BACHELOR OF SCIENCE IN NURSING COMPLETION (RN-BSN) PROGRAM

STUDENT MANUAL

2015-2016

COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

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COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

Welcome Letter

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, RN-BSN program. These policies will outline requirements, expectations, and answer questions about the RN-BSN program. 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 the RN-BSN program.

The introductory pages give an overview of the nursing curriculum and philosophy of the RN-BSN program. 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 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.

Dr. Christi Glesmann   Dr. Kathleen Zajic
Program Director, Undergraduate Nursing   Chair, Division of Health Professions

Nursing Program Student Manual Notification

I have been notified that a copy of the Bachelor of Science in Nursing Completion (RN-BSN) Program Student Manual (containing curriculum material and policies) is located on the MyCSM website: https://my.csm.edu/communities/Nursing%20News/Pages/default.aspx. The RN-BSN Program Student Manual is located at the bottom of the page under "Document Library."

I attest I have read the policies in full this week and directed 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 for the duration of my nursing program. My signature indicates my willingness to comply with these regulations as stated in the policy manual.

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Student (PLEASE PRINT) – use blank ink only

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Student's Signature – use blank ink only

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Date – use blank ink only

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.

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

Core Performance Standards

The following are the core performance standards the student must possess to successfully complete the nursing programs. These abilities are not conditions of admission; however, they reflect the performance abilities and characteristics necessary for the student to successfully complete program requirements.

The applicant must decide if she has any limitations that may restrict or interfere with satisfactory performance of any of the core performance standards. It is the responsibility of the applicant to meet the standards outlined below, and to request those accommodations that she feels are reasonable and necessary to perform the core performance standards. 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.

All students must be able to meet the performance requirements to progress in and complete the nursing programs. The applicant should consult with the Program Director to discuss any individual circumstance in which she may not be able to meet the essential requirements.

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

Ability	Standard	Examples of Necessary Activities (not all inclusive)
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 have read the above and declare that I am able to meet the core performance standards. Any falsification or misrepresentations will be sufficient grounds for my dismissal from the nursing program.

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Student (PLEASE PRINT) – use blank ink only

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Date – use blank ink only

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

COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

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 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 RN-BSN program.

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Student's Signature – use blank ink only

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Date – use blank ink only

This document will be retained 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 your assigned practicum sites, 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 RN-BSN Program.

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COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

A Student's Guide to the Health Professions Skills and Simulation Center

As a patron of the Health Professions Skills and Simulation Center (HPSSC), I understand the significance of confidentiality with respect to information concerning simulated patients and fellow students. I will uphold the requirements of the Health Insurance Portability Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality. I agree to report any violations of confidentiality that I become aware of to my facilitator and/or Instructor.

I agree to adhere to the following guideline:
- All patient information is confidential and any inappropriate viewing, discussion, or disclosure of this information is a violation of College of Saint Mary policy.
- This information is privileged and confidential regardless of format: electronic, written, overheard, and/or observed.
- I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of hospital policy and may be violation of HIPAA and other state and federal laws.
- The HPSSC is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The student running the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students.
- The simulation mannequins are to be used with respect and be treated as if they are live patients.
- No Betadine or ink pens may be used on or near the simulation mannequins. Only 22 gauge IV catheters, or smaller, may be used.
- When using the SimPad for skills and/or simulation, the wrist strap will be worn at all times or the cost of a new SimPad will be incurred to the student responsible for the damage caused.

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

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Student (PLEASE PRINT) – use blank ink only

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Date – use blank ink only

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

Photograph and Audio/Visual Recording Release

Photography and audio/visual recording equipment may or may not be in use while students are using the Health Professions Skills and Simulation Center (HPSSC) as well as in the classrooms and clinical/practicum setting. The use of photo/audio/visual recording equipment allows work done in these settings to be reviewed by faculty and students for learning purposes. A photo/audio/visual release form must be signed by all students prior to use of the HPSSC.

Health Professions Skills and Simulation Center
7000 Mercy Rd
Omaha, Ne 68106

Telephone: 402-399-2400
www.csm.edu

I, _____, grant permission to College of Saint Mary Health to make photo, audio and/or visual recordings of any or all sessions and to reproduce, communicate, or otherwise use some or all of the recordings for the College's educational purposes. I understand that the recordings may be edited; however, College of Saint Mary will not edit the recordings so as to misrepresent or alter the meaning of the contributions.

