



Department of Nursing

Baccalaureate of Science in

Nursing

NURSING STUDENT HANDBOOK* 2019-2020

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**DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

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ACCREDITATION

The Bachelor of Science in Nursing Program at Plymouth State University is accredited by the Commission on Collegiate Nursing Education (<http://www.aacnnursing.org/CCNE>).

APPROVAL

The Plymouth State University Department of Nursing Bachelor of Science in Nursing Program is approved on probation by the New Hampshire Board of Nursing. (<https://www.oplc.nh.gov/nursing/>)

Welcome to Plymouth State University Nursing Program

Welcome,

You are about to embark on the journey toward becoming a professional nurse. The role of the nurse is more than a job, it is a profession that embodies a contract with society to provide safe, evidenced based, compassionate care to all patients, in all settings. While at PSU, you will learn the science and the art of delivering nursing care. We, the nursing department faculty and staff, will guide you to acquire vast knowledge of the human condition while coaching you to listen to the patient story. We will join you in your journey, celebrating the success and supporting you during the challenges. We wish you well. Let the journey commence!

Jean S. Coffey PhD, APRN, CPNP
Associate Professor & Director
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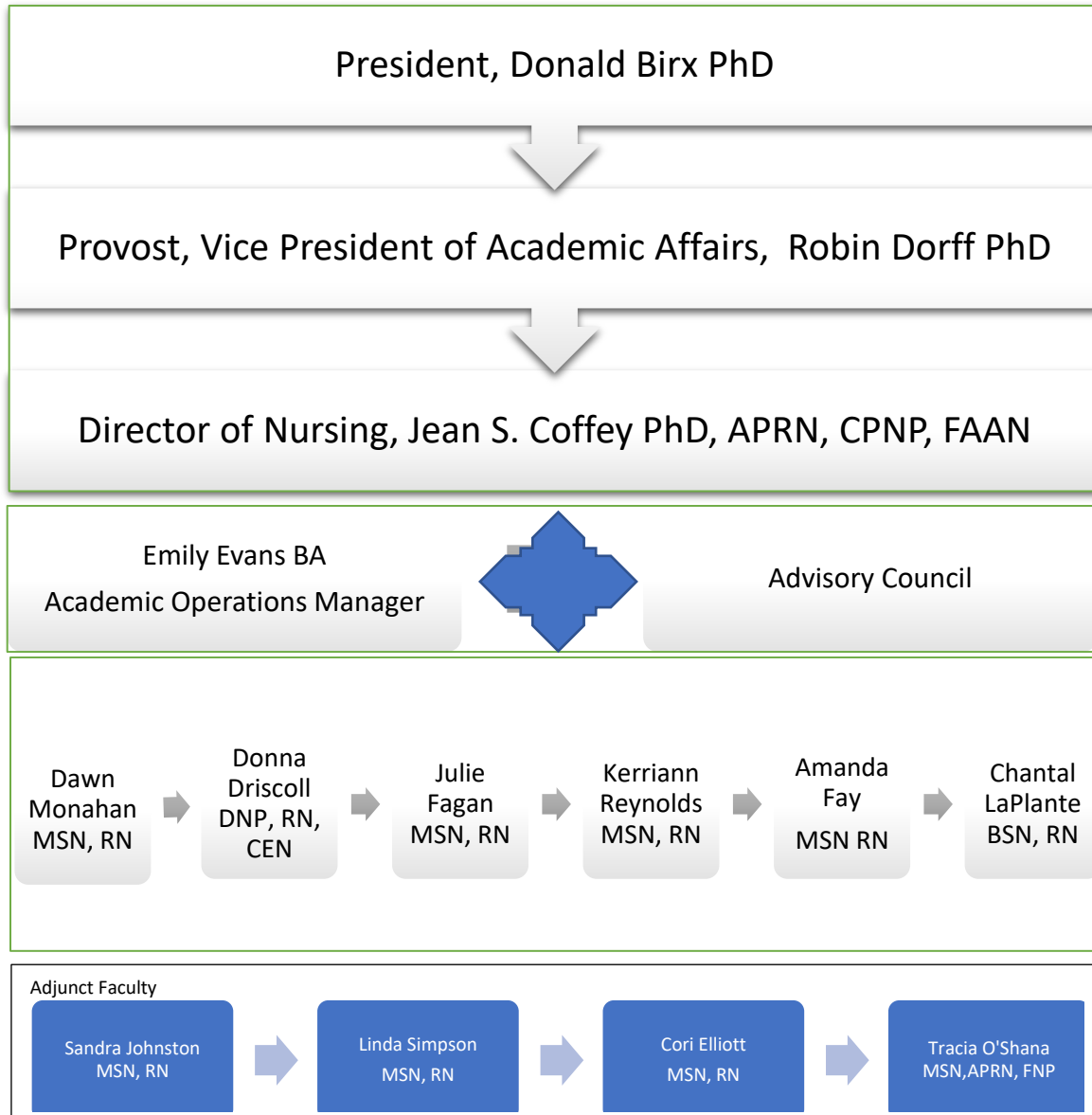
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SECTION I

DEPARTMENT OF NURSING

Department of Nursing Organizational Chart



DEPARTMENT OF NURSING MISSION, VISION, PHILOSOPHY AND GOALS

Mission

The Department of Nursing's mission is to provide nursing curricula that supports excellence in nursing education. We educate future nursing leaders to provide innovative, high quality, accessible health care to the geographic regions of Plymouth and beyond, connecting with local and global health care communities. We teach practices that promote the health and well-being of diverse individuals, families, communities, populations, and systems. We graduate competent nurses who make sound clinical judgments, communicate effectively, and make decisions using the best evidence available, to practice in an interdisciplinary global healthcare environment.

Vision

The Department of Nursing's vision is to prepare nurses to deliver patient-centered care as members of an interdisciplinary team, emphasizing teamwork and collaboration, safety, evidence-based practice, quality improvement, and informatics.

Program Philosophy

The Plymouth State Nursing Program derives its philosophy from the Plymouth State University values and motto, *Ut Prosim: That I May Serve*. The Department of Nursing embraces innovative and creative approaches to interdisciplinary, culturally-sensitive nursing practice. The faculty believe the purpose of a collegiate undergraduate education is to prepare the professional nurse whose practice is informed by theory and research to positively impact communities. The philosophy is further grounded in the competencies defined by the Nurse of the Future literature (MA Dept. of Higher Education, 2010) and the American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education.

Educational Philosophy

The PSU Nursing Department provides a supportive learning environment for nursing students in the classroom, clinical arena, and the greater community. The pursuit of a career in the profession of nursing implies a spirit of life-long learning; in that vein, the Nursing Department seeks to partner with students and communities of interest to create a mutual teaching and learning continuum wherein we all learn from each other. This spirit of inquiry is encouraged through discovery of the arts and sciences of nursing, using a problem-solving approach, whereby students and faculty alike find meaning in their nursing practice, within a framework of mutual respect. The essence of nursing lies in service to people in need; the PSU motto embraces this spirit of service to our community.

Program Goals

Based on the Mission, Vision, and Philosophy of the Department of Nursing, the following program goals have been identified. The program goals of the nursing program are to:

1. Prepare graduates to provide safe, evidence-based, patient-centered care that reflects ethical clinical judgement and inter-professional collaboration (NoF: Patient-Centered Care, Evidence-Based Practice, Teamwork and Collaboration, Safety) (EPO: 1, 4, 5, 6) (Essentials: I, II, III, IV, V, VI, VII, VIII, IX)
2. Provide an innovative program of study that is responsive to the changes in the healthcare environment (NoF: Quality Improvement) (EPO: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10) (Essentials: I, II, III, IV, V, VI, VII, VIII, IX)
3. Promote collaboration and partnerships within the communities of New Hampshire and the world beyond (NoF: Teamwork and Collaboration) (EPO: 2, 3, 4, 5, 6, 8, 9, 10) (Essentials: II, V, VI, IX)
4. Develop students' critical thinking skills, to solve problems encountered on the work unit, considering the health care system's technological resources, agency policies, and client/family needs, to deliver quality care. (NoF: Systems Based Practice & Informatics) (EPO: 2, 3, 4, 5, 6, 7,9) (Essentials: I,III, IV, V, VIII, IX)
5. Promote effective communication across all nursing practice settings, considering psychosocial, physiological, developmental, spiritual, cultural and educational concerns, in order to support positive client outcomes. (NoF: Communication & Leadership) (EPO: 1, 3, 4, 5, 8, 9, 10) (Essentials: I, VI, VII, IX)

END OF PROGRAM OUTCOMES

At the end of the baccalaureate nursing curriculum, graduates will:

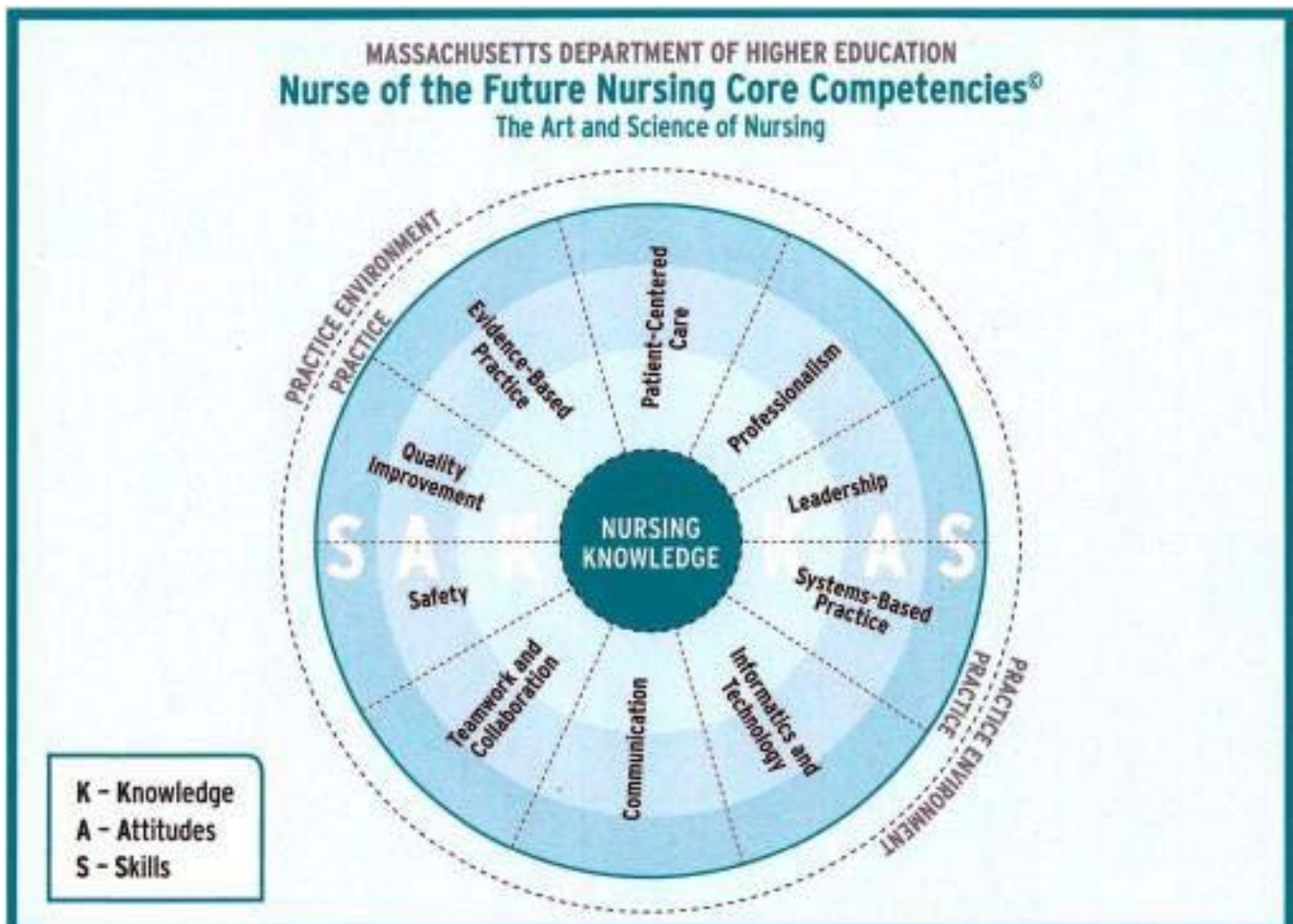
1. Demonstrate accountability for practicing nursing within established moral, legal, ethical, regulatory, and humanistic principles.
2. Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal quality and value.
3. Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.
4. Identify, evaluate, and use the best current evidence coupled with clinical expertise and consideration of patients' preferences, experience and values to make practice decisions.
5. Function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development.
6. Minimize risk of harm to patients and providers through both individual performance and system effectiveness.
7. Use data to monitor outcomes and care processes, and use improvement methods to design and test changes to continuously improve the quality and safety of health care.
8. Influence the behavior of individuals or groups of individuals within their environment in a way that will facilitate the establishment and acquisition/achievement of shared goals.
9. Deliver holistic nursing care and advocate for health promotion and disease prevention strategies at the individual, family, community, and global levels.
10. Demonstrate effective communication skills with clients that foster mutual respect and shared decision making to enhance patient satisfaction and health outcomes.

