



BSN STUDENT HANDBOOK  
2014-2015

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## **Welcome to Anderson University School of Nursing**

Nursing is one of the most rewarding, challenging, and respected careers available today. Professional nursing has evolved over more than a century and is based upon nursing knowledge, theory, and research. Today, at Anderson University, we use the latest technology and instructional methods to impart the critical knowledge and skills to assist you in becoming an integral part of the healthcare team, an agent for change, an advocate for your clients, and an informed consumer of recent, valid research to guide your practice for the optimum outcomes for your clients. As a graduate of Anderson University, not only will you gain credentials from an institution that is highly respected, you will gain the ability to be a highly competent professional nurse with a commitment to service. In addition, you will become immersed in the art and science of nursing through the perspective of the Christian worldview.

Faculties partnering with you on this journey are committed to student-oriented learning in which learning and faith are integrated. Represented within the faculty are various disciplines from the breadth of nursing who are leaders and experts and are active in their profession and specialties.

Thank you for choosing Anderson University's School of Nursing to grow professionally within nursing! It is my prayer that this is a time of growth for you, professionally and spiritually; that you develop life-long relationships; that you represent Anderson University well with high ethical and moral standards. But most of all, that you find a true passion for nursing and service.

A handwritten signature in cursive script that reads "Pamela Binns-Turner".

Pamela Binns-Turner, PhD, CRNA, APRN  
Founding Dean and Professor  
School of Nursing

## **History**

Anderson University was one of the first institutions for higher learning for women in the United States. The Johnson Female Seminary opened in Anderson in 1848. The founder was the Reverend William B. Johnson, a Baptist minister who was the first president of the South Baptist Convention. The school the Reverend Mr. Johnson founded was forced to close during the Civil War and did not reopen. A group of Anderson residents, wanting an institution of higher learning in Anderson, offered 32 acres of land and \$100,000 to the South Carolina Baptist Convention at their meeting in 1910. The convention nominated a group of trustees, and Anderson College was granted a charter in 1911 by the South Carolina General Assembly. In 1912, the College opened its doors and operated as a four-year college for women until 1930. In 1929, the South Carolina Baptist Convention approved the institution's transition to a junior college, the first in the state. The College became a coeducational institution in 1930.

In December, 1989, the Board of Trust voted to return the College to its status as a four-year institution, beginning with the fall semester of 1991. This decision was subsequently affirmed by a unanimous vote of the General Board of the South Carolina Baptist Convention. The first four-year class since 1930 graduated in May, 1993.

In the spring of 2005, Anderson's Board of Trust voted to change the College to University status to reflect the addition of graduate programs and a reorganization of the academic divisions into colleges. On January 1, 2006, Anderson College became Anderson University.

The community of Anderson has nurtured and supported the institution throughout the University's history. In turn, the University has provided intellectual, cultural, and recreational opportunities for the citizens of the Anderson area, and has made a significant contribution to the economy of the community.

The first class of students to the nursing program in fall 2012 marks a return of nurses to Anderson University since 1959. In the 1950's then, Anderson College, partnered with Anderson Memorial Hospital to provide classes to Freshmen Nursing Students in their program.

## **Mission Statements**

### **Anderson University**

Anderson University is an academic community, affiliated with the South Carolina Baptist Convention, providing a challenging education grounded in the liberal arts, enhanced by professional and graduate programs and a co-curricular focus on the development of character, servant leadership and cultural engagement. This is a diverse community that is Christ-centered, people-focused, student-oriented, quality-driven and future-directed.

### **School of Nursing**

The mission of the School of Nursing is to be Christ-centered, people-focused, student-oriented, quality-driven, and future-directed in preparing qualified persons to provide holistic therapeutic interventions with care, competence, and safety for a culturally diverse population.

## **Vision Statement**

### **School of Nursing**

The vision of the School of Nursing is to be a leading university where learners combine the foundational knowledge of science and the historical art of nursing, while examining and synthesizing current evidence shaping professional practice in a distinctively Christian community dedicated to Christ's call to service.

## **Program Objectives**

The program objectives of the BSN program are:

1. Deliver baccalaureate nursing education within a liberal arts framework which is excellence-driven and which provides opportunity for the development of the total personality: spiritual, psychological, sociocultural and professional.
2. Prepare the nursing graduate for entry into the profession as a generalist.
3. Provide the foundation in baccalaureate nursing that serves as a basis for future entry into graduate level nursing education.

## **BSN Student Outcomes**

The graduate of the baccalaureate nursing program will be able to:

1. Explain the concept that each person is unique and holistic and has rights to self-determination regarding health matters.
2. Synthesize the nursing process to guide diverse persons toward meeting basic needs within a wellness continuum.
3. Integrate the professional nurse's role of advocate, communicator, counselor, change agent, teacher, leader, and provider and manager of care to assist the client toward optimum level of wellness.
4. Communicate collaboratively in interpersonal relationships with individuals and families, members of the healthcare system, and in effective use of technology and data documentation.
5. Think critically to integrate theoretical and experiential knowledge from nursing, the humanities, and the biologic and social sciences in the promotion of clients' health.
6. Utilize the research process and use evidence-based findings in nursing practice to contribute to the improvement of healthcare and the advancement of nursing science.
7. Assume legal and ethical responsibility for nursing activities and responsibility for professional growth.
8. Appraise personal development of character, exhibit servant leadership, and cultural engagement through the perspective of Christian values and utilize this knowledge to guide behaviors and implement decisions.
9. Evaluate evidence of care process outcomes leading to health system improvement and participate in promoting a culture of safety through increased effectiveness and performance.

## **Approval**

Approval is granted by:  
South Carolina Board of Nursing  
PO Box 12367  
Columbia, South Carolina 29211-2367  
803-896-4550

## **Accreditation**

Anderson University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools as a Level V institution, granting baccalaureate, masters, and doctorate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Anderson University.

Anderson University School of Nursing is accredited by:  
Commission on Collegiate Nursing Education (CCNE).  
<http://www.aacn.nche.edu/ccne-accreditation/ActionsForS14.pdf>

## **Administration, Faculty, and Staff**

Pamela Binns-Turner, PhD, CRNA, APRN  
Dean and Professor

Beth Schultz, DNP, RN  
Undergraduate Co-Chair and Associate Professor

Charlotte Stephens, DNP, APRN-BC  
Undergraduate Co-Chair and Assistant Professor

Casey Hopkins, MSN, WHNP-BC  
Assistant Professor

Kristen Hawkins, MSN, RN  
Assistant Professor

Karen Hardin, MSN, RN  
Assistant Professor

Rosita Maley, MN, RN  
Assistant Professor

Angie King, MSN, RN  
Assistant Professor

Kimberly Speer, MSN, FNP-BC, APRN  
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Elizabeth Snyder, DNP, APRN-BC  
Assistant Professor

Cindy Cross, MSN, RN, MBA  
Assistant Professor

Edith Hamilton, BSN, RN, CEN  
Clinical Instructor

Andrea Spencer, BSN, RN  
Clinical Instructor

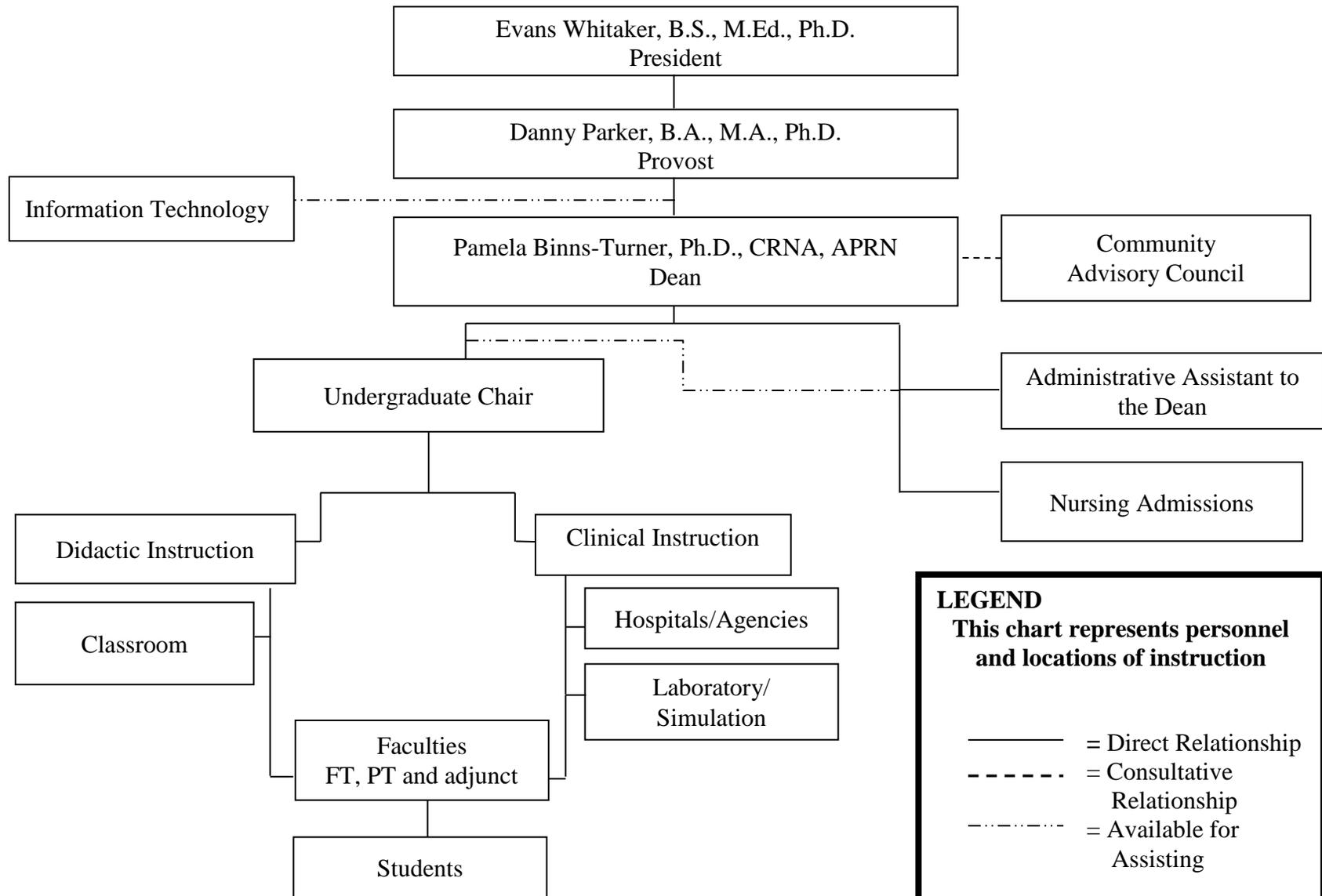
Patrick Wolf, MS, EMT-P, CCP  
Simulation Coordinator and Assistant Professor

Kelli Hembree, BBA  
Simulation Specialist

Katherine Davenport, BA  
Administrative Assistant and Program Coordinator

Chesley Tench  
Nursing Admission Coordinator

## School of Nursing Organizational Chart



**LEGEND**  
 This chart represents personnel and locations of instruction

- = Direct Relationship
- - - - - = Consultative Relationship
- · - · - · = Available for Assisting

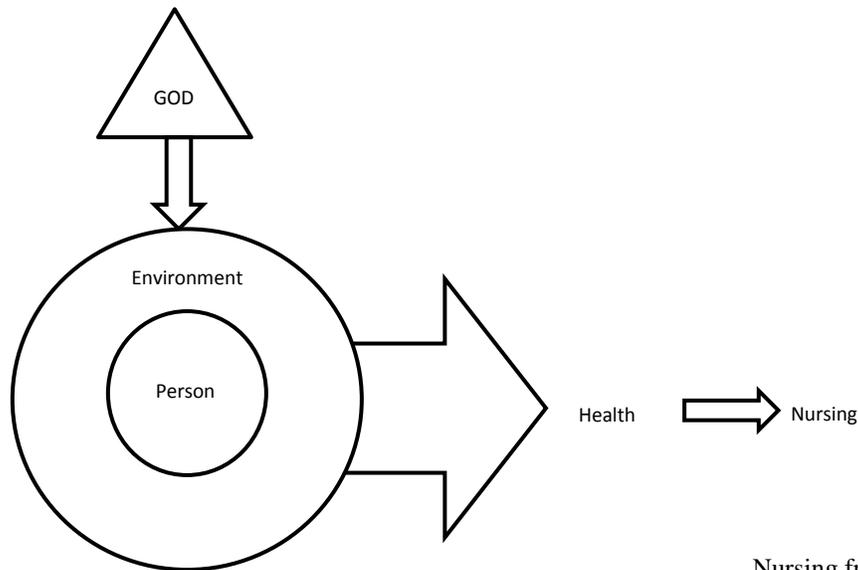
## **Conceptual Framework**

The philosophy of the Anderson University School of Nursing revolves around developing nurses who are grounded in professionalism, clinical competence and spiritual maturity. As a part of Anderson University we support the mission statement of the university, which states: Anderson University is an academic community, affiliated with the South Carolina Baptist Convention, providing a challenging education grounded in the liberal arts, enhanced by professional and graduate programs and a co-curricular focus on the development of character, servant leadership, and cultural engagement. This is a diverse community that is Christ-centered, people-focused, student-oriented, quality-driven and future-directed.

The faculty of the Anderson University School of Nursing is an integral part of the Anderson University community. The faculty strives to enhance student academic excellence and character in a Christian environment. The faculty prepares graduates with an increased level of clinical reasoning skills for personal and professional decision-making. These skills enable graduates to provide care to individuals, families, groups, communities and populations in response to rapidly changing and complex health systems, and technologically advancing global environments within a culture of safety.

The conceptual framework for the School of Nursing at Anderson University is built upon the truth that God is the loving sovereign creator of all that is. God is triune: Father, Son, and Holy Spirit, continually seeking a restorative relationship with His creation. The understanding of God's nature and His desire to be in relationship with man is developed through studying scripture, the word of God. Genesis 1:27 reveals "And God created man in His own image, in the image of God He created him; male and female He created them" (NAS). This illustrates *imago Dei*, the Latin term for "Image of God". We believe that man was created in the image and likeness of God. We also believe that all humanity is created in the image of God (*imago Dei*), and thus has intrinsic value. We see this demonstrated for us in the reality of Jesus Christ's incarnation, becoming a man, and His willingness to die for humanity.

The nursing metaparadigm from a Christian worldview as described by Shelly and Miller in *Called to Care*, begins with God creating the world (environment) and all that is included within it. Man (person) was created by God and placed within this environment to live in balance and wholeness (health). Achieving health allows the person to live at peace in a God-centered community with a sense of physical, psychosocial, and spiritual wellness. Nursing works toward wholeness of the person and the community.



Nursing from a  
Christian Worldview  
*Called to Care*, 2006, Shelly & Miller

### *Person*

Person is defined as the recipient of nursing, including individuals, families, communities, and other groups. A Christian worldview emphasizes that all persons are created in the image of God to live in a loving relationship with Him and others. The holistic individual encompasses body, mind, and spirit: (1) the body, anatomy and physiology; (2) the mind/psyche, emotion/affect, intellect/cognition, and will; and (3) spirit, the soul which expresses itself in relationships with God and with others. While it is helpful to separately conceive body, mind and spirit, in reality they are indivisible and interrelated. The dynamic nature of the individual undergirds a developmental focus on the life-cycle as a series of phases. During each phase of development, from conception through maturity, there is a changing priority of need fulfillment as perceived by the individual.

The whole individual is in constant interaction with the environment, and therefore, yields a broader society and culture. This sociocultural outgrowth incorporates ethnicity, beliefs, values/ethics, and interpersonal and intersocietal relationships which are developed through communication.

Family can be defined as individuals who join together to contribute to the physical, psychosocial, and spiritual needs of each other within an environment of love and affection. Functional family dynamics incorporate caring relationships. Individuals and families build and maintain constructive and responsible community relationships.

Community is an aggregate of people who share common characteristics such as geographical, cultural, religious or relational characteristics. Community connotes an interdependency that is a means for the production, distribution, and consumption of goods and services; for socialization; for social control; for social relationships; and for mutual support (Kozier, Erb, & Blair, 1997). Communities are responsible for building and maintaining constructive and productive relationships in the broader societal and global contexts.

### *Environment*

Environment includes the person, those with whom they interact, their physical surroundings, and the variety of settings in which nursing occurs. Environment is the internal and external conditions, circumstances and influences affecting persons. The internal environment of the individual encompasses the body, mind and spirit. The external environment is all of the outer influences that impact upon the person, such as climate, ecology, economy, politics and history, technology, geology, society and culture. The extent of environment ranges from the interpersonal and local to intersocietal and global. The person's internal and external environments are in constant interaction and change, requiring adaptation, thus influencing health.