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BACHELOR OF SCIENCE IN NURSING COMPLETION (RN-BSN) PROGRAM

CURRICULUM MATERIALS

College of Saint Mary Mission Statement

College of Saint Mary is a Catholic university providing access to education for women in an environment that calls forth potential and fosters leadership. Consistent with the works, values and aspirations of the Sisters of Mercy, this mission inspires us to:

- Academic excellence, scholarship, and lifelong learning;
- Respect for the dignity of each person;
- Development of mind, body and spirit; and,
- Commitment to compassionate service.

Bachelor of Science in Nursing (RN-BSN) Completion Program 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 Completion (RN-BSN) 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 RN-BSN 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 populations. The nurse utilizes the nursing process while assuming the nursing roles as provider of care, designer/manager/coordinator 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 (ACEN, 2013). 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 (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 RN-BSN education includes upper division nursing courses and a broader base in general education. Care is provided to clients who may be individuals, families, groups, communities, and populations 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, community, and populations.

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, communities, and populations 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.

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).

RN-BSN Program Conceptual Framework

The organizing framework reflects the philosophy and goals of ASN and RN-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 RN-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 RN-BSN)
> Categories of Human Functioning (only in ASN curriculum)
> Communication (ASN and RN-BSN)
> Human Development (ASN and RN-BSN)
> Teaching/Learning (ASN and RN-BSN)
> Discipline of Nursing (ASN)
> Management (ASN and RN-BSN)
> Family (ASN and RN-BSN)
> Community (ASN and RN-BSN)
> Populations (RN-BSN)
> Research (RN-BSN)

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

RN-BSN Program Integrative Strands

The following are the organizing strands of the RN-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. <u>NURSING PROCESS</u>
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. <u>COMMUNICATION</u>
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 RN-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. <u>HUMAN DEVELOPMENT</u>
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 RN-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. <u>TEACHING / LEARNING</u>
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 RN-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.   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 RN-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, 2015).

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

G.   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 RN-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.

H.   POPULATION
A collection of individuals having personal or environmental characteristics in common (AACN, 2008).

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

RN-BSN Student Learning Outcomes

Upon completion of the RN-BSN 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, communities, and populations.

COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

RN-BSN Plan of Study

GENERAL EDUCATION	24	COMP	GRD	MAJOR PROGRAM COURSES	61	COMP	GRD
ENG 102 or Literature	3			Diploma/RN Credits	36		
Global and Cultural Diversity	3						
Fine Arts (any Art, Music, or Theatre)	3			**Upper Division Major**	25		
History (any History course)	3			NUR 372 Health Assessment	3		
MTH 242 Statistics*	3			NUR 438 Nrsng Theories & Resch	4		
PHL (any Philosophy course)	3			NUR 452 Pop. Based Comm. Hlth	3		
THL (any Theology courses)	6			NUR 453 Lead&Mgmt in Hlth Care	3		
MTH 112 is prerequisite/ concurrent MTH 242	(3)			NUR 455 Prof. Roles Issues in Nrs	3		
SUMMARY				NUR 463 Prac: Leading & Managing in Health Care	2		
GENERAL EDUCATION	24(3)			NUR 472 Pr: Pop.Based CommHlth	3		
MAJOR	61			NUR 494 Capstone Seminar	4		
SUPPORTING COURSES	3						
MINOR OR SUPPORTING FIELD	18			**RN-BSN SUPPORTING COURSES**	**3**		
ELECTIVES/TRANSFER	22			BIO 366 Pathophysiology	3		
TOTAL	**128**						

Nursing Program Student Manual Reviewed Annually and Revised As Needed

Glossary of Terms

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

Client(s):	An individual, family, group, community, or population 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 *client* is preferred to *patient,* because it implies autonomy and self-direction, rather than a dependent role (Berman & Snyder 2012).
Client-centered 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 (IOM, 2003).
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 & 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).
Culturally Competent:	The attitudes, knowledge, and skills necessary for providing quality care to diverse populations. Cultural competence is an ongoing process in which the nurse continuously strives to achieve the ability to work effectively within the cultural context of patients. This involves accepting and respecting differences in personal beliefs, as well as having general cultural and cultural-specific information so the nurse knows what questions to ask (AACN, 2013).
Delegation:	Transferring to a competent staff member the authority and responsibility to perform a selected nursing task that the staff member would not normally be allowed to perform; the registered nurse retains the accountability for the delegated task (Cherry & Jacob, 2014).

