



**PRACTICAL NURSING CERTIFICATE
PROGRAM**

STUDENT MANUAL

2022

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, Practical Nursing Certificate program. These policies will outline requirements, expectations, and answer questions about the PNC 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 PNC program.

The introductory pages give an overview of the nursing curriculum and philosophy of the PNC 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. Jennifer Kuchta

Jennifer Kuchta, EdD, MSN, MBA, RN
Director, Practical Nursing Certificate Program

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Nursing Program Student Manual Notification

I have been notified that a copy of the Practical Nursing Certificate Program Student Manual (containing curriculum material and policies) is located on the MyCSM website: <https://my.csm.edu/communities/PN/default.aspx> The PNC Program Student Manual is located at the bottom of the page under “Document Library.”

I attest I have read the policies in full this week and directed any questions about the policies to my Instructor, Academic Advisor, Program Director, or Division Chairperson.

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

Student (PLEASE PRINT)

Student's Signature

Date

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

An electronic version of this document will be signed and retained in the Student's Academic Advising File.

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Core Performance Standards

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

The applicant must decide if she has any limitations that may restrict or interfere with satisfactory performance of any of the core performance standards. It is the responsibility of the applicant to meet the standards outlined below, and to request those accommodations that she feels are reasonable and necessary to perform the core performance standards. Technological adaptations can be made for some disabilities; however, a student must perform in a safe and reasonably independent manner. It is not acceptable to use a trained intermediary, as a student's judgment may be influenced by someone else's observations.

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

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

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

I have read the above and declare that I am able to meet the core performance standards. Any falsification or misrepresentations will be sufficient grounds for my dismissal from the nursing program. _____

Student (PLEASE PRINT)

Student's Signature

Date

An electronic version of this document will be signed and retained in the Student's Academic Advising File.

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Student Affiliation Agreement for Health Care Agencies

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

1. To be available for 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.
8. To notify of any termination actions from any possible clinical affiliate to the Program Director to determine eligibility for clinical placement.

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

Student (PLEASE PRINT)

Student's Signature

Date

An electronic version of this document will be signed and retained in the Student's Academic Advising File.

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A Student's Guide to HIPAA

Just What is HIPAA?

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

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

Examples of PHI include:

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

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

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

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

Student (PLEASE PRINT)

Student's Signature

Date

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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 PNC program at CSM.

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

Student (PLEASE PRINT) – Use black ink only

Student’s Signature – Use black ink only

Date – Use black ink only

An electronic version of this document will be signed and retained in the student’s Academic Advising File.

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Confidentiality Agreement for 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 and 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.

Student (PLEASE PRINT)

Student's Signature

Date

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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 the right and permission to College of Saint Mary to use and publish the photography, audio and/or visual recordings of any or all sessions made of me by College of Saint Mary, and hereby release the College from any and all liability from its use and publication of 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. I release and waive any claims or rights of compensation or ownership regarding such uses and understand that all such recordings shall remain the property of College of Saint Mary.

Student (PLEASE PRINT)

Student's Signature

Date

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Practical Nursing Certificate Program (PNC)

CURRICULUM MATERIALS

College of Saint Mary Mission Statement

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

- **Excellence**
We share a passionate commitment to Mission that drives us to achieve academic distinction, foster leadership and nurture the love of lifelong learning.
- **Service**
Our culture is characterized by our commitment to servant leadership and social responsibility where we strive to understand and attend to the needs of our community in a spirit of mutuality, addressing the concerns of our times.
- **Dignity**
Our profound respect for all of creation calls us to honor the sacredness of one another, care for the earth and recognize the presence of God in all things.
- **Compassion**
In solidarity, we extend our spirit of mercy in all relationships, caring for the joys and sorrows, hopes and dreams of others.
- **Inclusivity**
Our welcoming and hospitable environment reflects a diverse collegial community that honors all cultures and cares for the global community.
- **Integrity**
We uphold the trust people place in us by demonstrating wholeness of character, stewarding the gifts we have been given and caring for the well-being of our body, mind and spirit

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Practical Nursing Philosophy

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

Nursing is an art which promotes an individual's commitment to the well-being of others, the quality of mercy and compassion, and the healing power of the human relationship. As an applied science, nursing is grounded in a strong liberal arts and science foundation. Nursing is a holistic, compassionate, and caring profession which requires integrity, skillful decision making, and critical thinking. Nursing is an essential humanitarian service profession and requires interprofessional collaboration. Nursing occurs across the lifespan in rapidly evolving and complex healthcare environments, thus requiring a commitment to lifelong learning.

