%; time frame is two/three years for ASN and one year for BSN. It is to be expected that some students will elect part-time study and have an extended program.
Guidelines for Nursing Practice:	A set of guidelines approved by a recognized nursing organization for use in the development and evaluation of nursing curriculum. . . (NLNAC 2008)
Health:	The degree of wellness or well-being that the client experiences (Berman and Snyder 2012)
Health Promotion:	Any activity done for the achievement of a higher level of health or wellbeing (Berman and Snyder 2012)
Holistic Care:	The promotion of care and the prevention of illness with the emphasis on the person's responsibility to achieve high-level wellness and a concern with the person mind, body and spirit (Ignatavicius and Workman, 2006).
Illness:	A highly personalized state in which the person feels unhealthy or ill, may or may not be related to disease. (Berman and Snyder, 2012.)
Informatics:	The integration of nursing science, computer science and information science to manage and communicate data, information, knowledge, and wisdom into nursing practice (American Nurses Association, 2007).
Interdisciplinary team:	Cooperation, collaboration, communication, integration of care in teams to assure care is continuous and reliable (IOM, 2003)

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Leadership:	The process by which an individual induces a group to pursue objectives .teaching others to tap their full capabilities (Marquis & Huston, 2009)
Outcome levels in ASN Program	As defined within the Associate Degree Nursing Program at College of Saint Mary: a) proficient – able to make clinical judgments and carry out related nursing interventions without supervision and adapt them to patients/clients in a variety of situations; b) Intermediate – able to make clinical judgments and carry out related nursing interventions with limited supervision; and c) Beginning – able to make clinical judgments and carry out related nursing interventions with supervision.
Licensure Pass Rate:	Performance on National Council Licensure Examination (NCLEX) for first time writers (NLNAC, 2008).
Job Placement Rates:	Number of graduates, one year after graduation, employed in a position for which the program prepared (NLNAC, 2008).
Manager of care:	As managers, nurses are responsible for (a) effectively accomplishing goals of the organization, (b) efficiently using the organization’s resources (c) ensuring effective client care, and (d) ensuring compliance with institutional, professional, regulatory, and governmental standards (Berman and Snyder 2012)
Member of the discipline:	As members of the profession, nurses apply knowledge of legal and ethical issues to respond to client needs within the context of an agencies policies and procedures and the state laws influences nursing practice (Wywialowski, 2004)
Professional nursing competence:	Behavior based on beliefs, attitudes, knowledge matched to and in the context of a set of expected outcomes as defined by nursing scope of practice, policy, code for nurses, standards, guidelines, and benchmarks that assure safe performance of professional activities (American Nurses Association, 2000).
Program Satisfaction:	Perceptions of the graduates and employers as to the adequacy and effectiveness of the program. (NLNAC, 2008).
Program Outcomes	Performance indicators that reflect the extent to which the purposes of the nursing education unit are achieved and by which program effectiveness is documented. Program outcomes are measureable consumer-oriented indexes designed to evaluate the degree to which the program is achieving its mission and goals.(NLNAC, 2008)
Provider of Client-centered care:	An individual that identifies, respects, and cares about client differences, values, preferences, and expressed needs; relieves pain and suffering; coordinates continuous care; listens to, clearly informs, communicates with, and educates clients; shares decision making and management; and

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continuously advocates disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (IOM, 2003).

Quality Improvement (QI):

The use of data to monitor the outcomes of care processes and the use of improvement methods to design and test changes to continuously improve the quality and safety of health care systems (IOM, 2003).

Service:

To respond to compassion to the needs of others (Sisters of Mercy Health systems, retrieved 2009).

Wellness:

A state of well-being; engaging in attitudes and behaviors that enhance quality of life and maximize personal potential. (Berman and Snyder 2012).

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**ADMINISTRATIVE POLICIES**

- 1.1 Admission
- 1.2 Performance Standards
- 1.3 Program Requirements
- 1.4 Readmission
- 1.5 Transfer
- 1.6 Withdrawal
- 1.7 Credit by Exam-LPN
- 1.8 BSN Validating Previous Credit

**ACADEMIC AND CLINICAL/PRACTICUM POLICIES**

- 2.1 Professional Conduct
- 2.2 Audit
- 2.3 Independent Study
- 2.4 Academic Evaluation
- 2.5 Failing/Repeating Courses and Grade Appeal Procedure
- 2.6 Progression and Graduation
- 2.7 Attendance at Class and Clinical Laboratory
- 2.8 Misrepresentation of Theory and/of Clinical Experiences/Assignments
- 2.9 Professional Image and Personal Appearance
- 2.10 Smoking
- 2.11 Snow Policy
- 2.12 Medications, Intravenous Therapy and Blood Therapy
- 2.13 ATI Policy
- 2.14 Test of Essential Skills (TEAS) Policy

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Original Date: May 1974  
Reviewed Date: April 2002  
Revised Date: April 2003  
Revised Date: November 2005  
Revised Date: November 2009  
Revised Date: July 2010  
Revised Date: June 2011

Number: 1.1  
Section: Student Policies

**ADMISSION TO NURSING PROGRAMS**

Policies:

1. Students desiring admission to the ASN or BSN Program apply through Enrollment Services and must meet the CSM admissions criteria, which is articulated in the current Academic Catalog.
2. See detailed criteria for admission on following page.
3. Application materials for the nursing program are processed by Enrollment Services and then submitted to the nursing program directors for review.
4. Applications are reviewed by the appropriate program director upon receipt of all of the following:
  - a. application form
  - b. official copy of high school transcript or GED with appropriate signatures
  - c. official school transcripts from all colleges attended
  - d. official school of nursing transcripts, if student has attended a nursing program
  - e. results of ACT scores and/or TEAS scores
  - f. two positive and completed "Nursing Applicant Evaluation Forms" references
5. If the applicant meets the criteria for nursing, she is notified of her acceptance in writing by Enrollment Services.
6. A personal interview may be requested by the program director.
7. The nursing program reserves the right of admitting only those students who, in the judgment of the faculty, satisfy the requirements of scholarship, health, and person suitability for nursing.
8. To participate in clinical//practicum courses, the student must have the following on file: a) CPR certificate, b) Clinical Agency Requirements, c) Health Record, and be able to meet Performance Standards (See Policy 1.2 and Policy 1.3).

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**\*HIGH SCHOOL APPLICANTS: Criteria for Admission to the Nursing Program**

**ASN TWO-YEAR TRACK CRITERIA** – Applicant from high school, the following criteria will be used:

<b>Criteria</b>	<b>Data Required</b>
1. High school graduate with cumulative GPA of at least 3.0 (B)	1. Official high school transcript
2. ACT composite score of 23, with no sub-score below 21;	2. ACT report form recorded on official high school transcript.
3. Complete minimum one semester high school biology and one year high school chemistry	3. Official high school transcript
4. Evidence of positive references for nursing	4. Two references from employers or school officials.

**ASN THREE-YEAR TRACK – CRITERIA**

<b>Criteria</b>	<b>Data Required</b>
1. High School graduate with grade point average of at least 2.75.	1. Official high school transcript
2. ACT composite score of 21, with no sub-scores below 19	2. ACT report form or score recorded on official high school transcript
3. Evidence of positive references for nursing	3. Two references from employers or school officials.

**FOR PROGRESSION TO NURSING CLASSES:** The student must have a CSM college cumulative GPA of 2.5 and have completed a minimum of one science requirement by the end of Spring semester. A second science requirement must be completed prior to beginning nursing classes. (See Policy 2.6, Progression and Graduation.)

The nursing program reserves the right of retaining only those students who, in the judgment of the faculty, satisfy the requirements of scholarship, health, and personal suitability for nursing.

\*High School Applicant refers to individuals who have graduated high school within two years of application to nursing program.

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**APPLICANT WITH COLLEGE TRANSFER CREDIT:**

**ASN TWO-YEAR TRACK CRITERIA**

<b>Criteria</b>	<b>Data Required</b>
1. Cumulative grade point average of at least 2.75 with a minimum of C in all natural and biological sciences.	1. Official college transcript
2. Completion of at least 18 semester hours which must include at least two science courses in nursing curriculum. No developmental classes will be included in the 18-hour requirement.	2. Official college transcript
3. Successful completion of English 101 and Math requirement (Intermediate Algebra or higher).	3. Official college transcript
4. All applicants will be required to take the Test of Essential Academic Skills (TEAS) to determine acceptance to ASN program. Applicant must meet TEAS program requirement scores (Policy 2.14) or if ACT has been taken within the past two years, the applicant must meet ACT program requirement scores.	4. Placement test results Official college transcript
5. Evidence of positive references for nursing.	5. Two references from employers or school officials.