### *Health*

The goal of attaining health is the ultimate outcome of nursing care. Health is viewed through a lens that varies from culture to culture and its definition may differ and will impact how care is delivered. Health is a dynamic process and reflects the integrated wholeness of the person's body, mind and spirit; choices; and environmental factors. Health exists on a wellness- illness continuum. The right to seek opportunities for wellness belongs to each person, regardless of social or economic status, personal qualities, or nature of the health need. Usually the person makes decisions about seeking assistance within the health care system relative to his/her perceived health status on the wellness-illness continuum.

Wellness is maximum health potential which is reached when each, the body, mind, and spirit, is at its highest level of wholeness. This means that wellness consists of: (1) the individual, family, or community making responsible choices according to knowledge and an ethical framework. Choices may be influenced by lifestyle, genetic predisposition, and family and cultural belief systems; (2) environmental factors such as healthcare access, financial resources, food sources, climate, etc.; (3) the interaction between choices and environmental factors. For example, choices about the level of wellness the person wishes to achieve or maintain may be limited by society if, by the choices made, a threat is posed to self and/or others.

As the level of wellness decreases, the possibility for illness, suffering, and death increases. Illness is an absence of integrated wholeness or disintegration of wholeness. Both wellness and illness are abstract constructs that are personal and subjective, but may be objectively discernible because of common experience and symptom manifestation. Subjective and objective data may be used to discern the quality and quantity of wellness or illness.

When one or more of the means to wellness is not attained or is flawed, suffering may occur. Suffering is the conscious endurance of pain and distress which occur because of a loss or illness. When health is insufficient to sustain life, death occurs. Death is the end of physical life.

### *Nursing*

As a response to God's grace and love, nursing is a ministry of compassionate care which affects the physical, psychosocial, and spiritual spheres of the individual, family, groups, and communities.

Christ-centered nursing is unique because its emphasis is on caring for and respecting the whole person, the imago Dei, as embodied by God. While this represents both the science and the art of nursing, more importantly it represents God's grace and is a reflection of His character and love for us.

In congruence with the mission, vision, purpose, and outcomes of the School of Nursing, the concepts nursing, environment, health, and person have been defined, clarified and described in relation to God and imago Dei. The structure for the School of Nursing from which the outcome criteria are established, curriculum is designed, and courses are developed is based upon this conceptualization.

Nursing is an applied discipline which expresses itself in nursing practice and has its foundation in scientific/empirical knowledge, theory, and research. Nursing in its fullest sense is also a caring, therapeutic and teaching discipline. The body of nursing knowledge is ever expanding through future-directed research and theory development. The research process is one means for developing scientific problem solving skills and research findings are utilized to guide nursing practice. Nursing theories are tested and supported by knowledge gained through research.

Theoretical and empirical knowledge from the nursing, biological and social sciences, and the humanities are synthesized in utilization of the nursing process. The nursing process is a science based series of activities employed by the nurse as a methodical, ongoing effort toward achieving desired outcomes for person, environment and health. The steps of the nursing process include assessment, nursing diagnosis, planning, implementation and evaluation. The process occurs dynamically in a back and forth fashion.

The caring component of nursing reflects the nurse's concern, empathy, and love for others. The caring role is best fulfilled as the nurse demonstrates the Christ-centered ethic of service in relation to God and to person.

The therapeutic component of nursing is realized by providing health care or knowledge of health care practices to enhance the person's level of wellness. The teaching component of nursing includes providing information to make health care decisions, acquire skills, and change behavior. When it is not possible to promote wellness, nursing seeks to enable persons to adjust to illness and/or relieve suffering. When it is not possible to promote life, nursing seeks to enable persons to adjust to loss and a peaceful death.

### **Bibliography**

1. Miller, Arlene B & Shelly, Judith A. (2006). *Called to Care: A Christian Worldview for Nursing*. Downers Grove, IL: InterVarsity Press.

## **The Development of Novice to Expert and the Nursing Process**

Patricia Benner in 1982 introduced the concept that expert nurses develop skills and understanding of patient care over time through a sound educational base as well as a multitude of experiences. Dr. Benner described five levels of nursing experience: novice, advanced beginner, competent, proficient, and expert. A student nurse is expected to demonstrate novice, advanced beginner, and competent skills and behaviors, while an experienced nurse exhibits proficient and expert skills and behaviors.

The BSN student is expected to demonstrate a progression of professional growth during the nursing program reflective of the nursing process, which follows a similar building of knowledge, skills, and clinical reasoning. By the end of the 2<sup>nd</sup> semester, the novice BSN student is expected to be able to

assess, diagnose, and plan. At the end of the 3<sup>rd</sup> semester, the advanced beginner BSN student is expected to be able to assess, diagnose, plan, and implement. While the competent BSN student at the end of the 4<sup>th</sup> semester is able to assess, diagnose, plan, implement, and evaluate.

## **American Nurses Association Nursing Code of Ethics**

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
2. The nurse's primary commitment is to the patient, whether an individual, family, group or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
4. The nurse is responsible for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. The nurse collaborates with other health professionals and the public in promoting community, national and international efforts to meet health needs.
9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

## **National Student Nurses' Association, Inc. Code of Academia and Clinical Conduct**

### **Preamble**

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

### **A Code for Nursing Students**

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we:

1. Advocate for the rights of all clients.

2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substance in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

*Adopted by the NSNA House of Delegates, Nashville, TN, on April 6, 2001.*

## **General Academic Policies**

Academic policies that apply to all Anderson University students may be found in the [Anderson University Academic Catalog](#) accessible online at [www.andersonuniversity.edu](http://www.andersonuniversity.edu).

## **Standards for Admission to the School Of Nursing**

### **Nondiscrimination Policy**

Anderson University accepts students on the basis of academic qualifications, character, and evidence of the potential to benefit from the university experience. The University accepts all qualified applicants without regard to race, religious creed, place of national origin, sex, age, disability or ethnic group.

### **Student Disability Services**

Anderson University provides accommodations to enable students with disabilities to access the University community, in compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Reasonable accommodations are determined based on current documentation and are made on a case-by-case basis. Adherence to academic standards that are essential to a course of study is generally considered non-discriminatory.

Students requesting accommodations from Anderson University must self-identify by contacting the Center for Student Success. Application for accommodations does not ensure that the student qualifies to receive accommodations.

Students requesting accommodations must have a documented disability as defined by Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. All documentation is evaluated on a case-by-case basis. If provided documentation is deemed insufficient, the student may be required to provide additional documentation. Complete guidelines for documentation are available from the Center for Student Success.

The Center for Student Success determines the student's eligibility for accommodations and, for eligible students, determines appropriate accommodation. If a student cannot demonstrate the following skills and abilities, it is the responsibility of the student to request appropriate accommodation. Anderson University will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program. ***In the event a student is unable to fulfill these admission and progression standards, with or without reasonable accommodation, the student will not be admitted into, or allowed to progress through the program.***

The nursing program at Anderson University is a rigorous mental and physical program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings. These employment settings require a broad spectrum of mental and physical demands on the nurse. The following "Core Performance Standards for Admission and Progression of Nursing Students" must be met by all students admitted to the nursing program.

The stated mission of the undergraduate program at Anderson University is to be Christ-centered, people-focused, student-oriented, quality-driven, and future-directed in preparing qualified persons to serve a diverse population through the holistic profession of nursing. Potential nurses are expected to complete all the academic and clinical requirements of the baccalaureate program in nursing before they are eligible to take the National Council Licensure Examination (NCLEX) to become a licensed registered nurse. The purpose of this document is to define the cognitive, affective and psychomotor skills that are essential to the completion of this program and to safely perform as a competent generalist nurse.

### **Americans with Disabilities Act ("ADA") Guidelines**

#### Definitions:

Title III of the Americans with Disabilities Act provides comprehensive civil rights protections for "qualified individuals with disabilities." An "individual with a disability" is a person who:

- has a physical or mental impairment that substantially limits a "major life activity," or
- has a record of such an impairment, or
- is regarded as having such an impairment.

Federal regulations state that "physical or mental impairments" include, **but are not limited to** "such contagious and non-contagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease,

diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism.”

“Major life activities” include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, eating, standing, lifting/bending, thinking, concentrating, reading, communicating, sleeping, and working. “Major life activities” also include “major bodily functions” which include, without limitation functions of the immune system; digestive, bladder and bowel functions; respiratory and circulatory functions; reproductive functions; cell growth; neurological and brain functions; and endocrine functions. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action is taken on the basis of the recurrent illegal use of drugs.

“Qualified” individuals are defined as follows:

- A “qualified” individual with a disability is one who meets the essential eligibility requirements of the program or activity offered.
- The “essential eligibility requirements” will depend on the type of service or activity involved.

## **Core Performance Standards for Admission and Progression of Nursing Students**

### **Cognitive Learning Skills**

The student must demonstrate the ability to:

1. Receive and interpret information in the cognitive, psychomotor, and affective domains of learning. This means that the student must be able to remember information, reproduce it, and use it to solve problems, evaluate work, and generate new ways of processing and categorizing information as listed in course objectives.
2. Perform physical assessments of clients and make sound, responsible, evidence-based decisions regarding nursing action/treatment within given time restraints.
3. Appropriately synthesize data from the client, charts, verbal reports and medical history and observe the physical status of the client to purposefully recommend or maintain treatment.
4. Resolve practical problems and deal with a variety of variables in conditions where only limited standardization exists.
5. Accurately assess clients using complex monitors and equipment such as cardiac monitors, electronic infusion devices, glucometers and suction devices.
6. Differentiate and prioritize nursing care among multiple client situations simultaneously.
7. Interpret a variety of instructions furnished in written, oral or diagram form and intervene appropriately.
8. Record examination and diagnostic results clearly, accurately, and efficiently and communicate them effectively to the client and other health care providers.
9. Apply methods of measurement, including calculation, analysis, reasoning and synthesis.
10. Learn large volumes of complex, technically detailed information to perform clinical problem solving.
11. Use critical reasoning and apply independent decision making skills in a timely manner.

### **Psychomotor Skills**

The student must demonstrate the ability to:

1. Sit: Maintain upright posture.
2. Stand: Maintain upright posture.

3. Locomotion: Ability to:
  - a. Get to lecture, lab and clinical locations, and move within rooms as needed for group rotations, work stations and partners, and performing assigned tasks.
  - b. Physically maneuver in clinical settings and rapidly get to locations within the health care facility for emergency calls such as “code blue” situations.
4. Manual tasks:
  - a. Maneuver an individual’s body parts or clinical equipment from all directions: side to side, forward and backward, or from a lower to higher position.
  - b. Maintain an object in a steady position for an extended period of time.
  - c. Competently perform cardiopulmonary resuscitation (C.P.R.) using guidelines issued by the American Heart Association or the American Red Cross.
  - d. Pushing/pulling/rolling efforts to exert force against small or large objects to move them closer or further away.
5. Reaching:
  - a. Capable of extending arm(s) over and under individuals and equipment as required by the task.
6. Small motor/hand skills:
  - a. Legibly record assessments, nursing notes, referrals, etc. in standard medical charts in clinical settings in a timely manner and consistent with the acceptable norms of the clinical setting.
  - b. Legibly record ideas and thoughts for written assignments and tests.
  - c. Record communications in written form in charts, reports, and correspondence.
  - d. Secure a firm grasp as required by the task.
  - e. Operate a push-button telephone and a computer keyboard.
  - f. Perform precision movements (i.e., catheterization, venipuncture, IV fluid administration, parenteral injections and medication administration), which may also include invasive procedures into the central circulation or specific body cavities.
  - g. Obtain data from clients via palpation, auscultation, and percussion.
  - h. Manipulate a stethoscope, blood pressure cuff, thermometer (digital, tympanic or glass); insert urethral catheters, IV catheters, nasogastric tubes; perform injections; adjust IV infusions or other equipment as required.
7. Visual acuity to:
  - a. Legibly record/document assessments, nursing notes and referrals in standard medical charts in health care settings in a timely manner and consistent with the acceptable norms of clinical settings.
  - b. Perform precise movements.
  - c. Identify small markings and inscriptions, i.e., on syringes, thermometers, IV bags and sphygmomanometers.
  - d. Identify color changes and coding systems per protocols.
8. Hearing or ability to receive and:
  - a. Effectively respond to verbal requests from clients and health team members, especially in noisy environments.
  - b. Interpret verbal communication used in lectures, instructions, concepts, narratives, questions and answers.
  - c. Auscultate and percuss for body sounds, e.g., heart, bowel, lungs.
  - d. Respond in a timely manner to a variety of machine alarms and sounds.

9. Communication ability:
  - a. Effectively communicate with team members verbally and in written format.
  - b. Communicate spontaneously with other students, faculty, clients, and health care personnel to ask questions, explain conditions and procedures, and teach safety within a reasonable time frame.
  - c. Perceive non-verbal communication and describe pertinent changes in the client/situation.
10. Self-care ability to:
  - a. Maintain general good health and self-care to foster the health and safety of self and individuals with whom one interacts in the academic and clinical settings.
  - b. Coordinate transportation and living accommodations for off-campus clinical assignments to ensure timely reporting to the clinical areas and classroom.

### **Affective Learning Skills**

The student must be able to:

1. Demonstrate composure of affective behaviors (verbal, physical, and emotional) to ensure the emotional, physical, mental and behavioral safety of the client in compliance with ethical standards of the American Nurses Association.
2. Tolerate physically and intellectually demanding academic and clinical workloads in nursing within set time constraints which often are concurrent.
3. Adapt to constantly changing environments, display flexibility, and function in situations of uncertainty.
4. Acknowledge and respect individual values and opinions to foster congruous working relationships with faculty, peers, clients, and the health care team.

Document adapted with permission from Samuel Merritt College's BSN Technical Standards (<http://www.samuelmerritt.edu>) July 2008

**The previous Core Performance Standards are not all inclusive.\***

### **Traditional Bachelor of Science in Nursing (TBSN)**

The School of Nursing offers a Bachelor of Science degree. All traditional students (TBSN) are accepted into the university and categorized as a pre-nursing major (pBSN) during the first two years before being selected to progress into the School of Nursing as a junior. The criterion for being admitted as a pBSN student are a minimum ACT score of 21 with a minimum ACT Math score of 19 or a minimum SAT score of 1000 with a minimum SAT Math score of 450. To be eligible for selection to progress into the School of Nursing as a junior, the student must: 1) complete all required courses as noted in the curriculum model, 2) maintain a cumulative GPA of 3.0 or greater on a 4.0 scale and 3) maintain a cumulative GPA of 3.0 or greater on a 4.0 scale in science prerequisites: anatomy, physiology, microbiology and chemistry.

This type of program is often called the 2 + 2 program because the applicants must complete 59-60 semester hours include general education requirements and other required courses specific to the BSN degree. A grade of C or better must be achieved in all of the courses making up these 59-60 hours. The student must also maintain an overall 3.0 GPA or better on a 4-point scale for this same list of courses. The student must also demonstrate strong academic performance in the core science courses as shown

by achieving a minimum 3.0 overall GPA in these courses. The science courses considered core are anatomy, physiology, microbiology, and chemistry. To be eligible to be selected to enter the nursing curriculum as a junior, the student must submit their Request to Progression to Nursing Curriculum before February 15th in the sophomore year.

Applicants to the nursing program will be required to verify they understand and meet these admission standards or, with reasonable accommodation, they can meet the admission standards. The University will evaluate any student who states he/she requires accommodation to meet the program's admission standards and then will confirm that the stated condition qualifies as a disability under applicable laws.

If an applicant states he/she can meet the admission standards/requirements with accommodation, then the University will determine whether it agrees that the student can meet the admission standards with reasonable accommodation. This includes a review to determine whether the accommodation would jeopardize institutional requirements or clinician/client safety, as well as the educational process of the student, including all course work and clinical experiences essential to graduation. ***In the event a student is unable to fulfill these admission and progression standards, with or without reasonable accommodation, the student will not be admitted into, or allowed to progress through the program.***

All application materials must be postmarked by the established application deadline to be considered for admission. Applications received or completed after the established application deadline may be reviewed on a space available basis. All application materials become the property of the School of Nursing and will not be returned to the student or another party. Application fees and enrollment deposits are non-refundable.

Students who applied in previous years and who were placed on the alternate list or were denied admission will need to reapply using the same process as a new applicant. Alternate applicants from a previous year are not given preference over the rest of the applicant pool. The School of Nursing will keep the files of all applicants for up to one year. If an applicant chooses to re-apply, the School of Nursing will pull the transcripts and other supplemental material to add to the new application (upon request). All re-applicants will need to submit other supplemental application materials to the School of Nursing in the application packet by the posted application deadline in order to be considered.

### **Accelerated Bachelor of Science in Nursing (ABSN)**

The Accelerated Bachelor of Science in Nursing was created to offer adult and/or non-traditional students an alternative method to achieve their Bachelor of Science degree. The program is 15-months; four consecutive semesters, which prepares students for their initial licensure as a registered nurse. This program is full-time and classes are held on the Anderson University Campus. This is a rigorous program and graduates of the Anderson University ABSN program earn a Bachelor of Science in Nursing and are prepared to take the NCLEX-RN examination to obtain licensure as a registered nurse. As a BSN prepared nurse, graduates may work in a variety of healthcare settings, which may include hospitals, community agencies, health clinics, long-term care facilities and private practice. Special focus is given to leadership, Christian worldview, quality, safety and informatics.