ORGANIZING FRAMEWORK

The organizing framework of the nursing curriculum is derived from the philosophy and rooted in the competencies defined by the *Nurse of the Future*:

- Patient-Centered Care
- Evidence-Based Practice
- Teamwork and Collaboration
- Quality Improvement
- Leadership
- Informatics
- Professionalism
- Communication
- Systems-Based Practice
- Safety

The curriculum of the Department of Nursing reflects these competencies as well as professional nursing standards and guidelines. The curriculum incorporates knowledge and skills of both the standards of the American Nurses Association (Scope and Standards of Practice), the Essentials of Baccalaureate Education in Professional Nursing, AACN, Quality and Safety Education for Nurses, and the Nurse of the Future ©.



[Massachusetts Nurse of the Future Nursing Core Competencies](#)

March 2016

The nine **Essentials of Baccalaureate Education** are:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice

A solid base in liberal education provides the cornerstone for the practice and education of nurses.

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety

Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

Essential III: Scholarship for Evidence Based Practice

Professional nursing practice is grounded in the translation of current evidence into one's practice.

Essential IV: Information Management and Application of Patient Care Technology

Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

Essential V: Health Care Policy, Finance, and Regulatory Environments

Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes

Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

Essential VII: Clinical Prevention and Population Health

Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice

Essential VIII: Professionalism and Professional Values

Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.

Essential IX: Baccalaureate Generalist Nursing Practice

The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

SECTION II

PROGRAM INFORMATION

SEMESTER 1 FALL –Y1	Taken	Credits	Semester/Total Credits
BI 2110 Human Anatomy/Physiology I *		3	
BI 2130 Human Anatomy/Physiology I Lab*		1	
IS XXX The Wicked Problem		4	
PS 2010 Intro to Psych*		3	
Gen Ed		3/4	
Gen Ed		3/4	Semester Credits 16 or 18
SEMESTER 2 SPRING-Y1	RUNNING TOTAL:		
BI 2120 Human Anatomy/Physiology II *		3	
BI 2140 Human Anatomy/Physiology I Lab*		1	
MA 2300 Statistics I*		3	
EN 1400 Composition		4	
Gen Ed		3/4	Semester Credits 14 or 15
SEMESTER 3 FALL-Y2	RUNNING TOTAL:		
PS 2050 Life-Span Development **		3	
NR 2100 Foundations of Professional Nursing		3	
NR 2300 Biochemistry for Nurses		3	
Gen Ed		3/4	
Gen Ed		3/4	Semester Credits 15 or 17
SEMESTER 4 SPRING-Y2	RUNNING TOTAL:		
BI 2340 Microbiology for Nurses **		4	
NR 2700 Pathophysiology		3	
NR 2500 Health Assessment		2	
Elective		3	
Elective		3	Semester Credits 15
SEMESTER 5 FALL-Y3	RUNNING TOTAL:		
NR 3020 Intro to Patient Centered Care (DICO)		3	
NR 3025 Pharmacology		3	
NR 3052 Clinical Application of Patient Centered Care		4	
NR 3070 Health and Wellness of Older Adults (WECO)		3	Semester Credits 13
SEMESTER 6 SPRING-Y3	RUNNING TOTAL:		
NR 3035 Nursing Care of Children		2	
NR 3054 Clinical Application of Pediatric Wellness and Illness		2	
NR 3057 Clinical Application of Community Based Care		2	
NR 3065 Leadership, Collaboration & Quality Health Care Systems (TECO)		4	
NR 4020 Global Health & Population Based Health Care (GACO)		3	Semester Credits 13

SEMESTER 7 SUMMER-Y3	RUNNING TOTAL:		
NR 3059 Clinical Application of Psychiatric Mental Health Nursing		2	
NR 3085 NCLEX-RN Success I		2	
NR 3092 Evidence Based Practice of Mental Health Nursing		3	Semester Credits 7
SEMESTER 8 FALL-Y4	RUNNING TOTAL:		
NR 3094 Evidenced Based Practice in Med Surg Nursing		3	
NR 4015 Maternal Newborn Care		2	
NR 4055 Clinical Applications Evid Based Practice Med Surg Nursing		2	
NR 4057 Clinical Applications of Maternal Newborn Care		2	
Elective		3	Semester Credits 12
SEMESTER 9 SPRING-Y4	RUNNING TOTAL:		
NR 4050 Nursing Leadership for Acute Care Nursing (INCO)		3	
NR 4060 Research Process & Evidence- Based Practice(QRCO) WRCO)		3	
NR 4073 NCLEX-RN-Success II		1	
NR 4082 Clinical Application of Leadership & Quality Improvement		6	Semester Credits 13
	RUNNING TOTAL:		

*pre-requisite
 **co-requisite

DIRECTIONS GENERAL ED COURSES		
Minimum of 16 credits required and 3 credits under each category		
Gen Eds	Course ID	Credits
CTDI		
PPDI		
SSDI		
CHOICE		

ELECTIVES	
Minimum of 11 credits required	
Course ID	Credits

STUDENT ORGANIZATIONS AND COMMITTEES

PSU Student Nurses Association

Student nurses are encouraged to participate in professional nursing organizations and activities. Time and location of membership meetings are determined by the Executive Board. An Executive Board member's term shall last from the second Friday in April to the second Friday in April of the following year. At each annual March meeting of the Student Nurses Association, new executive board members will be elected.

Student representatives to the Curriculum Committee (one from each class is encouraged) are selected through the Student Nurses Association and represent the student body as liaisons regarding the nursing program curriculum. Liaisons are asked to take an active role in shaping the curriculum and the voice of the liaisons is a valued aspect in decision-making.

The executive board members are also part of the Nursing Department Advisory Board.

Sigma Theta Tau International Eta Iota Chapter

Mission

The mission of the Honor Society of Nursing, Sigma Theta Tau International (STTI) is advancing world health and celebrating nursing excellence in scholarship, leadership, and service.

Vision

The vision of the Honor Society of Nursing, Sigma Theta Tau International is to be the global organization of choice for nursing.

Membership to Eta Iota at Large Chapter is open to students enrolled in the Plymouth State University undergraduate nursing program, and who meet the following criteria, are invited to join.

- a. Have completed $\frac{1}{2}$ of the nursing curriculum;
- b. Achieve academic excellence (at schools where a 4.0 grade point average system is used, this equates to a 3.0 or higher);
- c. Rank in the upper 35 percentile of the graduating class;
- d. Meet the expectation of academic integrity

STUDENT AWARDS

The Academic Excellence Award is awarded to a graduating student with the highest over-all GPA.

The Clinical Excellence Award is awarded to a graduating student who:

- Establishes caring interpersonal relationships with clients.
- Functions as a client advocate in clinical interventions.
- Displays a knowledge base necessary for strong critical thinking behaviors in client interactions.
- Displays creativity during clinical experiences.
- Exhibits a high degree of clinical accountability and responsibility.
- Provides clinical role modeling behaviors for peers.
- Possesses strong communication skills in the clinical setting.
- Exhibits leadership skills in peer and community relations.

The Nurse of the Future Award is awarded to a graduating student who demonstrates the following:

- Exemplary knowledge, skills, and attitudes as they relate to all of the nurse of the future competencies, but leadership.
- Strong leadership skills that can influence future nursing workforce force initiatives. These may include service in leadership capacities in the Student Nurses Association; service on Department and University committees; community activities; leadership, support, and sharing of special expertise with student peers, or other activities that represent service and commitment to the betterment of society and their chosen profession.

Nursing Faculty Award for Outstanding Achievement is presented during convocation and goes to a student who has overcome personal and/or academic challenges and blossomed as a student of nursing at Plymouth State University. The deserving student of this award has not only engaged in but has taken charge of their own learning, utilized campus and community resources to their fullest potential, and demonstrates a passion for nursing in his or her academic and personal endeavors.

The Director's Award is awarded to a graduating student. The Director will select this student with input from the faculty. This student will:

- Exemplify outstanding academic and professional achievement.
- Be a senior student anticipating of degree requirements.
- Have outstanding overall academic and clinical achievement.
- Exhibit leadership in pre-professional (e.g., leadership in the Student Nurses Association; service on department or college committees; community activities) or professional activities (in the case of RN students, New Hampshire Nurses Association or other nursing specialty activities; nursing service to the community)

SECTION III

POLICIES & PROCEDURES

CORE PERFORMANCE STANDARDS AND FUNCTIONAL ABILITIES FOR ADMISSION TO AND IN THE BACHELOR OF SCIENCE IN NURSING PROGRAM

All applicants and continuing students must meet the core performance standards and functional abilities.