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:

    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 & 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.)

    f. Psychological Factors:

Factors influencing health include mind-body interactions and self-c0ncept. Increasing attention is being given to the mind's ability to direct the body's functioning (Berman & 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 & 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 & Snyder, 2012).

Guidelines for Nursing Practice:	A set of guidelines approved by a recognized nursing organization for use in the development and evaluation of nursing curriculum. . . (ACEN, 2013).
Health:	The degree of wellness or well-being that the client experiences (Berman & Snyder, 2012).
Health Promotion:	Any activity done for the achievement of a higher level of health or wellbeing (Berman & 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 & Workman, 2006).
Illness:	A highly personalized state in which the person feels unhealthy or ill, may or may not be related to disease (Berman & 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).
Leadership:	A skill that focuses on the development and deployment of vision, mission, and strategy as well as the creation of a motivated workforce (Marquis & Huston, 2012).
Licensure Pass Rate:	Performance on National Council Licensure Examination for Registered Nurses (NCLEX_RN) for first time writers (ACEN, 2013).
Job Placement Rates:	Number of graduates, one year after graduation, employed in a position for which the program prepared them (ACEN, 2013).
Designer/ Manager/ Coordinator of care:	Nurse leaders as managers 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 & 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 Completion Rate:	Number of students who graduate within 150% of the stated program length beginning with enrollment in the first nursing course (ACEN, 2013).

Program Satisfaction:	Perceptions of the graduates and employers regarding the graduates' achievement of the learning outcomes/competencies and the adequacy and effectiveness of the program (ACEN, 2013).
Program Outcomes:	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 (ACEN, 2013).
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 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 & Snyder, 2012).

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COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

BACHELOR OF SCIENCE IN NURSING COMPLETION (RN-BSN) PROGRAM

ADMINISTRATIVE POLICIES

Original Date: May 1974   Number: 1.1
Last Reviewed Date: June 2015   Section: Student Policies

ADMISSION TO RN-BSN PROGRAM

Policy:

1. Students desiring admission to the RN-BSN Program apply through Enrollment Services or the Centralized Application Service for Nursing Programs (Nursing CAS) and must meet the CSM admission criteria.

2. Detailed criteria for admission is found on the following page.

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

4. To participate in practicum courses, the student must have the following on file: a) CPR certificate, b) Clinical Agency Requirements, c) Health Record, and d) be able to meet Core Performance Standards (See Policy 1.2: Core Performance Standards; and Policy 1.3: Nursing Program Requirements).

Procedure:

1. Application materials for the nursing program are processed by Enrollment Services or NursingCAS and then submitted to the nursing Program Director for review.

2. Applications are reviewed by the nursing Program Director upon receipt of all of the following:
- application form
- official copy of high school transcript or GED with appropriate signatures
- official school transcripts from all colleges attended
- official school of nursing transcripts, if student has attended a nursing program

3. A personal interview may be requested by the Program Director.

4. If the applicant meets the criteria for admission to the RN-BSN program, she is notified of her acceptance in writing.

Admission Criteria

<u>RN-BSN Program</u>

Criteria for admission into the RN-BSN program are as follows:

- Graduate of a nationally accredited ADN program
- Graduate of a diploma or non-nationally accredited associate degree program with credits validated through verification of a Registered Nurse license in good standing (unencumbered) with the State of Nebraska or compact state.
- Cumulative grade-point average of at least 2.5
- Provide verification of a Registered Nurse license in good standing (unencumbered) with the State of Nebraska or compact state
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

Original Date: May 1994   Number: 1.2
Last Reviewed Date: June 2015   Section: Student Policies

CORE PERFORMANCE STANDARDS FOR PRACTICUM COURSES

The following are the core performance standards the student must possess to successfully complete the nursing program. These abilities are not conditions of admission; however, they reflect the performance abilities and characteristics necessary for the student to successfully complete program requirements.

Policy: The applicant must decide if she has any limitations that may restrict or interfere with satisfactory performance of any of the core performance standards. It is the responsibility of the applicant to meet the standards outlined below, and to request those accommodations that she feels are reasonable and necessary to perform the core performance standards. 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. All students must be able to meet the performance requirements to progress in and complete the nursing program. The applicant should consult with the Program Director to discuss any individual circumstance in which she may not be able to meet the essential requirements.