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**ASN THREE-YEAR TRACK – CRITERIA**

<b>Criteria</b>	<b>Data Required</b>
1. Cumulative grade point average of at least 2.75 with a minimum of C in all natural and biological sciences. Two science courses required or two science courses may be in progress.	1. Official college transcript
2. Completion of at least 18 semester hours. No developmental classes will be included in the 18-hour requirement.	2. Official college transcript
3. Successful completion of English 101 OR Math requirement (Intermediate Algebra or higher).	3. Official college transcript,
4. All applicants will be required to take the Test of Essential Academic Skills (TEAS) to determine acceptance to ASN program. Applicant must meet TEAS program requirement scores (Policy 2.14)	4.Placement test results
or	
if ACT has been taken within the past two years, the applicant must meet ACT program requirement scores.	Official college transcript
5.Evidence of positive references for nursing.	5. Two references from employers or school officials.

**FOR PROGRESSION TO NURSING CLASSES:** The student must have a CSM college cumulative GPA of 2.5 and have completed a minimum of one science requirement by the end of spring semester. A second science requirement must be completed prior to beginning nursing classes. (See Policy 2.6, Progression and Graduation.)

The nursing program reserves the right of retaining only those students who, in the judgment of the faculty, satisfy the requirements of scholarship, health, and personal suitability for nursing.

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**ASN NURSING APPLICANT WITH NO PREVIOUS COLLEGE CREDIT:**

If an applicant is not a recent high school graduate (less than 2 years), and has not attended college, the student must enroll in and successfully complete college courses as indicated in the “Applicant With College Transfer Credit” criteria found in the College’s Academic Catalog. When the criteria are met, the student may apply to the ASN Program through the Change of Major process. See change of major process.

**LICENSED PRACTICAL NURSE TO ASN APPLICANT:**

<b>Criteria</b>	<b>Data Required</b>
1. Graduate of a Practical Nursing Program with a GPA of 2.75	1. Official transcript from practical nursing school, and high school transcript or GED
2. Licensed Practical Nurse	2. Unencumbered current license
3. Evidence of positive references for nursing	3. Two references (one should be employment related) from individuals able to report on variables on the Nursing Applicant Evaluation Form.
4. Sciences must have been completed with a ‘C’ or better	4. Official college transcript
5. Successful completion/required minimum score of NLN Advance Challenge Exam (ACE) RN-RN Book I	5. Placement test results
6. Successful completion/required minimum score on Test of Essential Academic Skills (TEAS)S exam	6. Placement test results
7. Successful completion of Nursing 144.	7. Official CSM transcript

**FOR PROGRESSION TO NURSING CLASSES:** The student must meet the requirements indicated in the “Licensed Practical Nurse to ASN Applicant Criteria” found in the College’s Academic Catalog and meet an accepted score in the Mobility ACE Book I test and identified components of the first semester nursing theory/clinical (NUR 144) if nursing transfer credit is desired. (See Policy 1.7.)

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

**BSN Program**

**CSM'S ASN GRADUATES PROGRESSION DIRECTLY ON TO BSN PROGRAM:**

<b>General Criteria</b>	<b>Data Required</b>
1. Graduate with a GPA of 2.5	1. CSM transcript.
2. Registered nurse license in good standing in the state of Nebraska or compact state.	2. Verification of unencumbered RN license To ASN/BSN secretary before starting semester.

**REGISTERED NURSE TRANSFER OR READMIT APPLICANT (GRADUATE OF NLNAC NURSING PROGRAM)**

<b>General Criteria</b>	<b>Data Required</b>
1. Graduate of an NLNAC accredited ADN program with a GPA of 2.5	1. Official transcripts from high school, nursing program, and any other colleges attended
2. Registered nurse license in good standing in the state of Nebraska or compact state.	2. Verification of unencumbered RN license
3. Evidence of positive references for baccalaureate nursing	3. Two letters of reference – one employment related and one from nursing program, if graduated in last five (5) years; otherwise, two nursing employment related
4. Successful completion of Math and English requirements, (non-developmental)	4. College transcripts

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**BSN PROVISIONAL APPLICANT (GRADUATES OF DIPLOMA OR NON-NLNAC NURSING PROGRAM)**

**Criteria**

1. Graduate of a diploma or non-NLNAC accredited ADN program
2. Composite college GPA of 2.5\*
3. Validation of credit *prior to* through successful completion of NUR 372
4. Registered nurse license in good standing in the state of Nebraska or compact state.
5. Evidence of positive references for baccalaureate nursing
6. Successful completion of English and Math requirement

**Data Required**

1. Official transcript from high school, nursing program, and any other colleges attended
2. Official transcripts from Nursing Program and any other colleges attended
3. Validation of nursing credit by successful completion of NUR 372.
4. Verification of unencumbered RN license.
5. Two letters of reference – one work related and one from nursing program, if graduated in last five (5) years; otherwise, two work related
6. College transcripts,

\*Provisional and seeks admission to the BSN program with a GPA below 2.5:

- a. Admitted as provisional student
- b. Must achieve 2.5 GPA for minimum of 15 hours, included in those 15 hours must be NUR 372, MTH 242, and BIO 366.
- c. If the 15 hours are achieved with a 2.5 GPA or greater, the student is accepted into the BSN program unconditionally and then must meet criteria as previously established to continue

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DIVISION OF HEALTH CARE PROFESSIONS

Original Date: May 1994  
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Reviewed Date: May 2005  
Reviewed Date: July 2010  
Reviewed Date: June 2011

Number: 1.2  
Section: Student Policies

**PERFORMANCE STANDARDS FOR CLINICAL/PRACTICUM COURSES**

Satisfactory completion of clinical/practicum nursing course and ultimate success in the nursing program depends on the ability to think critically and to use nursing process. This includes the abilities identified in the table below. Technological adaptations can be made for some disabilities, however, a student must perform in a safe and reasonably independent manner. It is not acceptable to use a trained intermediary, as a student's judgment may be influenced by someone else's observations.

Core performance standards for successful completion of program outcomes include the following:

<b>Ability</b>	<b>Standard</b>	<b>Some examples of Necessary Activities (not all inclusive)</b>
Critical Thinking	Critical thinking ability sufficient for clinical judgment	Identify cause-effect relationships in clinical situations, develop nursing care plans.
Interpersonal	Interpersonal/intrapersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural and intellectual backgrounds	Establish rapport with clients and colleagues. Use self-awareness and active listening to function safely under stressful conditions with the ability to adapt to ever changing health care environment.
Communication	Communication abilities sufficient for interaction with others in verbal, nonverbal and written form	Explain treatment procedures, initiate health teaching, interpret nursing actions, report client responses to others and appropriately document.
Mobility	Physical abilities sufficient to move from room to room and maneuver in small places	Moves around in client rooms, work spaces, and treatment areas, administer cardiopulmonary resuscitation
Motor Skills	Gross and fine motor abilities sufficient to provide safe and effective nursing care	Calibrate and use equipment; assist in lifting and positioning clients
Hearing	Auditory ability sufficient to monitor and assess health needs	Hears monitor alarm, emergency signals, breath sounds, cries for help
Visual	Visual ability sufficient for observation and assessment necessary in nursing care	Observes client responses
Tactile	Tactile ability sufficient for physical assessment	Perform palpation, functions of physical examination and/or those related to therapeutic intervention, i.e. insertion of a catheter

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Reviewed Date: May 2005  
Revised Date: July 2010  
Revised Date: June 2011

Number 1.3  
Section: Student Policies

**NURSING PROGRAM REQUIREMENTS**

Policies:

Once the student is admitted to the ASN or BSN Program, she must complete the following requirements: a) CPR; b) Clinical Agency Requirements; and c) Health Record.

**A. CPR REQUIREMENT**

Policies:

1. A current American Heart Association: Health Care Provider CPR card or Red Cross: Professional Rescuer CPR card is required.
2. Failure to maintain a current American Heart Association: Health Care Provider CPR card or Red Cross: Professional Rescuer CPR card will result in the student not being allowed in the clinical/practicum course and may ultimately delay the student's graduation. Expense incurred by the student in connection with the CPR requirement is the responsibility of the student.