ABSN (accelerated) students, who are a minimum of 22 years old by application deadline, follow an admission process instead of a progressions process when being enrolled in the nursing curriculum. The criterion for being selected as a student in the school of nursing accelerated track are: 1) hold a bachelor

degree in any area OR possess adequate college credits matching the university general education requirements, 2) GPA for last 60 hours of college credits  $\geq 3.0$ , 3) Science pre-requisites: anatomy, physiology, microbiology, chemistry with GPA  $\geq 3.0$ , 4) Developmental Psychology and statistics, 4) letters of reference, 5) interview with nursing admissions committee if requested.

All application materials must be postmarked by the established application deadline to be considered for admission. Applications received or completed after the established application deadline may be reviewed on a space available basis. All application materials become the property of the School of Nursing and will not be returned to the student or another party. Application fees and enrollment deposits are non-refundable. Decision letters regarding admission status are sent out by the Anderson University School of Nursing.

## Curriculum Plans

### Traditional Bachelor of Science (TBSN) Curriculum Plan

#### Sample Freshman Year

**Fall Semester (14 credit hours)**

BIO105 Human Biology (4)  
ENG 101 Composition & Speech I (3)  
PSY 101 Introduction to Psychology (3)  
Foreign Language I (3)  
FYE 101 Freshman Experience (1)

**Spring Semester (16 credit hours)**

CHE 105 Essentials of General Organic &  
Biochemistry<sup>+</sup> (4)  
ENG 102 Composition & Speech II (3)  
Foreign Language II (3)  
MAT 108 Finite Probability & Statistics (3)  
CHR 105 Introduction to the Bible (3)

#### Sample Sophomore Year

**Fall Semester (15 credit hours)**

BIO 201 Human Anatomy & Physiology I<sup>+</sup> (4)  
PSY 205 Human Development (3)  
History or Literature (3)  
History or Literature (3)  
KIN 135 Lifetime Wellness (2)

**Spring Semester (14 credit hours)**

BIO 202 Human Anatomy & Physiology II<sup>+</sup> (4)  
BIO 215 Fundamentals of Microbiology<sup>+</sup> (4)  
FA 200 Experiencing the Arts (3)  
CHR 305 Christian Worldview (3)

#### Junior Year

**Fall Semester (17 credit hours)**

NUR 310 Pathophysiology (3)  
NUR 320 Foundations in Nursing (6)  
NUR 311 Pharmacology I (2)  
NUR 350 Skills Practicum (3)  
NUR 352 Health Assessment (3)

**Spring Semester (16 credit hours)**

NUR 355 Intro. to Research in Nursing (3)  
NUR 322 Mental Health & Wellness (5)  
NUR 312 Pharmacology II (2)  
NUR 324 Adult Health (6)

#### Senior Year

**Fall Semester (17 credit hours)**

NUR 420 Childbearing (5)  
NUR 421 Childrearing (5)  
NUR 453 Leadership & Management (4)  
NUR 451 Issues in Professional Nursing (3)

**Spring Semester (13 credit hours)**

NUR 425 Critical Care (5)  
NUR 457 Clinical Preceptorship (3)  
NUR 423 Community Health Nursing (4)  
NUR 459 Senior Seminar (1)

Prior to enrollment into the nursing program, the following must be successfully completed:

- Pre-enrollment physical exam and job function test.

Prior to progression into the nursing curriculum:

- Required immunizations or evidence of immunizations
- Evidence of health insurance
- Current CPR certification
- Clear urine drug screen and background check
- Evidence of malpractice insurance as a student nurse

## **Accelerated Bachelor of Science (ABSN) Curriculum Plan**

### **Fall Semester (17 credit hours)**

NUR 310 Pathophysiology (3)  
NUR 320 Foundations in Nursing (6)  
NUR 311 Pharmacology I (2)  
NUR 350 Skills Practicum (3)  
NUR 352 Health Assessment (3)

### **Spring Semester (16 credit hours)**

NUR 355 Intro. to Research in Nursing (3)  
NUR 322 Mental Health & Wellness (5)  
NUR 312 Pharmacology II (2)  
NUR 324 Adult Health (6)

### **Summer Semester (17 credit hours)**

NUR 420 Childbearing (5)  
NUR 421 Childrearing (5)  
NUR 453 Leadership & Management (4)  
NUR 451 Issues in Professional Nursing (3)

### **Fall Semester (13 credit hours)**

NUR 425 Critical Care (5)  
NUR 457 Clinical Preceptorship (3)  
NUR 423 Community Health Nursing (4)  
NUR 459 Senior Seminar (1)

Science prerequisites and foundational course (22 hrs) requirements prior to enrollment must be completed by May 15th:

- BIO 215 Fundamentals of Microbiology<sup>+</sup> (4 hrs)
- BIO 201 Human Anatomy & Physiology I<sup>+</sup> (4 hrs)
- BIO 202 Human Anatomy & Physiology II<sup>+</sup> (4 hrs)
- CHE 105 Essentials of General, Organic, & Biochemistry<sup>+</sup> (4 hrs)
- PSY 205 Human Development (3 hrs)
- MAT 108 Finite Probability & Statistics (3 hrs)

Upon acceptance into the program, the following must be obtained:

- Successful completion of a pre-enrollment physical exam and job function test
- Clear urine drug screen and background check
- Required immunizations or evidence of immunizations
- Evidence of health insurance
- Current CPR certification
- Evidence of malpractice insurance as a student nurse

## **Course Descriptions**

### **Bachelor of Science in Nursing Course Descriptions**

#### **NUR310 Pathophysiology (3-0-0)**

Prerequisite BIO 201 and 202.

NUR 310 is an introduction to basic pathophysiological concepts and commonly occurring acute and chronic health problems utilizing a body systems approach – building on knowledge gained in Anatomy and Physiology. Students are acquainted with clinical reasoning skills necessary for a successful career in nursing. The course provides exposure to current trends, treatment advances and ongoing research for emerging health problems.

#### **NUR311 Pharmacology I (2-0-0)**

NUR 311 is an introduction to the biochemical, physiologic, and psychological effects of drugs on the holistic person over the lifespan in a multicultural society. Drug actions, nursing process and client teaching, medication safety and administration are examined and calculation methods are introduced.

#### **NUR312 Pharmacology II (2-0-0)**

Prerequisite: Pharmacology I

NUR 312 is a continuation of NUR 311, Pharmacology I, in its study of the biochemical, physiologic and psychological effects of drugs on the holistic person over the lifespan in a multicultural society. Major drug classifications, indications for use, side effects, interactions, routes of administration, dosages and contraindications are reviewed. Accurate medication calculation methods are reinforced.

#### **NUR320 Foundations in Nursing (3-0-3)**

NUR320, Foundations in Nursing introduces the student to core competencies required by modern health care professionals. The course emphasizes the development of clinical judgment, basic nursing principles, key nursing interventions, and the nursing process. The course investigates topics such as effective communication, infection control, safety, and health care trends.

Each week three (3) hours will be spent in didactic and nine (9) hours in clinical experience.

#### **NUR322 Mental Health and Wellness (3-0-2)**

NUR 322 focuses on knowledge and application of theories and the nursing process to identify, implement, and evaluate nursing interventions for the care of clients with psychiatric disorders.

Each week two (2) hours will be spent in didactic and six (6) hours in clinical experience.

#### **NUR324 Adult Health (3-0-3)**

NUR 324 explores the roles and responsibilities of professional nursing practice for patients with specific medical and/or surgical conditions. The nursing process is applied with emphasis placed on care that addresses the specific needs of the adult patient for the maintenance, promotion and restoration of physiological/psychosocial function.

Each week three (3) hours will be spent in didactic and nine (9) hours in clinical experience.

#### **NUR350 Skills Practicum (0-3-0)**

NUR 350 is a practical hands-on experience in basic nursing skills. Students learn and perform specific clinical skills using scientific principles foundational to nursing knowledge, intervention, and application.

**NUR352 Health Assessment (2-1-0)**

NUR 352 focuses on developing skills and knowledge related to history taking, assessing health status and recognizing deviations from the normal. Emphasis is on the collection of subjective and objective data, physical examinations and accurate documentation. Communication technique is further developed by emphasis on interviewing skills.

**NUR355 Introduction to Research in Nursing (3-0-0)**

Prerequisite MAT 108

NUR 355 will focus on the role of the professional nurse in critical appraisal to determine the merit and readiness of research literature for use in clinical practice.

**NUR420 Childbearing (3-0-2)**

NUR 420 focuses on the care, counseling and education of childbearing families. Didactic and clinical learning opportunities focus on nursing practice with expectant mothers, neonates and their families in classroom and selected health care settings. This course provides the theoretical basis for the nursing management of developmental and pathological human responses related to healthy and high risk childbearing families.

Each week three (3) hours will be spent in didactic and nine (9) hours in clinical experience.

**NUR421 Childrearing (3-0-2)**

NUR 421 will include application of the nursing process with children and families in the hospital and community settings. Care will focus on the common pediatric health problems and the health promotion needs of well, acute and chronically ill children. Additional emphasis will be placed on the developmental aspects of children from infancy to adolescence and on children with special health problems, including genetic disorders.

Each week three (3) hours will be spent in didactic and nine (9) hours in clinical experience.

**NUR423 Community Health Nursing (2-0-2)**

NUR 423 focuses on assessing needs, promoting health, and preventing disease in vulnerable individuals, groups, and communities across the lifespan. Family and community assessments will be performed utilizing multidisciplinary theories and principles.

Each week two (2) hours will be spent in didactic and six (6) hours in clinical experience.

**NUR425 Critical Care (3-0-2)**

NUR 425 focuses on the biological, psychological, philosophical and sociocultural influences on complex health problems related to acute and traumatic conditions. This course emphasizes the concepts of circulation, oxygenation, homeostasis, and compensation in acutely ill adults.

Each week two (2) hours will be spent in didactic and six (6) hours in clinical experience.

**NUR453 Leadership and Management (2-0-2)**

NUR 453 is a study of health care organizational structures and the professional nurse's role as a patient advocate, leader, manager, and change agent. Emphasis is on the application of the theories principles of leadership and management in the context of the healthcare delivery system. Ethical and spiritual dilemmas confronting nurses are explored from multiple perspectives.

Each week two (2) hours will be spent in didactic and six (6) hours in clinical experience.

**NUR451 Issues in Professional Nursing (2-1-0)**

NUR 451 is an examination of the nurse's role through evaluation of historical and current issues impacting the profession and health care delivery systems. The legal, ethical, social, economic, political and moral obligations of the professional nurse are explored from the Christian worldview.

**NUR457 Clinical Preceptorship (0-0-3)**

NUR 457 is a practicum consisting of preceptor-supervised and faculty led nursing clinical experience in a regional health care facility.

Each week eighteen (18) hours will be spent in clinical experience.

**NUR459 Senior Seminar (1-0-0)**

NUR 459 provides an opportunity to monitor the outcomes of care processes and apply improvement methods to design changes in health care systems that will improve quality and safety.

**Grades****Grading Scale**

The Anderson University School of Nursing grade scale is as follows:

A= 92-100

B= 84-91

C= 75-83

D= 67-74

F= 66 and below.

Course grades are earned by the student based on an accumulation of total possible points in a course. This is individualized based upon the instructor's plan for the course. For example, a course may include possible points earned as follows:

- Exam I (50 points)
- Exam II (60 points)
- Exam III (40 points)
- Project (10 points)
- ATI content testing (10 points)
- Attendance/participation (5 points)
- Simulation (5 points)

In this example, the total possible points are 180 points for the course. If student A earns 170 out of 180 points ( $170/180 = 94.4\%$ ), then that student has earned a 94.4% (which is an A). If student B earns 150 out of 180 points ( $150/180 = 83.3\%$ ), then that student has earned an 83.3% (which is a C). If student C earns 151 out of 180 points ( $151/180 = 83.9\%$ ), then that student has earned an 83.9% (which rounds up to a B).

- Rounding up: The School of Nursing requires that students achieve a minimum grade of 75 before any grade can be “rounded up.” (Example: **74.9 does not round up to 75**). After the student has achieved a minimum grade of 75, the calculation of a grade will be based on rounding a score from a number +0.5 below the number and to +0.49 above the number to the common whole number. (Example: a grade of 85= 84.5 – 85.49; 84= 83.5 – 84.49)
- Point distribution of grades in a course will be as follows: 70% (or more) will be derived from exams, quizzes, and final exam; 30% (or less) will be derived from special projects, presentations, extra credit assignments, PrepU, ATI testing.

### **Anderson University School of Nursing Test Policy**

The student must have an average of 75% on all tests (quizzes, sectional exams, and final exam) in order to successfully complete the course. Test grades will be averaged first and then other grades are added provided the student has a 75% average. Anderson University School of Nursing follows the Anderson University policy to make up missed exams which can be found in the Anderson University Academic Catalog, p. 261. The format for all make up exams will be at the discretion of the faculty and may include essay, short answer, fill in the blank, and/or multiple-choice type questions that cover the same content areas noted on the missed exam. The student must take the make-up exam within 4 working days of the original exam or the student will receive a “0”. Exam grades will not be released to the entire class until the student missing an exam has made it up or has declined to take the exam.

For any absences on testing dates (exams and scheduled quizzes), the instructor or professor of the course must be notified of missing the exam/quiz **PRIOR** to the exam/quiz date. If the student fails to notify the instructor or professor of the course of the absence prior to the time of the testing, the student receives a “zero” for the exam/quiz grade that cannot be made up. If in the judgment of the faculty there are circumstances that warrant allowing the student to make up the exam, the resulting points will be 90% of the actual points and counted as such. Unannounced quizzes will not be made up because of an absence.

All belongings, backpacks, purses, and phones must be placed in the front of the classroom. No personal calculators are allowed. If a calculator is required, it will be provided by the faculty member. Testing will be performed on the student’s laptop computer using ExamSoft. While testing, the proctoring instructor(s) will not address questions. If scratch paper is allowed, the student will place their name on it and submit it to the faculty before leaving the room. When the student is finished, the student will shut down the laptop completely, leaving the screen up and computer open, exiting the room quietly to avoid disturbing classmates. When all students have finished, the belongings can be gathered.

### **Exam Review Policy**

Within 5 (five) working days, any exam taken in a course may be reviewed by contacting the professor responsible for the course. An appointment will be set by the professor for this individual review. After 5 (five) working days, no individual review of an exam is available.

### **Standardized Testing in Designated Courses**

Students are required to take nationally normed tests throughout the curriculum. The faculty of the School of Nursing selected the series of tests because of the reliability and validity of the tests and the comprehensive test to prepare the student for success on the National Council of State Boards of Nursing Licensure Exam. The faculty of the School of Nursing are committed to the fact that it is the

responsibility of baccalaureate students to master the content throughout the nursing curriculum. Students must integrate learning from multiple sources in order to pass a series of multiple standardized tests and to function as safe and competent Registered Nurses. These sources include, but are not limited to, lecture, clinical, out of class assignments, computer-based assisted instruction, reading and projects. The standardized tests evaluate the student’s ability to demonstrate integration of multiple levels of knowledge presented in each course in the nursing program and assist students to prepare for the National Council of State Boards of Nursing Licensure Exam, which all graduates of the program must pass, in order to practice nursing.

- Standardized tests are scheduled to be administered in identified courses prior to final exams;
- The student will have one chance to take course standardized tests (excluding the comprehensive test);
- The score from the standardized test is leveled based on statistics;
- All standardized tests are figured into the final course grade up to 10%;
- There will be no scheduled retakes of course standardized testing unless a 2<sup>nd</sup> version is available and remediation is required; and
- Any student who does not achieve a benchmark score on any standardized test will complete a focused review (available from the testing service with individual student’s scores on line) to enhance student’s success on the National Council of State Boards of Nursing Licensure Exam.

### ATI Testing & Remediation Policy

The purpose of this policy is to assist students to reach an ATI level that would be predictive of NCLEX success. Points are assigned (based upon the weight of the total course points) to various activities along the ATI pathway. Specific remediation is required to maximize learning and proficiency on the ATI proctored exams.