Human beings are unique individuals with inherent rights, dignity, worth, and potential. An individual interacts with the ever-changing environment which impacts their decisions, learning, and ability to change. Individuals have the inherent right to participate in activities that affect their health status and therefore are responsible for their own actions. The nurse brings the art and science into every encounter with the patient, without bias or prejudice.

Health is viewed as a dynamic continuum of wellness and illness in individuals, families, groups, communities, and populations. Healthcare is an interprofessional, collaborative effort focused on health promotion and maintenance, illness care, rehabilitation, and end-of-life care. The pursuit of health is the right and responsibility of each individual. CSM nursing is committed to all dimensions of the human life: physical, mental, social, spiritual, and emotional in an effort to reach optimal health and well-being.

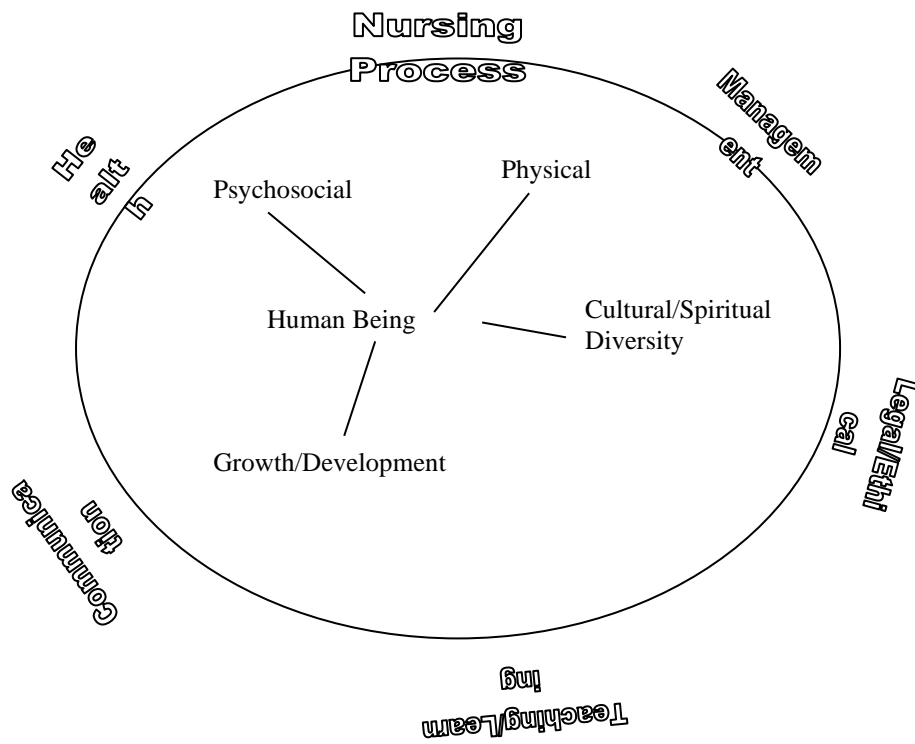
Education is the process of developing an individual's knowledge, skills, and critical thinking. Learning, the outcome of education, is influenced by conditions in the environment. A conducive learning environment includes: open discourse, inclusivity, constructive guidance, opportunity for creativity, recognition and acceptance of responsibility, participation in decision making, and cooperative relationships. College of Saint Mary and the nursing faculty provide an environment in which individuals are free to explore and develop personally, professionally, and intellectually.

Nursing education is the development of knowledge, skills, critical thinking, and values to promote scholarship, service, social responsibility, and academic excellence. Our nursing programs prepare graduates to function in an increasingly complex healthcare system that includes responding to global, technological, and environmental issues in accordance with their level of education and practice. The nurse involves the individual as a partner in care and strives to ensure that they are well-informed on their health journey.