**B. CLINICAL AGENCY REQUIREMENTS**

1. INVESTIGATIVE CONSUMER REPORT (Background Check)

Policies:

- a. All students must complete a background check as partial fulfillment of clinical/practicum agency contracts. This process must be completed prior to the beginning of semester when clinical/practicum occurs.
- b. Students will complete the application for background check and submit it to the College for processing.
- c. Results of the background check will be given to the nursing program directors. Faculty will be notified whether the student has completed or not completed the requirement.
- d. If there is concern that the findings have a rational connection and/or pose a liability risk to nursing faculty or clinical agencies, findings will be brought to the Division Chair.
- e. If findings indicate a rational connection and/or pose a liability risk to nursing, the student may be denied admission to nursing or revoked of her admission status in nursing.
- f. Decisions for continuing in the program in no way can be construed as a guarantee that the State Board of Nursing will find the student eligible for licensure even when she graduates. Boards of Nursing will make independent decisions on eligibility requirements as stated in the law. (Neb. Statutes 38-2220.)

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DIVISION OF HEALTH CARE PROFESSIONS

**2. DRUG SCREENING**

Policies:

- a. Students entering nursing will be required to undergo drug testing required by clinical contract. Current students will be required to repeat drug screening for reasonable cause (probable cause) when at least 2 faculty members believe that a nursing student is impaired as a result of the use or abuse of illegal drugs, controlled substances and/or alcohol. Reasonable cause exists when:
  - i. actions or appearance are out of the ordinary and unusual to the normal behavior patterns of an individual and could indicate the presence of an intoxicating substance.
  - ii. behavior is such that it presents a danger to the safety of other students, faculty, clients, staff and/or member of the public.
- b. Refusal to submit to a drug screen when there is reasonable cause is grounds for the Nursing Student Policy committee to dismiss the student from the program.
- c. If the drug screen is positive, the individual will be given an opportunity to list all medications currently being taken and to name the prescribing physician.

**C. HEALTH RECORD REQUIREMENTS**

The following policies and procedures have been identified to meet health requirements of clinical agencies. The student must be physically and mentally able to engage in clinical practice to ensure the safety of clients, self, peers, faculty and staff. These requirements will facilitate maintenance of our health as professionals and that of our clients.

Policies:

1. Every student in Division of Health Care Professions programs is required to have current health records on file with a designated health services office prior to the date of her first clinical experience. Students will not be allowed in the clinical/practicum courses on or off campus until this requirement is met. The health record must be current to within six months of the date submitted.
2. Students who stop out and must be readmitted to the program must submit another health record, current to within six months.
3. Additional immunizations or health screening may be required as needed to meet clinical agency requirements.
4. The student is responsible for any expense incurred in completing this process.
5. Upon receipt of the medical form, the designated health services office reviews it for completeness and content. Information that may affect the student's ability to function in the classroom or clinical area will be shared with appropriate clinical faculty.
6. Failure by the student to submit health records as required will result in missed clinical/practicum days.
7. All items on the medical form must be filled in for the record to be considered complete.
  - a. Immunizations must be current and the report must include the dates they were given, in order to meet clinical agency requirements. Students are to update immunizations when the Center for Disease Control and the Health Department require doing so.
  - b. TB skin tests and influenza immunizations must be updated annually. Records of current TB skin tests and influenza immunizations must be on file with the designated health services office. Students with positive TB skin tests will be referred for follow-up.
  - c. In order to comply with the adult immunization recommendation from the Center for Disease Control and OSHA guidelines required of the hospital settings utilized for clinical experience, the Hepatitis B vaccine is required prior to enrollment in clinical courses.

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DIVISION OF HEALTH CARE PROFESSIONS

8. Students are responsible for updating their health records annually with the designated health services office.

Procedures:

1. The designated health services office shall:
  - a. Review the form for content and completeness.
  - b. Notify the student of any deficiencies.
  - c. Issue a clearance card to the student which includes an expiration date.
2. The program director or designate shall:
  - a. Inform prospective or new students of the necessity of meeting the health requirement.
  - b. Notify advisors, instructors and/or student of any deficiencies or special needs.
3. Faculty shall:
  - a. Allow students to come to the clinical/practicum area with a valid health clearance card.
  - b. Refer students without a clearance card back to the designated health services office and not allow students to come to clinical/practicum.
  - c. Furnish the information that the student is in compliance with CSM health requirements to clinical agencies, as needed.
4. The student shall:
  - a. Maintain a valid health clearance card.
  - b. Show valid health clearance card at designated times.

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Original Date: May 1974  
Reviewed Date: April 2002  
Revised Date: April 2002  
Reviewed Date: May 2005  
Reviewed Date: May 2009  
Revised Date: July 2010  
Reviewed Date: June 2011

Number: 1.4  
Section: Student Policies

**READMISSION TO THE NURSING PROGRAMS**

Policies:

1. When a student withdraws or is terminated from either nursing program at CSM, a recommendation will be made by the Nursing Student Policies Committee at the time of withdrawal or termination about whether the student will be eligible for readmission. Documentation of this recommendation and reasons for leaving will be kept in the student's folder and in the minutes of the Nursing Student Policies Committee.
2. The student who has withdrawn or has been terminated from the nursing program and wishes to be readmitted will be considered for readmission by the program director according to the following criteria:
  - a. The recommendation made by the Student Policies Committee at the time the student withdrew or was terminated
  - b. The amount of time elapsed between withdrawal or termination from the ASN or BSN program to anticipated date of readmission
  - c. The amount of time elapsed from withdrawal or termination from either nursing program and previous college transcripts will be reviewed and recommendations made about appropriate plan of study.
3. If the program director desires additional information, the student application and information may be reviewed by the Nursing Student Policies Committee.
4. Students are subject to Policy 1.3.
5. The student wishing to be readmitted to a Nursing Program must complete the application process through Enrollment Services according to Policy 1.1, Admission to Nursing Programs.

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Original Date: June 1974  
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Revised Date: April 2002  
Reviewed Date: May 2005  
Revised Date: May 2009  
Revised Date: July 2010  
Reviewed Date: June 2011

Number: 1.5  
Section: Student Policies

**TRANSFER FROM ANOTHER NURSING PROGRAM**

Policies:

1. Advanced standing may be granted to the student who qualified for transfer from an accredited program in nursing.
2. The student who wishes to transfer with advanced standing must fulfill the following requirements before being considered for admission:
  - a. Fulfill admission requirements of Policy 1.1.
  - b. Present a minimum overall grade point average of 2.75 for ASN and 2.5 for BSN.
  - c. Favorable reference(s) from the school from which she is transferring.
  - d. Submit all application materials in advance of admission date.
3. Credit allowance for nursing courses is considered on an individual basis. Non nursing courses will not be accepted for nursing courses. The program of study will be developed based on accepted transfer college credits. The following materials may be requested:
  - a. Course syllabi
  - b. Results of standardized tests
  - c. College catalog
  - d. Sample of previous course work
4. Students are subject to Policy 1.3.
5. If a transfer nursing students is admitted, the nursing transfer student will be accepted on a provisional basis for one semester and must show academic success in order to continue.
6. Nursing credit from a non-collegiate program must be validated via challenge testing or other method as determined by the program director.
7. The Baccalaureate student from an NLNAC-accredited Associate Degree program will be accepted into the program and allowed to enroll full-time. Credits from the Associate Degree program will be held in escrow until satisfactory validation of nursing process in Nursing 372. Upon satisfactory completion of validation in Nursing 372, and completion of nursing program requirements, the Associate Degree nursing courses will be recorded on the student's transcript.

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8. Requirements for diploma nursing graduates and non-NLN program graduates seeking the BSN at College of Saint Mary are as follows:

	<b>Credit Hours</b>
A. Credit for lower division nursing courses (see Policy 1.8.)	36
B. Upper division BSN courses	25
C. Core curriculum requirements	49
D. Required support courses	18
Total	128

\*The student may choose to meet requirements for another minor as described in the College of Saint Mary Academic Catalog.

Procedure:

1. Enrollment Services shall:
  - a. Secure application credentials and submit to program director.
  - b. Send letter to applicant stating decision after review by Program Director.
  - c. Instruct applicant regarding registration.
  - d. Inform applicant of advisor's name.
2. Registrar shall evaluate the transcript for transferable credit of non-nursing courses.
3. Program director shall:
  - a. Review applicant credentials for: satisfactory completion of required courses; academic standing and GPA; course deficiencies, if any; description of courses completed; recommendations from faculty of transfer school.
  - b. Evaluate content of nursing courses.
  - c. Arrange for interview with student as deemed necessary.
  - d. Make decision regarding student's eligibility for admission or refer to the Nursing Student Policies Committee.

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Original Date: May 1974  
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Revised Date: April 2002  
Reviewed Date: May 2005  
Reviewed Date: May 2009  
Reviewed Date: July 2010  
Reviewed Date: June 2011

Number: 1.6  
Section: Student Policies

**STUDENT WITHDRAWAL FROM NURSING PROGRAMS OR CHANGE IN MAJOR  
Policies:**

1. The student who withdraws from a course, the Nursing Program, and/or the College, and/or changes major of study follows the procedure described in the College Academic Catalog.
2. A student who voluntarily withdraws from Nursing Program is not assured of readmission. Any commitment to the student will be given in writing and will be pending space availability.