Points given for ATI will account for 10% of the total points accumulated in the course and will be added to the students’ accumulated total after calculation of all exams, quizzes, and final exams (verifying that the student has earned a  $\geq 75\%$  average passing grade)

For example, the following rubrics are for courses that designate 10 points, 50 points, or 100 points:

### 10 point Rubric

4 points			
Complete Practice Assessment A Remediation		Complete Practice Assessment B Remediation	
<ul style="list-style-type: none"> <li>• 1 hour in focused review</li> <li>• Complete active learning templates with 3 critical points for each topic missed</li> </ul>		<ul style="list-style-type: none"> <li>• 1 hour in focused review</li> <li>• Complete active learning templates with 3 critical points for each topic missed</li> </ul>	
Then, take Proctored Assessment			
Score? Level 3 – 4 points	Score? Level 2 – 3 points	Score? Level 1 – 1 point	Score? Below Level 1 – 0 points
Review	Review	Review	Review
<ul style="list-style-type: none"> <li>• 1 hour focused review</li> </ul>	<ul style="list-style-type: none"> <li>• 2 hour focused review</li> </ul>	<ul style="list-style-type: none"> <li>• 3 hour focused review</li> </ul>	<ul style="list-style-type: none"> <li>• 4 hour focused review</li> </ul>

<ul style="list-style-type: none"> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>
<b>2 points</b>	<b>2 points</b>	<b>2 points</b>	<b>2 points</b>
Proctored Assessment Retake			
No Retake (optional)	No Retake (optional)	Retake required	Retake required
<b>Total points possible =10/10</b>	<b>Total points possible =9/10</b>	<b>Total points possible =7/10</b>	<b>Total points possible =6/10</b>

## 50 Point Rubric

<b>20 points</b>			
Complete Practice Assessment A Remediation <ul style="list-style-type: none"> <li>1 hour in focused review</li> <li>Complete active learning templates with 3 critical points for each topic missed</li> </ul>		Complete Practice Assessment B Remediation <ul style="list-style-type: none"> <li>1 hour in focused review</li> <li>Complete active learning templates with 3 critical points for each topic missed</li> </ul>	
Then, take Proctored Assessment (Proctored Assessments are required!)			
<b>Score?</b> <b>Level 3 – 20 points</b>	<b>Score?</b> <b>Level 2 – 15 points</b>	<b>Score?</b> <b>Level 1 – 5 point s</b>	<b>Score?</b> <b>Below Level 1 – 0 points</b>
Review <ul style="list-style-type: none"> <li><b>1 hour focused review</b></li> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li><b>2 hour focused review</b></li> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li><b>3 hour focused review</b></li> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li><b>4 hour focused review</b></li> <li>Complete &amp; submit active learning template and 3 critical points for each topic missed</li> </ul>
<b>10 points</b>	<b>10 points</b>	<b>10 points</b>	<b>10 points</b>
Proctored Assessment Retake			
No Retake (optional)	No Retake (optional)	Retake required	Retake required
<b>Total points possible =50/50</b>	<b>Total points possible =45/50</b>	<b>Total points possible =35/50</b>	<b>Total points possible =30/10</b>

## 100 point Rubric

<b>40 points</b>
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Complete Practice Assessment A Remediation		Complete Practice Assessment B Remediation	
<ul style="list-style-type: none"> <li>• 1 hour in focused review</li> <li>• Complete active learning templates by hand with 3 critical points for each topic missed</li> </ul>		<ul style="list-style-type: none"> <li>• 1 hour in focused review</li> <li>• Complete active learning templates by hand with 3 critical points for each topic missed</li> </ul>	
Then, take Proctored Assessment			
<b>Score? Level 3 – 40 points</b>	<b>Score? Level 2 – 30 points</b>	<b>Score? Level 1 – 10 point</b>	<b>Score? Below Level 10 – 0 points</b>
Review	Review	Review	Review
<ul style="list-style-type: none"> <li>• <b>1 hour focused review</b></li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>• <b>2 hour focused review</b></li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>• <b>3 hour focused review</b></li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	<ul style="list-style-type: none"> <li>• <b>4 hour focused review</b></li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>
<b>20 points</b>	<b>20 points</b>	<b>20 points</b>	<b>20 points</b>
Proctored Assessment Retake			
No Retake (optional)	No Retake (optional)	Retake required	Retake required
<b>Total points possible =100/100</b>	<b>Total points possible =90/100</b>	<b>Total points possible =70/100</b>	<b>Total points possible =60/100</b>

When should ATI practice exams, proctored exams, and remediation occur within a course?

**In a 16 week full semester course:**

- Week 7 – practice assessment A
- Week 8 – Remediation from practice assessment A (focused review and submission of active learning template)
- Week 9 – practice assessment B
- Week 10 - Remediation from practice assessment B (focused review and submission of active learning template)
- Week 12- Proctored Assessment
- Week 13 - Remediation from proctored assessment (focused review and submission of active learning template)
- Week 14 – Retake proctored assessment

**In a 7 week half-semester course:**

- Week 3 – practice assessment A
- Week 4 – Remediation from practice assessment A (focused review and submission of active learning template)

- Week 5 – Proctored Assessment
- Week 6 - Remediation from proctored assessment (focused review and submission of active learning template)
- Week 7 – Retake proctored assessment

## Rubric for Comprehensive Predictor

### NUR 459 Senior Seminar

For 100 point rubric:

<b>40 points</b>			
Complete Practice Assessment A Remediation <ul style="list-style-type: none"> <li>• 2 hours in focused review</li> <li>• Complete &amp; submit active learning templates by hand with 3 critical points for each topic missed</li> </ul>	Complete Practice Assessment B Remediation <ul style="list-style-type: none"> <li>• 2 hours in focused review</li> <li>• Complete &amp; submit active learning templates by hand with 3 critical points for each topic missed</li> </ul>		
Then, take Proctored Assessment (Proctored Assessments are required!)			
Score? ≥95% – 40 points	Score? ≥90% – 30 points	Score? ≥85% – 10 point	Score? ≤ 84% – 0 points
Review <ul style="list-style-type: none"> <li>• 1 hour focused review</li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li>• 2 hour focused review</li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li>• 3 hour focused review</li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>	Review <ul style="list-style-type: none"> <li>• 4 hour focused review</li> <li>• Complete &amp; submit active learning template by hand and 3 critical points for each topic missed</li> </ul>
<b>20 points</b>	<b>20 points</b>	<b>20 points</b>	<b>20 points</b>
Proctored Assessment Retake			
No Retake (optional)	No Retake (optional)	Retake required	Retake required
<b>Total points possible =100/100</b>	<b>Total points possible =90/100</b>	<b>Total points possible =70/100</b>	<b>Total points possible =60/100</b>

**In a 16 week full semester course:**

- Week 7 – practice assessment A
- Week 8 – Remediation from practice assessment A (focused review and submission of active learning template)
- Week 9 – practice assessment B
- Week 10 - Remediation from practice assessment B (focused review and submission of active learning template)

- Week 12- Proctored Assessment
- Week 13 - Remediation from proctored assessment (focused review and submission of active learning template)
- Week 14 – Retake proctored assessment

Students are encouraged to visit the Academic Success Center for support on test taking issues. Any student who does not complete any phase of this remediation will receive an incomplete for the course.

### **Academic Integrity**

Academic misconduct is taken very seriously. It can be represented by such acts as:

- Plagiarism
- Cheating
- unethical use or sharing of texts and teaching-learning resources including, but not limited to, those purchased by another
- to give or receive information *before, during or after examinations* – including previous test information, copying actual exams or quizzes, or possession and use of unauthorized instructor materials (test banks associated with texts utilized in the course)
- to turn in assignments which are the result of another’s work (fabrication)
- acting in a disrespectful manner toward patients, visitors, fellow students, program faculty, or clinical faculty
- falsifying clinical documents
- duplicating and disbursing in any format copyrighted national certification exam questions or any exams, quizzes utilized by the nursing program
- sharing or discussing information or details regarding simulation scenarios/clinical experiences that represent a HIPAA violation

Violations may include probation, suspension, or dismissal from the School of Nursing.

Bulleted items can lead to program dismissal. Further explanation can be found in the Anderson University Student Handbook, available at [www.andersonuniversity.edu](http://www.andersonuniversity.edu).

Unethical behaviors in the classroom and clinical settings by nursing students include but are not limited to the following: lying, cheating, **sharing information via any means possible**, copying, saving, utilizing and/or sharing exams or quizzes without the permission of the faculty, plagiarizing the work of others, falsifying information on patients' charts, physically recording or remembering protected patient information (HIPAA), and fabricating home visits. Cheating and other forms of dishonesty displayed as a student have been correlated with later unethical behaviors as a practicing nurse (Fosbinder, 1991; Harper, 2006; Kenny, 2007; Kiehl, 2006; Langone, 2007).

### **Program Information, Policies and Procedures**

#### **Attendance Policies**

Attendance in classroom, simulations, labs and clinical experiences are determined by the credit hours of the experience. Accreditation requires these contact hours to be met and attendance policies are designed to reinforce and meet this requirement.

Attendance and punctuality of all classes, labs, and clinical experiences is expected. Absences (e.g. illness, AU Institutional Activity) cannot exceed more than 10% of the total class or clinical contact time or a failure in the course will occur. For example, if a class meets for 45 contact hours (3 semester credits), the student that misses more than 4.5 hours of the 45 total contact hours will fail the course. Arrival to class after the scheduled start time or leaving class prior to dismissal counts as one tardy. Three tardies and/or early departures will be counted as 5% of unexcused absence time unless stated otherwise. For example, 3 tardies in a 45 contact hour course would constitute 2.25 hours of the total 4.5 total absence allowable contact hours.

Participation in institutional activities representing Anderson University Academic Catalogue is addressed as follows:

- Because didactic/clinical contact hours must be met in nursing content, participation in institutional activities must be arranged so they do not occur simultaneously. It is possible, but **never** guaranteed that an alternative time for clinical might be available. When AU institutional activities are planned, prior schedule with discussion and approval must be submitted prior to the athletic season or activity schedule beginning to the Undergraduate Co-Chair(s). Subsequent changes due to tournaments, weather changes will be addressed as needed by the coach involved and the Undergraduate Co-Chair. *See AU Institutional Activities Schedule Approval*. The student participating in institutional activities would be responsible for finding another student in a different clinical group willing to exchange clinical times. Both students would need to submit the proposed exchange in writing to the clinical or course instructor at least one week prior to the absence. *See Scheduled Clinical Assignment Change Agreement*

All absences require that the student make up missed activities and/or assignments (if permitted to do so). The student is responsible for contacting the instructor prior to or after an absence to obtain the assignment for content information missed. See testing policy for further details. The faculty will counsel the student whenever classroom absences affect the student's attainment of course outcomes.

Exceptions, if made, will be made at the discretion of the course faculty, clinical faculty, undergraduate chair(s), and Dean.

All communication and notification of absences/tardies to class, lab, or clinical must be made by email to the course instructor (AU email), clinical faculty, or preceptor as applicable. Please see syllabus for designated email addresses. NO TEXTING is acceptable and the message is treated as having not been communicated.

### **Admission, Progression and Dismissal Policies**

A student must earn a minimum grade of C in each nursing course. Some of the specifics about the progressions and dismissal policy include:

#### *Admission*

- All traditional students (TBSN) will be "conditionally" accepted into the nursing school upon acceptance into the university as a freshman. The criterion for being selected as a student in the school of nursing as a traditional student are: 1) high school GPA, 2) ACT/SAT, 3) class rank, 4) participation in extracurricular activities, 5) admission essay, and 6) letter of reference.

Points will be awarded for each of these areas and students will be notified of their acceptance status without an interview. Once “conditionally” accepted into the program, the student will progress into the nursing curriculum as a junior if they have: 1) completed all required courses as noted in the curriculum model, 2) maintained a cumulative GPA of 3.0 or greater on a 4.0 scale, 3) maintained a cumulative GPA of 3.0 or greater on a 4.0 scale in science pre-requisites (anatomy, physiology, microbiology, chemistry).

- ABSN (accelerated) and transfer students (students enrolling at Anderson University with 24 or more credit hours) follow an admissions process instead of a progressions process in being enrolled in the nursing curriculum. The criterion for being selected as a student in the school of nursing accelerated track are: 1) hold a bachelor degree in any area OR possess adequate college credits matching the university general education requirements, 2) GPA for last 60 hours of college credits  $\geq 3.0$ , 3) Science pre-requisites: anatomy, physiology, microbiology, chemistry with GPA  $\geq 3.0$ , 4) Developmental Psychology and statistics, 4) letters of reference, 5) interview with nursing admissions committee if requested.

An applicant for either the TBSN or ABSN tracks must obtain and successfully pass a physical/job function test to be eligible for enrollment.

#### *Progression/Dismissal*

- If a student is admitted into either the TBSN or ABSN tracks, their progression must remain within that track. Conversion from one track to the other is not permitted.
- Any exam grade within any nursing course  $< 84\%$  will require the student to make an advisement appointment within 1 week of the exam and meet with the professor for recommendations for improvement.
- The student must make a minimum of a “C” in all nursing courses to progress in the nursing curriculum.
- Only a maximum of **(2) two C’s** is allowed in nursing courses. The first “C” will result in advisement, the second “C” will result in probation, should the student receive a third “C” the result will be permanent dismissal from the program.
- If a grade less than a “C” is earned in any nursing course, the student is not allowed to progress in the curriculum and is dismissed from the program. Failure in a clinical course results in removal/failure from all clinical courses in which the student is enrolled and program dismissal. See Clinical, Simulation, and Lab Policies.
- There are other areas that prohibit a student from progressing through the nursing curriculum that are not associated with the earning of a letter grade. These include: unsafe/unethical student practice, failure to comply with school drug policy, HIPAA violation, any act that violates the South Carolina Nurse Practice Act, any act that violates the Code of Ethics for Nurses of the American Nurses’ Association, and/or violations of university student guide. The inability to progress leads to dismissal with ineligibility to reapply for the nursing program.
- unethical use or sharing of texts and teaching-learning resources including, but not limited to, those purchased by another
- to give or receive information ***before, during or after examinations*** – including previous test information, copying actual exams or quizzes, or possession and use of unauthorized instructor materials (test banks associated with texts utilized in the course)

- duplicating and disbursing in any format copyrighted national certification exam questions or any exams, quizzes utilized by the nursing program

A student must also receive a satisfactory rating in all aspects of clinical as indicated on the Clinical Evaluation Tool to progress through the nursing curriculum.

### **Internet postings and Social Media Policy**

It is never appropriate to share comments, updates, or critiques regarding other students, patients, clinical agencies or other aspects of the clinical experience on any public forum (e.g. facebook, twitter). Items, photos, and comments shared on these sites are available to the public and any that are in direct violation with our values guided by Christian principles of love of God, neighbor, and self may result in disciplinary action (e.g. probation, suspension, and/or dismissal). It is the policy of the School of Nursing that faculty and staff will not interact with students on social media sites.

For your convenience, below is a portion of the code of behavior from the student development and campus life portion of the Academic Catalog:

“Respect for others, by acting in a manner respectful of the rights and privileges of others and upholding that every member of the campus community, regardless of race, sex, age, disability, or religion, as the right to grow and learn in an atmosphere of respect and support.”

Violations of this are considered very serious because they not only reflect upon your character, but reflect upon the School of Nursing and the University and individuals will be disciplined as appropriate.

These social media sites (e.g. facebook, twitter,) are not to be utilized to address items such as clinical concerns, clinical sites or concerns with the nursing faculty or coursework at Anderson University. Direct violation of this policy may result in disciplinary action as listed above. (e.g. probation, suspension, and/or dismissal)

### **Assistance with SON Technology**

The School of Nursing utilizes The Point resources for e-texts (Lippincott) and ATI (standardized content and comprehensive testing). The student must have a laptop that has current software, sufficient memory, and speed to function in testing situations. Laptops must have wireless connectivity and those older than 2 years are unacceptable. In addition, **it is the student's responsibility to contact tech support** whenever problems are encountered either with the technological products or access within the system.

### **Advising**

All students will be informed of their faculty advisor and are responsible for contacting their advisor by email prior to the registration time of each semester. Students are required to discuss their progress and classes they plan to take. During advisement, students will be approved to take only courses for which they have had the specified prerequisites. Students will not add courses for which they are not approved. Failure to preregister may result in desired classes being closed, and may necessitate a delay in completing program requirements. It is the student's responsibility to register for their classes each semester through Self-Service. Failure to register by the Last Day to Register and Add Courses at the beginning of the next semester will result in automatic withdrawal from the nursing program.

## **Paper Writing**

Students are required to format papers and cite sources according to the style guidelines of the APA (American Psychological Association). Information can be found online at [www.apastyle.org](http://www.apastyle.org).

## **Simulation Learning Environment Policies**

The primary objective of the Anderson University Simulation Learning Environment is to promote a superior level of high fidelity learning/teaching for students and faculty by providing a state-of-the-art environment to evaluate basic and advanced skills/behaviors.

- Students are never to discuss events or scenarios occurring in the simulation lab except in debriefing sessions. This is considered a clinical environment and confidentiality regarding all aspects of scenarios is required and expected. There is zero tolerance for academic dishonesty.
- Students are to dress for simulation lab as if attending clinical. Uniforms, name badges, and uniform policies are enforced.
- Students are required to access the SLS electronic charting (if required) during a scenario.
- Faculty members are responsible for supervising all students brought to the lab for training.
- Universal Precautions are to be followed at all times as are all safety guidelines used in the clinical setting. Sharps and syringes are to be disposed of in appropriate containers. Anyone sustaining an injury must notify their instructor immediately and report to Anderson University Health Services.
  