Program Organizing Framework

Created: November 2008

Revised: April 2011



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PNC Student Learning Outcomes

Upon completion of the Practical Nursing Certificate program, the nursing student will be able to demonstrate the following outcomes:

1. Recognize abnormal alterations in clients across the life span.
2. Contribute to health assessment, establishing nursing diagnoses, the development of individualized care plans, implementing the care plan, and evaluating the patient's response to nursing interventions.
3. Utilize nursing care plans as they relate to selected alterations in care of the individual client.
4. Apply therapeutic communication skills in interactions with the client and health care team.
5. Demonstrate an understanding of the legal, ethical, and professional responsibilities related to the role of a practical nurse.
6. Apply the principles of human growth and development in client care across the life span.
7. Contribute to patient education as directed by the registered nurse consistent with the identified learning needs of individuals, families, and groups.
8. Incorporate cultural and spiritual diversity principles while providing individualized nursing care.
9. Implement basic management principles when working with members of the interdisciplinary treatment team.

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Plan of Study

Practical Nursing Certificate

SUPPORTING COURSES	7	COMP	GRD	MAJOR PROGRAM COURSES	35	COMP	GRD
BIO 120 Prin. Of Anat & Phy	3			PNC 101 Intro to Practical Nurs	3		
BIO 121 A&P lab OR	1			PNC 102 Med-Surg Prac. Nurs I	3		
BIO 202 Anat & Phy I	3			PNC 103 Med-Surg Prac.Nurs II	3		
BIO 203 Anat & Phy I Lab	1			PNC 104 Maternal/Child Prac. Nursing	2		
				PNC 105 Transition to Prac Nurs. Practice	2		
Prerequisite Course(s) to be taken before starting PN program:				PNC 131 Psychosocial Concepts In Practical Nursing	3		
ENG 101 English Composition	3			PNC 142 Nutrition	2		
ENG 099 (if needed by placement test)	(3)			PNC 143 Integrating Prac. Nurs. Concepts	3		
				PNC 171 Practical Nurs Clin I	3		
SUMMARY				PNC 172 Med-Surg PN Clinical	3		
MAJOR	35			PNC 173 Med-Surg PN II Clin.	3		
SUPPORTING COURSES	7			PNC 174 Maternal/Child Clinical	1		
TOTAL	42			PNC 175 PN Practice Clinical	1		
				PNC 124 Intro to Pharmacology	3		

Some courses may be counted in more than one category. The student must still complete the specific total hours for graduation by taking additional electives.

Developmental courses cannot be counted toward graduation requirements.

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).

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 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).

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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).

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).

LPN: a licensed practical nurse is a professional healthcare team member who functions under the direction of the registered nurse or other licensed professional while providing care consistent with the state Nurse Practice Act and other governing statutes.

Licensure pass rate: Performance on the National Council Licensure Examination for Practical Nurses (NCLEX-PN) 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).

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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).

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 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 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).

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).

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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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Practical Nursing Certificate Program

ADMINISTRATIVE POLICIES

COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

Original Date: March 2015

Number: 1.1

Last Revised Date: September 2021

Section: Student Policies

Admission to PNC Program

Policy:

1. Students desiring admission to the PNC 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 and Policy 1.3).

Procedure:

1. Application materials for the nursing program are processed by Enrollment Services or Nursing CAS 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 (refer to policy 1.8)
3. A personal interview may be requested by the Program Director.
4. If the applicant meets the criteria for nursing, she is notified of her acceptance in writing.

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Admission Criteria

Criteria for admission into the PNC program are as follows:

1. High School graduate with GPA of 2.0 or GED with appropriate signatures.
2. Official transcripts from all colleges attended.
3. Completion of ENG 101.
4. If transferring in A&P courses they must have been successfully completed within the last 5 years.
5. Completion and documentation of an active and unencumbered CNA license and CPR course.
6. At the beginning of October, December, January, and February applications will be reviewed for admission. Final review of applications will occur in March pending available spots in the program. Scoring rubrics and guides will be utilized on the criteria below to determine the top candidates for PNC admission. Completion of the following recommended coursework and having a cumulative GPA above 2.5 provides a competitive advantage to an application:
 - Anatomy & Physiology I & II courses
 - Medical Terminology
 - Nutrition
 - Basic Algebra
7. Prior to program start:
 - a. Meet Core Performance Standards (Policy 1.2) and Nursing Program Requirements (Policy 1.3)
 - b. Completed health record, including immunizations and laboratory results, background check and drug screen.
8. A personal interview may be requested by the Program Director.

