



**GENERIC  
BACHELOR OF SCIENCE IN NURSING (BSN)  
PROGRAM**

**STUDENT MANUAL**

**2016-2017**

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

The introductory pages give an overview of the nursing curriculum and philosophy of the 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  
Program Director, Undergraduate Nursing

Dr. Kathleen Zajic  
Associate Dean of the Division of Health Professions

COLLEGE OF SAINT MARY  
DIVISION OF HEALTH PROFESSIONS

**Nursing Program Student Manual Notification**

I have been notified that a copy of the Generic Bachelor of Science in Nursing Program Student Manual (containing curriculum material and policies) is located on the MyCSM/Communities/Nursing News website: <https://my.csm.edu/communities/Nursing%20News/Pages/default.aspx>. The 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 Associate Dean of the Division of Health Professions.

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 black ink only

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Student’s Signature – Use black ink only

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Date – Use black 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.*

**COLLEGE OF SAINT MARY**  
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**Core Performance Standards**

College of Saint Mary is committed to providing persons with disabilities equal opportunity for access in programs and activities, as well as reasonable accommodations provided these accommodations do not place an undue burden on the institution or fundamentally alter the nature of the course or program of study.

A profession's essential functions, or performance standards, are considered to be the fundamental duties that one must be able to perform with or without a reasonable accommodation. A student who wishes to be considered for reasonable accommodations at College of Saint Mary must self-identify to the accommodations coordinator as a person who has a disability and is seeking accommodation. College of Saint Mary will make reasonable accommodations that will allow the individual student to perform the essential functions of class or profession unless it causes an undue hardship to the Nursing program at College of Saint Mary. The applicant should consult with the Program Director to discuss any individual circumstance in which she may not be able to meet the essential functions.

Core performance standards/Essential Functions for successful completion of program outcomes include the following: General Ability, Observational Ability, Communication Ability, Motor Ability, Intellectual-Conceptual Ability, Behavioral and Social Attributes, Ability to Manage Stressful Situations, and Background Check/Drug Screening.

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.

I attest I have read *Policy 1.2: Core Performance Standards for Clinical Courses* and declare that I am able to meet the core performance standards as defined in the policy. Any falsification or misrepresentations will be sufficient grounds for my dismissal from the nursing program.

\_\_\_\_\_  
Student (PLEASE PRINT) – Use black ink only

\_\_\_\_\_  
Student's Signature – Use black ink only

\_\_\_\_\_  
Date – Use black ink only

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

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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 clinical 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 BSN program.

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Student (PLEASE PRINT) – Use black ink only

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Student's Signature – Use black ink only

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Date – Use black ink only

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### Confidentiality Agreement

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 clinical 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, and 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 includes, but is not limited to, written information, electronic information, and verbal communication.

I understand that violation of this confidentiality agreement may result in possible fines and civil or criminal penalties under state or federal law, as well as disciplinary or other corrective action, including suspension or dismissal from BSN program at CSM.

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 black ink only

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DIVISION OF HEALTH PROFESSIONS

**Background Investigation Annual Attestation**

I, \_\_\_\_\_, attest that there have been no changes to my background investigation record (including, but not limited to: felony or misdemeanor charges / convictions) since the time of the original background investigation prior to entering Level I nursing courses. If such a change occurs, I agree to contact the Program Director, Dr. Christi Glesmann, immediately.

\_\_\_\_\_  
Student (PLEASE PRINT) – Use black ink only

\_\_\_\_\_  
Student's Signature – Use black ink only

\_\_\_\_\_  
Date – Use black ink only

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



### 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.

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**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.

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

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

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

\_\_\_\_\_  
Date

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

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**COLLEGE OF SAINT MARY**  
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**GENERIC BACHELOR OF SCIENCE IN NURSING (BSN)**

**CURRICULUM MATERIALS**

**COLLEGE OF SAINT MARY**  
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**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 (BSN) Philosophy**

In accordance with the Mission of College of Saint Mary, the nursing faculty believes that:

Nursing is an art and applied science. Professional nursing functions and actions are grounded in a strong liberal arts and science foundation which complement and enhance nursing courses. Nursing is a holistic, caring profession which requires skillful decision making and critical thinking/clinical reasoning skills. Nursing is an essential humanitarian service profession. Nursing practice requires inter-professional collaboration and communication to assist recipients of healthcare to achieve an optimal level of wellness or a dignified death. Nursing care recipients include individuals, families, groups, communities, and populations. Nursing is concerned with health promotion and maintenance along with disease and injury prevention. Nursing roles include: provider of care, designer/manager/coordinator of care, and member of the nursing profession. Nursing practice occurs across the lifespan in rapidly evolving and complex healthcare environments, thus requiring a commitment to life-long learning.

Each human being is a unique individual with inherent rights, dignity, worth, and potential. An individual has basic needs—psychosocial, cultural, intellectual, developmental, spiritual, environmental, and physical. An individual has the capacity to make decisions, to learn, and to change.

Health and illness are viewed as a continuum. Health is influenced by genetics, environment, lifestyle decisions, and behaviors. Health decisions are made in partnership involving the patient and professional health care providers.

Education is the process of developing knowledge, skill, and attitudes of an individual. Learning is the outcome of the education process and is manifested by changes in behavior that persist over time. Learning is evidenced by changes in the way the learner thinks, feels and acts. Education involves active efforts of the learner working in partnership with faculty to implement and achieve identified goals. Each learner is responsible for her own learning. While considering the diverse ages, backgrounds, and life experiences of the learner, faculty facilitates the learner's efforts and evaluates achievement of learning outcomes.

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, constructive guidance, 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.

Professional nursing education requires preparation, at a minimum, involving a baccalaureate nursing curriculum. Our BSN program prepares students to deliver safe, patient-centered care, as members of an interdisciplinary team, emphasizing evidence based practice, quality improvement approaches and informatics, consistent with the Institute of Medicine (IOM) core competencies and Quality and Safety Education for Nurses (QSEN) guidelines (IOM, 2003 and Cronenwett, Sherwood, Barnsteiner, et al., 2007).