- Equipment may not be removed from the simulation lab for practice, nor are the simulation labs to be used for practicing clinical skills unless supervised by faculty or staff.
- Students may be digitally recorded during scenarios. Viewing of videos recorded during training are only permitted with faculty members. The videos are the property of the nursing department and students may not possess simulation lab videos or recordings.
- Coats, backpacks, and other personal belongings are not to be brought to simulation lab and should be secured before entering the simulation area.
- Electronic devices (iPad, laptop, cell phone) are permitted if utilized within the scenario for access or charting.
- The camera/video function on the iPad is never to be used in the simulation/clinical environment.
- After a simulation lab experience, take your personal belongings with you (i.e. papers, pencils, stethoscopes, pen lights, etc.).
- Food, drink and ink pens/markers are not permitted in the labs. Only pencils may be used in the simulation lab.
- If you have a latex allergy, inform your instructor before beginning simulation.

## **Clinical, Simulation and Lab Policies**

Students are required to attend all clinical, simulation, and lab sessions. Students are required to attend and actively participate in all nursing laboratories (including human dissection lab). If the student is absent on a clinical day, she/he will be required to make up the clinical experience at the discretion of the instructor (e.g. volunteer hours, paper). A make-up will not erase the absence. Additional absences from clinical, simulation and lab sessions will result in a grade of U for any clinical and course. Being tardy for a clinical experience is unacceptable and it is the up to the discretion of the clinical instructor whether or not the student will be allowed to remain in the clinical setting if they are tardy. On the third occurrence of a tardy for the clinical, simulation and lab sessions, the student will not be permitted to

remain in the experience for that day and an absence will be recorded. If the student is going to be late to the clinical area, the student is expected to call the faculty member as soon as possible. When the student cannot attend the clinical session, the student must notify the clinical instructor one-half hour prior to the start of the clinical session and call the assigned faculty member before the clinical session. Failure to notify the faculty will result in a grade of “No Credit” for the day and an absence is recorded.

Some clinical courses may require non-typical hours such as evening and/or weekend time slots. These clinical times are only altered for an unavoidable conflict. The student is responsible and must propose an alternative learning experience and time in writing to the clinical/course instructor 4 weeks in advance for approval; although submitted, it is not guaranteed to be approved.

Only approved electronic devices may be used during the clinical experience. Any smartphone must be in a concealed location (e.g. backpack) away from patient care areas. The camera functionality on any smartphone or iPad will NEVER be used within a clinical, lab, or simulation setting. If a student violates this policy, they will be immediately dismissed. Any student with knowledge of this activity must confidentially report this to the School of Nursing. If this knowledge is unreported, both the offender and the person who did not report will be dismissed.

### **Daily Clinical Evaluation**

Clinical evaluation is assessed on a daily basis depending on the needs of the specific clinical course and instructor. Students are expected to earn satisfactory ratings in assessed categories. When a student earns a “Needs Improvement”, specific details are provided that address the area to be improved by the action date given. An unsatisfactory rating warrants a clinical counseling meeting in which a warning is issued to the student regarding the observation that is below expectations and may reflect an action that is contrary to safe nursing practice. **A student’s unsatisfactory daily clinical evaluation/lab warnings and counseling meetings are cumulative and a third one in a subsequent course within the program can constitute a failure. See Daily Clinical Evaluation Tool**

### **Mid-Term and End-Semester Clinical Evaluation Tool and Clinical Grading Scale**

Rating Code: Clinical Evaluation Tool – utilized mid-term and end-semester

- 0 = Unsafe/Unethical Performance – (0.0% failure in meeting any/all minimal standards for safe practice)
- 1 = Unsatisfactory Performance – Inconsistent in meeting clinical objectives (74.99% or less of the time – inconsistent in meeting any/all minimal standards for safe practice)
- 2 = Minimal Performance – With ongoing guidance is able to meet all clinical objectives (75-80% of the time – meets minimal standards for safe practice)
- 3 = Good Performance – With limited guidance is able to meet all clinical objectives (81-89% of the time).
- 4 = Outstanding Performance – Consistently, skillfully, and with early and progressive independence is able to meet all objectives (90-100% of the time)

A clinical failure will occur for the following situations:

- if a student receives 3 (three) consecutive “U” ratings on either the Daily Clinical Evaluation or the Daily Medication Administration Evaluation throughout the track
- if a student is rated a “0” at midterm or final evaluation

- if a student receives any category rating of “1” or below at the final evaluation
- if a student receives a final score at the end of clinical evaluation that is less than 75% of the total maximum score possible in NUR 3XX clinical courses
- if a student receives a final score at the end of clinical evaluation that is less than 84% of the total maximum score possible in NUR 4XX clinical courses

A clinical failure will result in failure within the entire course regardless of didactic grade point average. This will result in dismissal from the track and immediate removal and failure of any other additional clinical courses the student was enrolled in for that semester.

### **Clinical/Simulation Lab Preparation and Conduct**

1. Each semester students will be provided specific written guidelines for preparation (e.g. concept maps, pre-tests, post-tests, written assignments, or other activities).
2. Students are expected to come prepared for clinical/lab.
3. If a student is unprepared for clinical/lab or violates clinical policies, the student may be sent home and the incident will result in a clinical counseling, a second occurrence of the same or different infraction will result in a clinical warning, and a third incident will result in a clinical/lab and course failure.
4. A student’s unsatisfactory daily clinical evaluation/lab warnings and counseling meetings are cumulative and a third one in a subsequent course within the track will constitute a failure.
5. Any grossly unsafe or negligent event occurring clinical, simulation, or lab or unethical practice will constitute an automatic course or program failure without the student receiving a counseling or warning.

### **Clinical Evaluation of Student Performance**

1. Students may request a copy of each of their clinical evaluations.
2. Student performance in the clinical area will be evaluated utilizing the Clinical Evaluation Tool. The student must achieve a satisfactory level of performance in the clinical/ lab in order to progress. See clinical grading scale below for details.
3. When a student’s clinical performance in any clinical situation indicates that a student is unable or unwilling to perform at a safe, ethical and/or professional level of practice, the clinical faculty in consultation with the faculty course coordinator will remove the student from the clinical area and it will result in a clinical counseling for that day.
4. After one clinical counseling, a written action plan will be made with the course coordinator and the clinical instructor and shared with the student. If the directions in the action plan are not met by the date and time identified, then the student will receive a clinical warning. This process will again be repeated and if they fail to meet the directions in the action plan by the date and time identified, the student will fail the course.
5. Students are encouraged to continuously articulate learning needs to the nursing faculty throughout each semester in order to enhance the clinical and course faculty’s ability to facilitate relevant learning assignments and opportunities.
6. **A clinical failure will be assigned if the student is responsible for a sentinel event or a violation of HIPAA.**

The Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) defines “A sentinel event is an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase, “or the risk thereof” includes any process variation for which a recurrence would carry a

significant chance of a serious adverse outcome. Such events are called "sentinel" because they signal the need for immediate investigation and response.”

## **Regulations for Student/Faculty Data Entry and Deletion of Practice Materials**

The policy written here within is a procedural method for the entry and deletion of practice data by students and or faculty from the Anderson University School of Nursing.

### Entering Data

Students are required to practice documentation recording when in the clinical setting, to learn the basic concepts of documentation. Clinical instructors are required to observe this data, critiquing it for accuracy, completeness, and legality issues.

To comply with federal regulators, such as HIPAA, and organizational guidelines for the healthcare organization where students attend clinicals, **no student is to record any patient identifier of any kind, whether intentional or unintentional.** Patient identifiers include, but are not limited to, Account Numbers, Medical Record Numbers, Patient Name, Date of Birth, Actual Age, Gender, Patient Initials, Room Numbers, and Provider Name.

Once a student has completed their data entry for a clinical date, the student will submit their entries to their clinical instructor. The clinical instructor will assess the entries, not only for accuracy and completeness of documentation, but also to assure no patient identifiers, such as those listed above, are recognizable in any part of the record.

### Penalties

If a student does identify the patient in any way, in any part of the entry, the instructor is to confiscate and delete the record immediately. The student will also receive an unsatisfactory grade, or U, for that particular clinical date. The student will not be allowed to make it up and further consequences may follow, that can include actions taken by the clinical site where the violation occurred.

Further violations may constitute a corrective action for the instructor involved in regards to the education of students about HIPAA guidelines and regulations. Students who violate the policy a second time will receive a second unsatisfactory grade, and by the Anderson University School of Nursing Handbook, this will result in immediate expulsion from the nursing program.

### Instructor Responsibilities

The instructor will review the entire entry by the student before releasing their grade for that clinical date and re-emphasize during clinicals, in post-conference, and at various stages of the student’s time in the program, during lecture, orientations, student assemblies, about the importance of HIPAA and maintaining patient confidentiality with private health information (PHI).

### Deletion of Entries

Furthermore, either the Simulation Coordinator, or designated staff member, will be responsible for the deletion of the records entered by students on a semester-by-semester basis. Upon completion of this, the person above will be required to notify the Internet/IT Security Advisor/Director of the healthcare organization where clinicals took place for that semester that all data entered by Anderson University School of Nursing students has been deleted.

The faculty, staff, and students of the Anderson University School of Nursing will be held accountable for ensuring that this policy is maintained. Any violation of this policy will require a corrective action plan on the part of the faculty or staff member involved, and students will receive an unsatisfactory grade for that particular clinical date.

### **Standard Precautions**

The Center for Disease Control and Prevention (CDC) Recommended Standard Precautions are outlined below. It is the student's responsibility to maintain compliance with these recommendations in all clinical settings.

Because the potential diseases in a patient's blood and body fluids cannot be known, blood and body fluid and substance precautions recommended by the CDC should be adhered to for all patients and for all specimens submitted to the laboratory. These precautions, called "standard precautions," should be followed regardless of any lack of evidence of the patient's infection status. Students should routinely use barrier protection to prevent skin and mucous membrane contamination with:

1. Secretions and excretions, except sweat, regardless of whether or not they contain visible blood
2. Body fluids of all patients and specimens
3. Non-intact skin
4. Mucous membranes

### **Hand Hygiene**

The following guidelines will help prevent contamination:

- Wash hands after touching blood, body fluids, secretions, excretions, and contaminated items, whether or not gloves are worn, and/or immediately wash hands prior to any client interaction or nursing intervention. Perform hand hygiene immediately after gloves are removed, between patient contacts, and when otherwise indicated to avoid transfer of microorganisms to other patients or environments. It may be necessary to wash hands between tasks and procedures on the same patient to prevent cross contamination of different body sites.
- Use a plain (non-antimicrobial) soap for routine hand washing.
- Use an antimicrobial agent or waterless antiseptic agent for specific circumstances (e.g., control of outbreaks or hyperendemic infections) as defined by the infection control program.
- Wash hands upon entering and exiting a patient room.

### **Gloves**

Wear gloves (clean non-sterile gloves are adequate) when touching blood, body fluids, secretions, excretions, and contaminated items. Put on clean gloves just before touching mucous membranes and

non-intact skin. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms and perform hand hygiene. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces, and before providing care to another patient. Perform hand hygiene immediately to avoid transfer of microorganisms to other patients or environments.

### **Mask, Eye Protection, Face Shield**

Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures and when performing patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

### **Gown**

Wear a gown (a clean non-sterile gown is adequate) to protect skin and prevent soiling of clothing during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions, or cause soiling of clothing. Select a gown that is appropriate for the activity and amount of fluid likely to be encountered. Remove a soiled gown as promptly as possible and wash hands to avoid transfer of microorganisms to other patients or environments.

### **Patient Care Equipment**

Handle used patient care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other patients and environments. Ensure that reusable equipment is not used for the care of another patient until it has been appropriately cleaned and reprocessed. Ensure that single use items are properly discarded.

### **Environmental Control**

Follow procedures for the routine care, cleaning, and disinfection of environmental surfaces, beds, bed rails, bedside equipment, and other frequently touched surfaces.

### **Linen**

Handle, transport, and process used linen soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures and contamination of clothing, which avoids transfer of microorganisms to other patients and environments.

### **Occupational Health and Blood-borne Pathogens**

Take care to prevent injuries when using:

- Needles, scalpels, and other sharp instruments or devices.
- When handling sharp instruments after procedures.
- When cleaning used instruments and when disposing of used needles.

Never recap used needles, manipulate them with both hands, or use any other technique that involves directing the point of a needle toward any part of the body. Instead, use either a one-handed scoop technique or a mechanical device designed for holding the needle sheath. Do not remove used needles from disposable syringes by hand and do not bend, break, or manipulate used needles by hand. Place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers located as close as practical to the area in which the items were used. Place reusable syringes and needles in a puncture-resistant container for transport to the reprocessing area.

Use mouthpieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

### **Student Occurrence**

Any student involved in a clinical occurrence (e.g. needle stick, patient or student fall/injury, medication error, etc.) must adhere to the following protocol for reporting the occurrence:

1. Notify the nurse responsible for the patient immediately.
2. Notify the clinical instructor, preceptor, and/or faculty member as quickly as possible after the occurrence happens. The clinical instructor, preceptor, and faculty will provide information on appropriate actions to be taken.
3. Notify the charge nurse.
4. If exposure occurs, complete the Anderson University Exposure Incident Report and provide a copy to the School of Nursing Undergraduate Chair and Anderson University Health Services.
5. Meet any facility policy regarding occurrences.

Any medical services provided to the nursing student in a clinical facility will be billed against the health insurance of the student. Any financial obligations (e.g. copay, balance due) will be the sole responsibility of the student.

### **Extended Illness**

Students who are absent due to illness for three days or more will be required to bring the “Fitness for Duty-Return to Classroom and Clinical Courses” medical clearance form signed by their physician when they return to school. (As changes to student health status occur (i.e., hospitalization, surgery, pregnancy, etc.), the student is required to inform the Nursing Program Chair so that changes may be made to the health record. Full healthcare provider clearance is required prior to the student returning to the clinical rotation for changes in health status.)

A student who appears ill for class or clinical may be asked by the instructor to leave and consult a physician or Student Health Services.

### **Readmission/Admission After Voluntary Withdrawal or Transfer**

A student who leaves the university and/or School of Nursing in **good standing** through voluntary withdrawal or a student from another nursing program who left that program in good standing and desires to transfer to the Anderson University nursing program may be evaluated for readmission/admission under the following circumstances:

1. Make a formal reapplication/application to the School.
2. At the time of reapplication/application, submit a statement which addresses the reason for the withdrawal or transfer, outlines what she/he has done to ensure success in the School of Nursing and why she/he should be readmitted/admitted. The statement must be written by the student.
3. Have a personal interview with the Admission, Retention and Graduation Sub-Committee (ARG) and Dean. In addition, the student’s complete academic record, including all clinical evaluations, will be reviewed.
4. Readmission/admission is not automatic. Students will be considered as part of the total applicant pool.
5. The requirements for completion of program/major requirements within five (5) years of initial enrollment will be in effect for readmitted students.
6. All policies in place at the time of readmission/admission will apply.

## **Student Grievance, Complaint, and Right of Appeal Guidelines**

### **Course/Clinical Grievance (SON)**

Course/Clinical Grievances Issues/Concerns in a single course, such as the quality of instruction, fairness and equity in awarding grades or evaluations should use the following procedures:

1. If the issue(s) concern a single course, the student should make an appointment with the course instructor, clinical instructor and/or the course coordinator (as appropriate), provide a written explanation and attempt to come to an amicable resolution. A written response will be given to the student within five working days.
2. If the issue cannot be settled at the course level, an appointment should be made to provide a written explanation and discuss the issue(s) with the Undergraduate Co-Chair of Nursing. A written response will be given to the student within five working days.

### **Formal Complaint (SON)**

The School of Nursing defines a formal complaint as a concern about a specific aspect of the nursing program expressed by the individual affected and communicated in writing to the Dean of the School of Nursing who has the authority to respond. However, first a student must initiate the course/clinical grievance with the specific course and/or clinical instructor and then proceed to the Undergraduate Co-Chair(s) of Nursing for resolution prior to filing a formal complaint in writing to the Dean. Once receiving a formal complaint, a written response will be given to the nursing student within five working days.

### **Right of Appeal (AU)**

The School of Nursing adheres to the Anderson University Right of Appeal as outlined in the Anderson University Academic Catalog. Student concerns or complaints are handled in a professional manner. Discussion and problem solving of issues should be based on facts. Resolutions should acknowledge the satisfaction of all parties, but must maintain the integrity of the nursing program. If the issue(s) cannot be resolved through the procedures described above in Course/Clinical Grievances, a formal complaint may be filed as described above in the section above titled Formal Complaint. In the current Anderson University Academic Catalogue, the process is described on page 284 and states that after addressing a formal complaint with Dean of Nursing, then a written appeal is submitted to the Office of the Provost. A response will be returned to the student within five working days. The Office of the Provost renders a final response.