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Number: 1.2
Section: Student Policies

CORE PERFORMANCE STANDARDS FOR CLINICAL COURSES

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

Policy: The applicant must decide if she has any limitations that may restrict or interfere with satisfactory performance of any of the core performance standards. It is the responsibility of the applicant to meet the standards outlined below, and to request those accommodations that she feels are reasonable and necessary to perform the core performance standards. Technological adaptations can be made for some disabilities; however, a student must perform in a safe and reasonably independent manner. It is not acceptable to use a trained intermediary, as a student's judgment may be influenced by someone else's observations. All students must be able to meet the performance requirements to progress in and complete the nursing program. The applicant should consult with the Program Director to discuss any individual circumstance in which she may not be able to meet the essential requirements.

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

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

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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.

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Number 1.3
Section: Student Policies

NURSING PROGRAM REQUIREMENTS

Policy:

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

1. CPR Requirement

- A current American Heart Association: Health Care Provider CPR card, Red Cross: Professional Rescuer CPR card, or American Safety & Health Institute: BLS for Healthcare Providers is required to participate in a lab/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 nursing program.
 - Results of the background check will be given to the nursing Program Director.
 - If there is concern that the findings have a rational connection and/or pose a liability risk to nursing faculty or clinical agencies, findings will be brought to the Division Chair.
 - If findings indicate a rational connection and/or pose a liability risk to nursing, the student may be denied admission to nursing or be dismissed from the nursing program.
 - 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:
 - 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.

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- 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.
 - Physical examination stating ‘fit for duty’ from medical provider
 - Proof of receiving the MMR series (two doses) or positive titers for measles, mumps, and rubella
 - Proof of receiving the Hepatitis B series (three doses) or positive titer
 - Proof of receiving the Varicella series (two doses), positive titer, or documented history of chicken pox
 - Proof of receiving the Tdap vaccine or booster within the past 10 years
 - The Tdap vaccine is required every 10 years.
 - TB Testing: Two-step TB Skin PPD Test within six weeks of first TB Skin PPD Test when a new nursing student and completion of the TB Assessment or follow-up TB Skin PPD Test annually for any subsequent years as a nursing student
 - If PPD is positive, a chest x-ray is required
 - Proof of receiving the seasonal annual flu vaccination
 - Proof of receiving the COVID-19 vaccine
 - All CSM health professions students are required to be immunized against COVID-19 without exception. Students are required to provide CSM and clinical partners (upon request) with a copy of their Centers for Disease Control (“CDC”) COVID-19 vaccination record card evidencing their receipt of the COVID-19 vaccine.
 - CSM is closely monitoring the ongoing Coronavirus Disease (COVID-19) pandemic. As the situation continues to change, our top priority remains the health, safety, and well-being of our community both on and off campus. We are planning for several contingency scenarios and taking decisive, informed action to limit the spread of COVID-19 while maintaining the continuity of our teaching mission. The impact of COVID-19 may require modification of some of the services, programs, procedures, or activities described in this Handbook.
 - Our clinical partners are vital to our ability to place students in clinical rotations. Clinical sites must be informed of any student activity that may be pertinent to COVID-19. This includes any potential student exposures to COVID-19 as well as recent travel that may have put the student at risk of exposure. The student is responsible to disclose any exposure to their

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clinical instructor immediately. The student is also required to disclose any symptoms they are experiencing which could be COVID-19 related to the clinical instructor immediately. The clinical site has complete discretion to determine what is required of the student prior to starting the rotation, and during the rotation. This could include, but not limited to, providing a negative COVID-19 test result, or having the student quarantine prior to starting the rotation, or during the rotation. Should there be a quarantine requirement, graduation may be delayed.