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Original Date: November 1988  
Revised Date: February 2003  
Reviewed Date: May 2005  
Revised Date: July 2007  
Revised Date: July 2010  
Reviewed Date: June 2011

Number: 1.7  
Section: Student Policies

**ESTABLISHMENT OF NURSING CREDITS BY EXAMINATION FOR LICENSED PRACTICAL  
NURSES ADMITTED INTO THE ASN PROGRAM**

Policies:

1. Credit evaluation for students who meet other criteria for admission to the ASN Program will be completed in accordance with college procedure. Nursing credit may be received through successful completion of a validation process.
2. The student must apply to take the NLN ACE PN-RN by July 1 and complete the exam before July 21 of the year they wish to start nursing classes. Students must pass Mobility Book one to progress to NUR 144. Students must receive a 79% score or above for Book one.
3. Mobility examinations may be attempted **only one time** to progress to NUR 144. The student must achieve a standard score (decision score) of 79 or above in order to receive credit. Successful completion of Book One provides 6 semester hours of credit for Nursing fundamentals. The test may be taken only once to achieve credit. If successful, the student will take the equivalent of 1 credit hours of NUR 100 and 1 credit hour of NUR 170, plus NUR 110, for a total of 3 credits in a combined course NUR 144. Bridging LPN to ASN. LPN-ASN students must satisfactorily meet the CPR, health, and background check requirements and take NUR 222 while in their first intermediate nursing class.
4. If the student is unsuccessful, she will be referred to her academic advisor for review of her academic plan. The student will have the option to begin the ASN program with 4 credit hours in NUR 100, 4 credit hours in NUR 170 and 1 credit hour in NUR 110, provided health, CPR, and background check requirements are met and pending space availability in the class.
5. The NLN ACE PN-RN test scores are valid for two years and may be transferred from another institution.
6. Pre-and co-requisite courses are required and are listed in the NUR 144: Bridging LPN to ASN syllabus and in the College catalog.
7. Students must submit the form NLN ACE PN-RN Exam Process-Validation of LPN Nursing Credit-ASN Program to the Business Office, with payment, prior to the ordering of the exams by the program director.
8. After successful completion of NUR 144, credits (6) will be placed on the transcript for Book One. The student will be advance placed into the intermediate nursing courses:

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**NLN ACE PN-RN Book One Exam Process  
Validation of LPN Nursing Credit – ASN Program**

Name: \_\_\_\_\_

Date Process Initiated: \_\_\_\_\_

\*NLN ACE PN-RN Book One Exam Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_

Date Book One completed: \_\_\_\_\_

Date Book One Scores received: \_\_\_\_\_

Decision Score Book One: \_\_\_\_\_ (Policy 1.7)

Date Student Notified: \_\_\_\_\_ Letter   
Phone   
E-Mail

\*ASN Assessment Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_

.....  
Registrar:

The student named above has completed the process for the validation of credit for the LPN completion program. Please record on the student's official transcript.

NLN ACE Book One 6 hours  
NUR 144 3 hours

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Program Director

\* Current fee assessments available from Business Office.

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Original Date: January 1, 1984  
Date Revised: May 2001  
Date Revised: April 2002; March 2003  
Date Reviewed: May 2005  
Date Revised: July 2010  
Date Reviewed: June 2011

Number: 1.8  
Section: Students

**ESTABLISHMENT OF BASIC NURSING CREDITS  
FOR TRANSFER STUDENTS ADMITTED TO  
BACCALAUREATE DEGREE PROGRAM**

- I. Credit evaluation for students who meet the criteria for admission to the BSN program will be performed in accordance with college procedure. Registered nurse students transferring from another college will have the nursing credit held in escrow and will validate through successful completion of Nursing 372
- II. Students from a diploma or non-NLN-accredited basic nursing program will also validate through completion of Nursing 372.
  - a. Two letters of recommendation (from current work or educational setting, *e.g.*, supervisor or faculty person).
- III. Interview with nursing program director
- IV. Obtain the "Alternative for College Credit" form from the program director, or designate and follow the process identified on the form.
- V. Upon satisfactory completion of Nursing 372 and course requirements for a baccalaureate degree at College of Saint Mary, 36 hours of credit in nursing will be recorded on the student's transcript. A fee may be charged to record this credit.

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DIVISION OF HEALTH CARE PROFESSIONS

**EVALUATION CRITERIA FOR PRIOR LEARNING/PROFESSIONAL EXPERIENCE**

Specialty Area: \_\_\_\_\_ Employee Position/Title: \_\_\_\_\_

Directions: For each of the items below, please circle the number that corresponds to the item as follows:

For this objective, the employee:  
1 = demonstrates this **beyond** expectations.  
2 = demonstrates this **at** expectations.  
3 = **minimally** meets expectations; needs development.

- |   |   |   |    |   |
|---|---|---|----|---|
| 1 | 2 | 3 | A. | Incorporate an understanding of human functioning into the planned nursing care of individuals with multi-system alterations.   |
| 1 | 2 | 3 | B. | Use the nursing process when providing care for individuals with multi-system alterations in human functioning.   |
| 1 | 2 | 3 | C. | Use effective communication skills and principles when interacting with the individual client and significant others and in collaboration with other health team members. |
| 1 | 2 | 3 | D. | Apply knowledge of human development when caring for clients and when interacting as a member of the health care team.  |
| 1 | 2 | 3 | E. | Use teaching/learning principles as related to self in the educational process, as a member of the health care team and as a provider of client care.                     |
| 1 | 2 | 3 | F. | Examine the role of the Registered Nurse as a member of the discipline of nursing.  |
| 1 | 2 | 3 | G. | Incorporate selected management principles and skills while functioning within the role of Registered Nurse.  |
| 1 | 2 | 3 | H. | Use concepts of family in the provision of nursing care to individual clients.  |
| 1 | 2 | 3 | I. | Identify community resources when appropriate for clients.  |

Comments: (Please use the back side for comments)

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Title: \_\_\_\_\_

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Original Date: May 1991  
Reviewed Date: April 2002  
Revised Date: April 2002  
Revised Date: November 2005  
Revised Date: July 2010  
Revised Date: May 2011

Number: 2.1  
Section: Student Policies

**PROFESSIONAL CONDUCT**

Inherent in the profession of nursing, there are values that are demonstrated through professional conduct. Examples of professional values include demonstrating a commitment to nursing, placing the client's welfare first, demonstrating cooperation and collaboration, exhibiting intellectual and personal integrity and adhering to nursing program and clinical facility policies. These categories serve as examples by which the student may be evaluated in the area of professional conduct.

In keeping with the philosophy of the College of Saint Mary and the Division of Health Professions, a student is expected to exhibit professional behavior when performing nursing activities or representing the nursing division in any capacity. The student is expected to follow the "Code of Conduct" identified in the College Academic Catalog.

I. Professional Conduct

A. Commitment to Nursing

When in the clinical area or any clinical experience, the student should be identified as a College of Saint Mary student by proper uniform, and/or identification as listed in the Dress Code Policy (2.9). The student is expected to exhibit a professional manner, which includes but is not limited to having a neat, clean appearance, utilizing appropriate language and behavior, and refraining from use of cell phones or other electronic devices for personal matters

The ASN student will be identified as a CSM nursing student (CSM SN) and the BSN student will be identified as a CSM nursing student (RN CSM) when completing official agency records or forms. Additional titles may not be used when in a student role.

The student notifies the clinical instructor appropriately when she is unable to complete nursing responsibilities, will be absent from the clinical setting, or must leave the clinical area prior to the end of clinical time. Refer to Policy 2.7.

The student comes to the clinical area on time and is prepared to give safe client care. The student maintains safety at all times when caring for clients. The student is expected not to enter the clinical area if impaired by physical or mental illness, medication or substance abuse, or any other problem that could jeopardize the client, themselves, or others. Refer to Policy 2.7.

B. Client's welfare.

The student is expected to deliver care in a nondiscriminatory and nonjudgmental manner that is sensitive to client diversity. When providing care, the student places the client's welfare first by: being accessible and prompt in answering client's requests; establishing a priority of activities which reflects the client's needs; and being responsive and reliable when needs are identified by the client, staff or clinical instructor. The student delivers care in a manner that preserves and protects client autonomy, dignity and rights.

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C. Cooperation and collaboration.