Issues/concerns related to deviations from the prescribed admission policies, progression policies, program of study and graduation policies should be submitted to the Admission, Retention and Graduation Subcommittee (ARG) of the faculty. Admission, Retention and Graduation Subcommittee (ARG) Procedures:

1. Requests to the Committee must be in writing and received no later than five (5) days prior to the scheduled Committee meeting
2. The student will receive a letter from the Committee regarding its decision.
3. The student's request and the Committee's decision will be placed in the student's academic file in the School of Nursing.

### **Grade Appeals/Changes**

1. If a student files an appeal within a course it must be in writing and the student may continue to progress while the appeal is in process until a resolution is determined.
2. An appeal must be filed within 30 days of the incident or end of course.
3. Each person to whom an appeal is made has 5 working days in which to communicate the decision to the student.

## **Graduation Requirements**

1. Completion of a minimum of 122 semester credit hours, including 59 semester hours of liberal arts core and supporting courses and 63 hours of major courses.
2. Completion of Anderson University requirements.
3. Upon completion of the program, recommendation by the faculty and endorsement by the Dean, basic BSN graduates are eligible to apply to take the National Council Licensure Examination (NCLEX-RN) leading to a registered nurse (RN) licensure to practice nursing.

## **Program Requirements**

### **Background Check**

In compliance with the affiliation agreements between Anderson University, School of Nursing, and practice facilities/agencies, a criminal background check is now required for all nursing students participating in clinical education/ learning experiences. The enforcement of this policy is in conjunction with the facilities/agencies compliance with Joint Commission on Accreditation of Healthcare Organizations (JCAHO) Standards that require criminal background checks on anyone providing care, treatment or services.

The purpose of this policy is to:

1. Promote and protect patient/client safety;
2. Comply with clinical affiliates that may require a student and faculty background check as a condition of their contract;
3. Promote adequate opportunity for the student to petition or review the convictions in order to continue in the nursing program; and,
4. Provide early identification of students who may have difficulty meeting eligibility for licensure requirements.

Results of the criminal background checks will be made available to the Dean of the School of Nursing by the designated agency/company selected to perform the criminal background check. The Dean will make the results available to the individual student. The Dean or designee(s) will validate to the clinical facilities/agencies that the student has passed a criminal background check.

New students must complete the criminal background check in order to have the results received by the School of Nursing prior to the fall semester of the admission to the nursing program. As part of the signed application to the nursing program, students will indicate their knowledge of this policy and their belief that they do not have any criminal history that would disqualify them from clinical practice and/or licensure.

Failure to pass a criminal background check may prevent a student from enrolling and/or continuing in the nursing program.

A significant criminal background screen means a conviction for any matter (a) listed in the *Laws Governing Nursing in South Carolina*, published by the South Carolina Department of Labor, Licensing and Regulation, Board of Nursing, that would prohibit licensure; (b) noted by the program accrediting agency; and/or (c) identified by a clinical affiliate as unacceptable for clinical practice.

All criminal background information will be kept in confidential electronic files by the investigating agency and archived for at least seven years. The Dean of the School of Nursing will have access to these files. A copy of the criminal background check will be kept in a secured cabinet in the School of Nursing.

If a student believes her/his background information is incorrect, she/he will have an opportunity to demonstrate the inaccuracy of the information to the investigating agency. The search of court records and documents is the responsibility of the student in question. The student will not be able to enroll in the nursing program until the matter is resolved.

What does the background check consist of?

- Criminal History Investigation (7 years)
- Sexual Offender Registry/Predator Registry
- Social Security Number Verification
- Positive Identification National Locator with Previous Address
- Maiden/AKA Name Search
- Medicare/Medicaid Sanctioned, Excluded Individuals Report
- Office of Research Integrity (ORI) Search
- Office of Regulatory Affairs (ORA) Search
- FDA Debarment Check
- National Wants & Warrants Submission
- Investigative Application Review (by Licensed Investigator)
- National Healthcare Data Bank (NHDB) Sanction Report
- Misconduct Registry Search
- Executive Order 13224 Terrorism Sanctions Regulations
- Employment Verification (3 most recent employers)

### **Confidentiality Statement**

The faculty and staff of Anderson University School of Nursing recognizes the importance of protecting the private and confidential information regarding clients, their families, employees, staff and peers as well as the operation(s) of agencies within which the faculty and students practice.

It is the legal and ethical responsibility of every faculty member and student to maintain and abide by laws relative to privacy including the Health Insurance Portability and Accountability Act of 1996 (HIPAA) guidelines. This policy includes materials discussed in both the classroom, simulation lab and clinical settings. Information pertinent to clients may be relayed only to those individuals who have authority to have that information. All information pertaining to clients is confidential, regardless of form (verbal, hard copy, film or computerized form). Unauthorized access, use or disclosure is illegal.

The faculty and students agree to:

- Follow the HIPAA guidelines including the information in the School of Nursing HIPAA Statement found in the Anderson University School of Nursing BSN Student Handbook;
- Read, understand, sign and follow confidentiality and privacy policy statements before beginning each clinical experience. Policies vary from health care agency to agency; student and faculty are responsible for reviewing them at the beginning of every clinical experience;
- Protect confidentiality of clients, families, employees, peers and agency at all times;
- Access, use or share confidential information only as it is essential and allowed by law;
- Never release protected health information to any unidentified source; know the person you are taking to;
- Never talk about clients in public; never discuss confidential information where other clients, visitors or other employees might overhear, including elevators, dining facilities and telephones;
- Never leave client records or information where unauthorized persons might see them;
- Never copy information nor remove any part of the client's record from the agency;
- Never use client's names or specifics about their healthcare issues on the www including Moodle. Safeguards that exist to protect client data include institutional systems of passwords that identify users and their access to privileges in the computer system. The ability to use an electronic signature is a privilege that is granted in accordance with agency policies. It is not a right to have passwords and computer access.

Faculty and students agree:

- Never lend or share his or her password with anyone else;
- Never use another individual's login, ID or password;
- To report immediately breaches or suspected breaches of security to appropriate agency authority;
- To realize that E-mail is not private or secure and therefore not communicate information via this system.

### **Drug Screening**

The use of substances which interfere with the judgment and/or motor coordination of nursing students pose an unacceptable risk for clients, Anderson University, the faculty, and clinical agencies. In compliance with clinical agency requirements, Anderson University School of Nursing requires annual drug testing. Such testing will be completed before the first clinical course and annually thereafter for all students in clinical courses. Additionally, upon reasonable suspicion of drug and/or alcohol use in the clinical, classroom, or laboratory settings, Anderson University School of Nursing has the right to require a student to submit to testing for substance abuse at the student's expense. Refusal by a student to submit to testing will result in that student's dismissal from Anderson University School of Nursing.

### **Procedure for Drug Testing**

Prior to participation in clinical experiences, students will be required to follow the drug testing procedures established by Anderson University School of Nursing. Tests will be conducted by a qualified laboratory using established methods and procedures selected by the Department of Nursing through a selected outside vendor. The testing must be completed within 90 days prior to the first clinical experience. **All costs associated with testing are the responsibility of the student. Third party fees may be charged if a student does not use a laboratory site specified by the vendor.** The student may be screened for amphetamines, cocaine metabolites, marijuana metabolite, opiates, phencyclidine (PCP), propoxyphene, barbiturates, benzodiazepines, methadone, alcohol and other

chemicals as required by clinical agencies. A drug test will be presumed positive if any of the drugs tested are found. Presumed positives will be confirmed by a second test from the original urine sample. If the test is positive, the available evidence, including health history, will be used to determine the presence or absence of drug abuse. The School of Nursing will ensure confidentiality of results by making the information available only to the student and appropriate administrators.

### **Refusal to Test**

Refusal by a student to submit to testing will result in that student's dismissal from Anderson University School of Nursing.

### **Positive results**

Positive drug screens shall be reviewed by the School of Nursing. If the student tests positive for one or more of the above drugs, and asserts that the positive test is a result of taking a drug prescribed to them by a health care provider, the School of Nursing will review, with the student, the actual prescription, amount taken daily, the time and amount of the last dose, and the reasons for the prescribed drug. Additionally, the student will be required to contact the prescriber and/or pharmacy and authorize release of medical information to indicate the illness for which the drug was prescribed, the length of time the student will have to take the drug, and other relevant information.

A violation of the drug screening policy consists of:

- A student cannot provide a valid and current prescription that explains a positive drug screen
- A positive result for illegal substances or alcohol
- Refusal to provide a drug screen sample for testing upon request

These instances may result in dismissal from the School of Nursing. A recommendation will be provided to the student for community resources in the event of a positive drug screen for illegal substances or alcohol.

### **Reasonable Suspicion of Drug/Alcohol Use**

In addition to the pre-clinical screening process for substance abuse, for the protection of patients, faculty, staff, and students, the School of Nursing has the right to require a student to submit to testing for substance abuse at the student's expense when a faculty member has reasonable cause to believe that a student is under the influence of alcohol and other drugs including:

1. Observable phenomena, such as direct observation of drug use or the physical symptoms or manifestations of being under the influence of a drug or alcohol, such as, but not limited to, slurred speech, impaired physical coordination, inappropriate comments or behaviors, pupillary changes, noticeable change in grooming habits or odor of alcohol or other drugs.
2. Abnormal conduct or erratic behavior, absenteeism, tardiness or deterioration in performance.
3. A report of drug use provided by credible sources.
4. Evidence of tampering with a drug test.
5. Information that the individual has caused or contributed to harm of self, visitors, other staff, or patient while under the influence of drugs.
6. Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs.

If a faculty member observes such behavior, and if such behavior is observed or validated by another faculty member or clinical agency staff member, the faculty member must excuse or remove the student from the educational or patient setting immediately and contact the School of Nursing Dean in order to review the situation and authorize the faculty member to make arrangements for testing. The faculty member is to make arrangements to have the testing performed immediately. If a drug use/abuse incident occurs while on a clinical unit, the student will be responsible for obtaining transportation to the designated lab or other testing agency; the student will not be allowed to drive from the clinical facility. The student will be requested to sign an informed consent to be tested before the specimen is collected at the designated testing agency.

### **Cardiopulmonary Resuscitation (CPR) Certification**

All Anderson University nursing students must be American Heart Association CPR certified. New students must provide documentation of their certification during orientation. Continuing students should provide documentation of recertification at the beginning of each academic year. Students failing to provide documentation will be prohibited from attending clinical experiences and progressing in the nursing program. Absence in clinical experience as a result of lack of current CPR certification will be considered an unexcused absence from this course.

### **Professional Liability Insurance**

Students enrolled in Anderson University School of Nursing must maintain a personal Professional Liability Insurance Policy throughout the program. The student must provide documentation of coverage (i.e., policy face sheet with effective dates) of a current \$1 million (per occurrence) and \$3 million aggregate liability policy before starting clinical classes and **yearly** thereafter.

### **Health Insurance**

Health Insurance is required for all Anderson University nursing students throughout the nursing program in order to participate in clinical courses. Students must furnish evidence of having insurance annually. Students are required to sign a statement indicating their understanding of maintaining the personal health insurance at all times and failure to do so will result in dismissal from the program. Students are personally liable for health/medical costs incurred while attending the University.

### **Health Screening**

Prior to attending clinical experiences, students must provide documentation of current immunizations including:

- Measles, Mumps, Rubella (MMR) – two vaccine doses required or positive antibody titer for each.
- Tetanus-Diphtheria-Pertussis (Td or Tdap) – If last dose of Td (tetanus/diphtheria) is greater than two years prior to the date you enter clinicals, Tdap is recommended.
- Varicella (Chicken Pox) – two vaccine doses or positive titer showing immunity. Report of having had the disease is no longer acceptable documentation.
- Hepatitis B – documented series of three shots.
- Influenza – required annually.
- Meningitis

Tuberculosis screening – Student must either have documentation of yearly screenings or complete the initial two-step PPD series, i.e., two tests administered one to three weeks apart. Thereafter yearly

screenings are required. If the student has a positive result, a chest x-ray no more than 3-months prior to first clinical experience is required.

### **Health Insurance Portability and Accountability Act (HIPAA)**

In compliance with HIPAA regulations and privacy of health information, students' health information submitted to the School of Nursing as a requirement for enrollment and participation in clinical learning experiences will be secured in the individual student's records in locked cabinets.

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule provides a Federal law to protect privacy and confidentiality by preventing a release of an individual's (client's) individually identifiable health information (i.e., information in a medical record).

The faculty of the Department of Nursing at Anderson University recognizes the importance of protecting health information and understands the responsibility to educate the students as to the requirements of the Health Insurance Portability And Accountability Act of 1996 (HIPAA). HIPAA protects all health care information generated by a healthcare provider, health plan, or facility. This information is protected whether it is verbal, written or electronic. The following information is a description of the HIPAA guidelines as they apply to students and faculty.

A nursing student having access to individually identifiable health information must complete HIPAA Privacy Rule training. Typically, this Privacy Rule training must be completed prior to the student beginning clinical. Records of the training sessions are maintained in the Department of Nursing. Nursing students may view individually identifiable health information for treatment purposes ONLY. In other words, Anderson University BSN students must be involved in the care of the client to view a client's individually identifiable health information (i.e., the contents of a medical record).

Individually identifiable health information may be stored in a variety of formats including paper, electronic (computers), video, audio, and photographs. Regardless of the format, all individually identifiable health information must be protected. **Under no circumstances should any of this information be copied and/or removed from the clinical agency.**

### **Unsafe/Unethical Student Practice**

The faculty of the School of Nursing has an academic, legal and ethical responsibility to protect the public and health care community from unsafe nursing practice. It is within this context that students can be disciplined or dismissed from the Nursing Program for practice, which threatens or has the potential to threaten the safety or well-being of a client, family member, another student, a faculty member or other health care provider.

An unsafe/ unethical practice is defined as:

- An act or behavior of the type which violates the South Carolina Nursing Practice Act.
- An act or behavior, which violates the Code of Ethics for Nurses of the American Nurses' Association.
- An act or behavior, which violates the objectives and/or policies of the School of Nursing.
- An act or behavior, which violates the objectives and/or policies of each Nursing Course.
- An act or behavior, which violates the objectives and/or policies of the Health Care Agency.

- An act or behavior, which constitutes nursing practice for which a student is not authorized or educated at the time of the incident.

When an incident occurs which a faculty member believes may constitute an unsafe/unethical practice, the faculty member shall immediately notify the student and instruct the student to leave the clinical setting, the faculty member will then notify the Undergraduate Chair who will then notify the Dean of Nursing. The student may receive a course failure.

The clinical faculty member in consultation with the course coordinator will review all of the written documentation involved in the incident to determine whether there are grounds that unsafe/unethical practice has occurred. If it is determined at this point that critically unsafe/unethical practice and/or behavior has occurred, the Undergraduate Chair(s) will meet with the Dean of Nursing to review all the written documentation and for providing recommendations with regard to the status of the student.

After a gravely unsafe incident a recommendation for dismissal from the nursing course and/or program is made, the Dean of Nursing will refer the matter to the ARG (Admission, Retention, and Graduation) Subcommittee. The student has the right of due process and will be notified in writing at least three days prior to the scheduled meeting and provided an opportunity to respond to the allegations. The student will be notified in writing of the ARG Sub-Committee's decision. The student has the right to appeal the ARG's decision. Refer to the Anderson University Academic Catalog.

### **Transportation**

Students are required to provide their own transportation to clinical agencies. Students are reminded that if they transport other classmates, they are assuming personal liability in the event of an accident.

### **Emergency Contact Policy**

Students will be required to provide the School of Nursing with a name and telephone number of someone close to the student who could be contacted in case of an emergency. Students should provide the School of Nursing telephone number (864-328-1460) to family members who may need to contact the student in case of an emergency. Should this event occur, the student's location in class or clinical will be determined. The faculty will be contacted by the School of Nursing and will then inform the student.

### **Student Records**

Student records will be maintained per the policy of Anderson University as set forth in the Anderson University Undergraduate Catalog, page 21. The records kept at the School of Nursing will be maintained in a secured, locked records storage area. The nursing school's policy is established based on three record keeping processes. These are:

- Active student records – A file will be kept in the file record room that will be kept locked and hold the documents pertaining to the academic advising and progress notes, academic progress, and health records of the student.
- Graduated student records – A file will be kept in the file record room that will be kept locked and hold the documents pertaining to the prior academic processing and progress notes, academic success of the student, student health records, and materials noting the eligibility for taking the NCLEX-RN examination and state licensure. These records will be kept in the locked file for three years after graduation and then moved to a secured storage environment.

- Dismissed/withdrawn student records – A file will be kept in the file record room that will be kept locked and hold the documents pertaining to the student’s academic progress, academic advising and progress notes, and the rationale and grievance process noted in the student being dismissed from the nursing school. These records will be kept for four years after the student was initially enrolled. At this point the records will be shredded.