Policies:

- Every student in the PNC program is required to have current health records prior to participation at clinical sites. 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 the dates they were given, in order to meet clinical agency requirements. Students are to update immunizations when the Center for Disease Control and the Health Department and/or clinical agencies require doing so.
- Students are responsible for updating their health records annually with the CSM designated health services office.

Procedures:

- The Practical Nursing Program Director or the CSM designated health services office shall:
 - Review the medical form for completeness and content.
 - Notify student of any deficiencies.
 - Document that the student meets health clearance requirements as designated on the health clearance form.
 - Share information that may affect the student's ability to function in the classroom or clinical area with appropriate faculty.
- The Practical Nursing 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.

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- 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 Practical 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 status at designated times.

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Number: 1.4
Section: Student Policies

READMISSION TO THE PNC PROGRAM

Policy:

1. The student who has withdrawn or has been terminated from the PNC program and wishes to be readmitted will be considered for readmission by the Program Director/Nursing Student Policies Committee with consideration of the following criteria:
 - Facts/details surrounding withdrawal or termination
 - The amount of time elapsed between withdrawal or termination from the PNC program to anticipated date of readmission
 - The amount of time elapsed from withdrawal or termination from the PNC 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.
4. The student wishing to be readmitted to the PNC program must complete the application process according to Policy 1.1.

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Number: 1.5
Section: Student Policies

STUDENT WITHDRAWAL FROM PNC PROGRAM

Policy:

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

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PRACTICAL NURSING CERTIFICATE PROGRAM
ACADEMIC AND LABORATORY/CLINICAL POLICIES

COLLEGE OF SAINT MARY
DIVISION OF HEALTH PROFESSIONS

Original Date: March 2015
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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 PNC 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 (2.8). 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 PNC student will be identified as a CSM practical nursing student (CSM SPN) 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 2.6.

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 2.6.

- Client Welfare

The student is expected to deliver care in a nondiscriminatory and nonjudgmental manner that is culturally sensitive. When providing care, the student places the client's welfare first by: being accessible and prompt in answering client's requests; establishing a priority of activities which reflects the client's needs; and being responsive and reliable

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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 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 may result in the unsuccessful completion of the course. Refer to Policy 2.6. Unprofessional conduct may result in student dismissal from the nursing program.

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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 PNC 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 PNC 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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Number: 2.3
Section: Student Policies

ACADEMIC EVALUATION

Policies:

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

In the PNC program all Practical Nursing students are required to achieve a minimum grade of a C in all nursing theory courses and a satisfactory (S) in all clinical courses. Students must also have a minimum of C in all science courses; in non-science courses they must have a passing course grade (see college catalogue). Passing of clinical course requires an S at the time of the final clinical course evaluation.

3. The course syllabi outline expected criteria and the process of evaluating student achievement in the classroom, lab, and clinical experiences.
- a. Students are required to achieve a minimum average of 79% on test scores prior to additional coursework being added to the course grade. Students must achieve a 79% average (or higher) on both tests and overall course grade to pass the course.
 - b. Both components, theory and the corresponding clinical courses, must be passed in order to progress in the program.
4. A student may request an evaluation of progress whenever the need for additional guidance is desired.
5. Upon completion of lab/clinical courses, the student's evaluation form will be placed in the student's permanent folder.

Procedure:

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

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- Demonstrate evidence of following through with suggestions of faculty. A student encountering academic difficulties in a nursing course is expected to make full use of all available college resources.
- Discuss questions or concerns with Instructor(s). The student will utilize appropriate communication channels when addressing concerns regarding grades/evaluations. The student may seek input from her Academic Advisor for assistance with this process.
- Sign name and date clinical evaluation form. Student signature documents that she has been notified of evaluation, not necessarily agreement with the evaluation. The student may respond to the evaluation in writing.
- Access midterm and final grades by utilizing the designated CSM website.
- Refer to Policy 2.4 Failing/Repeating Nursing Courses and Grade Appeal Procedure and Policy 2.5 Progression and Graduation, if needed.