Standard 1. CRITICAL THINKING AND RELATED MENTAL ABILITIES: Must have critical thinking ability sufficient for clinical judgment. Examples of necessary functional abilities associated with this standard include (not an all-inclusive list): Has the ability to interpret, investigate, communicate, and comprehend complex situations; identify cause and effect relative to clinical situations; ability to make decisions and assess situations under varying degrees of stress; must be able to read and comprehend detailed charts, reports, journal articles, books, etc.; capable of performing all arithmetic functions (addition, subtraction, multiplication, division, ratios, and simple algebraic equations).

Standard 2. COMMUNICATION AND INTERPERSONAL ABILITIES: Must be able to read, write, speak and comprehend English with sufficient skill to communicate effectively verbally and nonverbally. Must have interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds. Examples of necessary functional abilities associated with the standard include (not all-inclusive): Has the ability to establish rapport with clients and their families, peers, agency personnel, and faculty; explain treatment procedures; initiate health teaching; and document and interpret nursing actions and client responses.

Standard 3. PHYSICAL ACTIVITIES: Must have physical abilities sufficient to move from room to room and maneuver in small spaces and gross and fine motor abilities sufficient to provide safe and effective nursing care. Examples of necessary functional abilities associated with the standard include (not all-inclusive): able to move around in client's room, work spaces, treatment areas and administer CPR; calibrate and use equipment; position and transfer clients; capable of lifting up to 50 pounds independently; capable of pushing up to 200 pounds independently; capable of reaching 18 inches above head without the use of mechanical devices to elevate themselves; capable of sitting, standing, walking for extended periods of time; experience no limitations when bending, stooping, sitting, standing, walking (i.e., uses no mechanical devices to assist themselves which would impede the safety of a client); ability to move to and respond to an emergency situation in a timely manner; and able to document in a clear legible manner.

Standard 4. HEARING: Auditory ability sufficient to monitor and assess health needs. Examples of necessary functional abilities associated with this standard include (not all-inclusive): Able to hear auscultator sounds, monitor alarms, and emergency signals; able to hear soft whispers of clients and families; able to tolerate loud noise for extended periods of time. Assistive devices must correct hearing to this degree and must be worn at all times during clinical practica.

Standard 5. VISUAL: Must have the visual ability sufficient for observation, assessment, and intervention necessary for nursing care. Examples of necessary functional abilities associated with this standard include (not all-inclusive): Observe client responses, accurately read equipment, gauges, and monitors; vision correctable to 20/40, normal depth perception, and ability to distinguish colors; and ability to tolerate offensive visual situations.

Standard 6. SMELL: Smelling ability sufficient to monitor and assess health needs. Examples of necessary functional abilities associated with this standard include (not-all inclusive): Have ability to differentiate between various types of smells and odors, and ability to tolerate offensive odors.

STUDENT BEHAVIORAL EXPECTATIONS

1. Student Code of Conduct

Plymouth State University Department of Nursing regards students as adults and expects them to accept responsibility for their behavior, whether acting individually or in a group. Students are expected to be considerate of the rights of others and conduct themselves in a manner that is consistent with the values embraced by the University and reflected in its various policies, contracts, rules, and regulations. Consumption of alcohol or use of tobacco products while in PSU Nursing uniform is prohibited. For information regarding student conduct please refer to: <https://www.plymouth.edu/office/dean-of-students/student-rights-and-code-of-conduct/>

2. PSU Department of Nursing endorses a culture of civility and respect and expects students to display civil and professional behaviors at all times. Student behaviors and/or performance should promote a healthy environment and not present a danger (or reasonable assumption of danger) to a student/person/client/patient/faculty.

Students should understand that their behavior in and out of the classroom will have positive and negative consequences for themselves and others. Students have a responsibility to:

- a. take learning seriously: attend class, be prepared, participate in discussions, ask questions, and complete assignments on time;
- b. treat faculty, staff, and fellow students with respect;
- c. contribute to the enrichment of the University and the larger community;
- d. protect and preserve property belonging to others and the University;
- e. be aware of how lifestyle choices affect academic success and personal growth;
- f. be knowledgeable of and comply with the University policies as outlined in the Student Handbook, University Catalog, and course syllabi.

3. Personal Responsibility

Each student must honor his/her responsibilities and modify behavior to be in compliance with the above stated expectations as requested by the institution and/ or members of this learning community.

INCLEMENT WEATHER

1. In case of inclement weather, decisions about canceling or delaying classes will be made as follows:
 - a. If classes are cancelled according to the PSU main website, then classes or clinical practica will be cancelled.
 - b. If classes are delayed according to the PSU main website, then classes or clinical practica will be delayed as follows:
 - i. Class delays: In the event there is a delay of PSU classes that meet for three hours or more, class will meet at the time the University opens.
 - ii. Clinical delays: In the event there is a delay of PSU classes, clinical will meet at the time the University opens.
 - c. If school is cancelled or delayed in the town that a clinical practicum is located, then the practicum shall also be cancelled or delayed.
 - d. Faculty reserves the right to cancel or delay a clinical practica with consideration of safe travel.
 - e. In the case that students anticipate leaving for a clinical practica prior to an official announcement

from PSU, the clinical instructor shall contact the students regarding cancellation of the practica if necessary.

- f. Often nursing students are traveling, or preparing to travel, to clinical practica before inclement weather announcements are made. If a student perceives that the weather situation poses a threat to their personal safety, the student has the right to determine that travel is unsafe and should contact their course instructor.

ADVISEMENT POLICY

The responsibility for completion of requirements for the degree lies with the student. Students and their nursing advisor are responsible for evaluating progress toward the degree and for interpreting and applying major requirements. Each semester, students must consult with their advisor prior to registration. During the advising session, the student and nursing faculty advisor shall agree upon a planned schedule of courses to promote completion of the nursing degree in a timely manner. At that time, the student will also be given their personal PIN needed for course registration. For additional information about advisement policies, please refer to the PSU website: <https://www.plymouth.edu/office/undergraduate-advising/>

ADMISSION

1. **Admission to the Nursing Program.** Admission to the Nursing program is competitive and is not guaranteed. Students must be admitted to the University and to the Nursing program. See Nursing Admissions page: <https://www.plymouth.edu/department/nursing/nursing-admissions/>

The following criteria must be met in order to be considered for admission into the Nursing Program:

- a. Submit either an ATI TEAS V score at the “Proficient” level or above (to learn more about preparing for the test, please go to <https://www1.atitesting.com/Solutions/pre-program/teas-for-nursing-and-allied-health.aspx>), or a revised SAT (taken as of March 2016) with a minimum score of 1080, with a minimum score of 500 in the Evidence Based Reading and Writing component and the Math component or ACT with a score of 21 or better.
- b. Completion of high school chemistry and biology class
- c. GPA of 3.0 in High School science courses.
- d. GPA of 3.0 or greater in all high school courses combined
- e. Demonstration of math proficiency.
- f. Average to strong writing skills, demonstrated in the application essay.

2. **Transfer Policy.**

- a. This policy pertains to students requesting *internal transfer*, as a change of major, *external transfer*, from another institution or readmission to the program. (also see Readmissions policy)
- b. Currently, each cohort of nursing majors is limited; therefore, very few openings are expected yearly. Students requesting transfer may apply to the nursing department following these guidelines.
 - i. Procedure:

The following criteria must be met in order to be considered for admission. Applications are only valid for the year in which they are submitted.

 - Score *proficient* or above on the TEAS V exam;
 - Meet all progression requirements to begin the nursing sequence in the fall of the year requesting admission;
 - Achieve a grade of 2.67 (B-) in all pre-requisite courses.

- c. Transfer Application Process:
- i. **Change of Major (internal transfer)** applicants and **PSU alumni** must submit a letter of request, addressed to psu-aprnursing@plymouth.edu, addressed to the chair of the APR committee, by May 1st of the year requesting admission.
 - ii. **PSU alumni** must also contact the admissions office to discuss transfer credits.
 - iii. **External transfer** applicants must submit all required documents by May 1st, addressed to the PSU Admissions Dept.
 - iv. The Department of Nursing Admission, Progression & Retention Committee, will review all transfer applications. Selection is based on:
 1. Space available, according to the following priority order:
 - o Students returning from an approved leave of absence (LOA)
 - o Change of major students and PSU alumni (internal transfer)
 - o External transfer applicants
 - o Students applying for readmission
 2. Meeting all progression requirements is required to enter the third nursing **semester** (see nursing curriculum).
 3. If two or more students meet all progression requirements equally, admission will be based firstly on cumulative GPA in all prerequisite science courses taken, and secondly on the TEAS V score (higher is better).
 4. Internal transfer students can request to be placed on a waiting list for the fall semester in the year they applied.
 - v. Applicants will be notified by June 15th of the decision. Wait list students will be notified as spaces open up until the fall add/ drop period closes in the year they apply.

GRADING/PROGRESSION/READMISSION

1. Nursing Department Grading Policy.

<u>Letter Grade</u>	<u>Numeric Grade</u>	<u>Letter Grade</u>	<u>Numeric Grade</u>
A	94-100	C	73-75
A-	90-93	C-	70-72
B+	86-89	D+	66-69
B	83-85	D	63-65
B-	80-82	D-	60-62
C+	76-79	F	59 and below

There will be no rounding up of grades; whereby, 80% (2.67) is the minimum passing grade for the nursing program, all grades will be derived from a calculation out to two decimal places to the hundredth.

2. Student Progression:

- a. Students must earn a grade of a B- (minimum numeric score of 80) or higher in all nursing prerequisite, co-requisite and required nursing (NR) courses and a PASS in all nursing (NR) clinical courses in order to progress in the program.
- b. A student who fails to achieve a minimum grade of B- in any nursing pre-requisite or co requisite courses must repeat the course and achieve a grade of B- or better to be eligible enroll in their subsequent nursing courses.
- c. If a student does not successfully repeat the pre-requisite or corequisite course with a grade of B- or better prior to the start of their next sequenced nursing course as part of their cohort progression, they are dismissed from the Nursing major. They may retake the pre/ co-requisite course one time and must successfully (B- or better) complete the course in order to reapply to the nursing major

- d. If a student does not meet the minimum grade (B- or better) in any two pre-requisite and/or co-requisite courses they are dismissed from the nursing program and are not eligible to reapply.
 - e. If a student does not meet the required minimum grade in any **one** nursing (NR) course, the student is dismissed from the Nursing major and may petition one time in writing for readmission if applicable. (See Readmission Policy).
 - f. Students must complete the program of all required nursing courses within five years of commencing nursing (NR) courses (significant extenuating circumstances such as medical issues, family issues, etc. will be reviewed on an individual basis).
3. **Readmission:** Nursing students requesting readmission to the PSU Nursing Program following dismissal for any reason may apply to the Admission, Progression & Retention Committee one time to be considered for readmission. Potential readmit students must reapply by submitting a letter to the Committee, formally requesting readmission to the program, which should address the reason(s) for their dismissal and identify a plan(s) for successful completion of the program, should the student be readmitted. The Committee will then require an interview with the potential student to review his/her proposals and explore the potential for the student's future success in the Program. If the student is granted readmission to the PSU Nursing Program, certain conditions may apply. If the APR Committee deems it necessary for the readmitted student to audit previously taken courses to support future success, the student will be expected to complete the required audited course(s) with a grade of at least an 80.00 (passing grade for nursing courses), with all course requirements completed as described in the course syllabus. Readmitted students will be required to agree to all terms of readmission as stated in their readmission letter, prior to readmission. The student will return a signed copy of the readmission letter to the Director of Nursing within 14 days after receipt of the readmission letter. Should the readmitted student fail to achieve a passing grade in any NR courses, including audited and clinical courses, or fail to meet other stipulations for readmission, the student will be permanently dismissed from the Program.

Admission, readmission request deadlines:

- For Re-entry in fall, date is May 1st
- For re-entry in spring, date is Oct. 1st
- For re-entry in summer, date is Feb. 1st

- a. In addition to the above, the following conditions must be met:
 - a. A course in which the student does not meet the minimum progression grade (B-) must be successfully repeated **before** enrolling in any subsequent nursing course.
 - b. Students who are granted readmission and subsequently fail to progress in the program will be permanently dismissed from the Nursing Program.
 - c. A student reapplying to the Nursing Program may additionally need to reapply to the University. Please see University readmission policies found in the Academic Catalog.
 - d. Students may reapply to the nursing program one time. If their readmission is denied they may appeal to the Office of Academic Affairs.

4. **Progression in Clinical**

All clinical courses are graded as Pass/Non-Pass. In order to progress, students must pass both the theory and clinical components of all courses with identified pre and co-requisites. Competencies identified in bold on all Clinical Evaluation Instruments are expected to be demonstrated at all times, and inability to demonstrate as such puts a student at risk of receiving a non-pass.

- a. NR 3052: If 50% of competencies are not met at the Developing or Satisfactory Level by the mid-semester evaluation period, students will be considered "at risk" of not passing. ALL competencies need to be met at the Developing or Satisfactory Level by the end of the clinical experience during summative evaluation period. Any student performing at the Need Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.

- b. NR 4082: If 50% of competencies are not met at the Developing or Satisfactory Level by the mid-semester evaluation period, students will be considered “at risk” of not passing. ALL competencies need to be met at the Developing or Satisfactory Level by the end of the semester during the summative evaluation period to receive a PASS for the course. Any student performing at the Needs Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.
- c. NR 3054, NR 3057, NR 3059, NR 4055, NR 4057: If 50% of competencies are not met at the Developing or Satisfactory Level by the mid-semester evaluation period, students will be considered “at risk” of not passing. All competencies need to be met at the Developing or Satisfactory Level by the end of the semester during the summative evaluation period to receive a PASS for the course. Any student performing at the Needs Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.

5. **The Clinical Warning Process** is applicable to all clinical courses and clinical attendance requirements.

The process:

- The faculty or preceptor communicates with the student regarding clinical expectations and/ or unmet expected clinical performance. This can be in the form of a policy, syllabus, conversation or email.
- If a student has not made the necessary adjustment to meet the clinical requirements, in a specified time frame designated by the faculty, the next step is a verbal warning. This can be in the form of a conversation or email.
- If the situation is not remedied by the student in a specified time frame designated by the faculty, the next step is a written clinical warning. This warning puts the student at risk of a non-pass in clinical if the situation is not remedied in a specified time frame, designated by the faculty.
- ***If a student receives a second written clinical warning they will concurrently receive a non-pass for the clinical course.***
- Egregious safety concerns or disregard for nursing department or host institution clinical policies precludes this process and is a clinical non-pass and potential dismissal from the program depending on the offense.

ATTENDANCE POLICY

1. **Nursing students are required to adhere to University attendance policies.** See current Undergraduate Academic Catalog for clarifications on excused and unexcused absences, and policies regarding computing grades for unexcused absences.
2. **Class Attendance Policy:** Class attendance is expected for all Plymouth State University Nursing theory classes. It is at the expectation of each faculty member to clarify class attendance policies in individual course syllabi.
3. **Clinical/Lab Attendance Policy:** It is expected that students will be present, on time, at all scheduled clinical experiences. Clinical competencies and course objectives are achieved through clinical learning. Missing clinical time places the student in jeopardy of not meeting clinical objectives and therefore clinical course failure may result. The faculty recognizes that reasonable accommodations must be made for excused absences (see PSU Undergraduate Class Attendance Policy for definition of excused absence).

4. A healthcare provider's release stating that the student may resume clinical without restrictions (See Standard 3 under Core Performance Standards) is required if student is absent for three (3) or more consecutive days, or if absence required a hospital stay or surgical procedure, or for an official Medical Leave of Absence.

ASSIGNMENT/EXAM POLICY

1. Assignment Due Dates:

Assignments and presentations for class, laboratory, and clinical courses are due by the assigned deadlines as stated in the course schedules of the course syllabi. The faculty must approve any exception to the due date in advance. It is the expectation of each faculty member to clarify grading of late assignments in course syllabi.

2. Examinations:

Examinations will only be administered on the dates and times scheduled. In the event of extenuating circumstances, the course faculty must approve alternate exam times in advance. If a student is absent from an exam, the student may be administered an alternate version and/ or format exam that will assess the same content. Students who miss an exam for an unexcused absence are at risk for receiving a zero for that exam. All exams must be made up within 2 weeks of returning to class, and all subsequent exams will be administered as per the syllabus. Personal items such as cell phones (which must be turned to silent), personal calculators, other electronic devices, handbags, backpacks (etc.), are not permitted to be on person during exam time, except with prior Faculty Proctor approval. Students who violate this policy are at risk for receiving a zero for the exam. **Students must have a laptop computer available for use for exams. Arrangements to borrow a computer through PSU Information Technology Department are the responsibility of the student in advance of the exam date. All teacher developed exams are administered using Respondus lockdown browser. All students must present to an exam with a computer with the functionality to employ the Respondus program during the exam.**

Exams will be available for students to review throughout the course while it is running. Individual exam reviews are arranged through the course instructor. It is at the faculty's discretion if a group review is conducted. Exam review will occur after all students have taken the exam and the FINAL grades have been posted. Students DO NOT have permission to copy or print questions or answers from any exam or quiz.

Students earning less than 80% on an exam should make an appointment with the faculty for an individual review of the exam.

3. Exam Blueprint

- Number of exams with NCLEX-RN style exam items per course will be 2 (minimum), and all courses will have a cumulative final exam with NCLEX-RN style exam items. Exception: All clinical courses, NR 3065, NR 4060, or when indicated on the course syllabus.
- Each nursing exam will have a minimum of 50 NCLEX-RN style exam items, and the final exam will have a minimum of 100 NCLEX-RN style exam items.
- Exam grades will be weighted as follows:
 - Unit Exams: combined weight will be between 50-60% of final grade calculation.
 - Cumulative Final: Will be between 20-30% of final grade calculation.
- The percentage of questions for each course/level of the program that will be written at the application/analysis levels are as follows:
 - 2000 level- at least 20%
 - 3000 level- at least 60%
 - 4000 level- at least 80%
- Scoring Exams:
 - Exam results will be available to students no sooner than 24 hours after and no later than 3 days after the exam has been closed

- No partial credit will be given for alternate format items
- Grades for course exams are not rounded
- All scores will be entered into the grade book to the second decimal point (hundredths)

4. Exam Item Appeal Process (See Appendix B)

- In order to ensure consistency in follow-up on concerns that students have about certain exam items, students must use the Exam Item Appeal Form found in Appendix B.
- Students must submit the appeal form to the faculty member who administered the exam within 24 hours of grades being posted. Submissions beyond 24 hours will not be considered.
- The concerned student must identify the assigned course resource that contains the answer they chose and place this information in the appropriate section of the form, by providing the title of the resource and the page or slide number where the faculty can verify the information.
- Each item under appeal must be placed on a separate form. Only one student may affix their name to each form. If more than one student wants to appeal a question each must submit a form. Faculty will not discuss the appeal with any student without the form being completed and submitted according to these guidelines.
- The faculty has 24 hours to respond to the appeal.
- Should the appeal lead to an item grade change, that change will be applied to all test takers.

GRIEVANCE/FORMAL COMPLAINTS

The Department of Nursing policy related to student appeals, grievances, or complaints mirror the University policies. Examples of university policies and procedures that may relate to formal complaints include: Bias Incidence, Citizen Complaint Process, Fair Grading Policy, Grade Appeals, FERPA, and Sexual Misconduct Policy. For complaints that do not fall into the categories above, students or constituents are encouraged to attempt to resolve the issue or concern with the individual involved. If the situation cannot be resolved by that means, or if the nature of the problem precludes discussion with the individual, the matter may be brought to the attention of the Director. The director will attempt to resolve the matter. If these meetings do not provide a satisfactory solution, the issue may be taken to the appropriate office, department, or committee, for review.

UNIVERSITY POLICIES

Students should refer to the PSU Academic Catalog pertaining to Academic Integrity requirements, Fair Grading, Grade Appeals, and FERPA Student Right to Privacy Policies, and Successful Completion and Graduation Requirements.

CLINICAL REQUIREMENTS

1. Clinical Requirements and Documentation

Students must create an account with Castle Branch for tracking of required documentation for clinical attendance. All documentation listed below must be uploaded to CertifiedBackground.com by **July 1** each year with the exception of flu shot verification. Students who miss the July 1 deadline will receive a verbal clinical warning. In addition, this will jeopardize their timely attendance in clinical which may risk dismissal from the nursing program. The cost for the basic clinical requirements is covered in the nursing program fees. Students incur the costs associated with any additional drug screening tests as required by the program or the clinical agency.

- **Proof of CPR Certification:** Basic Life Support (BLS) **for the Healthcare Provider** through the American Heart Association or the American Red Cross. The certification must be maintained for the entire time that the student is registered and attending clinical courses.
- **Proof of Physical Exam:** Yearly
- **Proof of Health Insurance:** Personal health insurance is required for all nursing students while studying in the nursing program.

2. Proof of Immunizations as listed below:

- i. **TB:** Yearly TB/PPD 2 step test or interferon-gamma release assays (IGRAs) blood test with negative result.
For students with a history of a positive TB test, a letter from their health care provider stating that they have had a recent negative chest x-ray and documentation of a negative TB test is required before participating in clinical.
Students are required to seek follow-up care with their PCP or the student health center if the TB test results are positive.
- ii. **MMR:** Proof of 2 documented MMR (Measles, Mumps and Rubella) vaccinations or immune status documented by titer.
- iii. **Varicella:** Proof of 2 documented Varicella vaccinations or immune status documented by titer.
- iv. **Hepatitis B:** Proof of 3 documented Hepatitis B vaccines **and** immune status documented by titer.
Students who do not take the Hepatitis B vaccine are required to sign a waiver.
- v. **TdAP/ Td:** Proof of documentation within 10 years of the most recent tetanus vaccination (Td). The CDC recommends a single dose of Tdap for healthcare personnel who have never received Tdap regardless of the time since their most recent Td vaccination
- vi. **Flu Vaccine:** Proof of Seasonal Influenza Vaccination by October 1 unless otherwise required by your clinical agency.

3. Drug Screening:

A medical/professional drug screen is required yearly. In some cases, depending on the clinical agency requirements, it may be required more frequently. Any additional drug screen charges are the responsibility of the student. A dilute negative drug screen result will not be accepted and it requires a repeat drug screen done within 24 hours at the student's expense.

- **Maintaining Documentation:**
Documentation of the requirements above must be kept up to date. It is the responsibility of the student to maintain current records. Students who do not maintain current documentation will receive a clinical warning and not be permitted to attend clinical. All required documentation except flu vaccine must be submitted by July 1 each year. It is the student's responsibility to keep this record updated as needed if there is a change.
- **Centralized Clinical Placement (CCP) Modules:**
All modules on the CCP site must be completed prior to clinical orientation. Failure to complete the modules on time will result in a clinical warning and delay in attending clinical, which may place the student at risk for a non-pass and dismissal from the program.

4. Background Review

- a. **Purpose:** The Nursing Program is committed to providing the public with nurses and nursing students who demonstrate personal and professional behaviors consistent with the standards of the nursing profession. The purpose of nursing licensure is to safeguard life, health, and the public welfare of the people of this state. In order to protect the people of the State of New Hampshire from the unauthorized, unqualified, and improper application of services of individuals in the practice of nursing, a criminal background check on all nursing students and any nurse not licensed by the State of New Hampshire is required. The student is responsible for the payment required for the review.
- b. **Scope:** This policy applies to all pre-licensure undergraduate students.
- c. **Policy:** Satisfactory (no results) results of a background review are required to progress in the nursing program.

- d. **Requirement:** Students will be required to undergo background review per clinical agency requirements. This may include a federal background check, State of New Hampshire background check and Bureau of Elder Abuse Services (BEAS) check as well as fingerprinting.
- e. **Refusal: Refusal to provide consent for investigation will result in exclusion from nursing courses and termination from the nursing major.**
- f. **Result Review:**
 - i. Background review information released to the Nursing Program will be used only for purposes of assisting in making decisions about continued matriculation in the nursing major. Certain convictions may be considered a disqualifying factor for continuation in the nursing major.
 - ii. If a background review includes information that the student claims is untrue or inaccurate, these concerns must be addressed by the student to the Bureau of Criminal Identification for resolution.
 - iii. Students have an obligation to report any criminal arrest and conviction including violation level offenses to the Director of Nursing within five (5) days of its occurrence. Failure to notify the Director may result in dismissal from the program.
 - iv. The Director of Nursing will review the results of all background reviews. If adverse information deemed to be relevant to the applicant's suitability for nursing student status is obtained, the Director of Nursing will notify the student in writing.
 - v. The student will have fourteen (14) days to respond to the information either in writing or, if appropriate, by meeting with the Director of Nursing.
 - vi. If a student is disciplined through the PSU Judicial System, the student must notify the program chair within five (5) days.
 - vii. Background reviews are non-transferrable from other schools or outside agencies.
- g. **Convictions:**
 - i. The existence of a conviction does not automatically terminate an individual from the nursing major. Relevant considerations may include, but are not limited to: the date, nature and number of convictions; the relationship the conviction bears to the duties and responsibilities of nursing; and successful efforts toward rehabilitation. Students who do not disclose criminal convictions on the Plymouth State University Common application and have a positive background review may not progress in the nursing program. Failure to disclose is done at the student's own risk.
 - ii. Individuals who have been convicted of a felony or misdemeanor crime or have a pending criminal case must meet eligibility requirements for affiliating clinical facilities. This can be a lengthy process, so students need to begin this process early. Students must also meet the New Hampshire Board of Nursing requirements for licensure eligibility (see NH Board of Nursing web site). Progression and mandatory clinical placements in the nursing program may be contingent on a satisfactory (no result) background review. Clinical agencies may independently perform background reviews on students awaiting placement and do not have to accept a student with an unsatisfactory background review. In addition, clinical agencies may refuse students with certain convictions on their record. The nursing program will **not** secure alternate clinical placements for students who cannot be placed in an agency related to an unsatisfactory background review.

5. Other Clinical Requirements

- h. **Clinical Assignments:** Nursing education includes extensive hands-on experience in the clinical area. Students may be assigned to clinical agencies within the state of New Hampshire. Due to increasing competition for clinical placements, students must have a degree of flexibility, as clinical assignments may involve evenings or weekends.
- i. **Orientation:** Students must meet all annual agency orientation requirements to attend clinical. Students will be responsible for submitting all required clinical documentation by the date specified by the course

Clinical Coordinator or his/her designee, each term. Much of this documentation will be done through the Central Clinical Placement Program (CCP). Students will be instructed in the procedures for completing required documentation each term. Incomplete documentation will mean a clinical warning for the student and they may not attend clinical until the documentation is complete,

- j. **Transportation to Clinical Experiences:** Students are expected to provide their own transportation for all clinical experiences and to assume all costs incurred.
- k. **Badge Return:** Students must return their agency badges to the clinical instructor or course coordinator at the close of clinical. Students who have not returned badges will receive an incomplete clinical grade until the badge is returned.

SIMULATION LAB GUIDELINES

Student & Faculty Guidelines for Simulation Lab Etiquette

- Perform hand hygiene prior to entering the simulation lab.
- The Professional Appearance Policy (see PSU Nursing Student Handbook) will be expected on lab days. Professional dress differs between a lab day and participation in open lab hours. If appropriate dress code is not followed, students will be sent home. Make up for missed time will be determined by the course instructor.
- Hair must be clean, neat and pulled back off the collar and face.
- Cell phones are not to be used during lab time and should be set to 'off' or 'silent' during simulations.
- Use professional behavior and language at all times. Patient care scenarios should be taken as realistically as possible.
- Follow standard precautions during simulation and adhere to clinical guidelines.
- All sharps must be disposed of in the red contaminated sharps containers available in the lab. Please notify the lab coordinator if these are full.
- Do not use ink or betadine on the manikins, place oral medications in manikins' mouths, or remove an IV catheter from a manikin unless instructed to do so.
- Clean up spills on the lab floor when they occur.
- Drinks & foods are not allowed in the simulation lab, near computers or models/manikins.
- Simulation equipment is only to be operated by personnel who have been trained to use such devices.
- Respect the confidentiality of your peers. What happens in the lab, stays in the lab.
- Students will not share details and activities with other students who have not yet participated in the simulation experience.
- No student will utilize the simulation space without permission from a faculty member or the lab coordinator.

Before leaving the lab, please return all chairs, and overbed tables to their proper place, straighten bed linens, return beds to the lowest position, and dispose of any waste. Return any supplies and equipment that you have used while in the lab to its designated location. (Ask the lab coordinator if you need assistance). Log off of the laptops and plug them in.

- Any equipment borrowed from the Simulation Lab must be signed out with a faculty member or the lab coordinator.
- Report any incidents or malfunctions of simulation lab equipment to the lab coordinator. If they are not immediately available, send a detailed email describing what is wrong with the item and put a note on the item for the next user.
- Select clinical supply items are re-used to offset lab costs and environmental impact (example saline flushes or IV tubing). Please save items identified for reuse in each lab.
- Anyone disregarding the guidelines for simulation lab etiquette will be asked to leave the shared space.

IMPAIRED NURSING PRACTICE

1. **Definition:** *Impaired Nursing Practice* is the inability to implement safe care, including demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients as a result of illness or a mental health condition or physical condition related to substance use, misuse, or abuse. If the instructor or agency staff suspect impairment, a student will be dismissed from clinical. Medical or Mental Health clearance may be required before returning to clinical.
2. **Substance Use/Misuse.** Substance use or misuse while engaged in any nursing student or clinical experience is strictly prohibited.
3. **Student's Agreement to Submit to Drug Testing by Affiliating Clinical Agencies and to Consent to Release of Test Results to University Officials**
 - a. For all affiliating clinical agencies that require nursing students to be subject to the agency's drug/alcohol testing policies, the student may be tested in accordance with the affiliating agency's policies.
 - b. Prior to being assigned to an affiliating clinical agency and as a pre-requisite for placement at any affiliating clinical agency, the nursing student shall a) submit to any drug/alcohol testing required by the affiliating clinical agency; and b) to release a copy of any and all drug/alcohol test results to the Department of Nursing Director. Failure to do so shall be grounds for non-placement at an affiliating clinical agency and may result in dismissal from the program.
 - c. The cost for the initial testing is covered in the program fees. The cost of any additional drug/alcohol testing required by affiliating clinical agencies shall be borne by the student or affiliating clinical agency, as determined by the affiliating clinical agency. Neither the University nor the Department of Nursing, or any of its officers or employees, shall absorb drug/alcohol testing costs arising out of any nursing student's placement at an affiliating clinical agency.
 - d. A positive substance abuse test may result in delayed progression or dismissal from the program on the basis that the student is not able to meet the course objectives for classroom and/or clinical experiences. In addition, the student will be reported to the Dean of Students in accord with University policy. The Director of the Department of Nursing will notify a student who has a positive drug test.
 - e. If a student tests positive for a prescribed drug, however, the person must obtain a written statement from a qualified physician stating that the drug level is within prescribed limits and that the level does not indicate abuse. The physician must indicate that the drug will not interfere with safe practice in the clinical area.
 - f. A student's failure to submit to a required drug screen, or attempting to tamper with, intentionally dilute, contaminate, or switch a sample will result in the student being dismissed from the program.
4. **Random or Incident Related Drug Screening.** To be in compliance with the University's contractual agreement with clinical agencies, students may be screened for substance abuse prior to engaging in any clinical activity (see Drug Screening policy), or at any time deemed necessary by the Director of the Nursing Program. **Duty to Notify of Drug/Alcohol Arrests and Convictions & Disclosure of Drug Use**
 - i. A violation by any nursing student of any state or federal statute, or regulation established pursuant to such statute, pertaining to the manufacture, improper possession, sale, use, or distribution of a drug or alcohol is strictly prohibited. Such violation, if substantiated, will result in the student's dismissal from the Department of Nursing. A nursing student who fails to notify the Director of the Department of Nursing within five (5) days of a legal arrest /conviction for any such violation may be subject to dismissal from the Department of Nursing.
 - ii. Nursing students determined by appropriate Department of Nursing officials to have violated these prescriptions may be dismissed from the Department of Nursing.

- iii. Failure to provide the above required information, past legal convictions for activities related to illegal or legally controlled substances, and/or information or evidence that reasonably establishes a past pattern of chemical substance abuse will be grounds for dismissal from the program. However, prior convictions related to chemical substances will be considered along with all other information pertaining to the individual, and will not produce automatic dismissal from the program. Discovery that false or fraudulent or misleading information was provided prior to matriculation will be grounds for dismissal from the program.

5. **Student Self--Disclosure of Prohibited Substance Use.** A student who self-identifies use of a prohibited substance or alcohol or drug abuse, and is requesting help to deal with the problem, should contact the Director of the Department of Nursing. The Director may institute the drug testing procedure. The cost of all drug/alcohol testing required by the Department of Nursing shall be borne by the student.
6. **Confidentiality.** All drug testing results will be treated by the Department of Nursing as information that is received in confidence and shall not be disclosed to third parties unless: disclosure is required by law; the information is needed by appropriate school officials to perform their job functions; disclosure is needed to override public health and safety concerns; or the student has consented in writing to the release of the information. The Department and the University shall have the right to use and disclose the results of drug testing required by this policy in connection with internal academic purposes, and in connection with the defense of any student grievance and any claims filed by a student, or by his/her personal representative, in any court of law or with any state or federal administrative agency.
7. **Impairment due to Suspected Use/Misuse.** Whenever a nursing student's academic or clinical performance is considered to be impaired, the University reserves the right to require the student to submit to drug testing. This policy describes the procedure to follow if impairment is suspected or evidenced in the clinical or resource laboratory setting or if the student tests positive in a pre-entrance or random drug screen. Impairment of a health care professional is the inability or impending inability to practice according to accepted standards as a result of substance use, abuse, or dependency

- a. **Suspected Impairment Procedure**

- g. Faculty will document student's performance using the Unusual Occurrence Form (see Appendix C) and submit it to the Nursing Department Director.
- h. Faculty will inform the Nursing Department Director immediately.
- i. Faculty will inform the student of the reason(s) that she/he be removed from patient care.
- j. If the student smells of alcohol or drug abuse is suspected, a random drug screening will be performed. Failure to consent to a drug or alcohol test will result in immediate suspension from the nursing program and can result in dismissal from the program.
- k. The student must arrange for alternate transportation from the clinical agency.
- l. The student is responsible for all expenses incurred.
- m. The student and the Director will meet to review the incident within three (3) business days.
- n. The Director may seek input from campus personnel such as the VPAA, LADAC, and Criminal Justice Department Head or others as needed.
- o. If test results are positive, the student may be suspended or dismissed from the nursing program.
- p. The student will be referred to the PSU Nursing Student Handbook for judicial policy/grievance procedures.

2. **Procedures for Readmission after Positive Drug Test:** A student who has been dismissed from the nursing major due to a positive drug test may be considered for readmission if the following conditions are met*:

- a. Submission of a verifiable letter from a recognized drug treatment agency stating that the student has successfully completed a substance abuse treatment program.

- b. Submission to a drug test prior to readmission. This drug test will be at the student's expense. A positive drug test will result in ineligibility for readmission.
- c. Submission to drug tests as requested by the Director of Nursing or clinical agencies after readmission, as deemed appropriate by either.

***Other conditions for readmission may be required and are dependent on the situation.**

- 3. **Incidence of Reoccurrence after Readmission:** A student who is readmitted to the nursing program and thereafter tests positive for any drug/alcohol test or is otherwise determined to have engaged in substance abuse as defined herein will be permanently dismissed from the program and will be ineligible for readmission. Furthermore, the student will be ineligible to receive a letter of good standing from the nursing program.
- 4. **Appeal Process:** A nursing student may appeal the decision to dismiss or not readmit a student through the established University Grievance Procedure.

PROFESSIONAL APPEARANCE POLICY

- 1. Personal appearance is a critical factor in the professional image of a baccalaureate nurse. Unless otherwise stated, students are required to wear the official uniform while in the clinical area, including the nursing lab. Uniforms shall be obtained from an approved Nursing Department source.
- 2. Requirements for both men and women:
 - a. **Uniform:**
 - i. Approved green scrub top and green or black scrub pants. Embroidered PSU logo will be on the front of the top.
 - ii. A white laboratory coat or green scrub jacket may be worn with the uniform. No sweatshirts, sweaters or vests are permitted.
 - iii. Students may wear a plain white or black shirt under their scrub top.
 - iv. Clothing must be clean and free of stains, rips, or wrinkles.
 - b. **Hair:** Must be clean, neat, and pulled back off the collar and face.
 - c. **Facial Hair:** Beards and mustaches must be clean, neat, short and neatly trimmed. Male students without full beards must be neatly shaven when in the clinical area.
 - d. **Jewelry:** Single small non-dangling earrings are acceptable in each earlobe. No other visible piercings are allowed in the clinical area. No bracelets. Wedding rings are allowed or a single plain band.
 - e. **Fingernails:** Should be short, with no artificial nails, no tips, and no polish.
 - f. **Scents:** No colognes, perfumes or cigarette/tobacco odors.
 - g. **Shoes and socks:** Plain white or black clean and polished professional, leather shoes (no canvas) with closed toe and heel. Socks must be worn.
- 3. **Student Identification in Clinical:** PSU name badge and/or Clinical Agency Photo ID (where required) must be worn any time a student is functioning as a student in places other than Plymouth State University.
- 4. **Equipment for Clinical Experiences:** Students are required to have the following items: Stethoscope (with bell and diaphragm), nursing scissors, penlight, black ink pen, and wristwatch with a second hand.
- 5. **Alcohol and Tobacco:** Consumption of alcohol or use of tobacco products while in PSU Nursing uniform is prohibited.

CONFIDENTIALITY POLICY

1. Under Health Information, Portability, and Accountability Act (HIPAA) the law protects client personal information. Students are to maintain the confidentiality of all clients at all times. For clinical agencies students will be asked to sign agency specific confidentiality forms. No information with patient identifiers should ever leave the clinical agency in written or verbal form.
2. A breach in patient confidentiality may result in failure of the course and dismissal from the program. Under HIPAA laws, civil fines may be applied by the clinical agency.
3. In order to document care using computerized systems in health care facilities, student social security numbers may be released to an authorized individual.

POSITION ON UNSAFE PRACTICE IN CLINICAL

1. The PSU Nursing Program adheres to the State of New Hampshire Nurse Practice Act (RSA 326-B).
2. Clinical nursing faculty have the responsibility of determining when a student can practice at a safe level and when a student is unable to function at a safe level in the clinical area. If the instructor or clinical agency determines that a student is unsafe to practice, the instructor has the obligation to remove the student from clinical practice.
3. Depending on the nature of the safety issue, the student may be asked to leave the clinical site. If dismissal for the remainder of the course is warranted, the student may receive a failing grade for the course if they are unable to meet clinical course objectives.
4. Safety violations include, but are not limited to: misconduct, dishonesty, blatant disregard for PSU or agency policies and procedures, failure to maintain one's self in an alert and sober manner and not be impaired by drugs or alcohol, and failure to maintain professional comportment.
5. The consequences of unsafe behavior are determined by the nature of the behavior exhibited and the situation in which it occurs.
6. If alcohol or other drugs are suspected by the faculty and/or have the potential or have led to unsafe practice, the Impaired Nursing Practice policy will be followed.

UNUSUAL OCCURENCES IN CLINICAL

1. If it is deemed that a student has practiced in the clinical environment in an unsafe manner the faculty:
 - a. Will complete an Unusual Occurrence Report Form (see Appendix C) and submit it to Nursing Department Director;
 - b. May dismiss the student from clinical;
 - c. Will contact the Nursing Department Director within 24 hours of any incident requiring the dismissal of the student from a clinical setting.
 - d. Will schedule a conference with the student, the clinical instructor, and the Nursing Department Director, within 48 hours of the incident.
2. The student will have the opportunity to explain or defend the unsafe behavior and an appropriate plan will be developed.
3. Repeated unsafe behaviors or failure to correct an unsafe behavior may result in dismissal from the program.
4. The Nursing Program has both the right and responsibility to dismiss from the program any student whose health, conduct or academic standing make it unsafe for that student to remain in a nursing course or the nursing major.
5. **Other Unusual Student Occurrences:**
 - a. In the event that a student becomes ill or injured in the clinical setting, it is expected that the faculty will submit an Unusual Occurrence Report (see Appendix C) in writing within 24 hours to the Department of

Nursing Director. In addition, faculty will follow the clinical agency policy regarding the occurrence. Included in the report should be the name of the student, agency and unit, date, and time incident occurred, and details of situation including description of student's symptoms, behavior and/or injury sustained and treatment received. A statement of follow-up care should be included when appropriate. After review by the Nursing Director, a copy of the incident should be placed in the student's file.

b. Patient Safety Situations

- i. Efforts should be made to trend data on hazards, errors, and near misses by nursing students in the clinical setting.
- ii. In the event that a student is involved in a patient care incident where safety was compromised a report should be completed according to the policy of the clinical agency. The student should also complete within 24 hours an Unusual Occurrence Report (see Appendix C) and within 7 days to complete a Root Cause Analysis (see appendix D) of the incident and submit it to their Clinical Instructor.
- iii. Clinical Instructor will submit reports to Director of Nursing.

RISK FOR BODY FLUID EXPOSURE POLICY

1. Because of the direct involvement with patients, all nurses and nursing students are at risk for exposure to body fluids, which may be infected with Hepatitis, HIV, or other infectious diseases. In the event that a student is exposed to body fluids in the clinical setting, the following steps should be followed:
 - a. Initiate the agency antiseptic/emergency procedures following exposure.
 - b. Notify the faculty and/or preceptor immediately.
 - c. Initiate the agency protocol for exposure.
 - d. Consider post-exposure prophylaxis as defined by Centers for Disease Control (CDC).
 - e. The faculty must document the clinical incident using the "Unusual Occurrence Report Form" (see Appendix C) and submit to the director of the department of nursing.
2. The student is responsible for all costs incurred as a result of the exposure incident.

CELLULAR PHONES AND PAGERS POLICY

1. Students with cellular phones and/or beepers are to turn them off or to silent mode during class and during any clinical practica, whether on campus, in the hospital, or in community-based learning experiences.
2. Texting during class or clinical sessions is inappropriate and distracts from the learning experience.
3. Cell phones may not be allowed in clinical per agency policy. Any use of cell phones during clinical must be for professional purposes only.
4. Cell phones must be on silent or off and must not be on person during all exams. If a student is found to have a cell phone or other smart electronic device on their person, this will be considered a breach of academic integrity.

ASSESSMENT TECHNOLOGIES INSTITUTE POLICY

1. **What does ATI offer?**

Assessment Technologies Institute (ATI) offers an assessment-driven comprehensive review program designed to enhance student NCLEX® success.

The comprehensive ATI review program offers multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.

ATI information and orientation resources can be accessed from your student home page. **It is highly recommended that you spend time navigating through these orientation materials.**

Modular Study: ATI provides Review Modules in print and eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement course work. Instructors may assign these ATI resources either during a given course and/or as part of active learning/remediation following assessments.

Tutorials: ATI offers unique Tutorials that are designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions.

Nurse Logic: is an excellent way to learn the basics of how nurses think and make decisions.

Learning System: offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide are embedded throughout the Learning System tests to help students gain an understanding of the content.

Assessments: Standardized assessments will help the student to identify what they know as well as areas requiring active learning/remediation. There are practice assessments available for students as well as standardized proctored assessments that may be scheduled during courses.

Active Learning Templates/Remediation Flashcards: Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood (as determined on an ATI assessment). Remediation tools are intended to help the student review important information to be successful in courses and on the NCLEX®. The student's individual performance profile will contain a listing of the topics to review. The student can remediate using the Focused Review, which contains links to ATI books, media clips, and active learning templates. The instructor has online access to detailed information about the timing and duration of time spent in assessments, focused reviews, and tutorials by each student. Students can provide documentation that required ATI work was completed using the "My Transcript" feature under "My Results" of the ATI Student Home Page or by submitting written Remediation Templates as required.

2. Faculty Responsibility

- a. Assist students to initially set up an account with ATI in NR 2100
- b. Distribute ATI Bundle to students in NR 2100
- c. Coordinate scheduling of computer-administered Proctored Assessments
- d. Convey via course syllabi due dates and required ATI assignments (see Table 1 below) including Practice Assessments, Proctored Assessment and plan for remediation using the ATI Focused Review tools, Remediation Flashcards and Active Learning Templates;

3. Student Responsibility.

- a. Students will complete all required ATI assignments, including but not limited to: ATI Practice Tutorials and Practice Assessments, Proctored Assessments (see Table 1 below) and remediation as required (see Table 2 below).
- b. Completion of the designated Practice Tutorials, Practice Assessment(s), Proctored Assessment(s) and remediation (if required) is a course requirement. If any required component is missed, students will receive a zero for their ATI Grade per rubric.

TABLE 1.
ATI Tutorial, Practice Assessment & Proctored Assessment Schedule*
(See Course Syllabi for Specific Dates)

NR 2100	<p>Tutorials:</p> <ul style="list-style-type: none"> • Student Orientation • Nurse Logic 2.0 - Beginner • Dosage Calculation 2.0 series <p>Practice Assessment:</p> <ul style="list-style-type: none"> • Self-Assessment Inventory Web 	<ul style="list-style-type: none"> • Critical Thinking Assessment Entrance (non-graded)- Recommended
NR 3020	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> o Fundamentals <p>Practice Assessment:</p> <ul style="list-style-type: none"> • RN Nutrition Online Practice Assessment • Targeted Medical-Surgical 2016: Perioperative Physiological Adaptation 	<ul style="list-style-type: none"> • RN Nutrition X2
NR 3025	<p>Tutorials:</p> <ul style="list-style-type: none"> • Pharmacology Made Easy per syllabus • Learning System RN <ul style="list-style-type: none"> o Pharmacology <p>Practice Assessment:</p> <ul style="list-style-type: none"> • RN Pharmacology 	
NR 3070	<p>Tutorial</p> <ul style="list-style-type: none"> • Learning System RN- Practice <ul style="list-style-type: none"> o Gerontology <p>Practice Assessment</p> <ul style="list-style-type: none"> • Targeted Med/Surg <ul style="list-style-type: none"> o Immune o Fluid & Electrolytes o Cardiovascular o Neurosensory and Musculoskeletal o Renal/ Urinary o Endocrine o Respiratory o Gastrointestinal 	
NR 3035	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> o Nursing Care of Children 1 & 2 <p>Practice Assessment:</p> <ul style="list-style-type: none"> • RN Nursing Care of Children • Dosage Calculation 2.0 <ul style="list-style-type: none"> o Dosage by weight o Pediatric Medications 	<ul style="list-style-type: none"> • RN Nursing Care of Children X2

NR 3065	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> ○ Leadership ○ Reduction of Risk Potential • Practice Assessment: <ul style="list-style-type: none"> ○ RN Leadership 	<ul style="list-style-type: none"> • RN Leadership X2
NR4020	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> ○ Community Health <p>Practice Assessment</p> <ul style="list-style-type: none"> • RN Community Health Online 	<ul style="list-style-type: none"> • RN Community Health X2
NR 3092	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> ○ Mental Health 1 & 2 <p>Practice Assessment</p> <p>RN Mental Health Online Practice</p>	<ul style="list-style-type: none"> • RN Mental Health X2
NR 3085 NCLEX I	<p>Tutorials:</p> <ul style="list-style-type: none"> • Nurse Logic 2.0: Advanced • Practice Assessment: • RN Fundamentals • Learning System RN <ul style="list-style-type: none"> ○ Dermatology ○ Cardiovascular ○ Endocrine ○ Gastrointestinal ○ Musculoskeletal ○ Neurosensory ○ Renal & Urinary ○ Respiratory ○ Final 	<ul style="list-style-type: none"> • RN Fundamentals X2
NR 3094	<p>Tutorials:</p> <p>Practice Assessment</p> <ul style="list-style-type: none"> • RN Targeted Medical-Surgical – Respiratory, Renal & Urinary, Neurosensory & Musculoskeletal, Gastrointestinal, Fluid, Electrolyte, Acid-Base, Endocrine, Cardiovascular. • RN Adult Medical/Surgical • Dosage Calculation 2.0 • Critical Care Medications • Case Studies: Final 	<ul style="list-style-type: none"> • RN Adult Medical/Surgical X2
NR 4015	<p>Tutorials:</p> <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> ○ Maternal Newborn 1 & 2 <p>Practice Assessment:</p> <ul style="list-style-type: none"> • RN Maternal Newborn 	<ul style="list-style-type: none"> • RN Maternal Newborn X2

NR 4050	Tutorials: <ul style="list-style-type: none"> • Learning System RN <ul style="list-style-type: none"> o Oncology Practice Assessment: <ul style="list-style-type: none"> • RN Pharmacology 	<ul style="list-style-type: none"> • RN Pharmacology X2
NR 4073	Practice Assessment: <ul style="list-style-type: none"> • Nurse Logic Advanced Student Tests • RN Comprehensive RN Practice A and B • ATI Live Three-Day Review 	<ul style="list-style-type: none"> • Critical Thinking Assessment: Exit (non-graded) Recommended • RN Comprehensive Predictor Exam Form A and Form B

Proficiency Levels:

Below is a description of what each *Proficiency Level* means:

- *Proficiency Level 3* - indicates a student is likely to **exceed** NCLEX-RN in this content area. Students are encouraged to engage in continuous focused review to maintain and improve their knowledge of this content.
- *Proficiency Level 2* - indicates a student is fairly certain to **meet** NCLEX-RN standards in this content area. Students are required to engage in continuous focused review in order to improve their knowledge of this content.
- *Proficiency Level 1* - indicates a student is likely to **just meet** NCLEX-RN standards in this content area. Students are required to develop and complete a rigorous plan of focused review in order to achieve a firmer grasp of this content.
- ***Below Proficiency Level 1*** - indicates a need for thorough review of this content area. Students are strongly encouraged to develop and complete an intensive plan for focused review. Students at this level are expected to fully remediate according to the instructor's directions.

Remediation:

- Remediation is a process of reviewing content not answered correctly on an ATI Tutorial, Practice Assessment or Proctored Assessment. This helps the students increase proficiency in identified areas of knowledge deficit. **Remediation (per syllabus) is a course requirement.** Students must submit proof of completion of required of all ATI assigned components including remediation in order to receive any credit for their ATI grade.
- **Grading and Remediation for the RN Comprehensive Predictor Exam (see Table 3):** The benchmark score for the RN Comprehensive Predictor Exam is 95% of the Predicted Probability of Passing the NCLEX- RN. If approval is not obtained by the end of the semester (date to be set by Director), the student will receive an Incomplete in the course until the remediation plan has been approved

TABLE 2. Content Mastery Series Grading Rubric 10% of overall course grade. <i>Specific Remediation and Assessment dates per course syllabi.</i>		
GRADE	CRITERIA	
100%	All required components completed & Level 3 on Proctored Assessment	
90%	All required components completed & Level 2 on Proctored Assessment	
70%	All required components completed & Level 1 on Proctored Assessment	
60%	All required components completed & Below Level 1 on Proctored Assessment	
0%	Not all required components completed regardless of Proctored Assessment Score	
Required Components		
PRACTICE ASSESSMENT A & Remediation	Minimum one hour Focused Review. For each topic missed complete Remediation Flashcard.	<ul style="list-style-type: none"> • Proof of completion of Practice Assessment A shall be submitted in Moodle 2 drop box by date per syllabus. • Printed copy of transcript and handwritten Remediation Flashcards or Active Learning Templates shall be submitted to course instructor per syllabus.
PRACTICE ASSESSMENT B & Remediation	Minimum one hour Focused Review. For each topic missed complete remediation flashcard.	<ul style="list-style-type: none"> • Proof of completion of Practice Assessment B shall be submitted in Moodle 2 drop box by date per syllabus. • Printed copy of transcript and handwritten Remediation Flashcards or Active Learning Templates shall be submitted to course instructor per syllabus.
PROCTORED ASSESSMENT A & Remediation	<ul style="list-style-type: none"> • Level 3-Minimum one hour Focused Review and complete Active Learning Template for each topic missed. • Level 2 - Minimum two hours Focused Review and complete Active Learning Template for each topic missed. • Level 1- Minimum three hours Focused Review and complete Active Learning Template for each topic missed. • Below Level 1--- Minimum four hours Focused Review and complete Active Learning Template for each topic missed. 	<ul style="list-style-type: none"> • Printed copy of transcript and handwritten Active Learning Templates shall be submitted to course instructor per syllabus.
PROCTORED ASSESSMENT B	<ul style="list-style-type: none"> • Required for Level 1 or Below Level 1. Recommended for Level 2 and 3. 	

TABLE 3.		
Comprehensive Predictor Grading Rubric		
10% of overall course grade based on Probability of Passing (not raw score).		
<i>Specific Remediation and Assessment dates per course syllabi.</i>		
GRADE	CRITERIA	
100%	All required components completed & Probability of Passing 95% or greater.	
90%	All required components completed & Probability of Passing 90---94%.	
70%	All required components completed & Probability of Passing 85---89%.	
60%	All required components completed & Probability of Passing 84% or below.	
0%	Not all required components completed regardless of Proctored Assessment Score	
RN Comprehensive Predictor Practice A & Remediation	Minimum one hour Focused Review. For each topic missed complete Active Learning Template	<ul style="list-style-type: none"> • Proof of completion of Comprehensive Practice A shall be submitted in Moodle 2 drop box by date per syllabus. • Printed copy of transcript and handwritten Active Learning Templates shall be submitted to course instructor per syllabus.
RN Comprehensive Predictor Practice B & Remediation	Minimum one hour Focused Review. For each topic missed complete Active Learning Template.	<ul style="list-style-type: none"> • Proof of completion of Comprehensive Practice B shall be submitted in Moodle 2 drop box by date per syllabus. • Printed copy of transcript and handwritten Remediation Flashcards shall be submitted to course instructor per syllabus.
PROCTORED Comprehensive Predictor A & Remediation	<ul style="list-style-type: none"> • 95% or greater -Minimum one hour Focused Review and complete Active Learning Template for each topic missed. • 90-94% - Minimum two hours Focused Review and complete Active Learning Template for each topic missed. • 85-89% - Minimum three hours Focused Review and complete Active Learning Template for each topic missed. • 84% or below • Minimum four hours Focused Review and complete Active Learning Template for each topic missed. 	<ul style="list-style-type: none"> • Printed copy of transcript and handwritten Active Learning Templates shall be submitted to course instructor per syllabus.
PROCTORED Comprehensive Predictor B	<ul style="list-style-type: none"> • Recommended for 90% or above. • Required for 89% or below. 	

MEDICATION ADMINISTRATION COMPETENCY POLICY

Math skills for dosage calculations are a major component in safe preparation and administration of medication as well as in educating patients and families. This medication administration competency program will facilitate students in meeting these high standards through a semester-to-semester approach of increasing expectations. The following elements are required:

- a. In NR 2100 students will be introduced to Dosage Calculation 2.0 Series (see ATI Policy). One assessment will be given to assess basic clinical calculations at 10% of overall grade.
- b. In NR 3020 students will have three attempts to pass a math calculation assessment prior to administering medication in clinical. Students must achieve a score of at least 90% on the assessment to pass, and the score will be entered into the gradebook toward the course total. If a 2nd or 3rd attempt is needed to pass the assessment with at least a 90%, the scores will be averaged and that value will be entered into the gradebook. Safe medication administration is an expectation for demonstrating clinical competency in NR 3052. Failure to pass the required math calculation assessment after three attempts may prohibit the student from administering medication in the clinical setting, and the student is therefore at risk of not passing the NR 3052 clinical course.
- c. In NR 3020, NR 3025, NR 3035, NR 3070, NR 4015, NR 3092, NR 3094, NR 4050: 10% of exam questions will relate to clinical calculations.
- d. Students will be assessed via competency checklist on rights of medication administration during scheduled lab time.
- e. Students will consistently demonstrate safe medication administration in all clinical settings. Unsafe medication administration will result in a clinical warning and the potential for clinical non-pass and dismissal.

CLINICAL REMEDIATION PROGRAM

The purpose of this policy is to define the Clinical Remediation Program process including responsibilities of all those involved. The Nursing Department Remediation Program was created to support students in meeting clinical requirements and demonstrating competencies.

1. Remediation Process:

- a. Referral to the Course Coordinator for remediation will occur when:
 - i. A student's performance indicates that they are not meeting one or more of the clinical competencies at a developing level or higher
 - ii. Risk for a grade of non-pass
 - iii. One Clinical Warning
- b. Faculty Responsibility: Complete the Clinical Remediation Referral form and forward it to the Course Coordinator and student prior to remediation.
- c. Student Responsibility:
 - i. Contact the Course Coordinator within 48 hours of receiving notice of referral to set up a specific time to discuss remediation.
 - ii. Attend the remediation session prepared by having reviewed the appropriate literature in the skills book (including reviewing appropriate skills checklists), medical/surgical text, or medication reference text.
 - iii. Bring a copy of the Clinical Remediation Referral form to the remediation session.
 - iv. Following the remediation session, complete the self-evaluation portion (part 2) of the Clinical Remediation Referral form and return to remediating faculty.

d. Course Coordinator Responsibility:

- i. Collaborate with the referring clinical faculty to create the remediation plan and designate a time with referred student.
- ii. Following the remediation, complete instructor feedback portion of the Clinical Remediation Referral form.
- iii. Forward a copy of the completed form, following remediation, to the referring clinical instructor and the remediated student.
- iv. If the clinical instructor is also the course coordinator they may request another faculty member or the director to assist with the remediation.
- v. Assure a copy of the referral is placed in student's Nursing Department master file.

STUDENTS ADMINISTRATION OF INTRAVENOUS MEDICATIONS IN CLINICAL

1. All peripheral intravenous (IV) medications and central line medications and flushes must be administered under the direct supervision of clinical instructor/preceptor throughout the program.
2. Intravenous Secondary Infusions (IVPB) and change of flow rates to continuous IV medications can only be done under the direct supervision of a clinical instructor or preceptor.
3. Intravenous push (IVP) medications can only be administered at the instructor/ preceptor discretion in NR 3054, NR 3057, NR 3059, NR 3094, NR 4057, and NR 4082 clinical under the direct supervision of the clinical instructor or preceptor.
4. Below is a list of the medications that students are **never** permitted to administer via IVP. This list is not exhaustive and additional drugs may be added subject to current evidence and agency policy. Failure to comply with this policy will result in a non-pass for the clinical course and dismissal from the program. Clinical instructor's may add additional medications specific to their clinical specialty/patient population.

Students are never permitted to administer the following medications as intravenous push (IVP):

- Adenosine
- Diltiazem
- Amiodarone
- Digoxin
- Atropine
- Lidocaine
- Pronestyl
- Epinephrine
- Isuprel
- Insulin
- Mexitil
- Bretylium
- Brevibloc
- Propofol
- Verapamil
- Tissue Plasminogen Activator (TPA)
- Heparin

SECTION IV

LICENSURE

LICENSURE

Upon successful completion of the Nursing Program, graduates will be eligible to apply to take the National Council Licensure Examination (NCLEX-RN) for licensure as a Registered Nurse (RN).

Each licensure applicant shall furnish to a State Board of Nursing satisfactory evidence of the following:

- Completion of a course of study in an approved nursing education program.
- Satisfaction of other qualification requirements as the BON may prescribe.

Costs for examination and licensure are the responsibility of the student.

The student is responsible for obtaining the necessary forms and requirements from that state in which he/she plans to apply for initial licensure. Information for licensure throughout the United States can be obtained at <https://www.ncsbn.org/index.htm>.

SECTION V

APPENDICES

Appendix A

ANA Code of Ethics for Nurses

1. The nurse, practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and strives to protect the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public, to protect human rights, promote health diplomacy, and reduce health disparities
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Copyright: American Nurses Association, Code of Ethics for Nurses with Interpretive Statements, Silver Spring, MD: American Nurses Publishing, 2015 retrieved at:
http://www.nursingworld.org/DocumentVault/Ethics_1/Code-of-Ethics•for-Nurses.html

Appendix B

EXAM ITEM APPEAL FORM

Date: _____

Student Name: _____

Course Number and Title: _____

Quiz/Test Item Number: _____

Quiz/Test Item text: _____

Keyed Answer: _____

Student Answer: _____

Rationale for your answer: (must include where your answer is found in the text, PowerPoint or other course materials assigned for the current course)

NOTE: this form must be submitted within 24 hours of grades being posted on Moodle. Submissions after that time will not be considered. Faculty will have 24 hours after receipt of appeal form to make a final decision.



Appendix C

**UNUSUAL OCCURRENCE
REPORT FORM**

THIS FORM AS AN ADJUNCT TO THE UNUSUAL OCCURRENCES POLICY; PLEASE SEE ENTIRE POLICY FOR SPECIFIC INSTRUCTIONS REGARDING UNUSUAL OCCURRENCES.

Date of Unusual Occurrence:	Time of Unusual Occurrence:
Place of Unusual Occurrence; Agency/ Unit:	Name and Contact Information of Person Completing Form:
Student's Name and Contact Information:	

State the facts of *Who, What, Where, When, Why, and How* of the unusual occurrence/incident happened including descriptions of: student's symptoms, behavior and/or injury and treatment received. (Use additional sheets of paper if necessary).

Follow up Care (if necessary):

**Please return this form to: Director, PSU Nursing Department
17 Highland St, MSC 58 Plymouth NH 03264**

For PSU Nursing Department Office Use Only	
Date PSU Nursing Department received report:	Date Report Filed:
Action Taken:	

Appendix D

Root Cause Analysis

Name of Person Completing This Form:

Date:

Description of event:

What happened?

Where did process go wrong? What steps were involved in (contributed to) the event?

What are the usual steps in the process(es)?

Why do you think it happened?

Human Factors

1. What role did human performance play in this event?
2. What human factors were relevant to this case? I.e. fatigue, staff illness, noise, temperature, scheduling, personal problems, stress, rushing, cognitive errors?
3. Were distractions or interruptions a factor in this case?

Communication among staff / Information availability

1. Was communication adequate and timely in this event?
2. Are there obstacles to communication relating to this event?
3. Was the needed information available, accurate, and complete?
4. Was patient identification an issue in this case?
5. Does the medical record documentation adequately provide a clear picture of what happened?
6. Were there issues related to continuity of care?

Aspects of care and care planning:

1. What issues related to physical or behavioral assessment were a factor in this event?
2. What policies or procedure relate to the level and frequency of observation and monitoring?
3. Did the level and frequency of patient observation or monitoring meet standard of care?
4. What issues relating to philosophy of care or care planning had an impact on this case?

Staffing

1. How did staffing levels compare with ideal levels? (Give #s)
2. Was workload a factor in this event?
3. How are staffing contingencies handled?

Training/Competency/

1. Were issues relating to staff training or staff competency a factor in this event? Is training provided prior to the start of the work process?
2. Was an individual performing in a situation for which they were inappropriately trained or prepared?
3. How is staff performance assessed? Are competencies documented?
4. Are the results of training monitored over time?
5. Is there a program to identify what training is needed?

Supervision of Staff and Credentialing (Includes physicians in training)

1. Was supervision of staff an issue in this case?
2. Was the staff physician involved in the case in a timely way?
3. Are there issues related to credentialing?

Adequacy of Technological Support

1. Was technological support adequate?

Equipment/ Equipment Maintenance/Management

1. What equipment / products were involved in this case/event?
2. Did equipment / products function properly?
3. Did alarms, monitoring systems function properly?
4. Was equipment used as designed?
5. Has staff been adequately trained in the use of the equipment / products?
6. Was equipment maintenance an issue?
7. Is there a maintenance program?

Environmental aspects

1. Was the work area or environment designed to support the function for which it was being used? (i.e space, privacy,

safety, access)

2. Does the work environment provide physical stressors for staff? (i.e. temperature, noise, improper lighting)
3. Does the work environment meet current codes, specifications, and regulations?
4. What systems are in place to identify environmental risks?
5. What security systems and processes relate to this event? Were there issues related to security systems and processes?
6. What emergency and failure modes responses have been tested? (safety evaluations, disaster drills, etc. ?)

Control of Medications: Storage/Access

1. Was storage or access to medications an issue?

Labeling of Medication

1. Was labeling medications (manufacturer or HCMC labeling) an issue?

Leadership:

1. To what degree is the culture conducive to risk identification and reduction?
2. What are the barriers to communication of potential risk factors?
3. How is the prevention of adverse outcomes communicated as a high priority?

Other questions:

1. Are there any other factors that influenced this outcome?
2. Were there uncontrollable external factors?
3. What can be done to protect against the uncontrollable factors?
4. What other areas or services are impacted (might have a similar event)?

Communication with Patient/Family

1. Was communication with patient and family adequate?
2. Was there disclosure regarding the untoward outcome, details of the event?

Summary of Root Causes and contributing factors:

Section IV. Student Acknowledgement

Student Acknowledgement of the 2019-2020 PSU Nursing Student Handbook will be completed electronically at the mandatory all school meeting each fall .