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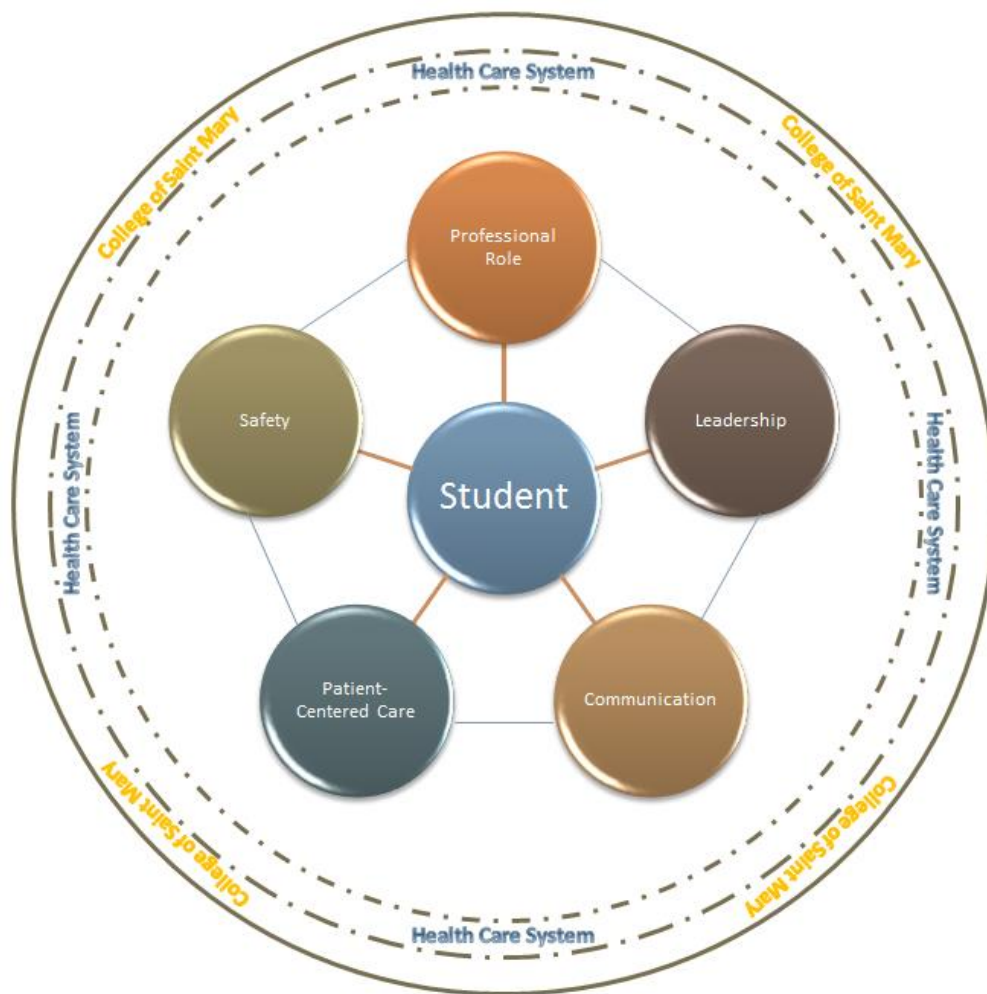
Nursing faculty members are responsible for developing and updating the BSN curriculum to prepare students for entry into professional nursing practice. Nursing courses include classroom theory, skills and simulation labs, and clinical/practicum learning experiences working directly with patients across the lifespan in a variety of practice settings. Nursing care is provided to patients who may be individuals, families, groups, communities and populations with emphasis on health promotion and maintenance along with disease and injury prevention. The BSN educational program provides diverse learning through incorporation of theory, clinical/practicum experiences, preceptorships, and service learning opportunities to broaden student's knowledge, skills, attitudes, and civic responsibilities. Concepts addressed within the baccalaureate curriculum include *patient-centered care, communication, leadership, safety, and professional role*.

Baccalaureate graduates function in a variety of health care settings. As members of the health care team, they may assume a leadership role and function as designers/managers/coordinators of care. In fulfilling the role as a member of the health care team, 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 as members of the nursing profession. Baccalaureate graduates have an understanding of evidence-based practice, nursing research, informatics, and quality improvement processes. Graduates are prepared to pursue advanced education in nursing.

Baccalaureate graduates are prepared to provide safe and competent nursing care within the legally defined scope of practice. (NHHS, Rules and Regulations Governing the Approval of Nursing Programs in Nebraska, 2006).

### BSN Conceptual Framework

The conceptual framework of College of Saint Mary’s Bachelor of Science in Nursing (BSN) program curriculum addresses five major concepts: ***Patient –Centered Care, Communication, Leadership, Safety, and Professional Role.*** The five major concepts form the integrative strands which organize the curriculum and provide guidance for the development of level outcomes and course objectives. The integrative strands are further divided into sub-concepts which are incorporated throughout the BSN curriculum. Nursing faculty use the integrative strands and sub-concepts to identify essential content and plan learning opportunities that build sequentially from one level to the next level in the BSN program. The nursing program draws upon multiple nursing and educational theorists to form a foundation for concept development and strand integration.



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**BSN Program Integrative Strands and Sub-Concepts**

<b>Patient-Centered Care</b>	<b>Communication</b>	<b>Leadership</b>	<b>Safety</b>	<b>Professional Role</b>
<ul style="list-style-type: none"> <li>• Provider of holistic care</li> <li>• Nursing process</li> <li>• Cultural competency</li> <li>• Evidence-based practice</li> <li>• Research</li> <li>• Clinical reasoning/critical thinking</li> <li>• Informatics</li> <li>• Technical skills</li> <li>• Advocacy</li> <li>• Health promotion and maintenance</li> <li>• Disease and injury prevention</li> <li>• Caring</li> <li>• Spirituality</li> <li>• Population based care</li> </ul>	<ul style="list-style-type: none"> <li>• Verbal, non-verbal, and written</li> <li>• Emerging Technologies</li> <li>• Therapeutic communication with individuals, families, groups, communities, and populations</li> <li>• Nursing team</li> <li>• Inter-professional collaboration and communication</li> </ul>	<ul style="list-style-type: none"> <li>• Individual leadership</li> <li>• Manager of care</li> <li>• Professional leadership</li> <li>• Organizational and systems leadership</li> <li>• Civic responsibility</li> </ul>	<ul style="list-style-type: none"> <li>• Accountability</li> <li>• Creating safe care environment</li> <li>• System processes</li> <li>• Transfer of care, discharge planning, and home care</li> <li>• Continuous quality improvement</li> <li>• Emergency preparedness and disaster response</li> </ul>	<ul style="list-style-type: none"> <li>• Core values (honesty, integrity, accountability, respect for human dignity, caring, autonomy, social justice)</li> <li>• Professional behavior and identity</li> <li>• Healthcare policy and regulation</li> <li>• Life-long learning</li> <li>• Legal and ethical practice considerations</li> <li>• End of life care issues</li> <li>• Professional advocacy</li> </ul>



**Leveling of Integrative Strands in BSN Program**

*Patient-Centered Care* includes sub-concepts of provider of holistic care, nursing process, cultural competency, evidence-based practice, research, clinical reasoning/critical thinking, informatics, technical skills, advocacy, health promotion and maintenance, disease and injury prevention, caring, spirituality, and population-based care.