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

Ability	Standard	Examples of Necessary Activities (not all inclusive)
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.

Procedure: The student will be required to sign an attestation form declaring the ability to meet the core performance standards at the time of admission into the nursing program.

Original Date: March 2002	Number 1.3
Last Reviewed Date: June 2015	Section: Student Policies

NURSING PROGRAM REQUIREMENTS

Policy:

Nursing program requirements include CPR, Clinical Agency Requirements, and Health Requirements.

1. CPR Requirement
   - A current American Heart Association: Health Care Provider CPR card, Red Cross: Professional Rescuer CPR card, or American Safety & Health Institute: BLS for Healthcare Providers is required to participate in a lab/practicum course. Expense incurred by the student in connection with the CPR requirement is the responsibility of the student.

2. Clinical Agency Requirements
   - Investigative Consumer Report (Background Check)
     - All students must complete a background check as partial fulfillment of clinical agency contracts. This process must be completed prior to beginning nursing courses.
     - Students will complete the application for background check as stipulated by nursing program.
     - Results of the background check will be given to the nursing Program Director.
     - 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.
     - If findings indicate a rational connection and/or pose a liability risk to nursing, the student may be denied admission to nursing or be dismissed from the nursing program.
   - Drug Screening
     - Students entering nursing will be required to undergo drug testing (5-panel or higher) as required by clinical contract. Current students will be required to repeat drug screening for reasonable cause (probable cause) when at least two licensed healthcare professionals 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.

- Refusal to submit to a drug screen when there is reasonable cause is grounds for the Nursing Student Policies Committee to dismiss the student from the program.
- 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.

3. Health 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:

- Every student in the RN-BSN program is required to have current health records prior to beginning nursing courses. Health records will be maintained through either the student's CSM admission record or through CSM's designated health services office.
- Students who stop out and are readmitted to the program must submit another health record, current to within six months.
- Additional immunizations or health screening may be required as needed to meet clinical agency requirements.
- The student is responsible for any expense incurred in completing this process.
- Failure by the student to submit health records as required will result in missed lab/practicum days.
- All items on the medical form must be filled in for the record to be considered complete.
- Immunizations must be current and the report must include all dates immunizations were given. Students are to meet immunization requirements per the state of Nebraska Immunization Law and any further requirements as outlined in clinical agency policies.
- Students are responsible for updating their health records annually with the CSM designated health services office.

Procedures:

- The CSM Nursing Program Director or the CSM designated health services office shall:
  - Review the medical form for completeness and content.
  - Notify student of any deficiencies.
  - Issue a clearance form/card to the student that includes an expiration date.
  - Share information that may affect the student's ability to function in the classroom or practicum area with appropriate faculty.

- The Program Director or designee shall:
  - Inform prospective or new students of the necessity of meeting the health requirement.
  - Notify Advisors, Instructors, and/or student of any deficiencies or special needs.

- Faculty/Staff shall:

- Allow students to come to the lab/practicum area with a valid health clearance form/card.
- Refer students without a clearance form/card to the CSM Nursing Program Director or CSM designated health services office and not allow students to come to lab/practicum until proof of current/valid health clearance form/card is received.
- Furnish the information that the student is in compliance with CSM health requirements to clinical agencies as needed.

- The student shall:
  - Maintain a valid health clearance form/card.
  - Show valid health clearance card at designated times.

Original Date: May 1974   Number: 1.4
Last Reviewed Date: June 2015   Section: Student Policies

READMISSION TO THE RN-BSN PROGRAM

Policy:

1. The student who has withdrawn or has been terminated from the RN-BSN program and wishes to be readmitted will be considered for readmission by the Program Director/Nursing Student Policies Committee with consideration of the following criteria:
   - Facts/details surrounding withdrawal or termination
   - The amount of time elapsed between withdrawal or termination from the RN-BSN program to anticipated date of readmission
   - The amount of time elapsed from withdrawal or termination from the RN-BSN program and previous college transcripts will be reviewed and recommendations made about appropriate plan of study

2. If the Program Director desires additional information, the student application and information may be reviewed by the Nursing Student Policies Committee.

3. Students are subject to Policy 1.3: Nursing Program Requirements.

4. The student wishing to be readmitted to the RN-BSN program must complete the application process according to Policy 1.1: Admission to RN-BSN Program.