The individuals having access to these files include administration, faculty, and staff serving in the nursing school. If the student files a verbal or written request to obtain any of his/her academic records, the university processes of sharing the records will be implemented.

### **Dress Code**

Uniforms are to be worn by students providing nursing care in clinical, simulation and laboratory settings. Uniforms must be clean and smoothly pressed and in good repair. The uniform is to be worn only in clinical, simulation, and laboratory settings. Students may wear the uniform to class on those days when both class and clinical, simulation, or lab experiences occur.

**Student Uniforms:** It is required that Students purchase two (2) complete uniforms and one (1) lab coat as described below:

Female: Black scrub pants  
 Adar “V-neck” scrub top in Honey with the Anderson University School of Nursing Patch  
 Black shoes (closed toe/closed heel)  
 Plain black socks  
 Picture Identification Badge per agency policy and course instructor

Male: Black scrub pants  
 Adar “V-neck” scrub top in Honey with the Anderson University School of Nursing Patch  
 A plain, black undershirt may be worn under scrub top (no graphics or writing)  
 Black socks  
 Black shoes (closed toe and heel)  
 Picture Identification Badge per agency policy and course instructor

**Lab Coats:**

Female: White Lapelled Lab Coat with the Anderson University School of Nursing Patch

Male: White Lapelled Lab Coat with the Anderson University School of Nursing Patch

**NOTE:** White scrub jacket is not an acceptable substitution. If you have any questions, please consult faculty.

**Accessories:** Uniform accessories are a part of each uniform and include the following:

- Watch with a second hand.
- Identification Badge: Worn above left breast pocket of uniform/lab coat.

- c. Bandage scissors
- d. Stethoscope
- e. Blood pressure cuff (optional)
- f. Penlight
- g. Nursing equipment as required by the specific course.

**NOTE: STUDENTS WILL NOT BE ALLOWED INTO THE CLINICAL AREA WITHOUT PICTURE IDENTIFICATION BADGE ISSUED BY ANDERSON UNIVERSITY.**

- Jewelry: Only the following jewelry may be worn:
- a. Smooth wedding bands with no stones.
  - b. One pair of small stud style earrings - silver, gold or white. Only one earring per ear should be worn and size should not exceed 8mm. No dangle or loop earrings with stones may be worn. No other visible piercings are permitted.
  - c. Medic Alert necklace or bracelet
  - d. No oral jewelry allowed.

- Body Tattoos  
or other Facial  
Jewelry: All body tattoos and other facial jewelry must be concealed or covered.

- Other Apparel: Outer apparel appropriate to weather conditions should be worn over the uniform to and from the clinical facility. It may not be worn while giving direct patient care. Sweaters are not allowed during clinical practice. A plain white or black tee shirt/camisole can be worn underneath uniforms for modesty. This applies to both male and female students.

- Personal Hygiene: Personal cleanliness is prerequisite for client care. Regular bathing, hair washing and use of deodorant are part of personal cleanliness. Perfume, cologne, scented lotion or body spray is not allowed.

- Hair: Hair must be neat at all times. Long hair must be pulled back or neatly restrained so that it will not interfere with nursing activities. Extreme hairstyles and/or colors are to be avoided. Devices used to restrain the hair are to be unobtrusive and of a color consistent with the hair color. Hair color is to be that typically occurring naturally in humans, i.e. black, brown, blonde, natural shades of red, and gray. Final determination of appropriate appearance of hair for any given clinical experience will be made by the faculty member responsible for each course.

Beards and mustaches should be kept trim and neat.

- Makeup: Makeup may be worn. It should be adequate to look attractive, but not so much as to attract attention.

- Fingernails: Nails should be kept clean and short enough to avoid scratching the patient. They should be even with the end of the fingers. No artificial nails, acrylic nails, or gel nails are allowed. Only clear, unchipped nail polish is allowed.
- Gum Chewing: Chewing gum will NOT be permitted in the clinical facility.
- Smoking: Anderson University is a smoke-free, tobacco-free campus. The use of tobacco products is prohibited on campus grounds. Smoking is not permitted while in student uniform/professional dress before or during any clinical/laboratory activity. Should the odor of tobacco be detected by the instructor or clinical facilitator, the student will be asked to leave and the student will receive an unexcused absence for that day.

### **Senior Information**

Nursing students will use the Anderson University Undergraduate Catalog for the year they entered the university to direct their general education requirements. Candidates for graduation must meet the requirements set by the University.

Students must also meet the degree requirements for the nursing major set forth in the catalog in force at the time of admission to the major as specified in the admission letter. Nursing credits applied toward a degree in nursing must have been completed within five years preceding the date of graduation.

### **NCLEX-RN**

All graduates of nursing programs are required to pass the National Council of State Boards of Nursing Licensure Exam in order to obtain a license to practice nursing and to use the title "RN". The examination is the same in each state and is offered on computer through various testing facilities in the state.

Application materials are available online for each state board of nursing. Seniors should submit the required materials, which vary by state to the office of the Dean of Nursing for endorsement. Students seeking licensure outside South Carolina need to include the mailer with sufficient postage. Each Board of Nursing determines the applicant's eligibility to take NCLEX. Applicants who have any misdemeanors or criminal records should seek consultation of the Board of Nursing several months before the application deadline. All graduate nurses are personally notified of their performance on the National Council of State Boards of Nursing Licensure Exam by the State Board of Nursing in the state where they took the examination. This information is reported as either "pass" or "fail." No individual scores are given to anyone. Successful candidates are listed as registered nurses on the state board website. South Carolina is a member of the RN Compact. Nurses with a compact license may practice in any compact state. Some states, such as Georgia for example, are not members of the compact so registered nurses must obtain a Georgia license to practice in that state.

**NOTE: THE INDIVIDUAL STUDENT IS RESPONSIBLE FOR COMPLETING THE APPLICATION PROCESS AND MEETING ALL DEADLINES. Practicing without a valid license is a serious and punishable offense.**

### **Program for Pin and Lamp**

Graduating seniors are expected to attend the BSN Recognition and Pinning Ceremony and graduation exercises. As part of this ceremony the student receives the Anderson University School of Nursing pin and makes a public pledge to the profession of nursing. Students will be pinned by the Dean of the School of Nursing or the Dean's designee only.

### **Pin for Professional Convocation**

Early in the final semester, an order for the school nursing pin will be placed for seniors. A realistic time for the students to send in their pin order will be determined. If this date is not honored then there is no guarantee the pins can be completed on time. It is the student's responsibility to get the order form and money back within the time allotted.

The School of Nursing will assist past graduates in reordering pins if they should need to do so. The request must include the student's name, current address, phone number and month and year of graduation. A special order form will be mailed to the graduate. A call is made to the transcript office at Anderson University to verify that the student did indeed graduate. At the time of graduation, the School of Nursing holds BSN Recognition Ceremony to honor its graduates and to welcome new graduates into the profession. Baccalaureate graduates will receive the School pin and lamp.

### **Pin**

The School of Nursing pin was designed by Dr. Pamela Binns-Turner, founding Dean of the Anderson University School of Nursing in 2012.

SEVEN RAYS – Represent Faith, Hope, Love, Charity, Loyalty, Service and Truth.

LAMP – Represents the lamp of knowledge Florence Nightingale carried when caring for patients.

CROSS – Represents our commitment to Christ and His gift of salvation for all.

FLAME – Represents the Holy Spirit.

### **Lamp**

During the Pin and Lamp ceremony the graduates light their lamp and state a pledge which is historically linked to Florence Nightingale who distinguished herself during the Crimean War nursing sick and wounded British soldiers. Because of her selfless duty during the Crimean War, Florence Nightingale became known as the "lady with the lamp." As a tribute to her dedication, the lamp icon became symbolic of nursing. The lamp will always shine brightly as a symbol of the care and devotion for those to whom the nurse administers to in the practice of Nursing.

### **Facilities and Services**

The School of Nursing is a state of the art facility within a 3 level structure containing approximately 26,000 square feet connected to Vandiver Hall. The building has an elevator to access the 2<sup>nd</sup> floor. The building has wireless access to the internet, all classrooms, offices, debriefing rooms, simulation bays, and Nursing Skills and Health Assessment Labs. All labs and classrooms have AV equipment to support the learning environment.

The first floor of this building contains the following:

- Reception area and admissions offices (Director and administrative assistant)

- Administrative offices (Dean, Undergraduate Chair, future Graduate Chair, administrative assistant)
- Conference room seating up to 25 guests with kitchen facility
- Small conference room seating 8 guests
- Secured records storage
- Copier and mail room
- Student lounge (400 square feet)
- Classroom (40 student capacity)
- Health assessment lab
- Faculty lounge
- Faculty offices (6)
- Adjunct faculty and/or student workroom
- Restroom facilities

The second floor contains:

- Two amphitheater-style classrooms (48 student capacity each)
- Nursing skills lab
- State of the art human simulation environment
- Two debriefing rooms (6 student capacity each)
- Simulation Coordinator office
- Human cadaver dissection lab
- Restroom facilities
- Equipment storage space

### **Health Assessment Laboratory**

The health assessment lab contains 10 exam tables (with equipment storage).

### **Nursing Skills Laboratory**

The nursing skill lab contains 10 hospital beds (with equipment storage)

- Full body low-fidelity manikins
- Task trainers (IV arms, ostomy training, blood pressure, upper torsos)

### **Simulation Learning Environment**

The Simulation lab contains 5 simulation rooms with room for future expansion (with equipment storage)

- 1. Labor and delivery (birthing simulator and infant simulator) 2. Pediatric simulator 3. Adult medical-surgical simulator 4. Adult ICU simulator 5. Trauma/ED simulator
- Simulators are wireless for portability
- Plasma screens provide information to students (vital signs, power points, etc)
- Each simulation room has audio-video recording capability and has a control room
- Electronic medication dispensing cart
- Defibrillator
- 12 lead EKG
- Emergency airway cart

- Ventilator
- IV and feeding tube pumps

### **Human Cadaver Dissection Laboratory**

The human cadaver dissection lab contains 4 dissection tables and cooler with racks for specimen storage.

### **Student Lounge**

The student lounge provides students a place to study, relax and fellowship with other nursing students. It includes refrigerator and microwave access.

### **Library**

In 2007 the university opened the grand new Thrift Library containing a computer lab, café, curriculum lab, special collections, music technology lab, 100-seat multimedia center, conference room and 10 group study rooms. The library's 150,000+ volume collection includes traditional books and media as well as 50,000+ eBooks, 100+ databases and more than 50,000 full text periodicals. The library supports the University's educational mission through its resources and services by teaching information literacy and by encouraging its users to be self-directed, lifelong learners. Additional References and Journals have been purchased by the School of Nursing to provide the most current and up-to-date resources necessary for the program.

### **Bookstore**

The bookstore is located in the Student Center and carries a wide variety of required and optional reading, course supplies, clothing, and other merchandise.

### **Financial Aid**

Making a college education affordable and accessible is a vital part of our mission at Anderson. There are many different sources of financial aid available to qualified students. **DEADLINE FOR APPLICATION FOR FINANCIAL AID FOR ENROLLED STUDENTS IS JULY 15TH OF EACH YEAR. THE STUDENT IS RESPONSIBLE FOR OBTAINING ADEQUATE FUNDS. FUNDS MAY BE OBTAINED IN THE FORM OF A STAFFORD LOAN OR ALTERNATIVE LOAN. SEE OFFICE OF FINANCIAL AID FOR DETAILS.**

### **Fees and Expenses**

Students are responsible for payment of all fees by established deadlines. In addition to tuition and fees listed in the Anderson University Academic Catalog, nursing students may expect to incur the following additional expenses: books and supplies, uniforms (refer to the Professional Dress Standards/Uniform Policy), watch with second hand, stethoscope, scissors, and travel to clinical sites. A car will be necessary for clinical agency placements. In the last semester, there are additional expenses related to graduation, School of Nursing Pin (which may be worn after graduation), nursing lamp, senior pictures, NCLEX-RN review course and NCLEX-RN Licensure Examination fees. For itemization, please see attached Estimation of Student Nursing Costs.

### **Inclement Weather Policy**

In the event that inclement weather is deemed to make it unwise or impossible to hold classes, classes will be cancelled. The information will be posted on the AU homepage ([www.andersonuniversity.edu](http://www.andersonuniversity.edu)), on the AU Information Line 864-622-6057.

ANDERSON UNIVERSITY  
SCHOOL OF NURSING

**Forms**

ANDERSON UNIVERSITY  
SCHOOL OF NURSING

**Request for Progression in the Nursing Curriculum**

Name \_\_\_\_\_

Student ID # \_\_\_\_\_

Advisor \_\_\_\_\_

	1. Completed all courses required Freshman year
	2. Completed all courses required Sophomore year - fall semester
	3. Satisfactory progress in all courses required Sophomore year spring semester
	4. Current cumulative GPA $\geq$ 3.0
	5. Science GPA $\geq$ 3.0 (anatomy, physiology, chemistry, microbiology)

I understand that prior to beginning the nursing curriculum next fall semester, I am required to obtain all immunizations requested, show evidence of health insurance, evidence of malpractice insurance, current CPR certification, negative urine drug screen, and negative background check. I understand that I will not be allowed to progress into the nursing curriculum if these requirements are not met by 1 month prior to the fall semester. I understand failure to provide appropriate documentation may result in a 1 year delay in progression of nursing academics or dismissal.

Signature \_\_\_\_\_

Date \_\_\_\_\_

01.30.13

ANDERSON UNIVERSITY  
SCHOOL OF NURSING

**Fitness for Duty – Return to Classroom and Clinical Courses**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
Absence Dates: \_\_\_\_\_

This form is required for all students who have experienced an illness, injury, pregnancy, hospitalization or other circumstance which resulted in either a physical or psychological limitation(s) or an absence from the program of more than 3 days consecutively.

As the healthcare provider completing this form, please use the following information to determine if this student is prepared to physically and emotionally handle returning to the classroom and clinical setting, which includes:

- Each clinical day is 8-12 hours in length
- Students are expected to complete nursing care activities comparable to that of a staff nurse with the supervision of their clinical instructor
- Physical demands in the nursing program include duties that frequently require squatting, bending, kneeling, reaching, and stair climbing, lifting and carrying up to 50 pounds; frequently pushing and pulling up to 200 pounds with assistance; occasionally lifting up to 200 pounds with assistance and occasional carrying up to 51 to 74 pounds. Duties also require constant use of sense of sight, hearing, touch, and speech. Environmental conditions include procedures that involve handling blood and body fluids using standard (universal) precautions.

**Please indicate your recommendation regarding this student's ability to return to the classroom/clinical setting. The student must be free of any restrictions or limitations which may endanger the student's health or a client's safety in the clinical setting.**

\_\_\_\_\_ I find the above named student fit for duty with NO restrictions or limitations in the classroom or clinical setting.

\_\_\_\_\_ I find the above named student fit for duty only WITH the following restrictions or limitations for the specified time period:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I find the above named student NOT fit for duty; may reconsider after \_\_\_\_\_ (date)

\_\_\_\_\_  
Healthcare Provider Signature/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Healthcare Provider Printed Name/Title

\_\_\_\_\_  
UPIN#

\_\_\_\_\_  
Address

\_\_\_\_\_  
Office phone number/email address

06.12.14

## Daily Clinical Evaluation

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

Faculty: \_\_\_\_\_

Date/Week: \_\_\_\_\_

Students are responsible for each behavior listed on these outcome statements. A student who receives a “U” in any area below must satisfactorily remediate any area listed before the last day of clinical. This means a *scheduled appointment* with your clinical instructor or lab faculty. If the student does not have a successful remediation, the student will not be permitted to go to the clinical institution for the remainder of clinical and may fail the course. Any student who receives a “U” for two clinical days may fail the course.

<b>I. ROLE: PROVIDER OF CARE</b>	<b>RATING*</b> S U N/O NI N/A	<b>Comments</b> S NI U
1. Is prepared for clinical assignment as assigned by clinical faculty a. Submits appropriate data for client assignment to clinical faculty on time b. Prepared for clinical skills necessary to safely perform assigned skills		
2. Verbalizes scientific rationale supporting nursing interventions for assigned skills		
3. Demonstrates therapeutic communication skills at an beginning level		
4. Demonstrates beginning skill in the application of nursing interventions		
5. Provides safe care with assigned skills and client interactions		
6. Begins to provide individualized client teaching during clinical as assigned		
7. Begins to evaluate effectiveness of nursing interventions in the achievement of client outcomes		
<b>II. ROLE: MANAGEMENT OF CARE</b>		
1. Begins to prioritizes nursing care appropriately		
2. Is organized. Care is complete at the end of the daily experience.		
3. Demonstrates legal and ethical behaviors that reflect accountability and standards of nursing practice according to the ANA CODE OF ETHICS		
<b>III. ROLE: MEMBER WITHIN PROFESSION OF NURSING</b>		
1. Demonstrates professional behavior when interacting with clients, families, and/or health care team members.		
2. Functions within the boundaries of the student nurse (including dress code).		
3. Identifies own strengths and weaknesses in the clinical setting and seeks appropriate assistance from faculty, staff and peers as appropriate.		

4. Begins to recognize the importance of utilizing evidenced-based literature to support clinical decision making.		
5. Prepares and participates in planning and discussion of assigned topics for post-conference.		
<b>OVERALL RATING FOR CLINICAL DAY</b>		

Faculty Signature: \_\_\_\_\_

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

## Daily Clinical Medication Administration Evaluation

Name: \_\_\_\_\_ Faculty: \_\_\_\_\_ Date/Week: \_\_\_\_\_

Students are responsible for each behavior listed on these outcome statements.

A” U” may lead to a CI-Clinical incident and failure of the day or course. Any area listed with N/I or U must be remediated as designated by the clinical faculty member.

<b>ASSESSMENT</b>	<b>RATING*</b> S U N/O N/I N/A	<b>COMMENTS</b> S N/I U
1. Utilized assessment data regarding clients medication profile for safe outcomes		
2. Chose appropriate use of assessment data for each client for scheduled and unscheduled medications.		
3. Begins to complete pain assessment when appropriate and needed		
<b>PLANNING</b>		
1. Demonstrated appropriate drug knowledge and nursing implications		
2. Validated medication orders for clients prior to administering.		
3. Communicated discrepancies and/or inappropriate dosages, as well as need to withhold medications appropriately.		
4. Communicated appropriately to instructor, staff, peers, clients, and significant others as needed.		
<b>INTERVENTION</b>		
1. Observed 6 rights.		
2. Demonstrated knowledge regarding administration of medication by the following routes: <input type="checkbox"/> PO <input type="checkbox"/> IM <input type="checkbox"/> Insulin-SC <input type="checkbox"/> SC <input type="checkbox"/> NG/G tube <input type="checkbox"/> R <input type="checkbox"/> Nasal <input type="checkbox"/> MDIs <input type="checkbox"/> SVN <input type="checkbox"/> Eye drops <input type="checkbox"/> Ear drops <input type="checkbox"/> Topical <input type="checkbox"/> IVPbk		
3. Used safe and appropriate technique at all times.		
4. Documented appropriately all meds given or not given.		
5. Demonstrated responsibility for administration of scheduled and unscheduled medications, including narcotic drugs according to agency policy.		
<b>EVALUATION</b>		
1. Evaluated effect of medications appropriately.		
2. Evaluated self accurately and appropriately.		
3. Sought assistance as needed from faculty or assigned staff nurse.		
4. Demonstrates professionalism and accountability for performing and communicating appropriately during medication administration. According to Anderson University policies, agency policy and ANA code of ethics.		
<b>OVERALL RATING FOR MEDICATION ADMINISTRATION CLINICAL DAY</b>		

Faculty Signature: \_\_\_\_\_

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

ANDERSON UNIVERSITY  
SCHOOL OF NURSING  
**Mid-Term and End-Semester Clinical Evaluation Tool**

Course Name/Number: \_\_\_\_\_ Instructor: \_\_\_\_\_

Student: \_\_\_\_\_ Clinical Site: \_\_\_\_\_

Semester/Year: \_\_\_\_\_ Number of Clinical Absences: \_\_\_\_\_ Grade: \_\_\_\_\_

A mid-term and final evaluation will be conducted by the clinical instructor for each student assigned. The student's clinical performance, strengths and areas for improvement will be summarized. PLEASE USE A DIFFERENT COLORED PEN FOR MID-TERM AND FINAL EVALUATION

**SCORING**

- 0 = Unsafe Performance – (0.0% failure in meeting any/all minimal standards for safe practice)
- 1 = Unsatisfactory Performance – Inconsistent in meeting clinical objectives (74.99% or less of the time – inconsistent in meeting any/all minimal standards for safe practice)
- 2 = Minimal Performance – With ongoing guidance is able to meet all clinical objectives (75-80% of the time – meets minimal standards for safe practice)
- 3 = Good Performance – With limited guidance is able to meet all clinical objectives (81-89% of the time).
- 4 = Outstanding Performance – Consistently, skillfully, and with early and progressive independence is able to meet all objectives (90-100% of the time)

BEHAVIOR	MIDTERM	FINAL	Clinical Instructor Comments
CLINICAL REASONING			
COMMUNICATION			
ASSESSMENT AND ANALYSIS			
PLANNING			
IMPLEMENTATION			
EVALUATION			
ROLE DEVELOPMENT			
COURSE SPECIFIC BEHAVIORS			
<b>TOTAL SCORE</b>			
DATE			

**METHOD OF CALCULATION TO OBTAIN A CLINICAL GRADE:**

Available rating categories \_\_\_\_\_ x Maximum Score (4) = \_\_\_\_\_

\*\*\*\*\*Maximum Score x 75% (0.75) = \_\_\_\_\_, (which is the minimum passing score for NUR 3XX clinical courses)

\*\*\*\*\*Maximum Score x 84% (0.84) = \_\_\_\_\_, (which is the minimum passing score for NUR 4XX clinical courses)

Student score is \_\_\_\_\_

**FAILURE = ANY/ALL STATEMENT SCORE(S) "1" OR BELOW AT FINAL END OF COURSE EVALUATION OR OBTAINS A FINAL SCORE OF LESS THAN 75% OF MAXIMUM SCORE (MINIMAL SAFE PRACTICE)**

<b>BEHAVIOR</b>	<b>MIDTERM</b>	<b>FINAL</b>	<b>CLINICAL INSTRUCTOR COMMENTS</b>
<b>CLINICAL REASONING</b>			
Uses nursing and other appropriate theories and models in an appropriate ethical framework			
Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions			
Uses clinical judgment and decision-making skills to solve problems			
Engages in self-reflection and collegial dialogue with instructors and others about professional practice.			
Conforms with Patient's Bill of Rights			
Follows Honor Code			
<b>COMMUNICATION</b>			
Communication shows sensitivity to sociocultural needs of client.			
Elicits and clarifies patient preferences and values.			
Communicates care, consideration, and privacy to the client at all times.			
Uses language expected of a professional when communicating with other professionals.			
Uses therapeutic communication strategies when communicating with clients.			
Uses technology to obtain and share data.			
Adapts communication methods as appropriate to specific client situations.			
Maintains client confidentiality.			
Presents an idea(s) in a logical, clear, concise and accurate manner, both written and oral.			
Communicates appropriate and critical information to faculty and staff in a timely manner.			
Documents nursing assessments, interventions, and outcomes in a thorough and accurate manner.			
<b>ASSESSMENT AND ANALYSIS</b>			
Collects comprehensive data appropriate to the client (individual,			

<b>BEHAVIOR</b>	<b>MIDTERM</b>	<b>FINAL</b>	<b>CLINICAL INSTRUCTOR COMMENTS</b>
family, group, or population).			
Conducts thorough assessment in a professional, organized, and timely manner.			
Analyzes all assessment information to develop appropriate nursing diagnoses.			
Prioritizes nursing diagnoses.			
Incorporates evidence-based findings and standards of care in the collection and analysis of data			
<b>PLANNING</b>			
Uses principles, established protocols, and practice standards to plan nursing care.			
Considers developmental, physical, psychological, sociocultural and spiritual needs of the client in nursing care.			
Plans interventions based on assessment and nursing diagnoses.			
Establishes outcome criteria that are measurable.			
<b>IMPLEMENTATION</b>			
Implements client care within a timely manner.			
Organizes time, resources, and self in the delivery of care.			
Maintains safe client environment..			
Is cost conscious while delivering care			
Provides client with relevant and sensitive health education, information and counseling			
Assists client to access and interpret the meaning and validity of health information.			
Practices standard safety precautions.			
<b>EVALUATION</b>			
Determine actual client outcomes			

<b>BEHAVIOR</b>	<b>MIDTERM</b>	<b>FINAL</b>	<b>CLINICAL INSTRUCTOR COMMENTS</b>
Evaluates effectiveness of nursing interventions			
Uses scientific data and standards of care to evaluate outcomes of client care			
Modifies plan of care based on outcomes allowing for the revision of actions and goals			
Evaluates usefulness of integrating traditional and complementary health care practices			
<b>ROLE DEVELOPMENT</b>			
Assumes a leadership role within one's scope of practice			
Incorporates principles of quality management and outcome effectiveness			
Assumes the functions of client advocate			
Is honest and demonstrates personal integrity			
Prepares for clinical experience by acquiring the knowledge, skills and equipment needed for client care			
Behaves and dresses professionally			
Arrives in the clinical area on time and prepared for the day's assignment			
Demonstrates self-motivation for professional learning.			
Articulates to the public the values of the profession as they relate to patient welfare and community health			
Participates in professional organizations to enhance high quality health care and advancement of the profession.			
Identifies clinical care issues that are appropriate for research study			
Practices competently, depending on level in program			

*COURSE SPECIFIC BEHAVIOR (CLINICAL COURSE OUTCOMES)			
COMMENTS:			

\* List Clinical objectives specific to the individual course.

Mid-term Evaluation

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clinical Faculty signature: \_\_\_\_\_ Date: \_\_\_\_\_

Final Evaluation

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clinical Faculty signature: \_\_\_\_\_ Date: \_\_\_\_\_ 01.30.13

# Exposure Incident Report

Exposure/Incident Report Form

Anderson University

Student : \_\_\_\_\_ Date Completed : \_\_\_\_\_

Date of Exposure/Incident: \_\_\_\_\_ Time of Exposure/Incident: \_\_\_\_\_

Where did the exposure/incident occur? \_\_\_\_\_

Describe the task you were performing at the time of exposure/incident? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What was the nature of the exposure/incident? \_\_\_\_\_

List the part of the body that was exposed? \_\_\_\_\_

Did the foreign object penetrate your body? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what was the exposure? \_\_\_\_\_

\_\_\_\_\_

Was any liquid injected into your body? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what was the liquid? \_\_\_\_\_

\_\_\_\_\_

Were you wearing personal protective equipment at the time of exposure? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what type were you wearing? \_\_\_\_\_

\_\_\_\_\_

Did you receive medical treatment? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, where? \_\_\_\_\_

Date: \_\_\_\_\_ Doctor's name providing treatment: \_\_\_\_\_

Additional Information about the incident: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

A copy must be provided to the School of Nursing Undergraduate Chair and Anderson University Health Services

01.30.13

**Anderson University School of Nursing  
Clinical Counseling Form**

**Student Contract – Clinical Setting Remediation Plan**

Name \_\_\_\_\_ Course \_\_\_\_\_  
Date \_\_\_\_\_ Clinical \_\_\_\_\_ Hospital \_\_\_\_\_ Simulation Lab \_\_\_\_\_

Has this occurred before? Yes \_\_\_ No \_\_\_ if yes, what course and semester? \_\_\_\_\_

Description of behavior(s) placing student at risk:

Clinical Behavior violation:

Remediation action plan (to be written by student in collaboration with the faculty member)

Identify actions that are intended to fix the behavior. Include date and resources required to be successful with action remediation plan.

Actions must be specific and list specific outcomes for success.

1. \_\_\_\_\_ Date to be completed: \_\_\_\_\_
2. \_\_\_\_\_ Date to be completed: \_\_\_\_\_
3. \_\_\_\_\_ Date to be completed: \_\_\_\_\_
4. \_\_\_\_\_ Date to be completed: \_\_\_\_\_

Faculty feedback/comments: (optional)

\_\_\_\_\_  
\_\_\_\_\_

Failure of the student to correct and meet remediation action plan may or will result in failure of the course.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_ Advisor's Name \_\_\_\_\_

Faculty signature \_\_\_\_\_ Date \_\_\_\_\_ (A copy will be submitted to the student's advisor and/or success specialist)

Final Evaluation of remediation plan: Satisfactory \_\_\_\_\_ Unsatisfactory \_\_\_\_\_

Faculty signature \_\_\_\_\_ Date \_\_\_\_\_

Student signature \_\_\_\_\_ Date \_\_\_\_\_

01.30.13

### Scheduled Clinical Assignment Change Agreement

A student may request a scheduled clinical assignment change based on the following criteria:

1. The reason for the request of change in scheduled assignment is submitted.
2. The student requesting the change is responsible for locating and obtaining agreement from another student.
3. The student will make the request of another student assigned to the same clinical rotation. (For Example: ED to ED or PBH to PBH)
4. Both students must verbally agree to the change as well as provide a written agreement to the clinical supervisor prior to the requested date of change.
5. Students must agree that the request and subsequent change will neither impact nor interfere with the expected performance of any assigned tasks associated with the clinical rotation.

I, \_\_\_\_\_ am requesting to change assigned clinical dates due to:

\_\_\_\_\_ and have obtained a verbal and written agreement to change my scheduled \_\_\_\_\_ for the \_\_\_\_\_ with \_\_\_\_\_.

Name	Original Scheduled Assignment	Clinical Site	Requested Date of Change	Approval

\_\_\_\_\_  
Date of Submission

\_\_\_\_\_  
(Student)                      Date

\_\_\_\_\_  
(Student)                      Date

\_\_\_\_\_  
Clinical Instructor              Date

**AU Institutional Activities Schedule Approval**

Student Name \_\_\_\_\_ Date \_\_\_\_\_  
Student AU Institutional Activity \_\_\_\_\_

Student Nursing Faculty \_\_\_\_\_ contact info \_\_\_\_\_  
Student SON Class/Simulation/Lab/Clinical Schedule:

AU Coach or Faculty Sponsor \_\_\_\_\_ contact info \_\_\_\_\_  
Student AU Institutional Activity Schedule:

**\*\*Specific Details of changes/agreement in SON class/lab/simulation/clinical and AU Institutional Activities Schedule:**

*\*\*Any deviation from the agreement outlined above requires pre-approval by the SON faculty, Coach/Faculty Sponsor.*

\_\_\_\_\_  
Student

\_\_\_\_\_  
SON Faculty

\_\_\_\_\_  
AU Coach or Faculty Sponsor

05.20.14



## Nursing Student Acknowledgement of Policies and Expectations

- I must **successfully pass a pre-enrollment physical and job function test.**
- I will provide my own laptop with wireless connectivity and software (including secure browser) as required by the School of Nursing for testing.
- I must **pass all general education and nursing courses with a minimum grade of “C”** or better for progression to the next level.
- I understand if I make any exam grade in any nursing course <84%, I will contact my professor within 1 week of the exam for an advisement appointment and meet for recommendations to improve.
- I understand that only a maximum of **(2) two C’s** is allowed in nursing courses. The first “C” will result in advisement, the second “C” will result in probation and the third “C” will result in permanent dismissal from the program.
- I will remain in the track to which I was originally admitted (ABSN or TBSN).
- I must **pass the didactic and clinical** components to pass all clinical courses.
- I may be digitally recorded and I give my permission for this during class, simulation scenarios, lab activities, and testing. Viewing of videos recorded during training are only permitted with faculty members. The videos are the property of the nursing department. Students may not possess simulation lab videos or recordings.
- A criminal background check is required before entering clinical courses and a clear result is expected. I understand that my clinical placement and/or licensure may be affected by information revealed through a criminal background check.
- I must submit to a **drug test** prior to beginning clinical courses. If I refuse to submit to drug testing, I will be dismissed from the School of Nursing. If I have a positive result on the drug test, I will follow the policy in the School of Nursing BSN Handbook.
- I may also submit to random **drug test(s)** while enrolled in the nursing program.
- I must **satisfy all clinical requirements** prior to attending any clinical course. **If all documentation is not received by the deadline, the School of Nursing will drop me from all nursing courses for which I have not submitted documentation.**
- I am required to participate in the **Supplemental Testing (ATI) which will represent a portion of my course grade per the course syllabus**
- I understand that I will be required to take **Comprehensive ATI exams during the final semester. This will represent a portion of my final grade per the course syllabus. If the required benchmark score is not obtained, remediation will be required to be completed successfully before the Dean will submit verification of the student’s completion of educational requirements for permission to take NCLEX-RN.**
- **I understand I will be required to take an ATI Review.**
- I understand that if I have been counseled or disciplined for chemical, mental or physical impairment, while in school, or ever been convicted of a crime, I may be required to report it to the State Board of Nursing when applying for licensure.
- I understand that the Nursing Undergraduate Handbook contains information for which I am held accountable and that I must review the Handbook at the beginning of each academic year. I understand that the policies set forth in the Handbook are binding and that breach of these policies can have consequences ranging from a written warning to dismissal from the program.
- I understand that the Nursing Undergraduate Handbook may be updated at any time and that a current copy will be made available to me and I will be expected to follow those guidelines. Significant changes will be shared and a new Nursing Student Acknowledgement will be signed and inserted in my student file.

I have read and understand this School of Nursing Contract and I agree to abide by the terms therein.

\_\_\_\_\_  
Student’s Full Name (please print)

\_\_\_\_\_  
AU ID Number

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

\_\_\_\_\_  
Date

08.20.14