<b>Level One Outcomes</b>	<b>Level Two Outcomes</b>	<b>Level Three Outcomes</b>	<b>BSN Student Learning Outcomes</b>
Begin to apply theories and concepts from required science and humanities courses which provide the foundation for evidence-based nursing practice	Use evidence-based information from the sciences, humanities, and nursing to guide clinical decisions and validate clinical interventions	Synthesize theoretical knowledge and research from the sciences, humanities, and nursing in the provision of patient-centered professional nursing care	Integrate theories and concepts from liberal arts education and nursing education into nursing practice
Use beginning professional nursing technical skills and the nursing process to provide culturally sensitive, holistic care for individuals and families	Demonstrate progression of professional nursing and informatics skills which focus on health promotion and maintenance as well as disease and injury prevention with individuals, families, groups, communities and populations	Demonstrate the ability to think critically while providing safe, individualized, culturally competent, evidence-based, holistic, patient-centered care within and across the health care system	Apply theoretical and empirical knowledge which is based on research and evidence-based practice, in order to be an advocate and provide safe, individualized, and culturally competent patient-centered nursing care

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*Communication* includes sub-concepts of verbal, non-verbal, written, and emerging technological communication, therapeutic communication, communication with the nursing team, and inter-professional collaboration and communication.

<b>Level One Outcomes</b>	<b>Level Two Outcomes</b>	<b>Level Three Outcomes</b>	<b>BSN Student Learning Outcomes</b>
Describe techniques which facilitate professional and therapeutic communication with patients and members of the health care team	Use professional verbal, non-verbal, and written communication skills when interacting with individuals, families, groups, communities, populations, and others within and across the health care system	Demonstrate competent use of contextually appropriate professional communication techniques and incorporation of emerging technological communication in nursing practice	Use effective and professional written, verbal, non-verbal, and emerging technological communication skills/principles when interacting with individuals, families, groups, communities, populations, and others within and across the health care system

*Leadership* includes sub-concepts of individual leadership, manager of care, professional leadership, organizational and systems leadership, and civic responsibility.

<b>Level One Outcomes</b>	<b>Level Two Outcomes</b>	<b>Level Three Outcomes</b>	<b>BSN Student Learning Outcomes</b>
Identify individual leadership characteristics that are needed to carry out nursing roles which include provider of care, designer/manager/coordinator of care, and member of the nursing profession	Use critical thinking and effective leadership skills when providing and managing care for individuals, families, groups, communities, and populations	Value professional/organizational/ and systems leadership opportunities as a responsible citizen and future professional nurse	Demonstrate leadership concepts, critical thinking skills, and ethical reasoning when working with individuals, families, groups, communities, populations, and other members of the healthcare team throughout various health care settings

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*Safety* includes sub-concepts of accountability, creating a safe environment, system processes, transfer of care/discharge planning/home care, continuous quality improvement, and emergency preparedness and disaster response.

<b>Level One Outcomes</b>	<b>Level Two Outcomes</b>	<b>Level Three Outcomes</b>	<b>BSN Student Learning Outcomes</b>
Identify risks and potential threats to patient safety, and the nurse's accountability for initiating actions needed to create and maintain a safe environment	Use knowledge of health care system processes to facilitate and provide a safe environment and efficient transfer of care, discharge planning and home care for patients	Discuss role expectations and engagement of professional nurses in continuous quality improvement activities, emergency preparedness and disaster response while providing a safe environment for patient care	Demonstrate vigilant attention and risk reduction responses to safety-related concerns encountered in all areas of professional nursing practice

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*Professional Role* includes sub-concepts of core values, professional behavior, and integrity which are consistent with the College of Saint Mary mission, health care policy and regulation, life-long learning, legal and ethical practice considerations, end-of-life care issues, and professional advocacy.

<b>Level One Outcomes</b>	<b>Level Two Outcomes</b>	<b>Level Three Outcomes</b>	<b>BSN Student Learning Outcomes</b>
<p>Display professional integrity, responsibility and accountability in nursing practice</p> <p>Discuss core values, legal and ethical standards, and professional advocacy considerations which are the foundation of professional nursing practice</p>	<p>Demonstrate professional integrity, responsibility and accountability in nursing practice</p> <p>Recognize opportunities and constraints which are influenced by health care policy and regulation</p>	<p>Exhibit professional integrity, responsibility and accountability in nursing practice</p> <p>Examine professional role expectations and challenges anticipated during transition period from student to newly licensed nurse including plans for life-long learning, dealing with complex legal/ethical considerations such as end-of-life care issues, and access to health care</p>	<p>Demonstrate professional role behaviors consistent with the mission of College of Saint Mary and legal and ethical standards of conduct</p> <p>Appreciate the pursuit of nursing practice excellence through lifelong learning and professional engagement in order to foster professional growth and development</p>

**BSN Student Learning Outcomes**

Upon completion of the Bachelor of Science in Nursing program, the nursing student will be able to demonstrate the following outcomes:

- Integrate theories and concepts from liberal arts education and nursing education into nursing practice
- Apply theoretical and empirical knowledge, which is based on research and evidence-based practice, in order to be an advocate and provide safe, individualized, and culturally competent patient-centered nursing care.
- Use effective and professional written, verbal, non-verbal, and emerging technological communication skills/principles when interacting with individuals, families, groups, communities, populations, and others within and across the healthcare system.
- Demonstrate leadership concepts, critical thinking skills, and ethical reasoning when working with individuals, families, groups, communities, populations, and other members of the healthcare team throughout various health care settings.
- Demonstrate professional role behaviors consistent with the mission of College of Saint Mary and legal and ethical standards of conduct.
- Appreciate the pursuit of nursing practice excellence through lifelong learning and professional engagement in order to foster professional growth and development.
- Demonstrate vigilant attention and risk reduction responses to safety-related concerns encountered in all areas of professional nursing practice

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**Bachelor of Science in Nursing Plan of Study**

3-Year Track / 128 total credit hours

<b>FALL Year 1 Level 1</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 1 Level 1</b>	<b>CREDIT HOURS</b>	<b>SUMMER Year 1 Level 1</b>	<b>CREDIT HOURS</b>
Chemistry/Lab	4	A & P II/Lab	4	Philosophy 200	3
A & P I/Lab	4	Micro/Lab	4	Psychology 101	3
English 101	3	NUR 101: Fundamentals of Nursing	9	History elective	3
Math 112	3	NUR 102: Fundamentals of Nursing Pharmacology	1		
First-Year Seminar	1				
NUR 100: Intro to Nursing	3				
Total	18	Total	18	Total	9
<b>FALL Year 2 Level 2</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 2 Level 2</b>	<b>CREDIT HOURS</b>	<b>SUMMER Year 2 Level 2</b>	<b>CREDIT HOURS</b>
NUR 200: *Psychiatric- Mental Health Nursing	4	NUR 203: *Maternal Newborn Nursing	4	Philosophy elective	3
NUR 201: *Public Health Nursing	4	NUR 204: *Pediatric Nursing	4	Pathophysiology	3
NUR 202: *Psych/Public Health Pharmacology	1	NUR 205: *Maternal/Child Pharmacology	1	Sociology 101	3
Theology elective	3	NUR 207: Intro to Nursing Research & Evidence-Based Practice	3		
Communications w/Public Speaking	3	Math 242	3		
NUR 206: Cultural and Spiritual Care in Nursing	3	English 200 Level	3		
Total	18	Total	18	Total	9
*Courses offered both fall and spring					
<b>FALL Year 3 Level 3</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 3 Level 3</b>	<b>CREDIT HOURS</b>	<b>SUMMER Year 3 Level 3</b>	<b>CREDIT HOURS</b>
NUR 300: Acute Med- Surgical Nursing	8	NUR 303: Multi- System Med-Surgical	8	NUR 307: Preceptorship	6
NUR 301: Acute Med- Surgical Pharmacology	1	NUR 304: Multi- System Med-Surg Pharmacology	1		
NUR 302: Health Assessment	3	NUR 305: Professional Nursing In The Evolving Healthcare System	2		
Fine Arts elective	3	NUR 306: Nursing Management and Leadership	3		
		Theology elective	3		
Total	15	Total	17	Total	6

**Bachelor of Science in Nursing Plan of Study**

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

4-Year Track / 128 total credit hours

<b>FALL Year 1 General Education</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 1 General Education</b>	<b>CREDIT HOURS</b>		
Chemistry/Lab	4	A & P I/Lab	4		
English 101	3	Communications w/Public Speaking	3		
Math 112	3	History elective	3		
FYS: First-Year Seminar	1	Sociology 101	3		
Psychology 101	3				
Total	14	Total	13		
<b>FALL Year 2 Level 1</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 2 Level 1</b>	<b>CREDIT HOURS</b>		
NUR 100: Intro to Nursing	3	NUR 101: Fundamentals of Nursing	9		
Philosophy 200	3	NUR 102: Fundamentals of Nursing Pharmacology	1		
Micro/Lab	4	Theology elective	3		
English 200 Level	3	Fine Arts elective	3		
A & P II/Lab	4				
Total	17	Total	16		
<b>FALL Year 3 Level 2</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 3 Level 2</b>	<b>CREDIT HOURS</b>		
NUR 200: *Psychiatric- Mental Health Nursing	4	NUR 203: *Maternal Newborn Nursing	4		
NUR 201: *Public Health Nursing	4	NUR 204: *Pediatric Nursing	4		
NUR 202: *Psych/Public Health Pharmacology	1	NUR 205: *Maternal/Child Pharmacology	1		
NUR 206: Cultural and Spiritual Care in Nursing	3	Theology elective	3		
Pathophysiology	3	NUR 207: Introduction to Nursing Research and Evidence-Based Practice	3		
Math 242	3				
Total	18	Total	15		
*Courses offered both fall and spring					
<b>FALL Year 4 Level 3</b>	<b>CREDIT HOURS</b>	<b>SPRING Year 4 Level 3</b>	<b>CREDIT HOURS</b>	<b>SUMMER Year 4 Level 3</b>	<b>CREDIT HOURS</b>
NUR 300: Acute Med- Surgical	8	NUR 303: Multi-System Med-Surgical	8	NUR 307: Preceptorship	6
NUR 301: Acute Med- Surgical Pharmacology	1	NUR 304: Multi-System Med-Surgical	1	Total	6
NUR 302: Health Assessment	3	NUR 305: Professional Nursing In The Evolving Healthcare System	2		
Philosophy elective	3	NUR 306: Professional Nursing In The Evolving Healthcare System	3		
Total	15	Total	14		

### Student Communication and Involvement Opportunities

Students are welcomed and encouraged to communicate openly with faculty and administration. The following are ways to become involved with the business of the Undergraduate Nursing Program:

- Undergraduate Nursing Program Meetings: Program meetings are held monthly. Contact the Program Director, Dr. Christi Glesmann ([Cglesmann@CSM.edu](mailto:Cglesmann@CSM.edu)), to add agenda items for discussion at these meetings.
- Communication Tool: The communication tool is located on MyCSM/Communities/Nursing News. Please use this tool to communicate suggestions and/or concerns. The completed communication tool should be submitted to the Program Director, Dr. Christi Glesmann ([Cglesmann@CSM.edu](mailto:Cglesmann@CSM.edu)).
- College of Saint Mary Student Nurses' Association (SNA): SNA Officers may be contacted for program feedback, suggestions, and/or concerns. The list of SNA Officers, with contact information, is located on MyCSM/Communities/Nursing News.