The student interacts professionally with faculty, staff, clients, and peers when giving and receiving information. When a question or unclear situation occurs, the student follows the appropriate channels of communication and authority for clarification. (See organizational chart.) The student's written work/charting is accurate, has a professional appearance, and is completed according to standards of the agency and the College of Saint Mary.

The student is a cooperative team member who considers the needs of the entire group when working together, giving and receiving assignments, and accepting the roles and responsibilities of others in the group. The student accepts and acts upon constructive criticism.

The program director in consultation with the course coordinator reserves the right to adjust assignments as warranted by clinical objectives, clinical facility requests and faculty availability. Any changes, which substantially affect a student's schedule, will be communicated to the student by the course coordinator and/or program director.

D. Intellectual and personal integrity.

The student exhibits intellectual and personal integrity by readily acknowledging mistakes and/or oversights, and takes action to correct the situation. The student is honest and truthful when interacting with client, peers, faculty and staff, and in completing written work such as charting, careplans and the like. The student completes her own work, not representing anyone else's work as being their own. The student identifies group collaboration on projects when indicated and appropriate. Refer to Policy on Academic Honesty in the Academic Catalog.

The student comes to the clinical area on time and is prepared to give safe client care. The student maintains safety at all times when caring for clients. The student is expected not to enter the clinical area if impaired by physical or mental illness, medication or substance abuse, or any other problem that could jeopardize the client, themselves, or others. Refer to Policy 2.7.

Any student nurse who is asked to vacate a health care facility by duly authorized personnel of the facility is vulnerable to a recommendation of immediate dismissal from the Nursing Student Policies Committee by virtue of that decision itself.

II. Consequences of Non-Professional Conduct

A. Initial action

If displaying unprofessional conduct, the student will be sent away from the classroom, clinical or laboratory setting by the instructor or designated authority. The instructor then notifies the course coordinator and/or program director. The program director will notify other college officials as deemed necessary. Documentation will be completed as appropriate.

B. Follow-up

Any violation of Policy 2.1 will be reviewed by the course coordinator, program director and any other college officials as deemed necessary. The student has the responsibility to follow appropriate communication channels in a timely manner in an attempt to resolve the situation. The student will be notified if she may return to the classroom or clinical setting. If warranted, the situation may be brought to the Nursing Student Policies Committee for review. The student will be notified of the committee decision.

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C. Consequences

Clinical time missed in the above situation will be considered as an unexcused absence and may result in the unsuccessful completion of the course. Refer to Policy 2.7. Unprofessional conduct may result in student dismissal from the nursing program.

- \* Adapted from Schoolcraft, V. (1989)  
A Nuts-and-Bolts Approach to Teaching Nursing  
New York, Springer Publishing Company.
  
- \* Adapted from American Nurses Association 1998 Standards of Clinical Nursing  
Practice

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

ORIGINAL DATE: JULY 1975

Reviewed Date: April 2002

Revised Date: April 2002

Reviewed Date: May 2009

Revised Date: July 2010

Reviewed Date: June 2011

NUMBER: 2.2

Section: Student Policies

**ASN AUDIT POLICY**

Policies:

1. Students out of sequence in nursing classes will be required to complete an audit of previous curriculum content or an individualized independent study before continuing in the ASN nursing program.
2. Conditions of the audit will be determined by the course coordinators and approved by the ASN program director. The student who audits a nursing course will be required to meet the same objectives as students who are taking the course for credit. The decision regarding audit will be based upon recommendation made by the faculty at the time the individual extends their program of study for any reason. Curricular changes during the time the student is out of nursing courses will be taken into consideration when determining the specific audit conditions. Initial faculty recommendations for audit will be recorded in the Nursing Student Policies Committee minutes.
3. The student must request in writing her intention to return to the nursing program prior to the deadline established by the Nursing Student Policies Committee. This request goes to the ASN program director.
4. The student will not be allowed to proceed to the next nursing course until conditions of the audit have been met.
5. Fees will be charged according to the current college fee structure.
6. A student who has been away from nursing courses for two years or more will be required to reapply for admission.

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Original Date: September, 1985  
Reviewed Date: April 2002  
Revised Date: April 2002  
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Revised Date: July 2010  
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Number: 2.3  
Section: Student Policies

**INDEPENDENT STUDY**  
**NUR 291/391**

Policies:

1. The Nursing Programs offer NUR 291/391-Independent Study in Nursing for students who desire additional study in a specific area in nursing.
2. Course may carry 1-3 credit hours.
3. All requests for Independent Study must be approved by the student's advisor, program director and Vice President for Academic Affairs prior to registration for the semester in which the course is to be taken.
4. Selection of faculty for the Independent Study will be based on:
  - A. Faculty workload for the semester/year.
  - B. Faculty expertise related to the area selected for study.
  - C. Mutual agreement of faculty and program director.
5. The student will follow the College procedure for Independent Study from the office of the Vice President of Academic Affairs.

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Revised Date: April 2002  
Reviewed Date: May 2005  
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Reviewed Date: July 2010  
Revised Date: May 2011

Number: 2.4  
Section: Student Policies

**ACADEMIC EVALUATION**

Policies:

1. The scale for the percentage method of grading in the Nursing Program is as follows:

Grade	Percentage	Grade	Percentage
A+	97-100	A	92- 96
B+	88-91	B	85-87
C+	82-84	C	79-81
D	71-78		
F	<70		

2. If the percentage system is used, faculty may not raise or lower the percentage for a grade equivalent.
3. Each faculty may select their own method of grading providing they can document the validity and reliability of the method based on nursing education and evaluation literature.
4. The Nursing Programs follow the College Academic Catalog for incomplete grades. In addition, if a student receives an incomplete in a course where theory and clinical or practicum components must be taken concurrently, both grades will be recorded as an incomplete until successful completion of the requirements.
5. For both Nursing Programs, the final theory course grade shall consist of a letter grade. For the ASN clinical nursing courses, a grade of satisfactory (S) or unsatisfactory (UN) will be given to indicate clinical achievement. For the BSN practicum nursing courses, a letter grade will be given to indicate practicum achievement. Refer to policy 2.5 regarding failure of nursing courses and submitted grades.
6. The course objectives derived from the level outcomes of the curriculum for the nursing major are the criteria for evaluating student achievement in both the classroom and clinical practice.
7. At designated intervals, each student will have the benefit of an evaluation of her progress in both the classroom and clinical/practicum component of the course.
  - a. Designated intervals are defined in each course evaluation procedures.
  - b. The clinical/practicum instructor shall provide the opportunity for each student to make self-evaluations.
  - c. Each clinical/practicum instructor shall be responsible for documenting evaluations on each assigned student. The student shall have access to evaluations by contacting the instructor for an appointment.
  - d. If the student's progress is unsatisfactory, additional evidence of guidance conferences may be entered into the student's permanent file.
8. A student may request an evaluation of progress whenever the need for additional guidance is desired.

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9. Upon completion of clinical/practicum courses, the student's evaluation form will be placed in the student's permanent folder.
10. Test grades will be given out by the course instructor no later than 48 hours after the test. Papers will usually take longer to grade. Grades will not be given out over the phone.

Procedure:

1. The student will:
  - a. Attend conferences as determined by faculty.
  - b. Demonstrate evidence of following through with suggestions of faculty. A student encountering academic difficulties in a nursing course is expected to make full use of all available college resources.
  - c. Discuss questions or concerns with instructor(s). The student will utilize appropriate communication channels when addressing concerns regarding grades/evaluations. The student may seek input from her academic advisor for assistance with this process.
  - d. Sign name and date clinical evaluation form. Student signature documents that they have been notified of evaluation, not necessarily agreement with the evaluation. The student may respond to the evaluation in writing.
  - e. Access midterm and final grades by utilizing the College's website.
  - f. Refer to Policy 2.5 Failing/Repeating Courses and Grade Appeal Procedure and Policy 2.6 Progression and Graduation, if needed.
2. The faculty will:
  - a. Orient students to evaluation policies and procedures at the beginning of each course.
  - b. Meet with the student for clinical evaluation conferences a minimum of twice per semester (at midterm and following completion of the clinical/practicum rotation).
  - c. Document clinical evaluation conferences on the student clinical/practicum evaluation form.
  - d. Submit the midterm and final grades to the course coordinator. Course Coordinator will report grades to the Registrar and the Nursing Student Policies Committee.
  - e. Present documented evidence of failures to the Nursing Student Policies Committee and make recommendations regarding the student's progress in the program.
3. The Chairperson of the Nursing Student Policies Committee will:
  - a. Arrange for a meeting of the Nursing Student Policies Committee as needed.