Original Date: June 1974   Number: 1.5
Last Reviewed Date: June 2015   Section: Student Policies

TRANSFER FROM ANOTHER NURSING PROGRAM

Policy:

1. Advanced standing may be granted to the student who qualified for transfer from an accredited program in nursing.
   - The student who wishes to transfer with advanced standing must fulfill the following requirements before being considered for admission:
     - Fulfill admission requirements of Policy 1.1: Admission to RN-BSN Program.
     - Present a minimum overall grade point average of 2.5.
     - Provide favorable reference(s) from the school from which she is transferring.
     - Submit all application materials in advance of admission date.

2. 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:
   - College catalog
   - Course syllabi
   - Results of standardized tests
   - Sample of previous course work

3. Students are subject to Policy 1.3: Nursing Program Requirements.

4. If a transfer nursing student 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.

5. Nursing credit from a non-collegiate program will be determined by the Program Director in collaboration with the Registrar.

Procedure:

1. NursingCAS or Enrollment Services shall:
   - Secure application credentials and submit to Program Director.
   - Send letter to applicant stating admission decision after review by Program Director.
   - Instruct applicant regarding registration.
   - Inform applicant of advisor's name.

2. Registrar shall evaluate the transcript for transferable credit of non-nursing courses.

3. Program Director shall:

- 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.
- Evaluate content of nursing courses for transferable credit.
- Arrange for interview with student as deemed necessary.
- Make decision regarding student's eligibility for admission or refer to the Nursing Student Policies Committee.

Original Date: May 1974   Number: 1.6
Last Reviewed Date: June 2015   Section: Student Policies

STUDENT WITHDRAWAL FROM RN-BSN PROGRAM

Policy:

1. The student who withdraws from a course, the RN-BSN 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 the RN-BSN 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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BACHELOR OF SCIENCE IN NURSING COMPLETION (RN-BSN) PROGRAM

ACADEMIC AND PRACTICUM POLICIES

Original Date: May 1991   Number: 2.1
Last Reviewed Date: June 2015   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 agency/practicum facility policies. These categories serve as examples by which the student may be evaluated in the area of professional conduct.

In keeping with the CSM mission and "Code of Conduct" (found in the CSM Academic Catalog), and the RN-BSN Philosophy, a student is expected to exhibit professional behavior when performing nursing activities or representing the College in any capacity.

Policy:

1. Professional Conduct
    - Commitment to Nursing
      When in the agency area or any practicum experience, the student should be identified as a College of Saint Mary student by proper uniform, and identification as listed in the Professional Image and Personal Appearance 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 RN-BSN student will be identified as a CSM RN-BSN 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 Practicum Instructor appropriately when she is unable to complete nursing responsibilities, will be absent from the agency setting, or must leave the agency area prior to the end of practicum time. Refer to Policy 2.7: Attendance at Class and Practicum Laboratory.

      The student comes to the agency 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 agency 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: Attendance at Class and Practicum Laboratory.

    - Client Welfare.
      The student is expected to deliver care in a nondiscriminatory and nonjudgmental manner that is culturally sensitive. 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 Practicum Instructor. The student delivers care in a manner that preserves and protects client autonomy, dignity, and rights.

- 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 chain-of-command for clarification. The student's written work/charting is accurate, has a professional appearance, and is completed according to standards of the agency and the College.

  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 practicum objectives, agency requests, and faculty availability. Any changes which affect a student's schedule will be communicated to the student by the Course Coordinator and/or Program Director.

- 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, 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 Dishonesty in the Academic Catalog.

2. Any student nurse who is asked to vacate an agency 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.

3. RN-BSN students are encouraged to maintain current liability insurance while enrolled in practicum courses.

Procedures:

Consequences of Non-Professional Conduct

1. Initial action
   - If displaying unprofessional conduct, the student will be sent away from the classroom, practicum, or laboratory setting by the Instructor or designated authority. The Instructor, or designated authority, 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.

2. Follow-up
   - Any violation of Policy 2.1: Professional Conduct 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, practicum, or laboratory 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.

     Practicum 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: Attendance at Class and Practicum Laboratory. Unprofessional conduct may result in student dismissal from the nursing program.

Original Date: July 1975   Number: 2.2
Last Reviewed Date: June 2015   Section: Student Policies

AUDIT POLICY

Policy:

1. Students out of sequence in nursing classes may be required to complete an audit of previous curriculum content or an individualized independent study before continuing in the RN-BSN program.

2. Conditions of the audit will be determined by the Course Coordinator(s) and approved by the 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 the audit will be based upon recommendation made by the faculty with consideration given to the length of time since the student was last enrolled in the nursing program. Curricular changes during the time the student is out of nursing courses will be taken into consideration when determining the specific audit conditions. 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 RN-BSN program prior to the deadline established by the Nursing Student Policies Committee. This request goes to the 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 more than one year will be required to reapply for admission.

Original Date: September, 1985   Number: 2.3
Last Reviewed Date: June 2015   Section: Student Policies

INDEPENDENT STUDY

Policy:

1. Independent Study in nursing may be an option for students at the discretion of the Program Director for 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 Academic 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:
   - Faculty workload for the semester/year.
   - Faculty expertise related to the area selected for study.
   - 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.

Original Date: March 2002   Number: 2.4
Last Reviewed Date: June 2015   Section: Student Policies

ACADEMIC EVALUATION

Policies:

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

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 or below

2. The RN-BSN program follows the College Academic Catalog for incomplete grades. In addition, if a student receives an incomplete in a course where theory and practicum components must be taken concurrently, both grades will be recorded as an incomplete until successful completion of the requirements.

3. In the RN-BSN program,
   - Nursing courses that have only a theory component are graded as follows: The final theory course grade shall consist of a letter grade.
   - Nursing courses that have both a theory and practicum component are graded as follows: The final theory course grade shall consist of a letter grade. The final practicum course grade shall consist of a letter grade to indicate practicum achievement. Refer to policy 2.5: Failing/Repeating Nursing Courses and Grade Appeal Procedure regarding failure of nursing courses and submitted grades.

4. The course syllabi outline expected criteria and the process of evaluating student achievement in the classroom, lab, and practicum experiences.

5. A student may request an evaluation of progress whenever the need for additional guidance is desired.

6. Upon completion of practicum courses, the student's evaluation form will be placed in the student's permanent folder.

Procedure:

1. The student will:
   - Attend conferences as determined by faculty.

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- 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.
- 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.
- Sign name and date practicum evaluation form. Student signature documents that she has been notified of evaluation, not necessarily agreement with the evaluation. The student may respond to the evaluation in writing.
- Access midterm and final grades by utilizing the designated CSM website.
- Refer to Policy 2.5: Failing/Repeating Nursing Courses and Grade Appeal Procedure, and Policy 2.6: Progression and Graduation, if needed.

2. The faculty will:
   - Orient students to evaluation policies and procedures at the beginning of each course.
   - Meet with the student for practicum evaluation conferences a minimum of twice per semester (at midterm and following completion of the practicum course).
   - Document practicum evaluation conferences on the student practicum evaluation form.
   - Submit the midterm and final grades to the Course Coordinator. Course Coordinator will report grades to the Registrar and the Nursing Student Policies Committee.
   - Present documented evidence of failures to the Nursing Student Policies Committee and make recommendations regarding the student's progress in the program.

Original Date: August 1980   Number: 2.5
Last Reviewed Date: June 2015   Section: Student Policies

FAILING/REPEATING NURSING COURSES AND GRADE APPEAL PROCEDURE

Policy:

1. Nursing courses that have only a theory component are graded as follows: The final theory course grade shall consist of a letter grade. Nursing courses that have both a theory and practicum component are graded as follows: The final theory course grade shall consist of a letter grade. The final practicum course grade shall consist of a letter grade to indicate practicum achievement.

2. In RN-BSN nursing courses, the student must earn a minimum of "C" in both theory and practicum. If a student receives a grade below "C" in theory or practicum the student will be required to repeat both components of the course.

3. Whenever a student withdraws from or 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.

4. 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 and VPAA for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis.

5. A student may withdraw, withdraw failing, and/or fail from only two nursing courses in her current program. If a student withdraws, withdraws failing, and/or 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 and VPAA for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis.

6. This policy applies to all nursing students, including those with ADA accommodations.

Grade Clarification / Appeal Procedure:

1. The student shall:
   - Discuss the grade with the Instructor and Course Coordinator, if applicable, for clarification as to how the course work was evaluated.

- If the student still has concerns about the evaluation, the student shall make an appointment to discuss concerns with the Program Director.
- If concerns remain after these steps, then the student shall make an appointment to discuss concerns with the Nursing Student Policies Committee.

2. The Nursing Student Policies Committee will review nursing student appeals and make recommendations to the Chair, Division of Health Professions and VPAA. The Nursing Student Policies Committee Chairperson shall:

- Review the written appeal submitted by the student.
- Schedule the Nursing Student Policies Committee meeting.
- Provide the written appeal to the Instructor/Course Coordinator, members of the Student Policies Committee, and Program Director.
- Arrange to have the student, Instructor and/or Course Coordinator, and Program Director at the beginning of the meeting for input of data and to answer questions the committee might have.
- Preside over the meeting.
  - Chair of Nursing Student Policies Committee calls group to order.
  - Student presents appeal and circumstances. Time limited to 5 minutes.
  - Instructor and Course Coordinator present rationale for grading decision(s). Time limited to 5 minutes.
  - Nursing Student Policies Committee members may question facts. Time limited to 5 minutes.
  - All non-Nursing Student Policies Committee members asked to leave.
  - Committee makes recommendation; written recommendation with brief rationale based on facts.
  - No discussion of the appeal occurs outside the meeting itself.
- Inform the Chair, Division of Health Professions, and VPAA in writing of the committee's recommendation.
- The student may appeal a specific academic decision that the student considers unwarranted, unjust, or capricious by following the Academic Appeal process as outlined in the College of Saint Mary Undergraduate Catalog, see "Academic Appeals Board." (http://www.csm.edu/Academics/Academic_Catalog/)

Original Date: July 1974   Number: 2.6
Last Reviewed Date: June 2015   Section: Student Policies

PROGRESSION AND GRADUATION

Policy:

1. All RN-BSN students must achieve a minimum grade of C in the following courses: BIO 366 Pathophysiology and MTH 242 Statistics, which are prerequisites or concurrent for 400 Level nursing courses.

2. 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 RN-BSN nursing program.

3. To progress in the nursing program, students must have CSM cumulative GPA of 2.0. Students with a GPA below 2.0 will be reviewed on an individual basis by the Program Director who will notify the Nursing Student Policies Committee (Refer also to the Academic Probation and Dismissal policy in the Academic Catalog).

4. The RN-BSN curriculum is organized so that a student must satisfactorily complete all nursing courses at a given level before progressing to the next level. See CSM College Catalog for course pre-requisite and concurrent course requirements.

5. RN-BSN students who take a Leave of Absence (LOA) for two semesters will be reviewed by the Nursing Student Policies Committee. This behavior may result in dismissal from the nursing program.

6. Academic success is only one requirement for progression in the nursing program. The student must meet Policy 2.1: Professional Conduct and the "Code of Conduct" in the Academic Catalog.

7. Each candidate for graduation from the nursing program must have satisfactorily completed all program requirements and have the required credit hours outlined in the Academic Catalog.

Original Date: May 1979   Number: 2.7
Last Reviewed Date: June 2015   Section: Student Policies

ATTENDANCE AT CLASS AND PRACTICUM LABORATORY

Policy:

Students are responsible to attend **all** scheduled classes and lab/practicum experiences. If a student chooses to miss a class or lab/practicum experience or has an emergency that necessitates missing class, practicum, or laboratory, the student is responsible for communicating with the Instructor and following the actions described below.

Absences are considered to be excused or unexcused. The student is responsible to notify the Practicum Instructor and the practicum agency when she is unable to attend a scheduled practicum assignment. The only exceptions will be when all students will not attend due to weather or other emergencies that make communication impossible.

Procedure:

1. Excused Absences
   - Excused absences are those absences due to illness/personal health situation, personal crisis, or special events (i.e., workshops, college functions)
   - For an excused absence related to a special event (see definition above), the student will notify the Practicum Instructor/Course Coordinator 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 practicum and classroom.
   - When an excused practicum absence is due to illness/personal health situation, the student will see a primary care health practitioner to obtain permission to return to class and practicum area. The Practicum 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 practicum is noted in the student file.
   - In the event of a crisis where the student is unable to notify the Practicum Instructor 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. Students with excused absences meet with Course Coordinator and Program Director to determine specific make-up requirements.
   - Students who have an excused absence for any college laboratory or practicum experience will be brought to the attention of the Course Coordinator for review.
     - An evaluation will be made to determine required make-up activities. The Course Coordinator will inform the student and the Nursing Student Policies Committee if the completion of course objectives becomes a concern.
     - The Practicum Instructor and Course Coordinator will develop a plan/requirement the student needs to complete to meet the practicum objectives.
     - The Practicum Instructor and Course Coordinator will submit the above plan to the Program Director for final approval.

- If course objectives are not met, the Nursing Student Policies Committee may recommend that the student be asked to withdraw from the course or be administratively withdrawn from the RN-BSN program.
- Availability of practicum make-up time cannot be guaranteed for any absence, even though the absence may be an excused one; however, for excused absences every attempt will be made to provide a make-up experience given agency and Preceptor availability considerations.

2. Unexcused Absences
   - An unexcused absence is any absence in which the student has not made contact, made prior arrangements, or upon review by the Practicum Instructor/Course Coordinator is not an approved absence.
   - Unexcused absences from an examination or failure to turn in a graded assignment may result in a grade of zero.
   - Unexcused absences from lab/practicum will result in an Unsatisfactory for the day and are not applicable for makeup.

Original Date: May 1984   Number: 2.8
Last Reviewed Date: June 2015   Section: Student Policies

MISREPRESENTATION OF THEORY AND/OR PRACTICUM 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 CSM Academic Catalog for the Policy for Academic Dishonesty.)

In keeping with the philosophy of College of Saint Mary and the RN-BSN program, a student is responsible for all required theory, practicum 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: Professional Conduct.)

Original Date: April 1977   Number: 2.9
Last Reviewed Date: June 2015   Section: Student Policies

PROFESSIONAL IMAGE AND PERSONAL APPEARANCE

Policy:

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

1. Personal Appearance:
    - 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.
    - Nails should be filed to a moderate length and clean. Bright colored polish may not be worn. Artificial nails and shellac products are not allowed.
    - The only acceptable jewelry to be worn to the practicum 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.
    - No visible tattoos/branding will be allowed. Tattoos/branding must be covered.
    - If make-up is used, it should be applied in a manner that reflects a professional appearance. "Professional appearance" is based on the subjective opinion of practicum faculty and agency policy.

2. Uniform Requirements:
    - 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.

The above policies will be enforced as long as they are congruent with each practicum 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 lab/practicum area if their appearance does not meet the guidelines for professional image and personal appearance.

Original Date: November 1, 1982   Number: 2.10
Last Reviewed Date: June 2015   Section: Student Policies

SMOKING POLICY

<u>Policy:</u>

1. The buildings at College of Saint Mary are smoke-free.

2. Students must follow practicum agency policies related to smoking. There is no smoking during any portion of practicum.

Original Date: January 1978   Number*:* 2.11
Last Reviewed Date: June 2015   Section: Student Policies

SNOW POLICY

Policy:

The RN-BSN program does 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 morning practicum is canceled. Decision about afternoon/evening practicum experience is made later in the day based on weather conditions.

Procedure:

1. Students are responsible to stay informed regarding the cancellation of class by way of news media.

2. When driving conditions could be hazardous, the student is expected to use personal discretion regarding attending practicum experiences.

3. Students should notify the Practicum Instructor, Preceptor, and agency if unable to attend scheduled practicum experience.

Original Date: April 1981   Number: 2.12
Last Reviewed Date: June 2015   Section: Student Policies

MEDICATIONS, INTRAVENOUS THERAPY, AND BLOOD THERAPY

Policy:

Students must comply with written practicum agency policies and procedures when they differ from the CSM policy. The Practicum 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.

Procedure:

RN-BSN students, with the direct supervision of their Preceptor, may do the following:

- Peripheral Lines: May start, regulate, and discontinue.

- 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 staff RN to ensure accuracy.

- Flushes: Peripheral, central lines, ports, and PICC lines with appropriate amounts of saline and/or heparin as needed according to policy.

- 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.

- Continuous Infusions: Administer standard intravenous solutions as well as those with other additives, for example: electrolytes, vitamins, antibiotics, dextran, and albumin. Exceptions include blood, vasopressors, chemotherapeutic agents, insulin, heparin, magnesium sulfate, and oxytocins.

- Regulate Infusions: Students are expected to know the side effects, infusion rate, and observe and document effects on the client. Students may regulate all continuous infusions except blood, vasopressors, chemotherapeutic agents, insulin, heparin, magnesium sulfate, and oxytocins.

- PCA Infusions: Document rate and effectiveness of infusion, change parameters, and clear pump with primary nurse.

- Epidurals: Document rate and effectiveness of infusion and clear pump with primary nurse.

- Central Lines: May not be discontinued by the student.

- Documentation: The student and Preceptor must document according to facility policy.