#### Division Contact Information:

- Associate Dean of the Division of Health Professions
  - Dr. Kathleen Zajic
    - Phone: (402) 399-2638
    - Email: [KZajic@CSM.edu](mailto:KZajic@CSM.edu)
- Director of Undergraduate Nursing
  - Dr. Christi Glesmann
    - Phone: (402) 399-2642
    - Email: [Cglesmann@CSM.edu](mailto:Cglesmann@CSM.edu)
- Health Professions Skills and Simulation Center Coordinators
  - Tracey Green
    - Phone: (402) 399-2363
    - Email: [TGreen@CSM.edu](mailto:TGreen@CSM.edu)
  - Brittney Fritzinger
    - Phone: (402) 399-2643
    - Email: [BFritzinger@CSM.edu](mailto:BFritzinger@CSM.edu)
- Student Nurses' Association Faculty Advisors
  - Tracey Green
    - Phone: (402) 399-2363
    - Email: [TGreen@CSM.edu](mailto:TGreen@CSM.edu)
  - Jamie Hilderbrand
    - Phone: (402) 399-2604
    - Email: [JHilderbrand@CSM.edu](mailto:JHilderbrand@CSM.edu)



## Glossary of Terms

**Clinical competence:** Clinical competence involves action and demonstration of both physical and cognitive skills used in the practice environment (Schroeter, 2008).

**Clinical reasoning:** The process used to assimilate information, analyze data, and make decisions regarding patient care (AACN, 2008).

**Communication:** An interaction between a health care professional and patient that aims to enhance the patient's comfort, safety, trust, or health and well-being (Venes, 2013).

**Critical thinking:** All or part of the process of questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application, and creativity. Critical thinking underlies independent and interdependent decision making (AACN, 2008).

**Cultural competence:** 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).

**Cultural sensitivity:** Cultural sensitivity is experienced when neutral language, both verbal and non-verbal, is used in a way that reflects sensitivity and appreciation for the diversity of another. It can be expressed through behaviors that are considered polite and respectful to others (e.g. choice of words, use of distance, etc.). Cultural sensitivity may also be conveyed through words, phrases, and categorizations that are intentionally avoided, especially when referring to any individual who may interpret them as impolite or offensive (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).

**Designer/Manager/Coordinator of care:** As the provider of care, the nurse assesses patient resources, strengths and weaknesses, coping behaviors, and the environment to optimize the problem-solving and self-care abilities of patients. The nurse plans therapeutic interventions in collaboration with patients and interdisciplinary team. The nurse takes responsibility for coordination of care that involves other health professionals or resources, providing continuity and helping patients deal effectively with the health care system. The nurse promotes what is best for patients, ensuring that needs are met, and rights are protected (Cherry & Jacob, 2014).

**Evidenced-based practice:** Care that integrates best research with clinical expertise and patient values for optimum care (AACN, 2013).

**Health:** A state of complete physical, social, and mental well-being, and not merely the absence of disease or infirmity. Health is a resource for everyday life, not the object of living, and is a

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positive concept emphasizing social and personal resources as well as physical capabilities. Health is a fundamental human right (WHO, 2013).

**Health care team:** The patient plus all of the healthcare professionals who care for the patient. The patient is an integral member of the healthcare team (AACN, 2008).

**Health care system:** The complete network of agencies, facilities, and all providers of health care in a specific geographical area. Nursing services are integral to all levels and patterns of care, and nurses form the largest number of providers in a health care system (Myers, 2009).

**Health promotion:** Any activity undertaken for the purpose of achieving a higher level of health and well-being (Berman & Snyder, 2012).

**Holistic care:** A system of comprehensive or total patient care that considers the physical, emotional, social, economic, and spiritual needs of the person; his or her response to illness; and the effect of the illness on the ability to meet self-care needs (Myers, 2009).

**Illness:** A highly personal state in which the person feels unhealthy or ill which may or may not be related to disease (Berman & Snyder, 2012).

**Information Technology/Health care informatics:** The study of how health care data, information, knowledge, and wisdom are collected, stored, processed, communicated, and used to support the process of health care delivery to patients, providers, administrators, and organizations involved in health care delivery (Venes, 2013).

**Interdisciplinary team:** Working across healthcare professions to cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable. The team consists of the patient, the nurse, and other healthcare providers as appropriate (AACN, 2008).

**Job placement rates:** Number of graduates, one year after graduation, employed in a position for which the program prepared them (ACEN, 2013).

**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 the National Council Licensure Examination for Registered Nurses (NCLEX-RN) for first-time writers (ACEN, 2013).

**Member of the nursing profession:** Core nursing roles include provider of care, a member of the profession, and a manager of patient care. As a member of the nursing profession, one will use the nursing process, demonstrate therapeutic communication skills, identify and practice within legal and ethical guidelines, demonstrate self-directed learning, and adhere to codes of conduct (Wywiałowski, 2004).

**Nursing research:** A process of systematic inquiry or study to build knowledge in nursing. The purpose of nursing research is to affect the direct provision of nursing and health care to

recipients of nursing care as well as to generate knowledge in areas that affect nursing care processes indirectly (Cherry & Jacob, 2014).

**Nursing Process:** A systematic rational method of planning and providing nursing care (Berman & Snyder, 2012).

**Observational Experience:** An assignment to a facility or unit where students observe the role of the facility and the role of nurse within the facility, but where students do not participate in direct patient care. Direct faculty or preceptor supervision is not required for an observational experience outside the clinical facility. Observational experiences may be used to supplement, but not replace direct patient care experiences (NHHS, 2006).

**Patient:** The recipient of nursing care or services. Patients may be individuals, families, groups, communities, or populations. Further, patients may function in independent, interdependent, or dependent roles, and may seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of-life care. Depending on the context or setting, patients may, at times, more appropriately be termed clients, consumers, or customers of nursing services (AACN, 2008).

**Patient-centered care:** Includes actions to identify, respect, and care about patients' differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (AACN, 2008).

**Partnership:** An agreement (formal relationship) between a nursing education unit/governing organization and an outside agent/agency to accomplish specific objectives and goals over a period of time. This does not include clinical agreements for student learning experiences required by the nursing program (ACEN, 2013).

**Population:** A collection of individuals having personal or environmental characteristics in common (AACN, 2008).

**Preceptor:** An experienced registered nurse who provides direct supervision of student clinical learning experiences at the clinical agency where the preceptor is employed. The preceptor acts as a facilitator of student learning and serves as a role model who is immediately available in the clinical setting. Preceptors are employed by the agency where the student is placed for clinical experience (NHHS, 2006).

**Professional Nurse:** An individual prepared with a minimum of a baccalaureate in nursing (AANC, 2008).

**Professional standards/guidelines for practice:** Statements of expectations and aspirations providing a foundation for professional nursing behaviors of graduates of baccalaureate, master's, and professional doctoral programs. Standards are developed by a consensus of professional nursing communities who have a vested interest in the education and practice of

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nurses. The professional nursing standard and guidelines are established through: state rules and regulations, nationally recognized accrediting agencies and professional nursing specialty organizations, national and institutional educational organizations, and health care agencies used in the education of nursing graduates (CCNE, 2009).

**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 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 measurable, consumer-orientated indexes designed to evaluate the degree to which the program is achieving its mission and goals (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).

**Quality improvement:** An organization's commitment and approach used to continuously improve all processes in the organization with the goal of meeting and exceeding customer expectations and outcomes (Berman & Snyder, 2012).

**Safety:** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance (QSEN, n.d.).

**Service Learning:** A teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experiences, teach civic responsibility, and strengthen communities (National Service Learning Clearinghouse, 2013).

**Simulation:** An activity that mimics the reality of the clinical environment that is designed to demonstrate procedures, decision-making, and critical thinking through techniques such as role-playing and the use of devices (AANC, 2008).

**Wellness:** Wellness is the optimal state of health of individuals or groups. There are two focal concerns: the realization of the fullest potential of an individual physically, psychologically, socially, spiritually, and economically; and the fulfillment of one's role expectations in the family, community, place of worship, workplace and other settings (Smith, Tang, & Nutbeam, 2006).

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**GENERIC BACHELOR OF SCIENCE IN NURSING (BSN)**

**ADMINISTRATIVE POLICIES**

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

Original Date: March 2014  
Last Reviewed Date: August 2016

Number: 1.1  
Section: Student Policies

**ADMISSION TO BSN PROGRAM**

Policy:

1. Students desiring admission to the 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 laboratory/clinical 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
  - results of ACT scores
  - A personal interview may be requested by the Program Director.
3. If the applicant meets the criteria for nursing, she is notified of her acceptance in writing.



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**Admission Criteria**

**BSN 3-Year Track**

Criteria for admission into the BSN 3 track for *\*recent high school graduates* are as follows:

- High school chemistry
- High school physical science
- High school cumulative grade-point average of 3.0 (B) or higher
- 23 composite score on ACT
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

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

**BSN 4-Year Track**

Criteria for admission into the BSN 4 track for *\*recent high school graduates* are as follows:

- High school chemistry
- High school physical science
- High school grade-point average of 2.75 (C+)
- 21 composite score on ACT
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

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

**BSN 3-Year Track Applicant with College Transfer Credit**

Criteria for admission into the BSN program for college transfer students are as follows:

- Cumulative grade-point average of at least 2.75.
- Satisfactory completion of at least 12 semester hours (not to include developmental courses) including two CSM nursing program required sciences OR satisfactory completion of at least 21 CSM nursing program required (general education curriculum) courses credits.
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

**LPN to BSN Track**

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

- Provide verification of Practical Nurse License in good standing (unencumbered) with the State of Nebraska or compact state
- Cumulative grade-point average of at least 2.75
- Completion of NUR 100: Introduction to Nursing “Challenge Exam” during fall semester (required prior to enrollment in NUR 101) (Policy 1.7)
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

**BSN PRE-NURSING STUDENTS**

Criteria for admission into the BSN program for pre-nursing students are as follows:

- Cumulative grade-point average of at least 2.75 with satisfactory completion of at least two CSM nursing program required sciences.
- Satisfactory completion of at least 12 semester hours (not to include developmental courses)
- Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)

Original Date: March 2014  
Last Revised Date: August 2016

Number: 1.2  
Section: Student Policies

### **CORE PERFORMANCE STANDARDS FOR CLINICAL COURSES**

College of Saint Mary is committed to providing persons with disabilities equal opportunity for access in programs and activities, as well as reasonable accommodations provided these accommodations do not place an undue burden on the institution or fundamentally alter the nature of the course or program of study.

Policy: A profession's essential functions, or performance standards, are considered to be the fundamental duties that one must be able to perform with or without a reasonable accommodation. A student who wishes to be considered for reasonable accommodations at College of Saint Mary must self-identify to the accommodations coordinator as a person who has a disability and is seeking accommodations. College of Saint Mary will make reasonable accommodations that will allow the individual student to perform the essential functions of class or profession unless it causes an undue hardship to the Nursing Program at College of Saint Mary. The applicant should consult with the Program Director to discuss any individual circumstance in which she may not be able to meet the essential functions.

Core Performance Standards/Essential Functions for successful completion of program outcomes include the following:

- **General Ability:**
  - The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses is integrated, analyzed and synthesized in a consistent and accurate manner. The student is expected to possess the ability to perceive pain, pressure, temperature, position, vibration, and movement in order to effectively evaluate patients. A student must be able to respond promptly to urgent situations.
- **Observational Ability:**
  - The student must have the ability to make accurate visual observations and interpret them in the context of clinical/laboratory activities and patient care experiences. The student must be able to document these observations accurately.
- **Communication Ability:**
  - The student must communicate effectively verbally and non-verbally to obtain information and explain that information to others. Each student must have the ability to read, write, comprehend and speak the English language to facilitate communication with patients, family members, and other members of the health care team. The student must be able to document and maintain accurate records, present information in a professional manner and provide patient instruction to effectively care for patients and their families.
- **Motor Ability:**
  - The student must be able to perform gross and fine motor movements with sufficient coordination needed to provide complete physical assessments and provide safe effective care for patients. The student is expected to have

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psychomotor skills necessary to perform or assist with procedures, treatments, administration of medications, and emergency interventions including CPR if necessary. The student must have sufficient levels of neuromuscular control and eye-to-hand coordination as well as possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, and physical exertion required for safe patient care. Students must be able to bend, squat, reach, kneel or balance. Clinical settings may require that students have the ability to carry and lift loads from the floor, from 12 inches from the floor, to shoulder height and overhead. The student must be able to occasionally lift 50 pounds, frequently lift 25 pounds, and constantly lift 10 pounds. The student is expected to be able to maintain consciousness and equilibrium and have the physical strength and stamina to perform satisfactorily in clinical settings.

- Intellectual –Conceptual Ability:
  - The student must have the ability to develop problem-solving skills essential to professional nursing practice. Problem solving skills include the ability to measure, calculate, reason, analyze, synthesize objective and subjective data, and to make decisions in a timely manner that reflect thoughtful deliberation and sound clinical judgment. The student must demonstrate application of these skills and possess the ability to incorporate new information from peers, instructors, and from the nursing and healthcare literature to demonstrate sound judgment to establish care plans and priorities in patient care activities.
- Behavioral and Social Attributes:
  - The student is expected to have the emotional stability required to exercise sound judgment, and complete assessment and intervention activities. Compassion, integrity, motivation, and concern for others are personal attributes required of those in the nursing program. The student must fully utilize intellectual capacities that facilitate prompt completion of all responsibilities in the classroom and clinical settings; the development of mature, sensitive, and effective relationships with patients and other members of the health care team. The ability to establish professional rapport with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. Each student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; and effectively collaborate in the clinical setting with other members of the healthcare team.
- Ability to Manage Stressful Situations:
  - The student must be able to adapt to and function effectively in stressful situations encountered in both the classroom and clinical settings, including emergency situations. Students will encounter multiple stressors while in the nursing program. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program related.
- Background Check/Drug Screening:
  - Clinical facilities require that College of Saint Mary perform drug testing and background checks on all students before they are allowed to participate in clinical experiences. Therefore, students will be required to have a background

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check performed and submit to drug screening before being allowed into laboratory and clinical practice.

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 2014  
Last Revised Date: August 2016

Number 1.3  
Section: Student Policies

## NURSING PROGRAM REQUIREMENTS

### Policy:

To ensure College of Saint Mary students are in compliance with college and clinical agency requirements and mitigate the risk of injury and/or communicable disease transmission, the nursing program requires all students to continuously meet CPR requirements, Clinical Agency Requirements, and Health Requirements. The student must comply with such requirements. Failure to do so will result in the ineligibility to attend laboratory, clinical, and preceptorship experiences.

### 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/clinical 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 the nursing program.
  - 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 Program Director.
  - 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.
  - 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 upon graduation. Boards of Nursing will make independent decisions on eligibility requirements as stated in the law (Neb. Statutes 38-2220).
- 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:

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- 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 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/clinical 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 and provide documentation to the nursing program in the form of an updated Health Clearance Card.

#### 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 clinical area with appropriate faculty.

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- 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/clinical 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/clinical 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.

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Original Date: March 2014  
Last Reviewed Date: August 2016

Number: 1.4  
Section: Student Policies

**READMISSION TO THE BSN PROGRAM**

Policy:

1. The student who has withdrawn or has been terminated from the BSN program and wishes to be readmitted will be considered for readmission by the Program Director and/or 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 BSN program to anticipated date of readmission
  - The amount of time elapsed from withdrawal or termination from the 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 BSN program must complete the application process according to Policy 1.1: Admission to BSN Program.



Original Date: March 2014  
Last Revised Date: August 2016

Number: 1.5  
Section: Student Policies

### **TRANSFER FROM ANOTHER NURSING PROGRAM**

Policy:

1. Admission may be granted to the student who qualifies for transfer from an accredited program in nursing.
  - The student who wishes to transfer must fulfill the following requirements before being considered for admission:
    - Fulfill admission requirements of Policy 1.1: Admission to BSN Program.
    - Present a minimum overall grade point average of 2.75.
    - Provide favorable reference(s) from the school from which she is transferring.
    - Submit all application materials in advance of admission date.
2. Students are subject to Policy 1.3: Nursing Program Requirements.
3. 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.

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Original Date: March 2014  
Last Revised Date: August 2016

Number: 1.6  
Section: Student Policies

**STUDENT WITHDRAWAL FROM BSN PROGRAM**

Policy:

1. The student who withdraws from the BSN program, and/or the College, and/or changes major of study follows the procedure described in the College Academic Catalog.

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Original Date: March 2014  
Last Reviewed Date: August 2016

Number: 1.7  
Section: Student Policies

**“CHALLENGE EXAM” FOR LICENSED PRACTICAL NURSE (LPN) APPLICANTS  
SEEKING PLACEMENT INTO BSN PROGRAM**

Policy:

1. Credit evaluation for students who meet other criteria for admission to the BSN program will be completed in accordance with college procedure.
2. The student must complete the NUR 100: Introduction to Nursing “Challenge Exam” during fall semester (required prior to enrollment in NUR 101).
3. 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 BSN program in its entirety.
4. Students must submit the “Alternatives for College Credit” form as directed prior to registration to take the “Challenge Exam.”
5. After successful completion of the “Challenge Exam,” credits (3) will be placed on the transcript for NUR 100: Introduction to Nursing. The student will be placed into the second semester of Level 1 BSN courses.
6. If a student is unsuccessful on the NUR 100: Introduction to Nursing “Challenge Exam”, then the student cannot progress in nursing until the student takes and successfully completes NUR 100.

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**GENERIC BACHELOR OF SCIENCE IN NURSING (BSN)**

**ACADEMIC AND LABORATORY/CLINICAL POLICIES**

Original Date: March 2014  
Last Reviewed Date: August 2016

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 CSM mission and "Code of Conduct" (found in the CSM Academic Catalog), and the 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 clinical area or any clinical 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 BSN student will be identified as a CSM nursing student (CSM SN) 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: Attendance at Class and Clinical Laboratory.

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: Attendance at Class and Clinical 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

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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.

- **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 clinical objectives, clinical facility 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 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.

Procedures:

Consequences of Non-Professional Conduct

1. 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.

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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, clinical, 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.

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

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Original Date: March 2014  
Last Reviewed Date: August 2016

Number: 2.2  
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 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 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.



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Original Date: March 2014  
Last Revised Date: August 2016

Number: 2.3  
Section: Student Policies

**ACADEMIC EVALUATION**

Policies:

1. The scale for the percentage method of grading in the 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 BSN program follows the College Academic Catalog for incomplete grades.

3. In the 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 clinical component are graded as follows: A final theory grade of 79% or higher and a “Satisfactory” (S) clinical grade are required to successfully pass a nursing theory/clinical course. A grade below 79% in theory and/or a grade of “Unsatisfactory” (U) in clinical will require that the entire course (theory and clinical components) be repeated. The final course grade will reflect the letter grade earned in the theory component of the course. However, if the student achieves a final theory grade of 79% or higher and an “Unsatisfactory” (U) grade in the clinical component, an “Unsatisfactory” (U) will be given for the final course grade.
  - Each nursing course has specific grading criteria. Please see individual course syllabi for additional grading information.

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Original Date: March 2014  
Last Revised Date: August 2016

Number: 2.4  
Section: Student Policies

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

Policy:

1. A student may withdraw, withdraw failing, and/or fail from only two nursing courses in her current program. A student who withdraws, withdraws failing, and/or fails two theory/lab or theory/clinical courses will be dismissed from the program.

Grade and/or Dismissal 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 Academic Advisor and Program Director.
  - If concerns remain after these steps, then the student shall submit a written appeal request to the Program Director and come before the Nursing Student Policies Committee.
2. The Nursing Student Policies Committee will review nursing student appeals and make recommendations to the Associate Dean of the Division of Health Professions.
3. 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/](http://www.csm.edu/Academics/Academic_Catalog/))

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Original Date: March 2014  
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Number: 2.5  
Section: Student Policies

**PROGRESSION AND GRADUATION**

Policy:

1. All BSN students are required to achieve a minimum grade of “C” in the following courses: All required sciences (Chemistry and Biology courses), PHL 200: Moral Reasoning, PSY 101: General Psychology, and MTH 242: Statistics to be allowed to progress to the next level in the BSN curriculum.
2. The BSN program 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.
3. 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 BSN nursing program.
4. 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).
5. 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: March 2014  
Last Reviewed Date: August 2016

Number: 2.6  
Section: Student Policies

## ATTENDANCE AT CLASS AND CLINICAL LABORATORY

### Policy:

Students are responsible to attend **all** scheduled classes and lab/clinical experiences. If a student chooses to miss a class or lab/clinical experience or has an emergency that necessitates missing class, clinical, 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 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 emergencies that make communication impossible.

### Procedure:

#### 1. Excused Absences

- Excused absences are those absences due to illness, 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 Clinical 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 clinical and classroom.
- 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.
- In the event of a crisis where the student is unable to notify the Clinical 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 clinical 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 Clinical Instructor and Course Coordinator will develop a plan/requirement the student needs to complete to meet the clinical objectives.
  - The Clinical Instructor and Course Coordinator will submit the above plan to the Program Director for final approval.

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- 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 BSN program.
- Additional clinical time at the clinical site will be scheduled to make-up excused absences in excess of 20% of the total number of clinical hours for the course.
- Availability of clinical 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 clinical site and Instructor availability considerations. Arrangements are made by the Program Director with coordinator input to obtain faculty and clinical site dates and times for clinical make-up.

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 Clinical 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/clinical will result in an Unsatisfactory for the day and are not applicable for makeup.

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Original Date: March 2014  
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Number: 2.7  
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 CSM Academic Catalog for the Policy for Academic Dishonesty.) Any academic honesty violations may be cause for dismissal.

Original Date: March 2014  
Last Revised Date: August 2016

Number: 2.8  
Section: Student Policies

## PROFESSIONAL IMAGE AND PERSONAL APPEARANCE

### Policy:

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

#### 1. Personal Appearance and Hygiene:

- 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 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.
- 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.
- Students shall be free of body odor, strong perfumes, and/or the smell of smoke.
- “Professional appearance” is based on the subjective opinion of clinical faculty and agency policy.

#### 2. Uniform Requirements:

- Student uniforms will consist of a preselected uniform top with CSM logo, pants, and a white cardigan-length lab jacket with CSM logo. White turtlenecks or white long-sleeved tee shirts may be worn under the top.
- Students may wear a white lab jacket with the CSM logo on the upper left chest in the clinical area, unless otherwise directed.
- A CSM photo identification is a part of the student uniform.
- Uniforms are required to be worn for all pre-lab experiences, tours, and/or observational experiences. Jeans, sweatpants, or shorts may not be worn under lab coats or at any time in the clinical agency.
- Professional, closed, mostly 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.
- While in surgery, mental health nursing, and maternal/newborn settings, 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

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regarding student dress code. Students will be asked to leave the lab/clinical 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 lab/clinical courses. Students who need maternity uniforms should consult with the Program Director.



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Original Date: March 2014  
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Number: 2.9  
Section: Student Policies

**SMOKING POLICY**

Policy:

1. The buildings at College of Saint Mary are smoke-free.
2. There is no smoking during any portion of clinical.

Original Date: March 2014  
Last Reviewed Date: August 2016

Number: 2.10  
Section: Student Policies

## **MEDICATIONS, INTRAVENOUS THERAPY, AND BLOOD THERAPY**

### Policy:

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

### Procedure:

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 as well as 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.
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, and albumin. Exceptions include blood, vasopressors, chemotherapeutic agents, insulin, heparin, magnesium sulfate, and oxytocins.
6. 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.
7. PCA Infusions: Document rate and effectiveness of infusion, change parameters and clear pump with primary nurse.
8. Epidurals: Students are expected to know the indications, side effects, infusion rate, and observe for effects. Students may not perform any cares in relation to the epidural.
9. Central Lines: May only observe removal of the central line.
10. Documentation: The student and Clinical Instructor must document according to facility policy.

Original Date: August 2016  
Last Revised Date: August 2016

Number: 2.11  
Section: Student Policies

## **MEDICATION CALCULATION AND ADMINISTRATION COMPETENCY POLICY**

### Policy:

The purpose of the Medication Calculation and Administration Competency assessment is to ensure delivery of safe client care. Competency will be assessed throughout the program.

### Procedure:

- After instruction of medication calculation and administration content in each of the theory/clinical courses, students will have a competency assessment.
- Medication calculation and administration competency must be demonstrated (as evidenced by an 88%) prior to the conclusion of the course.
- If a student is unsuccessful, remediation with the faculty member in the Health Professions Skills and Simulation Center must occur prior to a subsequent attempt.
- The competency assessment may be retaken.
- The students who do not successfully complete the competency assessment, will be required to complete remediation with Nursing Faculty and/or Lab Coordinators in the Health Professions Skills and Simulation Center the subsequent semester.