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Revised Date: April 2002; March, April 2003  
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Revised Date: July 2010  
Reviewed Date: June 2011

Number: 2.5  
Section: Student Policies

**FAILING/REPEATING COURSES AND GRADE APPEAL PROCEDURE**

Policies:

1. All ASN students are required to achieve a minimum grade of “C” in the following courses: CHM 100 General Chemistry: Organic and Biochemistry, CHM 100 L, BIO 200/201 Anatomy & Physiology I with lab, BIO 202/203 Anatomy and Physiology II with lab, BIO 230/231 Microbiology with lab, , PSY 101 General Psychology, ETH 200 Moral Reasoning, MTH elective, and Nursing 224 Pharmacology to be allowed to progress to the next level in the ASN curriculum.
2. BSN students must achieve a minimum grade of “C” in BIO 366 Pathophysiology, MTH 242, and, Philosophy course which are prerequisites or concurrent for 400 level nursing courses.
3. A student must earn a minimum grade of “C” in theory and a Satisfactory in clinical practice in order to pass ASN nursing courses. Failure to achieve either of those grades will result in the student being required to repeat both components of the course. If an ASN student received below “C” in theory but Satisfactory in clinical, an “NC” (no credit) for clinical is awarded. When the ASN student receives an Unsatisfactory in clinical and a “C” or better in theory, a “NC” (no credit) for the theory course is awarded. Refer to Academic Catalog (Policy for Repeating Courses).
4. In BSN nursing courses, the student must earn a minimum of “C” in both theory and clinical practicum. If a student receives a grade below “C” in theory or clinical practicum the student will be required to repeat both components of the course.
5. Whenever a student fails a nursing course, she is referred to the Nursing Student Policies Committee. A recommendation is made by the Committee concerning the student’s progression in the program. This recommendation is sent to the Program Director, for a final decision. A letter stating the final decision is sent to the student by the Program Director.
6. A student may repeat and/or withdraw from the same nursing course only once. If a student withdraws, withdraws failing, and/or fails from the course for the second time, her progression in the program will be evaluated by the Nursing Student Policies Committee. After review, a recommendation regarding the student’s continuation in the program will be made and forwarded to the chair, Division of Health Professions for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis.
7. A student may withdraw, withdraw failing, and/or fail from only two nursing courses in her current program. If a student fails two nursing courses, her progression in the program will be evaluated by the Nursing Student Policies Committee. After review, a recommendation regarding the student’s continuation in the program will be made and forwarded to the Chair, Division of Health Professions for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis. Failure of either a theory or clinical component of a course will be regarded as one failure. Failure of concurrently taken theory and clinical components of a course will be regarded as one failure.

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8. A student may appeal a theory or clinical nursing grade following the procedures available from the Vice President of Academic Affairs and must begin the process no later than one month after the end of the semester in which the decision was made.
9. This policy applies to all nursing students, including those with ADA accommodations.

Grade Appeal Procedure:

1. The student shall:
  - a. Discuss the grade with the instructor and course coordinator, if applicable, for clarification as to how the course work was evaluated.
  - b. If the student still has concerns about the evaluation, the student shall make an appointment to discuss concerns with the Program Director.
  - c. If concerns remain after steps a and b, then the student shall make an appointment to discuss concerns with the Division Chair
  - d. If concerns remain after steps a, b, and c, then the student shall make an appointment to discuss concerns with the Vice President Academic Affairs (VPAA.)
2. The student then has the option to obtain a copy of the appeal procedure from the VPAA and begin an appeal process.
3. The Nursing Student Policies Committee will review nursing student appeals and make recommendations to the chair, Division of Health Professions as designated in the Academic Catalog. The Nursing Student Policies Committee Chairperson shall:
  - a. Review the written appeal submitted by the student.
  - b. Schedule the Nursing Student Policies Committee meeting.
  - c. Provide the written appeal to the instructor/course coordinator, members of the Student Policy Committee, and program director.
  - d. Arrange to have the student, instructor, course coordinator, and program director at the beginning of the meeting for input of data and to answer questions the committee might have.
  - e. Preside over the meeting.
    - i. Chair of Nursing Student Policies Committee calls group to order.
    - ii. Student presents appeal and circumstances. Time limited to 5 minutes.
    - iii. Instructor and course coordinator present rationale for grading decision(s). Time limited to 5 minutes.
    - iv. Nursing Student Policies Committee members may question facts. Time limited to 5 minutes.
    - v. All non-Nursing Student Policies Committee members asked to leave.
    - vi. Committee makes recommendation; written recommendation with brief rationale based on facts.
    - vii. No discussion of the appeal occurs outside the meeting itself.
  - f. Inform the Chair, Division of Health Professions in writing of the committee's recommendation.
4. The VPAA will make the final decision.
5. Additional actions that may be taken:
  - a. A committee or chair, Division of Health Professions decision which adds to faculty workload must involve:
    - i. prior arrangement for monetary compensation to the faculty member.
    - ii. prior arrangement to ensure availability of a faculty member to complete the additional work.

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Original Date: July 1974  
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Revised Date: April 2002, April 2003, April 2006  
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Revised: July 2010  
Reviewed: June 2011

Number: 2.6  
Section: Student Policies

**PROGRESSION AND GRADUATION**

Policies:

1. All ASN students are required to achieve a minimum grade of C in the following courses: CHM 100 General Chemistry: Organic and Biochemistry, CHM 100 L, BIO 200/201 Anatomy & Physiology I with lab, BIO 202/203 Anatomy and Physiology II with lab, BIO 230/231 Microbiology with lab,, ETH 200 Moral Reasoning, PSY 101 General Psychology, NUR 224 Pharmacology and Math elective to be allowed to progress to the next level in the ASN curriculum. Any student who withdraws or receives a grade below a "C" in three required science courses, including the same science course if repeated or a combination of science courses, will not be admitted and or allowed to progress in the ASN/BSN nursing program.
2. To progress to nursing courses, ASN three-track students, must have CSM cumulative GPA of 2.5 and have completed a minimum of one science requirement and the math elective by the end of Spring semester. A second science requirement must be completed prior to beginning nursing courses.
3. BSN students must achieve a minimum grade of C in BIO 366 Pathophysiology, Philosophy and MTH 242 Statistics, which are prerequisites or concurrent for 400 Level nursing courses.
4. The ASN and BSN curriculum is organized so that a student must satisfactorily complete all nursing courses at a given level before progressing to the next level. Course levels\* are as follows:

Beginning Level:  
NUR 110,100/170

Intermediate Level:  
NUR 201/271:  
NUR 202/272: NUR 224,  
NUR 211 and 212. NUR 224 pharmacology can only be taken if a student has successfully completed at least one intermediate nursing/clinical course.

Proficient Level: Non nursing courses that must also be completed before enrolling in NUR 253/273 and NUR 213 are as follows: BIO 200/201, BIO 202/203, BIO 230/231, CHM 100/100L  
NUR 213:,253/273

Baccalaureate Level: NUR 372, 438, 452/472, 453/463, 455, 494

\*NUR 372 may be taken during the Intermediate level and must be taken prior to the Baccalaureate Level nursing courses or concurrent with NUR 452/472.

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5. Students who enroll but do not successfully complete classes for two semesters will be reviewed by the Nursing Student Policies Committee. This behavior may result in dismissal from the nursing program. When the student successfully completes classes their status in the department will be reconsidered by the Nursing Student Policies Committee.
6. Students with a current semester or cumulative GPA below 2.5 will be reviewed on an individual basis by the Nursing Student Policies Committee (Refer to the Academic Probation policy in the Academic Catalog.)
7. Academic success is only one requirement for progression in the nursing program. The student must meet professional conduct Policy 2.1 and the Code of Conduct in the Academic Catalog.
8. Each candidate for graduation from the nursing program must complete the required credit hours outlined in the Academic Catalog.
9. To qualify for graduation, the candidate must satisfactorily complete theory and clinical objectives in all nursing courses.
10. BSN students are encouraged to maintain current liability insurance while enrolled in clinical courses.

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Revised Date: April 2002  
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Reviewed Date: June 2011

Number: 2.7  
Section: Student Policies

**ATTENDANCE AT CLASS AND CLINICAL LABORATORY**

Students are responsible to attend all scheduled classes and clinical/practicum experiences. If a student chooses to miss a class or clinical/practicum experience, the student assumes responsibility for this action and it subject to the stipulations of this policy.

Absences are considered to be excused or unexcused. The student is responsible to notify the clinical instructor and the clinical agency when she is unable to attend a scheduled clinical assignment. The only exceptions will be when all students will not attend due to weather or other emergency.

I. Excused Absences

1. Excused absences are those absences due to illness, personal crisis, or special events (i.e., NSSNA, workshops, college functions)
2. Availability of clinical makeup time cannot be guaranteed for any absence, even though the absence may be an excused one.
3. When an excused clinical absence is due to illness, the student will see a primary care health practitioner to obtain permission to return to class and clinical area. The clinical instructor and/or course coordinator may waive this requirement when reviewing the nature of the illness and length of absence. The permission to return to clinical is noted in the student file.
4. For an excused absence related to a special event, the student will notify the course coordinator/clinical instructor in advance. A special event must be approved in order to be considered an excused absence. If approved, arrangements will be made to make up work missed in both clinical and classroom.
5. In the event of a crisis where the student is unable to notify the course leader in advance, the situation will be reviewed by the course coordinator and/or program director as appropriate. An excused absence will be determined at that time and arrangements made for course work.
6. A student who misses a course examination is responsible for notifying the course coordinator prior to the scheduled exam time.

II. Unexcused Absences

1. An unexcused absence is any absence in which the student has not made contact, made prior arrangement, or has not been approved by the course leader/clinical instructor.
2. Unexcused absences from an examination or failure to turn in a graded assignment may result in a grade of zero.

III. Clinical Absences

1. ASN students who have missed any clinical or college laboratory experience will be brought to the attention of the course coordinator by the clinical instructor for review.
  - a. An evaluation will be made to determine required make-up activities. The course coordinator will inform the Student Policies Committee if the completion of course objectives becomes a concern.
  - b. All clinical and laboratory hours are to be attended. Any absence will result in an automatic review of the student's progression by the clinical instructor and course coordinator. **Absence of either clinical orientation or the final clinical day** will result in two times the number of actual clinical hours missed.
  - c. The clinical instructor and course coordinator will develop a plan/requirement the student needs to complete to meet the clinical objectives.
  - d. The course coordinator and clinical instructor will submit the above plan to the Program Director for final approval.
  
2. BSN students who have missed a clinical or college laboratory experience will be brought to the attention of the course coordinator by the clinical instructor for review. An evaluation will be made to determine if the student is meeting clinical objectives. Student absences may affect the student's ability to meet the clinical objectives by the end of the course.
  
3. Availability of clinical make-up time cannot be guaranteed. The course coordinator and program director will determine availability. In the event that time is not available, the student will be notified and receives an unsatisfactory grade in the clinical course.
  
4. When additional clinical time is scheduled, students will be assessed an additional fee to compensate the clinical instructor. The fee will be based on the current market value. (See next page for procedure on clinical make-up.)
  
5. Clinical experience is an essential component of nursing. A pattern of absences will result in failure to meet not only course objectives but achieve program progression. The Nursing Student Policies Committee may recommend that the student be asked to withdraw or be administratively withdrawn from the ASN or BSN Programs.

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**Clinical Make-Up Procedure**

When additional clinical time is scheduled, students will be assessed an additional fee to compensate the clinical instructor. The fee will be based on the current market value.

Procedure:

1. Student with excused absences meets with coordinator and program director to determine specific make-up requirements.
2. Arrangements are made by program director with coordinator input to obtain faculty and clinical site times and dates.
3. An agreement form (available on the next page) will be written for all interested parties to sign. If the make-up time involves a student athlete, the athletic director will also be included.
4. Student pays a fee to Express Center in Budget line \_\_\_\_\_. If the make-up entails a college-sponsored event supported by another department of the college, that department may be charged the fee amount.
5. Program director requests stipend for faculty member doing make-up to Division Chair who makes arrangements for stipend through payroll, subject to usual deductions.
6. If more than one student needs make-up, students will share the burden of the fee together, i.e. faculty member will not be paid multiple times for same day.
7. During clinical make-up time, the faculty member must have sole responsibility for the clinical supervision and no other nursing related responsibilities.

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**Clinical Make-Up Agreement**

1. I, \_\_\_\_\_, agree to attend make-up clinical on \_\_\_\_\_ at \_\_\_\_\_ with clinical instructor \_\_\_\_\_.

2. The current rate for clinical make up is:

One Student	8 hours	\$280.00
Two Students	8 hours each	\$140.00
Three Students	8 hours each	\$93.00
Four Students	8 hours each	\$70.00
Five Students	8 hours each	\$56.00
Six Students	8 hours each	\$46.00
Seven Students	8 hours each	\$40.00
Eight Students	8 hours each	\$35.00

3. I, \_\_\_\_\_, agree to pay the rate circled above to the Express Center the next business day following the make-up clinical experience. I understand failure to do so will result in an unsatisfactory for this course.

4. This form is to be taken to the Express Center with payment. The Express Center will mark this form paid. Student will return this form marked paid to the instructor for finalization of the clinical evaluation for make-up clinical.

\_\_\_\_\_  
Printed Name: Student

\_\_\_\_\_  
Printed Name: Clinical Instructor

\_\_\_\_\_  
Signature: Student

\_\_\_\_\_  
Signature: Clinical Instructor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Express Center Space to mark Paid

\_\_\_\_\_  
Date

**COLLEGE OF SAINT MARY**  
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Original Date: May 1984  
Reviewed Date: April 2002  
Revised Date: April 2002  
Reviewed Date: May 2009  
Revised Date: July 2010  
Reviewed Date: June 2011

Number: 2.8  
Section: Student Policies

**MISREPRESENTATION OF THEORY AND/OR CLINICAL EXPERIENCE/ASSIGNMENTS**

In keeping with its mission, College of Saint Mary seeks to prepare its students to be knowledgeable, forthright, and honest. It expects academic honesty from all its members. Academic honesty mandates ethical behavior in academic matters, and prohibits, among other things, plagiarism, cheating, tampering with the work of other students, or knowingly furnishing false information. (Refer to the Academic Catalog for the Policy for Academic Honesty.)

In keeping with the philosophy of College of Saint Mary and the nursing programs, a student is responsible for all required theory, clinical experience and assignments.

Any misrepresentation of client visits, client assessments or assignments will be considered by the Nursing Student Policies Committee for disciplinary action. Such misrepresentation may be cause for dismissal. (Refer to Policy 2.1.)

**COLLEGE OF SAINT MARY**  
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Number: 2.9  
Section: Student Policies

**PROFESSIONAL IMAGE AND PERSONAL APPEARANCE**

In clinical settings, nursing students are required to be well groomed and dressed to reflect a professional image. Student identification is visible.

ASN and BSN Program Students:

- a. Hair – shall be neatly combed and pulled back in such a way that it is out of the face and does not fall forward while giving client care. Human colored hair is required.
- b. Nails – should be filed to a moderate length and clean. Bright colored polish may not be worn. Artificial nails are not allowed.
- c. Jewelry – the only acceptable jewelry to be worn to the clinical area will be wristwatches, a ring, and plain post-type pierced earrings (non-dangling), one earring per ear. No visible piercings or the like, allowed elsewhere on the body.
- d. Tattoos/branding - no visible tattoos/branding will be allowed. Tattoos/branding must be covered.
- e. Makeup – if used, should be applied in a manner that reflects a professional appearance. “Professional appearance” is based on the subjective opinion of clinical faculty and agency policy.

BSN Program

- a. Students will abide by agency policies for dress code. Students must wear a CSM picture identification in practicum areas. This policy may be waived by the course coordinator in practicum experiences where necessary.

ASN Program

- a. Student uniforms will consist of preselected uniform top, pants and a white cardigan-length lab jacket. White turtle necks or white long-sleeved tee shirts may be worn under the top.
- b. Uniforms are required to be worn for all pre-lab experiences, tours and/or observational experiences.
- c. Jeans, sweatpants, or shorts may not be worn under lab coats or at any time in the clinical agency.
- d. The CSM patch must be worn on the upper left sleeve of the uniform and lab jacket.
- e. A CSM picture identification is to be worn during clinical experiences.

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- f. Shoes – Professional closed white leather shoes and white socks are to be worn with the CSM uniform. Shoes for clinical must be clean, white, and polished. Shoelaces are to be kept clean. The style for shoes selected for clinical should be suitable for hospital wear. Sandals, canvas shoes, and boots are not suitable and may not be worn. Plain white socks are required.
- g. Name Tag, Arm Badge – are a part of the student uniform. A student appearing in clinical assignment without either is not maintaining the professional standard expected.
- h. Lab Coats – Students may wear white lab coats in the clinical areas.
- i. While in surgery, mental health nursing, pediatrics, and maternity nursing, students will adhere to dress policies of the individual institutions to which they are assigned.

The above policies will be enforced as long as they are congruent with each clinical agency's policies. Students and instructors are responsible for following and supporting agency policies regarding student dress code. Students will be asked to leave the clinical/practicum area if their appearance does not meet the guidelines for professional image and personal appearance. Students who need to adjust uniform requirements for cultural or religious reasons need to contact the program director to see if this is feasible, prior to enrollment in clinical/practicum courses. Students who need maternity uniforms should consult with the program director.

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ORIGINAL DATE: NOVEMBER 1, 1982

Reviewed Date: April 2002

Revised Date: April 2002

Reviewed Date: May 2008

Reviewed Date: May 2009

Reviewed Date: July 2010

Reviewed Date: June 2011

NUMBER: 2.10

Section: Student Policies

**SMOKING POLICY**

1. The buildings at College of Saint Mary are smoke-free.
2. Students must follow clinical agency policies related to smoking. There is no smoking in pre- or post-conferences.

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Reviewed Date: May 2005  
Reviewed Date: May 2009  
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Reviewed Date: June 2011

Number: 2.11  
Section: Student Policies

**SNOW POLICY**

1. The Nursing Programs do not have authority to cancel classes. The Vice President or designee makes this decision and notifies the news media. If the College of Saint Mary is closed, all A.M. clinical is canceled. Decision about P.M. clinical experience is made later in the day based on weather conditions.
2. When driving conditions could be hazardous for students and clinical instructors with clinical assignments, the program director will call the clinical coordinators by 6:00 A.M. with a decision regarding morning clinical experience or two hours prior to the starting time for afternoon clinical experience.
3. Upon notification by the program director, clinical coordinators will then call the clinical instructors in their course.
4. Instructors will initiate the calling system to their students by 6:15 A.M. or at the time designated by the individual instructor. Students having P.M. clinical experience will be notified by their clinical instructor prior to clinical. If in doubt the student should contact their instructor before leaving for clinical.
5. Each clinical group should establish a system for notification of students. Nursing students should delay leaving home until 6:30 A.M. on days of hazardous driving conditions to give instructors ample time to notify them of cancellation.
6. Alternate clinical learning experiences may be arranged on campus.
7. The clinical instructor will notify the clinical area.
8. Due to geographical differences, clinical closings may not necessarily be uniform. Make-up or alternative assignments will be determined by the course coordinator. See Policy 2.7 for clinical absences.
9. If driving conditions appear to be hazardous the evening before clinical assignments, or projections of weather reports are very unfavorable, course coordinators will consult the program director for advance planning.
10. Should a student arrive at the clinical area and find that the instructor has not yet arrived, the student will not give any client care. The student should inform the staff in the clinical area and call the Program Director for further instructions.

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Reviewed Date: June 2011

Number: 2.12  
Section: Student Policies

**MEDICATIONS, INTRAVENOUS THERAPY AND BLOOD THERAPY**

- A. Students must comply with written clinical agency policies and procedures when they differ from the CSM policy.**
- B. Clinical instructor will be familiar with current agency policies and make them available to students regarding administration of medications. Students are expected to know the infusion rate and observe its effect on the assigned clients.
- C. **After instruction in the appropriate nursing course, nursing students, with the direct supervision of their clinical instructor, or RN designated by the instructor, may do the following:**
1. **Peripheral Lines:** May start, regulate and discontinue.
  2. **Blood:** May initiate saline setup, regulate flow rate, observe and document vital signs and client's response to blood infusion. The primary care nurse will hang the blood with another RN to ensure accuracy.
  3. **Flushes:** Peripheral, central lines, ports, and PICC lines with appropriate amounts of saline and/or heparin as needed according to policy.
  4. **Intravenous Push and Intravenous Piggy-back (IVP/IVPB) Medications:** Give as per drug administration information from the Physician's Desk Reference (PDR) or the manufacturer's information sheet with the exception of vasopressors and chemotherapeutic agents.
  5. **Continuous Infusions:** Administer standard intravenous solutions as well as those with other additives, for example: electrolytes, vitamins, antibiotics, dextran, albumin, and heparin. Exceptions include blood, vasopressors, chemotherapeutic agents and oxytocins.
  6. **Regulate Infusions:** Students are not permitted to regulate IVs which have blood and blood products, anti-arrhythmic agents, vasopressors, chemotherapeutic agents or oxytocins. However, they ARE expected to know the side effects, infusion rate and observe and document its effects on the client.
  7. **PCA Infusions:** Document rate and effectiveness of infusion, change parameters and clear pump.
  8. **Epidurals:** Document rate and effectiveness of infusion and clear pump.
  9. **Central Lines:** May be discontinued after the policy has been reviewed by the student.
  10. **Documentation:** The student and clinical instructor must document according to facility policy.

**COLLEGE OF SAINT MARY**  
DIVISION OF HEALTH CARE PROFESSIONS

Original Date: February 2011  
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Number: 2.13  
Section: Student Policies

**ATI POLICY**

Policy: All College of Saint Mary Associate of Science in Nursing students will be required to complete the Assessment Technologies Institute, LLC (ATI) standardized Content Mastery proctored exams.

Procedure:

- At the beginning of every semester, an ATI representative will visit each course to discuss ATI and the advantages of using this program.
- A few weeks into the course, the ATI coordinator from College of Saint Mary will visit each course to discuss what resources are available for each specific course .
  - o Will encourage use of Learning System assessments as learning tool, then Practice Assessments.
- Assessments
  - o Each student will be required to take the Practice Assessment and score at least a 90% prior to sitting for the ATI exam for said course.
    - There will be a time limit of 24-hours between assessment attempts.
    - The score sheet of the online Practice Assessment and photo ID must be presented at the time of each proctored assessment.
  - o Each student will be required to take the ATI Proctored Assessment assigned to that course. The goal is for at least 86% of the students successful in said course to achieve a Proficiency Level 2 or above on the first attempt with the exception of the RN Predictor. The RN Predictor benchmark is at least an 86%.
    - If a student does not meet a Proficiency Level 2 or above on the first attempt, they will be required to take Proctored Assessment. This second assessment must be completed on the students' time and scheduled with the ATI coordinator.
      - Prior to retaking the assigned ATI assessment, the students must remediate. Remediation will include, at a minimum, taking a second Practice Assessment and scoring at least a 90%.
        - o There will be a 24-hour limit between Practice Assessment attempts.
      - The score sheet of the online Practice Assessment and photo ID must be presented at the time of the assessment.
    - If a student does not achieve a Proficiency Level 2 on the second attempt, the student will be recommended to take future associated Learning Circle courses.
- Scoring of Course Points
  - o Each Proctored Assessment will be awarded points as an 'Activity' grade. The total amount of points from Proctored Assessments should represent between a 4-8% of the total course points. See course syllabi for specifics.
- ATI Assessments
  - o NUR 100/170:
    - Critical Thinking Entrance Proctored Assessment
    - RN Fundamentals Proctored Assessment; points to be awarded in NUR 100
  - o NUR 110
    - Self-Assessment Inventory Practice Assessment
  - o NUR 201/271
    - Nursing Care of Children Proctored Assessment
    - Maternal Newborn Proctored Assessment

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- NUR 202/272
  - Mental Health Proctored Assessment
  - 5 Medical-Surgical Practice Assessments
- NUR 224
  - Pharmacology Proctored Assessment
- NUR 213
  - Leadership Proctored Assessment
- NUR 253
  - An assortment of the Fundamentals, Nutrition, Community Health Practice Assessments as additional homework points (beyond the 4-8%). Each Practice Assessment must be completed at a 90% in order for students to receive completion points. There will be a time restriction of 24-hours between each attempt.
  - Adult Medical Surgical Proctored Assessment
- NUR 273
  - RN Comprehensive Predictor Proctored Assessment; points will be awarded in NUR 213
  - Critical Thinking Exit Proctored Assessment

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Section: Student Policies

**POLICY ON TEST OF ESSENTIAL ACADEMIC SKILLS (TEAS) FOR ADMITTANCE TO  
ASSOCIATE NURSING IN NURSING PROGRAM (ASN)**

The following policy is adopted regarding the TEAS test and desiring admittance to the ASN program effective 11/24/10.

For acceptance to the ASN program, the applicant will have:

1. TEAS composite score of 64%
2. Reading sub-score of 78%

\*If the TEAS math sub-score is less than 68%, the student will be required to take NUR 181 (math content) concurrently with NUR 100/170.

The TEAS exam may be taken twice in a calendar year in an attempt to meet admission requirements for ASN program. An official TEAS score that meets CSM requirements but was taken elsewhere (not at CSM) may be accepted if taken within the last two calendar years.

The TEAS requirement is waived if a student has taken the ACT in the last two years and has met the nursing ACT requirements. Students have the option of taking the TEAS or ACT for admission criteria.