2. The faculty will:

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

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Original Date: March 2015
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Number: 2.4
Section: Student Policies

FAILING/REPEATING NURSING COURSES AND GRADE APPEAL PROCEDURE

Policy:

1. A grade below 79% in theory and/or a grade of “Unsatisfactory” (U) in clinical will require that both the theory course and the clinical course 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.
2. Whenever a student withdraws from or fails a nursing course, she is referred to the Nursing Student Policies Committee. A recommendation is made by the Committee concerning the student’s progression in the program. This recommendation is sent to the Program Director, for a final decision. A letter stating the final decision is sent to the student by the Program Director.
3. A student may repeat and/or withdraw from the same nursing course only once. If a student withdraws, withdraws failing, and/or fails from the course for the second time, her progression in the program will be evaluated by the Nursing Student Policies Committee. After review, a recommendation regarding the student’s continuation in the program will be made and forwarded to the Chair, Division of Health Professions and VPAA for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis.
4. A student may withdraw, withdraw failing, and/or fail from only two nursing courses in her current program. If a student withdraws, withdraws failing, and/or fails two nursing courses, her progression in the program will be evaluated by the Nursing Student Policies Committee. After review, a recommendation regarding the student’s continuation in the program will be made and forwarded to the Chair, Division of Health Professions and VPAA for a final decision. Withdrawals for reasons other than failing grades will be evaluated on an individual basis.
5. This policy applies to all nursing students, including those with ADA accommodations.

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Grade Clarification / Appeal Procedure:

1. The student shall appeal an assignment if the student considers the grade unwarranted, unjust, or capricious within 2 business days of the assignment grade being posted in Canvas:
 - Discuss the grade with the Instructor and Course Coordinator, if applicable, for clarification as to how the course work was evaluated.
 - If concerns remain, then the student shall submit a written appeal request to the Program Director and come before the Nursing Student Committee (as appropriate).
2. The student shall appeal a quiz/exam if the student considers the grade unwarranted, unjust, or capricious anytime from when the quiz/exam grade is posted until the subsequent quiz/exam.
 - a. Discuss the grade with the Instructor and/or Course Coordinator, if applicable, for clarification
 - b. If concerns remain, then the student shall submit a written appeal request to the Program Director and come before the Nursing Student Committee (as appropriate).
3. The Nursing Student Policies Committee will review nursing student appeals and make recommendations to the Chair, Division of Health Professions and VPAA. The Nursing Student Policies Committee Chairperson shall:
 - Review the written appeal submitted by the student.
 - Schedule the Nursing Student Policies Committee meeting.
 - Provide the written appeal to the Instructor/Course Coordinator, members of the Student Policies Committee, and Program Director.
 - Arrange to have the student, Instructor and/or Course Coordinator, and Program Director at the beginning of the meeting for input of data and to answer questions the committee might have.
 - Preside over the meeting.
 - Chair of Nursing Student Policies Committee calls group to order.
 - Student presents appeal and circumstances. Time limited to 5 minutes.
 - Instructor and Course Coordinator present rationale for grading decision(s). Time limited to 5 minutes.
 - Nursing Student Policies Committee members may question facts. Time limited to 5 minutes.
 - All non-Nursing Student Policies Committee members asked to leave.
 - Committee makes recommendation; written recommendation with brief rationale based on facts.
 - No discussion of the appeal occurs outside the meeting itself.
 - Inform the Chair, Division of Health Professions, and VPAA in writing of the committee's recommendation.
 - The student may appeal a specific academic decision that the student considers unwarranted, unjust, or capricious by following the Academic Appeal process as outlined in the College of Saint Mary Undergraduate Catalog, see "Academic Appeals Board."
(http://www.csm.edu/Academics/Academic_Catalog/)

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Number: 2.5
Section: Student Policies

PROGRESSION AND GRADUATION

Policy:

1. All Practical Nursing students are required to achieve a minimum grade of a C in all nursing theory courses and a satisfactory (S) in all clinical courses. Students must also have a minimum of C in all science courses; in non-science courses they must have a passing course grade (see college catalogue). Passing of clinical course requires an S at the time of the final clinical course evaluation.
2. The Practical Nursing curriculum is organized so that a student must satisfactorily complete all courses each semester before progressing to the next semester, semester 1 prior to semester 2, and semester 2 prior to semester 3.
3. Students who enroll and do not successfully complete classes sequentially will not be allowed to continue in the program. With proper documentation, the student can be placed on LOA and may be readmitted in the semester that was not completed the following year, dependent on application for readmission and space availability. If a student is not placed on LOA she must meet all established admission criteria at the time of reapplication.
4. Both components, theory and clinical in the nursing courses, must be passed in order to progress. A failure in the theory or clinical course, results in failure of both course components and the student is no longer able to proceed in the program.
5. Students must maintain a minimum GPA of 2.0 throughout the program.
6. Academic success is only one requirement for progression in the Nursing Program. The student must meet professional conduct policy and the Code of Conduct in the Academic Catalog.
7. Each candidate for graduation from the Nursing program must complete the required credit hours outlined in the course of study.
8. To qualify for graduation with a certificate, the candidate must satisfactorily complete theory and all clinical objectives in all nursing courses as well as all other required courses.

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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 PNC 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 2015
Last Revised Date:

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.)

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

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

Original Date: March 2015
Last Revised Date: April 2020

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:

- 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 non-dangling earrings (one earring or gauge per ear). One gauge per ear is acceptable but may not exceed 10mm/00gauge and a solid plug must be worn at all times. No visible piercings, or the like, allowed elsewhere on the body.
- tattoos/branding should be covered and not visible. Exception: Small tattoos on the hands, wrists, or lower arm, that could not be interpreted by clients, families, and/or the public as offensive (not limited to hateful, violent, profane, nudity, etc.), may be left uncovered.
- If make-up is used, it should be applied in a manner that reflects a professional appearance.
- “Professional appearance” is based on the subjective opinion of 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, leather shoes and white socks are to be worn with the CSM uniform. Shoes for clinical must be clean, 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 regarding student dress code. Students will be asked to leave the lab/clinical area if their

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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 2015
Last Revised Date: April 2020
Policies

Number: 2.9

Section: Student

SMOKING POLICY

Policy:

1. The buildings at College of Saint Mary are smoke-free.
2. The use of tobacco products or vaping during any portion of the clinical experience is prohibited.

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Original Date: March 2015
Last Revised Date:

Number: 2.10
Section: Student Policies

SNOW POLICY

Policy:

The PNC program does not have authority to cancel classes. The Vice President or designee makes this decision and notifies the news media. If the College of Saint Mary is closed, all morning clinical is canceled. Decision about afternoon/evening clinical experience is made later in the day based on weather conditions.

Procedure:

1. When driving conditions could be hazardous for students and Clinical Instructors with clinical assignments, the Program Director will call the Clinical Coordinators by 5:00 A.M. with a decision regarding morning clinical experience or two hours prior to the starting time for afternoon clinical experience.
2. Upon notification by the Program Director, Clinical Coordinators will then call the Clinical Instructors in their course.
3. Instructors will initiate the calling system to their students by 5:15 A.M. or at the time designated by the individual Instructor. Students having afternoon/evening clinical experience will be notified by their Clinical Instructor prior to clinical. If in doubt, the student should contact their Instructor before leaving for clinical.
4. Each clinical group should establish a system for notification of students. Nursing students should delay leaving home until 5:30 A.M. on days of hazardous driving conditions to give Instructors ample time to notify them of cancellation.
5. Alternate Clinical learning experiences may be arranged on campus.
6. The Clinical Instructor will notify the clinical area.
7. Due to geographical differences, clinical closings may not necessarily be uniform. Make-up or alternative assignments will be determined by the Course Coordinator. See Policy 2.6 for clinical absences.
8. If driving conditions appear to be hazardous the evening before clinical assignments, or projections of weather reports are very unfavorable, Course Coordinators will consult the Program Director for advance planning.
9. Should a student arrive at the clinical area and find that the Instructor has not yet arrived, the student will not give any client care. The student should inform the staff in the clinical area and call the Clinical Instructor, Course Coordinator, or Program Director for further instructions.

Original Date: March 2015
Last Revised Date:

Number: 2.11
Section: Student Policies

MEDICATIONS and INTRAVENOUS 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, practical nursing students, with the direct supervision of their Clinical Instructor, may do the following:

- Peripheral Lines **for adult patients only**: May start in upper extremity (device 3” or less), infuse intravenous fluids and administer medications through an intermittent or continuous flow peripheral line, calculate and regulate flow rate, reinsert, convert and flush peripheral intermittent devices
- 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
 - chemotherapeutic agents
 - oxytocics
 - anti-arrhythmics
 - hyperalimentation
 - blood and blood products
- Continuous Infusions: Administer standard intravenous solutions
- Regulate Infusions: Students are expected to know the side effects, infusion rate, and observe and document effects on the client.
- PCA Infusions: Document rate and effectiveness of infusion
- 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.
- Central Lines: May only observe removal of the central line.
- Documentation: The student and Clinical Instructor must document according to facility policy.

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Original Date: April 2020
Last Reviewed Date:

Number: 2.12
Section: Student Policies

STUDENT TESTING PROCEDURES

Policy:

The purpose of the testing procedures is to ensure accurate assessments that begin to utilize procedures such as those for the NCLEX-PN and promote Academic Integrity. This policy applies to quizzes, tests, and exams.

Procedure:

Before the exam:

1. Students will be given assigned seats.
2. All electronic devices (smart watches, ear buds, phones, tablets, etc) must be turned off/placed in airplane mode and stored in the designated area.
3. Personal belongings must be stored in the designated area.
4. Students may not wear hats, scarfs, gloves, hoodies/sweat jackets/coats (large sweatshirts and/or shirts containing pockets). Provisions may be made for specific religious/cultural apparel. Students will be asked to remove any watches or large accessories before entering the testing room.

During the exam:

- 1) No electronic items will be permitted during the exam.
- 2) No food, drink, water bottles, or the like will be permitted at the exam table.
- 3) Approved items used during the exam will be provided by the proctor (ex. calculator, scratch paper, white board). Once the test is complete, these must be returned to the proctor.
- 4) Student must be present in the classroom at the time the exam is opened. Late students will not be allowed to take the exam.
- 5) Once testing begins, a student is not allowed to leave the testing room.
- 6) No discussion or sharing of questions/exam content is permitted.

After the exam:

- 1) Once the student has completed their exam, the computer must be powered down.
- 2) Students will remain in the exam room until all have completed the exam.
- 3) Discussing, removing, or attempting to remove any exam content/questions is considered a violation of the CSM Academic Integrity policy as it is considered cheating. Students who are found to be violating this will be subject to the sanctions discussed in the CSM Academic Integrity policy.

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Original Date: January 2019
Last Revised Date: January 2019

Number: 2.13
Section: Student Policies


EXPOSURE and INJURY INCIDENT POLICY

Policy:

The purpose of this Exposure and Injury Incident Policy is to ensure the health and safety of the student and/or patient. Nursing students may be at risk for exposure to bodily fluids, environmental hazards, and physical injury during their education. Students should be aware that any exposure or injury could adversely affect student overall health and performance in the nursing program. Any expense incurred by the student in connection with the exposure or injury, is the responsibility of the student.

Procedure:

1. Students will immediately report the incident to the on-site supervisor (staff nurse, charge nurse, clinical instructor, etc).
2. Students will initiate and comply with the facility policy regarding exposure or injury and complete appropriate documentation at the facility.
3. If the facility does not have a policy/occupational medicine department, immediate notification to the Program Director should be made. The Program Director will counsel the student on the course of action.
4. Within 24 hours, the student will complete and submit the CSM Incident Report to the Program Director (see next page).

	<p>College of Saint Mary Lab/Clinical Incident Report</p>
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Incident Number:

Pages 1 of ____

Information

Student Name:

Address:

Telephone number(s):

Incident Information

Type of Incident:

Location:

Date & Time:

Summary of Incident Information (do NOT include identifying patient info):

On-site supervisor (staff nurse, charge nurse, clinical instructor, etc):

Site Documentation completed (yes/no):

Exposure/Injury testing and recommended follow-up: