

Nebraska Methodist College
Department of Nursing



STUDENT HANDBOOK
Academic Year
Spring 2012

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DISCLAIMER

The policies and procedures contained in this handbook are subject to change without notice at the discretion of the Program Director with the approval of the Associate Dean. Any changes made will be communicated to students in a timely manner. It is the responsibility of each student to be acquainted with all requirements, policies, and procedures for his or her degree program and to assume responsibility for meeting those requirements.

INTRODUCTION

This handbook has been prepared for the purpose of assisting nursing majors to become acquainted with the Department of Nursing and the various programs within the Department. The philosophy of each program is included along with the unique curriculum structure for that program and the program outcomes. Whether you are enrolled in the Baccalaureate Degree Program or the Masters Degree Program, you are encouraged to read the information on both programs offered in the Department. This information is most helpful in your understanding of what is involved/expected in the degree preceding your current one or in one to follow. An increased understanding in these key areas will also contribute to making the best decisions for your future development.

The attached policies are applicable to students in both nursing degree programs. Some policies designate if that policy or parts of that policy apply to specific groups of nursing students, i.e., non-RNs, BSN, or MSN. As students admitted to Nebraska Methodist College (NMC), you have access to the College Catalog found on the NMC Website at <http://www.methodistcollege.edu/currentstudents/catalogs/collegecatalog/index.asp>. All information in the College Catalog applies to nursing students who have the same privileges and responsibilities as other College students.

The policies and procedures contained in this handbook are subject to change without notice at the discretion of the Program Director with the approval of the Associate Dean. Any changes made will be communicated to all nursing students in a timely manner. It is the responsibility of each student to be acquainted with all requirements, policies, and procedures for his or her degree program and to assume responsibility for meeting those requirements.

Revised 7/09, 1/10

Reviewed 7/05, 7/06, 8/0, 8/08, 8/10, 7/11

OPPORTUNITIES FOR STUDENT COMMUNICATION AND INVOLVEMENT

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

- Department of Nursing Meetings held in October, December/January, March and May: Contact Dr. Marilyn Valerio at marilyn.valerio@methodistcollege.edu to add agenda items for discussion at department meetings.
- Communication Forums: Informal (face-to-face) meetings with students will be scheduled during the semester. Invitations will be sent to all nursing students via their NMC email accounts. Contact the program director Dr. Linda Hughes, Director of Undergraduate Nursing Programs, to identify items to be discussed at the forums.
- Communication Tool: The communication tool is located at the back of this handbook (Appendix E) and is available on the college webpage under student handbooks. The form may also be located on Angel. Please use this tool to communicate concerns and suggestions. Undergraduates please contact Dr. Linda Hughes, Director of the Undergraduate BSN Programs via email or phone to discuss concerns and or questions about the form as a hard copy. Graduate Students may contact Dr. Linda Foley, director of Graduate Nursing Programs.
- Student Senate and/or Methodist Student Nursing Association (MSNA): Contact officers of Student Senate and/ or MSNA for items of concern or suggestions. Officers of both organizations are listed on the college webpage under student organizations.

Department of Nursing Contact Information

Dr. Marilyn Valerio.....	Associate Dean of Nursing.....	office phone 354-7027
Dr. Linda Foley.....	Director, Graduate Programs.....	office phone 354-7050
Dr. Linda Hughes.....	Director, Undergraduate programs.....	office phone 354-7049
Dr. Fran Henton.....	Community Based Curriculum Coordinator...	office phone 354-7043
Dr. Susie Ward.....	Special Programs Coordinator .	office phone 354-7063

DEPARTMENT OF NURSING VISION AND MISSION STATEMENTS

Vision: Dynamic nursing education, for today and for tomorrow, for individuals and the global community.

Mission: The Department of Nursing is committed to providing quality education that prepares resilient professional nurses who are caring and practice holistically to meet the ever changing challenges of the 21st century through a culture of evidence-based practice.

Faculty will support students, peers, the College and the community in this mission through a collaborative, accepting environment and through relationships fostered by mentoring and role modeling.

*Implemented 7/07
Reviewed 7/08, 8/08, 8/09, 7/10, 7/11*

RN-MSN & MSN PROGRAM



MASTER OF SCIENCE DEGREE NURSING

MSN PHILOSOPHY

The philosophy of the Master of Science Program of the Department of Nursing is reflective of the values and beliefs from which the NMC mission and core values were formulated.

Nursing faculty believe that human beings are holistic and integrated. Each human being has dignity, basic rights and responsibilities, individual needs, and a unique internal environment. The human interacts within the environment that encompasses all the external factors that affect the human's well being and includes the physical, psychosocial, and existential dimensions. The client is the human recipient of care whether as an individual, family, group, or community.

Health is viewed as a dynamic state of mental, physical, social, and spiritual well being that maximizes the human's ability to function in his or her environment. Illness is an alteration in the dynamic state of well being that leads to disharmony between the human self and the environment. Health promotion, maintenance, rehabilitation, and restoration are facilitated by activities directed toward enhancement and stabilization of a dynamic state of well being.

Nursing is a caring, creative, dynamic, and interactive process that uses scientific and humanistic bodies of knowledge to assist the client in attainment of a dynamic state of well being. Nursing is concerned with promoting health, preventing illness, restoring health, and caring for the sick and dying. The practice of caring is an integral part of nursing and consists of the *caritas* processes*, which are those interventions that result in the satisfaction of human needs. The caring response promotes health and human growth. A caring atmosphere is one that offers the opportunity for development of potential while allowing the client to choose the best action at a given point in time. Caring is demonstrated and practiced interpersonally and uses the systematic nursing process approach.

Learning is a lifelong, continuous process through which humans acquire knowledge that results in changes of behavior, attitudes, and/or ways of thinking. The nursing faculty believe that nursing education is built on the application and synthesis of the biophysical sciences, psychosocial sciences, the humanities, and the science of caring. Teaching is an interactive process that uses a system of actions to promote acquisition, application, integration, and synthesis of knowledge. The faculty serve as teachers, facilitators, resource persons, evaluators, and professional role models. Graduate education plays a strategic role in the ongoing development of the skilled professional who will contribute to the health, business, political, and social structures of the global community.

Completion of the Master of Science Nursing Program provides the graduate with a strong theoretical and practical base to improve healthcare through a culture of evidence-based practice. This education will prepare the graduate with a firm background in critical thinking and decision making skills. The master's prepared nurse will have the necessary skills to practice independently and interdependently and to build interdisciplinary collegial relationships. The graduate will participate in the creative development of partnerships with communities to deliver services to a variety of populations. There will be consideration for the health care needs of populations at risk and the growing number of those clients who are underserved. The graduate will be able to use creativity and flexibility in order to deal with roles less clearly defined as well as to manage and carry out the changing and challenging advanced nursing roles. This graduate will function in an increasingly complex health care system that includes responding to global, technological, and environmental issues. The graduate will be able to analyze, synthesize, and utilize knowledge to better understand health care policy, financing, and ethical decision making. The graduate will be prepared in the professional role to foster leadership in the delivery of culturally sensitive health care.

*Jean Watson, *Nursing: The Philosophy and Science of Caring Revised Ed*, 2008

Revised 12/99, 9/07, 7/08, 8/08

Reviewed 7/00, 4/01, 8/02, 1/03, 8/04, 1/05, 12/05, 12/06, 9/07, 8/08, 12/08, 7/09, 7/10, 7/11
Editorial Changes 9/01

RN to Master of Science Degree Bridge Curriculum

CURRICULUM STRUCTURE

The RN-MSN track for the RN without a bachelor's degree affords the RN the ability to earn 18 semester credit hours of undergraduate bridge courses (statistics, leadership, research, health assessment, public/community health) and then transition into the MSN Program without receiving a BSN.

NRS 402	Nursing Assessment for the RN	3		NRS 552	Community Health Nursing for RN's	3
SSC 360	Introduction to Statistics	3		NRS 476C	Community Practicum RN	3
SSC 370	Applied Theories and Research for Nursing Concepts	3		NRS 446	Collaborative Nursing Leadership in a Global Society	3
					TOTAL HOURS	18

Initial 12/09

Reviewed 7/10, 7/11

NURSE EXECUTIVE TRACK (For students matriculating Fall 2010)

CURRICULUM STRUCTURE

The following plan represents full-time progression through the program. A student must earn a minimum of **36** semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

Fall			Spring		
NRS 507	Developing Your Ad Nsg Role	1	NRS 552	Role of the Nurse Executive I: Leading an Organization	3
NRS 550	Organizational Behavior & Structure	3	NRS 508	Issues in Advanced Nursing Roles	3
NRS 515	Applied Theories and Research for Nursing Concepts	5	NRS 517	Critical Appraisal of Knowledge for Practice	3
TOTAL HOURS		9	TOTAL HOURS		9

Summer		
NRS 519	Synthesis and Use of Knowledge for Evidence-Based Practice	3
NRS 554	Role of the Nurse Executive II: Human Resource Management	3
TOTAL HOURS		6

Fall			Spring		
NRS 558	Role of the Nurse Executive III: Financial Mgt & Economics	4	NRS 559	Practicum: Management, Improvement, & Evaluation in Health Care Organizations	4
NRS 592	Capstone I	2	NRS 594	Capstone II	2
TOTAL HOURS		6	TOTAL HOURS		6

*Reviewed 8/10, 7/11
Revised 9/09*

**MASTER OF SCIENCE DEGREE
NURSE EXECUTIVE TRACK
(For students matriculating May 2011)**

CURRICULUM STRUCTURE

The following plan represents full-time progression through the program. A student must earn a minimum of **36** semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

Session 1			Session 2		
NRS 509	Ad Nsg Roles & Phenomena	3	NRS 552	Role of the Nurse Executive I: Leading an Organization	3
NRS 513	Measurement & Statistical Concepts for Data Interpretation	3	NRS 508	Issues in Advanced Nursing Roles	3
NRS 550	Organizational Behavior & Structure	3	NRS 517	Critical Appraisal of Knowledge for Practice	3
TOTAL HOURS		9	TOTAL HOURS		9

Session 3		
NRS 519	Synthesis and Use of Knowledge for Evidence-Based Practice	3
NRS 554	Role of the Nurse Executive II: Human Resource Management	3
TOTAL HOURS		6

Session 4			Session 5		
NRS 558	Role of the Nurse Executive III: Financial Mgt & Economics	4	NRS 559	Practicum: Management, Improvement, & Evaluation in Health Care Organizations	4
NRS 592	Capstone I	2	NRS 594	Capstone II	2
TOTAL HOURS		6	TOTAL HOURS		6

Reviewed 7/11

Revised 2/11

**MASTER OF SCIENCE DEGREE
NURSE EDUCATOR TRACK
(For students matriculating Fall 2010)**

CURRICULUM STRUCTURE

The following plan represents full-time progression through the program. A student must earn a minimum of **36** semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

Fall			Spring		
NRS 507	Developing Your Ad Nsg Role	1	NRS 518	Instructional Methods	3
NRS 516	Teaching/Learning	3	NRS 508	Issues in Advanced Nursing Roles	3
NRS 515	Applied Theories and Research for Nursing Concepts	5	NRS 517	Critical Appraisal of Knowledge for Practice	3
TOTAL HOURS		9	TOTAL HOURS		9

Summer		
NRS 519	Synthesis and Use of Knowledge for Evidence-Based Practice	3
NRS 546	Advanced Health Assessment, Pathophysiology & Pharm	3
TOTAL HOURS		6

Fall			Spring		
NRS 523	Curriculum/Program Development & Evaluation	4	NRS 524	Practicum in Nursing Education	4
NRS 592	Capstone I	2	NRS 594	Capstone II	2
TOTAL HOURS		6	TOTAL HOURS		6

Reviewed, 7/11

Revised 5/10

**MASTER OF SCIENCE DEGREE
NURSE EDUCATOR TRACK
(For students matriculating May 2011)**

CURRICULUM STRUCTURE

The following plan represents full-time progression through the program. A student must earn a minimum of **36** semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

Fall			Spring		
NRS 509	Ad Nsg Roles & Phenomena	3	NRS 518	Instructional Methods	3
NRS 513	Measurement & Statistical Concepts for Data Interpretation	3	NRS 508	Issues in Advanced Nursing Roles	3
NRS 516	Teaching/Learning	3	NRS 517	Critical Appraisal of Knowledge for Practice	3
TOTAL HOURS		9	TOTAL HOURS		9

Summer		
NRS 519	Synthesis and Use of Knowledge for Evidence-Based Practice	3
NRS 546	Advanced Health Assessment, Pathophysiology & Pharm	3
TOTAL HOURS		6

Fall			Spring		
NRS 523	Curriculum/Program Development & Evaluation	4	NRS 524	Practicum in Nursing Education	4
NRS 592	Capstone I	2	NRS 594	Capstone II	2
TOTAL HOURS		6	TOTAL HOURS		6

Reviewed 7/11

Revised 2/11

POST-MASTERS CERTIFICATE NURSE EDUCATOR & NURSE EXECUTIVE

CURRICULUM STRUCTURE

The following plan represents progression for the online post-master's certificate as a nurse educator/nurse executive. There are a total of 14 credit hours to complete for each certificate.

Nurse Educator (PMC)			Nurse Executive (PMC)		
NRS 516	Developing Your Ad Nsg Role	3	NRS 550	Organizational Behavior & Structure	3
NRS 518	Instructional Methods	3	NRS 552	Role of the Nurse Ex. I: Leading an Organization	3
NRS 523	Curriculum/Program Development & Evaluation	4	NRS 558	Role of the Nurse Ex. III: Financial Management & Economics	4
NRS 524	Practicum in Nursing Education	4	NRS 559	Practicum: Management, Improvement & Evaluation in Health Care Organizations	4
TOTAL HOURS		14	TOTAL HOURS		14

*Reviewed 8/08, 12/08, 7/10, 7/11
Revised 5/09*

Nebraska Methodist College

Department of Nursing

MSN PROGRAM OUTCOMES

- 1. Demonstrates scholarship as a foundation for nursing and health care.**
 - a. Address ethical issues related to scholarship.
 - b. Build-on clinical expertise in a specific area.
 - c. Demonstrate use of the research process.
 - d. Incorporate theory and research outcomes into practice and education.
 - e. Contribute to continuous improvement of health by embracing change and innovation through evidenced-based nursing.

- 2. Embraces the roles of the nurse educator/executive to facilitate learning and change.**
 - a. Develop a personal philosophy as a nurse educator/executive.
 - b. Develop the capacity for recognizing and reflecting on problems that fall outside current knowledge.
 - c. Serve in the role of educator/executive and role model when working with students, staff, peers, and other constituencies.
 - d. Promote critical thinking in those that they educate and serve.
 - e. Engage in professional development as a nurse educator/executive.
 - f. Foster professional role development through leadership, collaborative skills and relation development with peers, students/personnel, clients and colleagues.
 - g. Model self-reflection and lifelong learning.
 - h. Effectively participate in curriculum/program design and evaluation of outcomes.

- 3. Values social, political, legal and ethical influences that impact nursing practice and nursing education.**
 - a. Evaluate the process of ethical decision making.
 - b. Apply ethical principles in the role of educator/executive.
 - c. Advocate for public policy that promotes and protects the health of the public.
 - d. Formulate strategies that respond to policy changes that impact health and education.
 - e. Analyze the impact of access on the health of populations.

- 4. Appreciates the impact of diversity within nursing and the global community.**
 - a. Examine personal thinking for clarity, objectivity and bias.
 - b. Demonstrate behaviors and attitudes that support respect, reciprocal learning, and advocacy related to human differences.
 - c. Coach others to improve sensitivity and acceptance of diverse individuals and groups.
 - d. Develop culturally competent educational/workplace practices.

- 5. Demonstrates competency in developing an effective professional nursing environment.**
 - a. Analyze the issues related to the use of advanced technology.
 - b. Integrate computer science and information science within the science and practice of nursing.
 - c. Communicate effectively based on the context of the situation.
 - d. Develop networks, collaborative, and partnerships to enhance nursing's influence within the academic/healthcare community and the broader community.
 - e. Develop skills for working within an institution and a system of governance.

Revised 3/99, 9/05, 12/07

Reviewed 7/00, 4/01, 8/02, 1/03, 8/04, 1/05, 1/06, 8/07, 12/07, 8/08, 12/08, 7/09, 8/10, 7/11

MSN E-Portfolio Policy

Purpose:

To ensure that graduate students meet program outcomes through completion of a professional e-portfolio.

Policy:

In order to graduate, students must complete the e-portfolio that demonstrates program outcomes have been met. The portfolio process begins in the first course in the program and students are expected to independently continue to update their portfolio after each semester.

Procedure:

1. Students begin the portfolio process in Developing Your Advanced Nursing Role or Advanced Nursing Roles and Phenomena.
2. Students are expected to independently update their e-portfolio each semester.
3. In the last semester of their program students are expected to submit their updated e-portfolio to the Team Files in the MSN Portfolio site in the course management system. The MSN director will notify students about due dates. Designated MSN faculty will provide feedback using the *E-Portfolio Assessment Grid*.
4. Students are expected to update their e-portfolio based on feedback received. Students must then submit the final e-portfolio to the Team Files in the MSN Portfolio site by the designated due date. The MSN director will notify students about due dates.
5. The director and one other graduate faculty will review and provide feedback indicating that students have met/not met program outcomes using the *E-Portfolio Assessment Grid*.

Effective 8/08
Reviewed 7/09, 7/11
Revised 8/1, 7/11

NEBRASKA METHODIST COLLEGE
MSN PROGRAM
VALIDATION OF PRIOR LEARNING
(Professional Portfolio)

PURPOSE:

To provide the graduate student with a process to demonstrate their knowledge of specific content in a course through a validation process.

POLICY:

The graduate student can complete the validation process to demonstrate competency in a specific subject matter/course and receive full or partial credit (CR) for the course on their transcript.

PROCEDURE:

1. Student verbalizes the desire to director/advisor to complete course validation via a portfolio process.
2. Director/advisor consults with faculty and student regarding the intentions, course, content needed, and the validation process.
3. Director consults with Academic Standards Committee of the Faculty Senate.
4. The Director sends the outcomes of the course to the graduate student for preview.
5. Student registers for the actual course as a credit for prior learning (example: NS 516 V Teaching/Learning) and is charged 25% of the actual tuition for the course.
6. Course validation can be done electronically or paper.
7. It is recommended that course validation be completed at least 30 days before the semester in which the course is offered.
8. Director/Advisor and student discuss format, identifying each outcome followed by the evidence (2-3 sources) and an explanation of how the evidence supports that outcome. Evidence can include but not limited to the following:
 - a. Previous graduate coursework taken and completed with a “B” or above
 - b. Professional conferences/seminars
 - c. Certifications
 - d. Thesis, dissertation
 - e. Community service with letter of support
 - f. Published articles, research, evidence-based practice
 - g. Professional experience
 - h. Continuing education
 - i. Professional awards
 - j. Other scholarly/academic evidence
9. The director of the program and 1-2 faculty with content expertise will review the portfolio to grant the CR (credit) for the course after approval of the VPAA.

Effective: 2/09

Reviewed 8/10, 7/11

BSN PROGRAM



BACHELOR OF SCIENCE DEGREE NURSING

PHILOSOPHY

The philosophy of the Baccalaureate Program of the Department of Nursing is reflective of the values and beliefs from which the NMC mission and core values were formulated.

The nursing faculty believes human beings are holistic and integrated. Each human being has dignity, basic rights and responsibilities, individual needs, and a unique internal environment. The human interacts within the environment, which encompasses all external factors that affect the human's well being and speaks to physical, social, and existential dimensions as well as various settings. The client is the human recipient of care — individual, family, group, or community.

Health is viewed as a dynamic state of mental, physical, social, and spiritual well being that maximizes the individual's ability to function in his or her environment. Illness is an alteration in the dynamic state of well being that leads to disharmony between the human self and the environment. Health promotion, illness prevention, maintenance, and rehabilitation are facilitated by activities or programs directed toward enhancement, stabilization, or restoration of a dynamic state of well being.

Nursing is a caring, creative, dynamic, and interactive process that uses scientific and humanistic bodies of knowledge to assist the client in attainment of a dynamic state of well being with a focus on human responses to actual or potential health problems. The nursing curriculum focuses on Jean Watson's science of caring* and is based on the following assumptions. Nursing is concerned with promoting health, preventing illness, restoring health, and caring for the sick and dying. The practice of caring is an integral part of nursing and consists of the *caritas* processes, which are those interventions that result in the satisfaction of human needs. The caring response promotes health and human growth and accepts a human not only as he or she is now, but as whom he or she may become. A caring atmosphere is one that offers the development of potential while allowing the client to choose the best action at a given point in time. Caring is demonstrated and practiced interpersonally and uses the systematic nursing process approach.

The curricular framework incorporates a community-based approach that prepares students to build connections between knowledge and action in an increasingly interdependent world. Students develop the attributes of effective nursing professionals and responsible citizens through focused and meaningfully applied learning experiences. Community-based education encompasses the concepts of health promotion, self care, prevention, collaboration, and continuity of care within the context of culture and community.

The nursing faculty believe that nursing education uses the science of caring and builds on the application and synthesis of the biophysical, psychosocial, computer, and information sciences and the humanities. Learning is a lifelong, continuous process through which humans acquire knowledge that results in changes of behavior, attitudes, and/or ways of thinking. The faculty view teaching as an interactive process that uses a system of actions to promote the acquisition, application, integration, and synthesis of knowledge. Optimal learning is enhanced by interaction with faculty members who use a variety of instructional strategies and settings. Faculty members serve as teachers, facilitators, resource persons, evaluators, and professional role models. Nursing education facilitates the student in developing interpersonal caring response skills and communication techniques that produce therapeutic interactions within the nurse-client relationship.

Completion of the baccalaureate nursing program prepares the graduate for professional practice as a nurse generalist, pursuit of advanced studies in nursing, and enhancement of lifelong learning. The nurse generalist uses critical thinking, nursing theory, research, nursing process, *caritas* processes, and clinical skills while assuming responsibility and accountability for providing nursing care to clients in a variety of settings. Additionally, the nurse generalist is able to demonstrate leadership and management skills in organization, change, advocacy, coordination, collaboration, and communication. Thus, the nurse generalist promotes the use of lifelong evidence-based and humanistic practice behaviors to change and respond to the health needs and well being of clients in a dynamic and diverse world.

*Jean Watson, *Nursing: The Philosophy and Science of Caring Revised Ed*, 2008.

Effective 8/22/02,

Reviewed 1/03, 8/04, 1/05, 8/07, 12/08, 7/09, 8/10

Revised 8/08, 7/11

BACHELOR OF SCIENCE DEGREE NURSING

PROGRAM OUTCOMES

1. Integrate culturally competent professional nursing care with clients while incorporating caring and the caritas processes to promote autonomy, altruism, human dignity, integrity, and social justice.*
2. Develop and analyze alternative solutions based on scientific and humanistic rationale for situations encountered in professional nursing practice.
3. Incorporate professional communication in interactions with clients, colleagues and community partners.
4. Synthesize scientific and humanistic knowledge derived from theory and research in the provision of professional nursing care.
5. Evaluate skills and ongoing assessment into the process of planning, intervening, and evaluating the delivery of professional nursing care including health promotion, risk reduction, disease prevention, illness/disease management, and rehabilitation to meet the health needs of clients.
6. Collaborate with clients and community partners as an agent to facilitate change within a global health care environment.
7. Assume professional responsibility and legal/ethical accountability in providing health care.
8. Evaluate research critically and use findings selectively in professional nursing practice.
9. Incorporate knowledge of health care system policy and of professional activism into nursing practice.
10. Integrate leadership and management skills as a professional caregiver, teacher, and manager of client care.

**Adapted from AACN, The Essentials of Baccalaureate Education for Professional Nursing, 2008
Effective 8/22/02
Reviewed 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 7/09, 8/10
Revised 7/11*

Nebraska Methodist College

Department of Nursing

Technical Standards for BSN Nursing Students

In preparation for professional nursing roles nursing students are expected to demonstrate the ability to meet the demands of a professional nursing career. Certain functional abilities are essential for the delivery of safe, effective nursing care. An applicant to the Bachelors of Science in Nursing program must meet the following technical standards and maintain satisfactory demonstration of these standards for progression throughout the program. Students unable to meet these technical standards will not be able to complete the program. Students shall notify faculty of any change in their ability to meet technical standards. The technical standards include but are not necessarily limited to the following:

General Ability:

The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses is integrated, analyzed and synthesized in a consistent and accurate manner. The student is expected to possess the ability to perceive pain, pressure, temperature, position, vibration, and movement in order to effectively evaluate patients. A student must be able to respond promptly to urgent situations.

Observational Ability:

The student must have the ability to make accurate visual observations and interpret them in the context of clinical/laboratory activities and patient care experiences. The student must be able to document these observations accurately.

Communication Ability:

The student must communicate effectively verbally and non-verbally to obtain information and explain that information to others. Each student must have the ability to read, write, comprehend and speak the English language to facilitate communication with patients, family members, and other members of the health care team. The student must be able to document and maintain accurate records, present information in a professional manner and provide patient instruction to effectively care for patients and their families.

Motor Ability:

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

Intellectual –Conceptual Ability:

The student must have the ability to develop problem-solving skills essential to professional nursing practice. Problem solving skills include the ability to measure, calculate reason, analyze, and synthesize objective and subjective data, and to make decisions, in a timely manner that reflect thoughtful deliberation and sound clinical judgment. The student must demonstrate application of these skills and possess the ability to incorporate new information from peers, instructors, and the nursing and healthcare literature to formulate sound judgment to establish care plans and priorities in patient care activities.

Behavioral and Social Attributes:

The student is expected to have the emotional stability required to exercise sound judgment, and complete assessment and intervention activities. Compassion, integrity, motivation, and concern for others are personal attributes required of those in the nursing program. The student must fully utilize intellectual capacities that facilitate prompt completion of all responsibilities in the classroom and clinical settings; the development of mature, sensitive, and effective relationships with patients and other members of the health care team. The ability to establish rapport and maintain interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. Each student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; and effectively collaborate in the clinical setting with other members of the healthcare team.

Ability to Manage Stressful Situations:

The student must be able to adapt to and function effectively in relation to stressful situations encountered in both the classroom and clinical settings, including emergency situations. Students will encounter multiple stressors while in the nursing program. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program related.

Background Check/Drug Screening:

Clinical facilities require that Nebraska Methodist College perform drug testing and background checks on all students before they are allowed to participate in clinical experiences. Therefore, students will be required to have a background check performed and submit to drug screening before being allowed into clinical practice.

Effective 8/06

Reviewed 8/08, 7/09, 8/10, 7/11

Revised 8/07

BACHELOR OF SCIENCE DEGREE NURSING (For students matriculating prior to Spring/Fall 09)

TRADITIONAL BSN STUDENT – CURRICULUM STRUCTURE

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 127 semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices. Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

FRESHMAN YEAR <i>1st Year</i>					
	First Semester	Credit Hours		Second Semester	Credit Hours
COM 101	English Composition	3	NRS 100	Intro to Comm-Based Nursing	4
SSC 101	Introduction to Psychology	3	NRS 102	Health Assessment I	2
SCI103	College Chemistry	3	SCI 226	Human Anatomy & Phys II	4
SCI 225	Human Anatomy & Physiology I	4	SCI 280	Microbiology I	3
HUM 150	World of Ideas: Critical Reasoning	3	HUM 220	World of Ideas: The Arts	3
	TOTAL HOURS	16		TOTAL HOURS	16
SOPHOMORE YEAR <i>2nd Year</i>					
	First Semester	Credit Hours		Second Semester	Credit Hours
SCI 315	Pathophysiology	3	NRS 240	Comm-Based Care w/Families	6
SCI 265	Introduction to Pharmacology	3	SSC 215	Life Span Psychology	3
NRS 220	Comm-Based Care with Adults	7	SCI 240	Principles of Nutrition	3
COM 2__	Language/Culture	3	NRS 245	Public Health Science I	1
			SSC 235	Sociology of Culture	3
	TOTAL HOURS	16		TOTAL HOURS	16
JUNIOR YEAR <i>3rd Year</i>					
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 302	Health Assessment II	2	NRS 350	Advanced Concepts	9
NRS 340	Comm-Based Care Across Life Span	9	SSC 370	Introduction to Research	3
COM 320	Healthcare Collaboration. And Leadership	3	HUM 210	Introduction to Ethics	3
SSC 360	Introduction to Statistics	3	NRS 345	Public Health Science II	2
	TOTAL HOURS	17		TOTAL HOURS	17
SENIOR YEAR <i>4th Year</i>					
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 445	Nursing the Global Society	3	NRS 460	Community-Based Care:	4
NRS 450	Community-Based Care: Complex Concepts Across the Life Span	8		Complexity of Aging	
			NRS 470	Senior Synthesis	1
HUM 255	World of Ideas: Historical	3	NRS470P	Senior Preceptor Practicum	2
NRS____	Non-Clinical Elective	2	HUM 270	World of Ideas: Human Connection	3
			SSC 465	Capstone: The Educated Citizen	3
	TOTAL HOURS	16		TOTAL HOURS	13

Revised 3/06, 8/07, 8/08

Reviewed 8/06, 7/09, 8/10, 7/11

Refer to pre/co-requisite requirements

BACHELOR OF SCIENCE DEGREE NURSING (For students matriculating Fall 2009)

TRADITIONAL BSN STUDENT – CURRICULUM STRUCTURE

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 127 semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices.

Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

FRESHMAN YEAR						
<i>1st Year</i>						
	First Semester	Credit Hours			Second Semester	Credit Hours
COM 101	English Composition	3		NRS 100	Intro to Comm-Based Nursing	4
SSC 101	Introduction to Psychology	3		SCI 226	Human Anatomy & Phys II	4
SCI103	College Chemistry	3		COM 230	Language/Culture	3
SCI 225	Human Anatomy & Physiology I	4		SCI 280	Microbiology	3
HUM 150	World of Ideas: Critical Reasoning	3		HUM 220	World of Ideas: The Arts	3
	TOTAL HOURS	16			TOTAL HOURS	17
SOPHOMORE YEAR						
<i>2nd Year</i>						
	First Semester	Credit Hours			Second Semester	Credit Hours
SCI 315	Pathophysiology	3		NRS 240	Comm-Based Care w/Families	6
NRS 220	Comm-Based Care with Adults	7		SCI 265	Intro to Pharmacology	3
NRS 202	Health Assessment across the lifespan	3		SCI 240	Principles of Nutrition	3
SSC 215	Lifespan Psychology	3		NRS 245	Public Health Science I	1
				SSI 235	Sociology of Culture	3
	TOTAL HOURS	16			TOTAL HOURS	16
JUNIOR YEAR						
<i>3rd Year</i>						
	First Semester	Credit Hours			Second Semester	Credit Hours
NRS 340	Comm-Based Care Across Life Span	9		NRS 350	Advanced Concepts	9
SSC 360	Introduction to Statistics	3		SSI 370	Principles of Research	3
NRS___	Non-Clinical Elective	2		HUM 210	Introduction to Ethics	3
COM 320	Healthcare/Leadership	3		NRS 345	Public Health Science II	2
	TOTAL HOURS	17			TOTAL HOURS	17
SENIOR YEAR						
<i>4th Year</i>						
	First Semester	Credit Hours			Second Semester	Credit Hours
NRS 445	Nursing the Global Society	3		NRS 460	Community-Based Care:	4
NRS 450	Community-Based Care: Complex Concepts Across the Life Span	9			Complexity of Aging	
				NRS 470	Senior Synthesis	1
HUM 255	World of Ideas: Historical	3		NRS 470P	Senior Preceptor Practicum	2
	TOTAL HOURS	15		HUM 270	World of Ideas: Human Connection	3
				SSC 465	Capstone: Educated Citizen	3
					TOTAL HOURS	13

Revised 03/06, 8/07, 8/08, 1/09

Reviewed 8/06, 8/10, 7/11

Refer to pre/co-requisite requirements

BACHELOR OF SCIENCE DEGREE IN NURSING (For students matriculating Fall 2009)

TRADITIONAL BSN STUDENT - 5 YEAR PLAN CURRICULUM STRUCTURE

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 127 semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices.

Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

YEAR ONE: 25 CREDIT HOURS

Course		Credit Hours		Course		Credit Hours
COM 101	Eng Comp	3		SSC 215	Lifespan Psych	3
SSC 101	Intro to Psych	3		COM 230	Language/Culture	3
SCI 103	College Chemistry	3		SCI 225	A&P I	4
HUM 150	World of Ideas: Critical Reasoning	3		HUM 220	World of Ideas: The Arts	3
		Total Hours	12			Total Hours
						13

YEAR TWO: 26 CREDIT HOURS

Course		Credit Hour		Course		Credit Hours
SCI 280	Micro I	3		NRS 100	Intro to Comm.	4
HUM 255	World of Ideas: Historical	3		HUM 270	World of Ideas: Human Conn	3
SCI 226	A&P II	4		SCI 315	Pathophysiology	3
SSC 235	Sociology of Culture	3		HUM 210	Intro to Ethics	3
		Total Hours	13			Total Hours
						13

YEAR THREE: 26 CREDIT HOURS

Course		Credit Hours		Course		Credit Hours
SCI 240	Nutrition	3		NRS 240	CB Care-Families	6
NRS 202	Health Assessment	3		SSC 360	Intro to Stats	3
NRS 220	Comm-Based Care - Adults	7		SCI 265	Pharmacology	3
		Total Hours	13	NRS 245	Public Hlth I	1
						Total Hours
						13

YEAR FOUR: 26 CREDIT HOURS

Course		Credit Hour		Course		Credit Hours
				NRS 350	Adv Concepts	9
NRS 340	Comm-Based	9		SSC 370	Intro to Research	3
COM 320	Healthcare Col	3		NRS 345	Public Hlth II	2
		Total Hours	12			Total Hours
						14

YEAR FIVE: 24 CREDIT HOURS

Course		Credit Hours		Course		Credit Hours
NRS 445	Nsg Global Soc	3		NRS 460	Comm. Based Care	4
NRS 450	Comm-Based	9		NRS 470	Senior Synthesis	1
				NRS 470P	Senior Preceptor	2
				SSC 465	Capstone: The Educated Citizen	3
				NRS 3__	Non Clin Elective	2
		Total Hours	12			Total Hours
						12

Eff. 8/09 Reviewed 8/10, 7/11

BACHELOR OF SCIENCE DEGREE NURSING (January 2010 Cohort and January 2011 Cohort)

ACCELERATED BSN STUDENT– CURRICULUM STRUCTURE

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 74 semester credit hours to be eligible for the Accelerated Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices. Note: Before matriculation: TEAS math and reading comprehension assessment will occur. Completion of modules will be required if not successful in the assessments.

SPRING SEMESTER – First Session			SPRING SEMESTER – Second Session		
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 100A	Introduction to CB Nursing	4	NRS 220A	Comm-Based Care w/ Adults	7
NRS 202A	Health Assessment across the life span	3			
SCI 315A	Pathophysiology	3	SCI 265A	Pharmacology	3
				SC315A, SC265A, & NS202	
				CM230A will run the entire semester	
	Total Hours	10		Total Hours	10

SUMMER SEMESTER – First Session			SUMMER SEMESTER – Second Session		
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 240A	Comm-Based Care w/Families	6	NRS 340A	Comm-Based Care Across LS	9
NRS 245A	Public Health Science I	1	NRS 345A	Public Health Science II	2
	Total Hours	7		Total Hours	11

FALL SEMESTER – First Session			FALL SEMESTER – Second Session		
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 350A	Adv. CB Nsg Comm./Mental Health	9	NRS450A	Comm-Based Care Complex	9
COM 230A or COM252	Language & Culture in Healthcare	3/1	NRS 446A	Collab Nsg Leadrshp/Global Soc	3
	Total Hours	12/10		Total Hours	12

SPRING SEMESTER – First Session			SPRING SEMESTER – Second Session		
	First Semester	Credit Hours		Second Semester	Credit Hours
NRS 460A	Comm-Based Complexity of Aging	3	NRS 470A	Preceptorship	1
NRS__A	Non-Clinical Elective	2	NRS470P (A)	Senior Preceptor Practicum	2
SSC 465A	Capstone (entire semester)	3			
	Total Hours	8		Total Hours	3

Reviewed 8/06, 8/10, 7/11

Revised 05/06, 8/07, 8/08, 1/09, 1/10, 11/11

BACHELOR OF SCIENCE DEGREE IN NURSING (For students matriculating Fall 2010)

RN to BSN Curriculum Structure

SEMESTER ONE: Fall

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
HUM 150 or HUM 152	Critical Reasoning & Rhetoric/or Portfolio		1-3
NRS 430	RN Professional Seminar		3
		Total	4 or 6

SEMESTER TWO: Spring

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
NRS 402	Health Assessment for RN's		3
NRS 446	Collaborative Nursing Leadership in a Global Society		3
		Total	6

SEMESTER THREE: Summer

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
COM 230	Language and Culture in Healthcare		3
		Total	3

SEMESTER FOUR: Fall

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
SCI 370	Research		3
SCI 315	Pathophysiology		3
		Total	6

SEMESTER FIVE: Spring

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
NRS 476	Community Health Nursing		3
NRS 476 C	Community Practicum		3
		Total	6

SEMESTER SIX: Summer

<u>Course #</u>	<u>Course Name</u>		<u>Credit Hour</u>
SSC 465	Capstone: The Educated Citizen		3
NRS 480	Complexity in Nursing		3
		Total	6

Reviewed 8/06, 8/07, 7/09, 7/11

Revised 05/06, 8/08, 8/10

BACHELOR OF SCIENCE DEGREE IN NURSING
(For students matriculating Fall 2011)
RN to BSN Curriculum Structure

PHASE I- PREREQUISITES:

Course		Credit Hours
COM 101	English Composition	3
HUM 210	Introduction to Ethics	3
HUM 220/255/270*	W of I: The Arts, Hist Persp, Hum Conn	3
HUM 220/255/270*	W of I: The Arts, Hist Persp, Hum Conn	3
HUM 220/255/270*	W of I: The Arts, Hist Persp, Hum Conn	3
SSC 101	Introduction to Psychology	3
SSC 215	Life-Span Psychology	3
SSC 235	Sociology of Culture	3
SSC 360	Introduction to Statistics	3

PHASE II:

Course		Credit Hours
HUM 150**	World of Ideas: Critical Reas & Rhet.	3
NRS 430	RN Professional Seminar	3
NRS 402	Health Assessment for RNs	3
NRS 446	Collaborative Nursing Leadership in a Global Society	3
COM 230/245***	Language and Culture in Healthcare	3
SCI 315	Pathophysiology	3
SSC 370	Principles of Research	3
NRS 476	Community Health Nursing	3
NRS 476C	Community Health Nursing Practicum	3
NRS 480	Complexity in Nursing	3
SSC 465	Capstone: The Educated Citizen	3

* Nine credits of Humanities: World of Ideas must include at least 2 out of the 3 areas: The Arts, Historical Perspectives, Human Connection

**Maximum credit awarded for HU 150 is 2 credit hours; students who transfer this credit must enroll in HU 152 for 1 credit.

***Maximum credit awarded for CM230/245 is 2 credit hours; students who transfer this credit must enroll in CM 252 for 1 credit.

Effective 7/11

Nebraska Methodist College
RN TO BSN VALIDATION OF PRIOR LEARNING
(PROFESSIONAL PORTFOLIO)

PURPOSE:

To provide the RN to BSN student with a process to demonstrate their knowledge of specific content in a course through validation process.

POLICY:

Validation of prior learning can be used to complete outcomes specified in a nursing course in the RN to BSN program by student request and faculty review to grant a satisfactory or unsatisfactory grade in the course. Validation of prior learning can be used for full or partial credit in a course.

PROCEDURE:

1. The student will first request the course syllabi/course outcomes from the advisor of the RN to BSN program to determine if validation is possible in a nursing course.
2. The student should next request permission for the validation from the Director of the BSN Program and discuss the possible demonstration of meeting the nursing course outcomes.
3. The director consults with academic Standards Committee of the Faculty Senate.
4. If determined that validation of course outcomes is possible, the student will register for a particular course (example: 476V) and is charged 25% of the actual tuition for the course.
5. In the validation of prior learning, the student should identify each specific course outcome, followed by the evidence, and accompanied with a thorough explanation describing how the evidence (2-3 sources) supports that the outcome has been met. Evidence may include but is not limited to the following:
 - a. Previous academic coursework
 - b. Professional conference/ seminars
 - c. Certifications
 - d. Community service with a letter of support
 - e. Letters of reference
 - f. Thesis, dissertation
 - g. Published articles, research, evidence-based practice
 - h. Professional experience and awards
 - i. Continuing education
 - j. Other scholarly/academic evidence
6. One faculty will be responsible to contact the student at least 2-3 times to answer questions. The course validation is first submitted at midterm and in the semester before the regular course is offered. The faculty should evaluate the course validation at midterm and direct the student to areas that need more explanation before the final submission.
7. A committee of three faculty members will review the course validation and grant a satisfactory or unsatisfactory grade according to the student's evidence to meet the outcomes of the course at the end of the semester, after approval of the VPAA.

Revised 9/07, 2/09

Effective 8/06

Reviewed 8/08, 8/10, 7/11

BACHELOR OF SCIENCE DEGREE IN NURSING LPN to BSN Curriculum

The following plan represents one progression option for full-time LPN nurses to BSN program. A student must earn a minimum of 118 semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices.

PHASE 1		
Course #	Course Name	Credit Hours
COM 101	English Composition	3
SCI 103	College Chemistry	3
SCI 225	Human Anatomy and Physiology I	4
SCI 226	Human Anatomy and Physiology II	4
HUM 210	Introduction to Ethics	3
SSC 101	Introduction to Psychology	3
SSC 360	Introduction to Statistics	3
SSC 215	Life-Span Psychology	3
SCI 280	Microbiology	3
SCI 240	Principles and Concepts of Nutrition	3
SSC 235	Sociology of Culture	3
HUM 220	World of Ideas: The Arts	3
HUM 225	World of Ideas: Historical Perspectives	3
HUM 270	World of Ideas: Human Connection	3
		Total 44 Credits

PHASE 2

Semester One	Course Name	9-11 Credit Hours
NRS 280	LPN Transition Course	1.5
NRS 280C	LPN Transition Clinical Practicum	.5
HUM 150	World of Ideas: Critical Reasoning and Rhetoric (1 credit for HU152)	3
NRS 202	Health Assessment Across the Life-Span	3
SCI 315	Pathophysiology	3
Semester Two		13 Credit Hours
NRS 240	Community-Based Care with Families	6
NRS 245	Public Health Science I	1
COM 230/245	Language and Culture in Healthcare	3
SCI 265	Introduction to Pharmacology	3
Semester Three		14 Credit Hours
NRS 340	Community-Based Care Across the Life-Span	9
NRS _____	Non-clinical nursing elective	2
COM 230	Healthcare Collaboration and Leadership	3
Semester Four		14 Credit Hours
NRS 350	Advanced Concepts in Community-based nursing	9
NRS 345	Public Health Science II	2
SSC 370	Principles of Research	3
Semester Five		12 Credit Hours
NRS 450	Community-based Care: complex Concepts Across the Life-span	9
NRS 445	Nursing the Global Society	3
Semester Six		10 Credit Hours
NRS 460	Community-Based Care: Complexity of Aging	4
NRS 470	Senior Synthesis	1
NRS 470S	Senior Preceptor Practicum	2
SSC 465	Capstone: The Educated Citizen	3
		Total 72-74 Credits

Reviewed 8/06, 8/07, 7/09, 7/11

Revised 05/06, 8/08/ 8/10

ADMINISTRATION OF CONTROLLED SUBSTANCES POLICY

PURPOSE:

To identify the nursing student's responsibility in administration of controlled substances.

POLICY:

Student nurses may administer controlled substances utilizing the following specified criteria.

PROCEDURE:

1. Students will abide by the policy of the clinical agency and individual state regulatory boards.
2. An RN or faculty member must check and when indicated, co-sign all controlled substances administered by students.
3. Partial doses and wasted or refused narcotics must be disposed of properly and witnessed by the student and co-signing RN or faculty member.

Reviewed 3/94, 2/95, 8/96, 8/99, 4/01, 1/03, 1/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11
Revised 8/97, 5/00, 8/04, 12/05

BASIC LIFE SUPPORT (BLS) POLICY

PURPOSE:

To ensure student preparation in BLS prior to clinical practicum experiences to comply with clinical agency requirements.

POLICY:

The student must obtain and maintain verification of a current BLS.

PROCEDURE:

1. BLS preparation must be obtained through the American Heart Association (Health Care Provider Course) or Red Cross (CPR/AED for the Professional Rescuer).
2. Successful completion of the American Heart Association (Health Care Provider Course) or the Red Cross (CPR/AED for the Professional Rescuer) must be obtained prior to the first clinical nursing experience.
3. Students who have not successfully completed BLS cannot be admitted to the clinical setting.
4. Official current BLS cards must be presented by the student and checked in Student Developmental Services by Crystal Lush.

CLINICAL PERFORMANCE CRITERIA POLICY

PURPOSE:

To ensure that satisfactory clinical performance is evaluated throughout the nursing program and that nursing students maintain sufficient clinical practice hours for licensure.

POLICY:

Clinical course outcomes and guidelines will be used to evaluate clinical performance in all clinical courses. These established outcomes must be achieved at a satisfactory level by the completion of the clinical experience or the student will receive a grade of unsatisfactory and must repeat the entire course (theoretical and clinical components). Students who miss clinical/laboratory experiences will be required to make up clinical/lab time. Excessive clinical/laboratory absences can result in an incomplete or failure of the course.

PROCEDURE:

Competency in the following clinical performance measures is evaluated in each clinical course as well as at the end of the program. Clinical performance is graded Satisfactory, Unsatisfactory or Incomplete. Students receiving Unsatisfactory will be required to retake the entire course (theoretical and clinical components).

Students will:

- a. meet stated outcomes and guidelines of assigned clinical course.
- b. demonstrate satisfactory preparation for client care according to course outcomes and guidelines. If students come to clinical unprepared, they will be dismissed from the scheduled clinical experience resulting in an unexcused absence.
- c. correlate theoretical concepts and scientific principles with clinical practice.
- d. deliver-client care according to course outcomes and guidelines.
- e. complete assignments within specified time as designated in course syllabi.
- f. provide safe client care within the standards of legal, ethical, and professional practice according to course outcomes and guidelines. Five rights need to be observed by all students doing medication administration.
- g. be removed from clinical for any behavior deemed unsafe which may result in failure of the course.
- h. be on time. Any student who is late can be placed on a clinical performance plan, or dismissed from the scheduled clinical experience resulting in an unexcused absence.
- i. notify clinical/laboratory faculty of an absence before the scheduled clinical experience begins. A no call, no show is an unexcused absence.

- j. In the BSN program (ACE and Traditional):
- attendance at a clinical orientation is required.
 - students who do not attend clinical orientation can be academically withdrawn from the course by the Director of the Undergraduate Nursing Programs.
 - one unexcused absence automatically results in a clinical performance plan.
 - a second unexcused absence will result in failure of the course.
 - absence for more than two clinical/lab experiences, may result in an incomplete in or failure of the course.
 - clinical/pre-clinical/lab will be made up according to specific guidelines set up by the course faculty and based on the expectations of the clinical agencies.
- In the ACE program:
- one unexcused absence may result in failure of the course due to the accelerated curriculum design.

Reviewed 3/94, 2/95, 8/96, 8/99, 4/01, 1/03, 1/05, 8/06, 8/07, 8/08, 12/08, 8/10, 7/11
Revised 5/00, 8/04, 12/05, 12/07, 7/09

CO-ASSIGNMENT POLICY

PURPOSE:

To facilitate continuity and consistency of client care when co-assignment is indicated.

POLICY:

In agencies requiring co-assignment, non-RN student nurses will be co-assigned with a registered nurse or designated person.

It is the responsibility of the faculty member and students to communicate with the co-assigned nurse/designated person on an ongoing basis which aspects of care will be provided by the student as determined by the course objectives. Based on this communication, the student nurse, faculty member and the co-assigned registered nurse/designated person share the responsibility for assuring that all aspects of client care are provided.

The faculty member is responsible for the provision of supervision of learning experiences for the students.

Agency personnel are ultimately responsible for all client care that is given.

PROCEDURE:

1. Students will confer with the co-assigned RN or designated person regarding specific student responsibilities in the setting.
2. Student will inform the co-assigned RN or designated person of any activities that lie outside the scope of the course outcomes.
3. Students will be responsible for keeping the co-assigned RN/designated person and faculty member informed of changes in client condition.
4. At the end of each clinical experience, students will give a comprehensive report according to course and agency guidelines.

*Reviewed 3/94, 2/95, 8/96, 5/00, 4/01, 1/05, 12/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11
Revised 8/99, 1/03, 8/04*

CONFIDENTIALTY POLICY

PURPOSE:

To ensure student preparation in the vital nature of confidentiality before clinical practicum experiences and to comply with clinical agency requirements.

POLICY:

The student must obtain and maintain verification of ongoing confidentiality education.

PROCEDURE:

1. Preparation in confidentiality/HIPAA guidelines must be reviewed in nursing courses and through clinical sites.
2. Successful instruction on compliance with confidentiality/HIPAA guidelines must be received with the first clinical nursing experience and annually updated.
3. Students who have not successfully completed the training on confidentiality cannot be admitted to the clinical setting.
4. Faculty will document student confidentiality education in clinical courses.

Effective 1/06

Reviewed 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11

FAILURE OF TWO BSN NURSING COURSES

PURPOSE:

To halt the progression of students who are not demonstrating satisfactory academic performance necessary for completion of the BSN nursing program.

POLICY:

Any student who fails a second BSN nursing course while at NMC will be dismissed from the program.

PROCEDURE:

1. Students who have failed a second BSN course will be automatically dismissed from the program.
2. If a student feels that extenuating circumstances contributed to the second failure, the student can appeal the dismissal.
3. A student should submit a letter of appeal to the Associate Dean, specifically outlining the extenuating circumstances within 14 days from the date of dismissal. This letter should include supporting evidence and a detailed plan for future academic improvement.
4. A Department of Nursing Review Board will be convened and make a recommendation on the appeal, to the Associate Dean, based on the student's circumstances and academic record.
5. The decision on the appeal given by the Associate Dean is final. Should the student be allowed to continue in and/or be readmitted to the BSN program, a developmental plan will be completed and incorporate the students plan for success. A subsequent failure of a nursing course will result in permanent dismissal.

Effective 1/06

Reviewed 8/07, 8/08, 12/08, 7/09, 8/10, 7/11

Revised 8/06, 8/09, 12/09

GRADING NURSING COURSES POLICY

PURPOSE:

To clarify the grading policies of undergraduate nursing courses.

POLICY:

Students must have a minimum of 75% average on all examinations to successfully complete a course. Theoretical and clinical/laboratory components of nursing courses shall be taken concurrently. Failure in any component will necessitate repeating the entire course.

PROCEDURE:

1. Students will register for the theory and clinical components of a nursing course concurrently.
2. Theoretical component will indicate actual classroom hours, and only these credit hours will be computed into the grade point average.
3. Students must achieve a minimum of 75% exam average to successfully complete the course.
4. Prior to final course grade computation, examinations will be averaged separately to determine if the 75% has been met or exceeded.
5. Test grade averages equal to or greater than 60% and less than 75% will result in a “D” in the course. Test grade averages less than 60% will result in an “F” in the course.
6. If test grade average is greater than or equal to 75%, the final theory grade is computed incorporating all graded class assignments.
7. A grade of less than “C” in the theory component of any nursing course and/or an unsatisfactory in the clinical/lab component necessitates repeating the entire course.

Reviewed 3/94, 2/95, 8/99, 5/00, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11
Revised 5/96 4/01, 12/01
Effective 8/01

MEDICATION ADMINISTRATION AND MATH CALCULATION PROFICIENCY POLICY

PURPOSE:

To assess non-RN nursing students' medication administration and/or math calculation proficiency appropriate to nursing course requirements.

POLICY:

Medication administration and/or math calculation proficiency will be tested throughout the curriculum to ensure delivery of safe client care.

PROCEDURE:

1. NS100 students will have medication administration and/or math calculation content incorporated into the course theory. These students will have medication administration and/or math calculation items incorporated into unit examinations. Students will apply medication administration/math calculation in clinical on a regular basis. If problems are identified remediation will be required.
2. All other non-RN students will be tested on medication administration and/or math calculation at the beginning of each clinical nursing course. Students taking NS 460 and NS 470 will be required to take medication administration and/or math calculation testing only in NS 460.
3. Medication administration and/or math calculation proficiency (95%) must be demonstrated within the first week after a course begins. The medication administration and/or math calculation test may be retaken one time, for a total of two attempts. Students may attend clinical and administer medications under faculty supervision during the first week until medication administration and/or math calculation proficiency is demonstrated.
4. **Students who do not successfully** complete medication administration and/or math calculation testing after two attempts, will be required to register for a one credit independent **study devoted to medication administration and math calculation**, to be taken concurrently with the nursing clinical course. Students may attend clinical and administer medications only under direct faculty supervision until medication and math calculation proficiency (95%) is demonstrated at the completion of the independent study.
5. Students must show all work when taking medication administration and/or math calculation tests. Calculators* can be used for math computation.

**Calculator that can be used is a Sharp EL-2435B or Staples STP466465, available in the NMC Bookstore.*

Effective 8/02

Revised 3/18/94, 5/96, 8/97, 8/99, 5/00, 4/01, 4/02, 1/03, 8/04, 8/06, 3/10, 7/11, 11/11

Reviewed 4/95, 1/05, 12/05, 8/07, 8/08, 7/09, 8/10

NCLEX PREPARATION POLICY (NRS 460 AND NRS 470)

PURPOSE:

To assess students' level of preparation or readiness for and facilitate successful completion of the NCLEX-RN®.

POLICY:

All undergraduate non-RN students are required to complete all components of NCLEX preparation in NRS 460 and NRS 470.

PROCEDURE:

Students enrolled in NRS 460 will:

1. Achieve a minimum score of 90% on the non-proctored online ATI RN Comprehensive Predictor® practice assessment. The practice assessment report will be presented to the course faculty in order for the student to be eligible to complete the proctored, online RN Comprehensive Predictor® 'exit' assessment.
2. Score at or above the 90% Predicted Probability of first-time NCLEX-RN® success on the proctored ATI RN Comprehensive Predictor® 'exit' assessment.
 - **First Attempt:**
 - a. Students who achieve the minimum score (i.e., achieve the 90% Predicted Probability) will earn 50 classroom points.
 - b. Students who earn between 80-89% Predicted Probability will earn 20 classroom points and *will be required to remediate and retest during NRS 460.*
 - c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points *and will be required to remediate and retest during NRS 460.*
 - **Second attempt:**
 - a. Students who are required to complete a second RN Comprehensive Predictor® and achieve the benchmark: 90% Predicted Probability of first-time NCLEX-RN® success will receive 25 classroom points.
 - b. Students who are required to complete a second RN Comprehensive Predictor® and earn between 80-89% Predicted Probability will earn 15 classroom points and *will be required to remediate and retest during NRS 470.*
 - c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points and *will be required to remediate and retest during NRS 470.*
3. Students who do not achieve 90% Predicted Probability on the RN Comprehensive Predictor® 'exit' assessment during NRS 460 will be required to remediate with the ATI Specialist and complete a **3rd RN Comprehensive Predictor® assessment at their own expense** during NRS 470.
4. Students who do not achieve 90% Predicted Probability on the 3rd proctored RN Comprehensive Predictor® will receive an **Incomplete** in NRS 470 and be required to remediate with the ATI Specialist. ***The Incomplete will be removed upon successful completion of all remediation activities or exercises.***
5. Students enrolled in NRS 470 will be required to attend *NCLEX PREP Seminars* in conjunction with NRS 470. These seminars will focus on:
 - Licensure issues and general NCLEX-RN® exam information,
 - Strategies for successful mental and emotional NCLEX-RN® preparation
 - Understanding and interpreting individual results of the RN Comprehensive Predictor® assessment to identify content areas or topics requiring additional study.

Effective 01/06

Reviewed 7/09, 8/10

Revised 8/06, 8/07, 8/08, 10/08, 3/10, 7/11, 11/11

NURSING CLINICAL DRESS CODE POLICY

PURPOSE:

To maintain professional appearance of nursing student and to assure student and client safety during clinical experiences.

POLICY:

Professional appearance must be maintained during all clinical experiences. Guidelines for professional attire will adhere to the policy of Nebraska Methodist College and to that of the institution in which the clinical experience is held. Failure to adhere to the College and institutional policy for professional attire may result in disciplinary action.

PROCEDURE:

1. Students are expected to look professional.
2. Non-licensed BSN students' clinical uniform in acute and long-term care settings is as follows:
 - a. The College uniform will consist of one of the designated tops and plain white or navy blue slacks/scrub pants or skirt. Stretch pants, leggings, or white denim pants are not considered appropriate professional attire. White turtlenecks or mock turtlenecks may be worn under tops in adherence with agency policy. The College arch and patch will be placed on the left sleeve two inches below the shoulder seam. There will be no space between arch and patch. The dove emblem will be positioned on the left collar. If there is no collar, the emblem will be positioned on the left side even with the top button, and midway between the buttons and the inseam. A white scrub jacket is acceptable with appropriate identification during the clinical practicum.
 - b. White socks, flesh tone, or solid dark socks, as appropriate. No bare legs. Underwear must not be visible through the uniform.
 - c. Predominantly white closed-toe shoes; leather or washable vinyl only.
 - d. Student identification must be worn and clearly visible (student nurse pin is optional). Student identification will consist of the student's first name.
 - e. One of the designated white lab coats with College arch and patch and name tag must be worn during pre-laboratory experiences and at other clinical experiences as specified. The lab coat is to be worn over appropriate street clothes which are limited to slacks and shirt, skirt and blouse, or dress. Blue jeans, shorts, short skirts, or open-toe shoes are not allowed.
 - f. When the student is engaged in the preceptor (NS470) experience, the student may wear the accepted uniform of the unit or the student uniform but the College student identification must be visible.
3. Licensed BSN students' clinical uniform is as follows unless otherwise designated by course guidelines:
 - a. A white lab coat with College arch and patch placed as above and name tag must be worn during clinical experiences.
 - b. The lab coat is to be worn over appropriate street clothes which are limited to slacks and shirt, skirt and blouse, or dress. Blue jeans, shorts, short skirts, or open-toe shoes are not allowed.

4. Student uniform for clinical experiences **not** located in acute or long-term care settings is as follows:
 - a. Navy blue skirt or slacks with white polo or shirt and designated jacket.
 - b. Students must wear student identification and school patches at all times.
 - c. Shoes: solid closed toe black, brown, gray, or blue.

Some clinical/practicum experiences may have alternate dress guidelines. See course syllabi for specific guidelines.

5. Artificial nails are not allowed in clinical areas. Nail polish must conform to the requirements of the clinical agency. Fingernails should be clean, neat, moderate in length and well-maintained. Polish colors should be traditional and should not detract from the attire, uniform or work environment.
6. Hair must be clean. Long hair must be styled off the face and shoulders and away from the front of the uniform. "Pony-tails" or similarly styled hair is permitted as long as the hair does not fall forward over the shoulders. Beards and moustaches must be kept clean and neatly trimmed.
7. Jewelry may be worn in accordance with agency policy. No body adornment (obvious, visible body piercing or tattoos) is allowed.
8. Student uniform/clothing with the College insignia will only be worn when in the student role.

Students must look professional at all times when in student uniform. Professional includes: clean, wrinkle-free clothes and being well-groomed. Faculty may use their discretion when determining if a student's appearance is professional, and when counseling a student regarding appearance and/or removing them from clinical.

Reviewed 3/94, 2/96, 5/00, 4/01, 1/05, 12/05, 8/06, 7/09, 8/10, 7/11
Revised 8/96, 8/97, 5/98, 8/99, 1/03, 8/04, 8/0, 8/07, 8/08, 12/08, 12/10

PERFORMANCE PLANS

PURPOSE:

To establish strategies that will improve student classroom and/or clinical performance.

POLICY:

Performance Plans will be initiated by faculty at any time the student is at high risk for not successfully meeting course requirements.

PROCEDURE:

1. Faculty will meet with the student needing a performance plan for classroom and/or clinical performance.
2. Faculty delineates rationale for initiating a performance plan.
3. The behaviors and outcomes that must occur for the student to be successful will be clearly and specifically written.
4. Referrals to Students Services will be made as appropriate to meet the goals of the performance plan.
5. A copy of the performance plan remains with the course faculty, one is given to the student, and one is given to the student's advisor.
6. Periodic evaluation of the student's progress will be monitored by the faculty and shared with the student.
7. At the end of the semester, the student will meet with faculty for final course/clinical evaluations to determine if the outcomes have been successfully met. A copy of the completed performance plan will be filed in the student advising folder.

Reviewed 5/00, 4/01, 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11
Revised 8/99, 12/05, 12/07
Effective 1/97

PREPARATION & ADMINISTRATION OF INTRAVENOUS MEDICATION POLICY

PURPOSE:

To specify student responsibility related to intravenous medication.

POLICY:

Students will follow the policies of the affiliating agencies related to preparation and administration of intravenous medications.

PROCEDURE:

1. The administration of all intravenous medications by non-RN students must be under the supervision of a faculty member or qualified registered nurse.
2. Students are **not** permitted to administer intravenous:
 - a. Antineoplastic agent via direct intravenous push.
 - b. Conscious sedation by direct intravenous push.
 - c. Antiarrhythmic agents, unless the client is connected to cardiac monitor.

*Reviewed 3/94, 2/95, 8/96, 5/00, 4/01, 1/03, 1/05, 12/05, 8/06, 8/07, 12/07, 8/08, 7/09, 8/10, 7/11
Revised 5/98, 8/99, 8/08, 12/08*

PREPARATION & ADMINISTRATION OF INVESTIGATIONAL & EXPERIMENTAL DRUGS POLICY

PURPOSE:

To specify student responsibility related to administration of experimental or Investigational drugs.

POLICY/PROCEDURE:

Students will **not** prepare or administer investigational or experimental drugs.

Reviewed 3/94, 2/95, 8/96, 8/99, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11

PROGRESSION TESTING IN BSN PROGRAM

PURPOSE:

To facilitate collaborative and individualized long term learning and transfer of knowledge from theory to application and course to course while demonstrating progress toward program outcomes and eventually successful testing on the NCLEX-RN.

POLICY:

All undergraduate non-RN students in the Department of Nursing will be required to complete standardized comprehensive testing throughout the curriculum and score at or above the ATI recommended cut score for Proficiency Level 2.

PROCEDURE:

1. Beginning in NS220 and in each subsequent nursing clinical course, students will complete the assigned standardized testing.
2. Students will first complete a non-proctored online practice predictor exam and achieve at least a 90%. The score sheet of the online practice predictor exam will be presented to the faculty before the student is eligible to complete a proctored assessment test during the last part of the course.
3. Students must score at or above the ATI recommended cut score for Proficiency Level 2 on the designated proctored ATI assessment test. For students scoring below the ATI recommended cut score for Proficiency Level 2, remediation and practice will occur before repeating up to a total of two proctored assessment tests scheduled with the faculty.
4. A total of 50 examination points will be given if the benchmark of Proficiency Level 2 is attained after the first exam (s). If proficiency level 1 is attained in the first exam(s), a total of 20 examination points will be awarded
5. A total of 25 examination points will be given if the benchmark of Proficiency Level 2 is attained after the second exam(s). If the Proficiency Level 1 is attained in the second exam(s), a total of 15 examination points will be awarded
6. No points will be given if either the benchmark or Proficiency Level 1 is not attained in any examination.
7. An “incomplete” will be given in a clinical nursing course until the required score at or above the ATI recommended cut score for Proficiency Level 2 is attained if all other course requirements are met. If two proctored assessment tests have been taken yet the required benchmark of Proficiency Level 2 has not been attained, a developmental plan for remediation in identified areas will be written. Once the remediation has been fulfilled according to the time schedule in the plan, the incomplete can be removed.
8. Beginning in NS220, each student will be tracked in ATI progressive testing. When the student is unsuccessful in meeting the first-attempt cut score for Proficiency Level 2 in two nursing courses, the student will be required to take structured online remediation. If the student continues to be unsuccessful in meeting the first-attempt cut score in subsequent nursing courses, the student will continue to be enrolled in a structured online remediation until NS470.

Effective 01/06 Revised 8/06, 12/06, 8/07, 8/08,10/08, 12/08, 3/10 Reviewed 7/09, 8/10, 7/11

SKILLS COMPETENCY TESTING

PURPOSE:

To facilitate preparation and successful competency in nursing skills.

POLICY:

All undergraduate non-RN students in the Department of Nursing will be required to demonstrate identified skills throughout the program and demonstrate satisfactory skills competency in NS460.

PROCEDURE:

1. Identified clinical course skills, according to a checklist, can be practiced and validated in the skills lab, on a clinical unit or during designated end-of-course skills days. All identified clinical skills need to be satisfactorily demonstrated by the end of the course. If any skill is unsatisfactory or the student was not able to demonstrate the skill in clinical, the student must demonstrate the skill satisfactorily in the skills lab or an incomplete will be given in the course.
2. Each student must obtain a satisfactory in the NS460 clinical course skills competency test in order to progress to NS470.
 - The student in NS460 must demonstrate satisfactory competency in a scenario, testing any of the following 10 clinical skills sets:
 - a. IV therapy
 - b. Medication administration
 - c. GI/GU nursing care
 - d. Respiratory nursing care
 - e. Cardiac nursing care
 - f. Neurological nursing care
 - g. Pediatric nursing care *
 - h. Maternal-newborn nursing care *
 - i. Gerontology nursing care
 - j. Mental health/Community health nursing care
 - A student who receives an unsatisfactory (U) in the scenario depicting a specific skills set, is required to remediate and complete a repeat evaluation on that particular skill scenario. An "incomplete" will be given in NS460 until each scenario is satisfactory, if all other course requirements are met.

* Students demonstrate satisfactory competency in a scenario testing pediatric and

maternal-newborn nursery at the completion of NS450.

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Effective 01/06

Revised 8/06, 12/07, 7/09

Reviewed 8/07, 8/08, 8/10, 7/11

SUMMER REGISTRATION POLICY FOR TRADITIONAL BSN CLINICAL NURSING COURSES

PURPOSE:

To facilitate equitable registration of students for summer clinical courses.

POLICY:

In order to provide equitable summer clinical nursing course registration for students and a sound educational experience, the following guidelines will be used.

PROCEDURE:

1. Students must have a cumulative GPA of 3.0 or higher at the end of Fall semester to register for summer clinical courses.
2. Pre-requisite courses must be completed prior to entering summer clinical courses.
3. Students with a 3.0 and above cumulative GPA will be prioritized for summer clinical courses based on the following criteria. *
 - Cumulative GPA rounded to the one hundredth place
 - Number of hours left to complete the nursing program of studies
 - Failure of more than one general education course
 - Failure of any BSN nursing courses

*In the event that selection criteria are equal among students, and the number of eligible students exceeds class slots, a randomized process will be used to determine which students are selected.

4. The student and advisor will meet and complete the Checklist for Summer BSN Clinical Courses and submit by the Department of Nursing published deadline.

Effective 1/00

Revised 2/00, 12/05, 12/07, 6/09,

Reviewed 4/01, 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 8/10, 7/11

TRANSPORTATION OF CLIENTS POLICY

PURPOSE:

To clarify the student nurse's role and responsibility in transportation of clients.

POLICY:

Nursing students will **NOT** be permitted to transport clients.

PROCEDURE:

1. Nursing students are encouraged to assist clients in arranging transportation for visits to physicians, hospitals, clinics, and referral agencies.
2. Nursing students will **NOT** provide such transportation.
3. Nursing students may meet clients at such visits or accompany them on public transportation.

Reviewed 3/94, 2/95, 8/96, 8/99, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11

UNSATISFACTORY/UNSAFE CLINICAL PRACTICE POLICY

The student will demonstrate professionalism and safe practice at all times in the clinical setting and during scheduled validations in the Nursing Skills Lab (NSL). Any behaviors inconsistent with this expectation will be documented and remain a part of the student's clinical performance record throughout the nursing program. Unacceptable behaviors may be classified as unsatisfactory/unsafe or critical unsatisfactory/unsafe. Unsatisfactory/Unsafe behaviors will have a point value attached to them. Points are not confined to one course but are considered cumulative in evaluating the student's overall clinical performance. **An accumulation of 4 points will result in a full review of the student's clinical performance record by the Clinical Review Panel.**

UNSATISFACTORY/UNSAFE PRACTICES

The following behaviors are considered **unsatisfactory/unsafe**. Each incident will be assigned 1 point. Course expectations and student level in the nursing program are factors in determining unsatisfactory/unsafe behaviors.

UNSAFE/UNSATISFACTORY Each incident will be assigned 1 point.							
	<u>Paperwork</u>		<u>Absence/Tardy</u>		<u>Patient Care Issues</u>		<u>Unprofessional Behavior</u>
_____	Failure to meet the client and gather assessment data prior to the clinical experience.	_____	Failure to call faculty and/or the unit prior to assigned time of arrival for illness or tardiness.	_____	Inadequate knowledge of treatments, medications, or plan of care.	_____	Communication with staff, faculty, fellow students, or clients that is disrespectful or otherwise unprofessional.
_____	Failure to complete clinical preparation assignments, as determined per course.	_____	Repeated tardiness.	_____	Medication error.	_____	Inappropriate dress.
_____	Failure to complete clinical paperwork on time as designated by clinical faculty.	_____	Unexcused absence (no call, no show or leaving assigned area without proper communication with instructor/staff).	_____	Treatment error.	_____	Any behavior deemed unsatisfactory by the clinical faculty or course faculty.
_____		_____		_____	Error occurring as result of lack of consultation by faculty/staff.	_____	

Clinical faculty will complete the Occurrence Report and Occurrence Report Comments form on the day of the incident. The clinical faculty will also notify the Associate Dean of point accumulation that day. The student will separately complete an Occurrence Report Comments form to be turned in to the Associate Dean of Nursing within 3 business days of the incident/occurrence. The student may document "no comment" on the form if the occurrence is not contested.

The student, clinical faculty and course faculty will meet within 3 business days to review the Occurrence report and complete a Clinical Performance Plan. The course/clinical faculty will determine if an appropriate learning assignment or skills lab referral related to the unsatisfactory/unsafe behavior needs to be completed by the student.

All unsatisfactory/unsafe incidents will be recorded and kept confidential on file with the Associate Dean of Nursing. Should a student accumulate 3 points a notification letter will be mailed to the student. Accumulation of 4 points will initiate a Clinical Panel Review (see below). Records will be maintained until program completion for each student.

Note: Accrued clinical points will remain in effect on return of out-of-sequence students; the cumulative total will be carried throughout progression of program of study.

*Effective 1/1/09 Revised 12/09
Reviewed 7/09, 8/10, 7/11*

CRITICAL UNSATISFACTORY/UNSAFE PRACTICES

The following behaviors are considered **critical unsatisfactory/unsafe** and potentially place the client, self, or others in immediate danger. An incident involving any of these behaviors will result in consequences from the specific policy violated or result in **immediate** full clinical review from the clinical review panel and MAY result in disenrollment from the school of nursing.

CRITICAL UNSAFE/UNSATISFACTORY (Place date next to all that apply). This will result in immediate review of the incident. *Contact Course Coordinator and Undergraduate Nursing Programs Director ASAP.	
1.	Any life-threatening error or action by the student to client, staff, faculty, or others.
2.	Implementing any action that is in direct violation of the course, school, or Agency HIPPA Confidentiality Policy.
3.	Violation of the Personal Conduct Policies: College Code of Conduct and Alcohol and Drug policies.

CLINICAL REVIEW PANEL

If initiated, the Clinical Review Panel will meet within 5 business days. The Panel consists of the Student Advancement Coordinator, Undergraduate Nursing Programs Director, President of MSNA, President of Student Government, and one other course faculty designated by the Associate Dean of Nursing who is not assigned to that clinical course. If a conflict of interest occurs the Associate Dean of Nursing will assign a parallel alternate to the panel. The student will not be able to participate in further clinical activities until the Panel has made a recommendation and the Associate Dean of Nursing has made a final decision.

The panel will make one of the following recommendations:

1. Program of remediation – clinical performance plan.
 - a. This recommendation allows the student to accumulate 2 more points with continued enrollment in the nursing program.
 - b. Should the student accumulate 1 of the two allowed points, a notification letter will be mailed to the student.
 - c. Should a second Clinical Review Panel be initiated, either a course failure or disenrollment from either the nursing program or the college will be the recommendation.
2. Assign course failure(s).
 - a. This recommendation allows the student to accumulate 2 more points with continued enrollment in the nursing program.
 - b. Should the student accumulate 1 of the two allowed points, a notification letter will be mailed to the student.
 - c. Should a second Clinical Review Panel be initiated, disenrollment from either the nursing program or the college will be the recommendation.
 - d. Should another Occurrence Report be filed, the student will be dis-enrolled from the nursing program.
3. Disenrollment of student from the program and possible dismissal of student from the college.

Course faculty will make the final decision regarding remediation for student progression.

*Effective 1/1/09 Revised 12/09
Reviewed 7/09, 8/10, 7/11*

VERBAL OR TELEPHONE ORDERS POLICY

PURPOSE:

To clarify the BSN student nurses' role and responsibility related to physicians' verbal/telephone orders.

POLICY:

Unlicensed nursing students will **not** be permitted to take physicians' verbal or telephone orders.

PROCEDURE:

1. Licensed RN or faculty member may take physicians' verbal or telephone orders according to agency policy.
2. Unlicensed nursing students will **not** take physicians' verbal or telephone orders, but are encouraged to participate according to course outcomes.

Effective 8/02

Reviewed 3/94, 2/95, 8/96, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11

Revised 8/99, 12/08

NEBRASKA METHODIST COLLEGE
Department of Nursing

GLOSSARY OF TERMS

ACTIVISM – Purposeful professional advocacy with energy and decision.

ADVOCACY – Through a caring process, empowering self, and/or clients/peers whose needs are not being met.

AGGREGATE/SELECT GROUPS – A group of people that reflect a specific characteristic or need.

ALTRUISM – Expression of concern for self/others on social issues and trends which impact health care delivery.

AUTONOMY – Acceptance of responsibility and consequences of actions.

BELIEF – Attitudes and expectations held by an individual.

CARITAS PROCESSES – “An extension of Carative Factors”; those interventions utilized in the delivery of health care that result in the satisfaction of certain human needs” (Watson, 2008, p.39.).

CARING – “Consists of Carative Factors/*Caritas Processes* that facilitate healing, honor wholeness, and contribute to the evolution of humanity” (Watson, 2008, p. 17).

CARING RESPONSE – Acceptance of a person as he or she is not but as he or she may become/ is becoming (Watson, 2008, p. 17).

CHANGE – A deliberate process that results in a positive alternate pattern of function for the client and self.

CHANGE AGENT – Health care professional who promotes change in the client.

CLINICAL – An experience/site that enables students to learn to provide nursing care with clients wherever they may be.

CLIENT – The human recipient of care: individual, family, group or community.

CLIENT ADVOCATE – Health care professional who promotes the interest of the clients’ well-being.

COLLABORATION – Working together to achieve a positive outcome.

COMMUNICATION – An interactive process with clients, colleagues, and other health professionals utilizing various techniques to address issues of health promotion and restoration, illness/disease prevention, and care for the sick and dying.

- Therapeutic – with clients
- Professional – with health care partners
- Dialogue – shared information through the processes of self-exploration and interpersonal dynamics

COMMUNITY - A group of people who share some type of bond, engage in interaction with each other, and function collectively in regard to common concerns, needs, and problems in an increasingly interdependent world.

COMMUNITY BASED EDUCATION - Responds to the needs identified by the community and brings together participants from the college, community members, and health care partners. It builds on ongoing and true partnerships between education and the community and is a learning process that enables students to learn to provide nursing care with people wherever they may be.

COMMUNITY OF INTEREST – The groups and individuals who have an interest in the mission, goals, and expected outcomes of the nursing unit and its effectiveness in achieving them. The community of interest comprised of the stakeholders of the program and may include both internal (e.g. current students, institutional administration) and external constituencies (e.g. prospective students, regulatory bodies, practicing nurses, clients, employers, the community/public, etc.). The community of interest might also encompass individuals and groups of diverse backgrounds, races, ethnicities, genders, values, and perspectives who are served and affected by the program.

COMMUNITY PARTNERS - Members of a community who engage in dialogue and/or other activities for the purpose of improving or maintaining the health and well-being of their community.

CORE VALUES – The values defined by the College: caring, excellence, holism, learning, respect.

CRITICAL THINKING – is fostered in an open environment where individuals are encouraged to be reflective, evaluative, pose questions, express intuitive thought, explore alternatives, and develop creative solutions. It is a reasoning process from which assumptions are formulated, inferences are drawn, options are analyzed, and conclusions are derived. This means that the Critical Thinker is engaged in:

- the art of being habitually inquisitive
- the art of removing bias, prejudice, and one-sidedness of thought
- the art of thinking clearer, more accurate and more defensible (Paul, 1995)

CULTURAL COMPETENCE – Characterized by a set of attitudes, practices, and/or policies that respects, rather than merely shows receptivity to different cultures and people.

CULTURAL SENSITIVITY - Precedes cultural competency. Demonstrating awareness of the multitude of human differences, including age, ethnicity, socio-economic characteristics, sexual orientation and other considerations.

DISEASE PREVENTION – Interventions during the stage of susceptibility before pathological changes have begun.

DIVERSITY – Understanding that each individual is unique, and the recognition of individual differences such as, race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, or religious beliefs. Understanding each other and moving beyond simple tolerance to embracing and celebrating the richness of differences unique within each individual.

EMOTIONAL INTELLIGENCE – Emotionally-based competencies that can be learned and improved over time: competencies include knowing and managing one's emotions, motivating oneself, recognizing emotions in others, and handling relationships (Salovey and Mayer, 1990).

ENVIRONMENT – All external factors which affect the human's well being. Environment includes physical, social and existential dimensions as well as various health-related settings.

EVIDENCE BASED PRACTICE – A problem-solving approach to clinical care that incorporates the conscientious use of current best practice from well-designed studies, a clinician's expertise, patient values and preferences and healthcare resources.

FAMILY – A group of individuals interacting together to form a unit in society.

GLOBAL HEALTH CARE ENVIRONMENT – All external factors that have the potential to impact health world-wide.

GROUP - Two or more individuals who interact in such a manner that the attitude, behavior or performance of one or more individuals is influenced by that of other members.

HEALTH – A dynamic state of mental, physical, social, and spiritual well-being which maximizes the individual's ability to function in his or her environment.

HEALTH CARE PARTNERS — Members of health care and related professions who are engaged in dialogue and/or other activities directed toward the well-being of clients, families, groups or communities.

HEALTH CARE SYSTEM POLICY – Public policy impacting care delivery and nursing practice including health care delivery systems, organizations, and financing.

HEALTH MAINTENANCE – Activities or programs directed toward stabilization of a dynamic state of well-being.

HEALTH PROMOTION – Activities or programs directed towards enhancement of a dynamic state of well-being.

HOLISTIC – A philosophical concept in which the whole is inextricably related and linked to each part.

HUMAN – Holistic integrated being with basic rights and responsibilities, individual needs, and a unique internal environment.

HUMAN DIGNITY – Inherent worth and uniqueness of an individual.

HUMANISTIC – A sensitivity to self and others that translates into thought or actions, with a concern for maintaining or supporting the interests and ideals of each individual.

ILLNESS – The alteration in the dynamic state of well-being that leads to disharmony within the individual and between the human self and the environment.

INDIVIDUAL – A distinct entity consisting of an indivisible whole.

INFORMATICS – The integration of computer science and information science into the acquisition and processing of data, information and knowledge within the science and practice of nursing.

INTEGRITY – Behaviors which are congruent with professional values/codes.

INTELLECTUAL SKILLS – Utilization of cognitive abilities.

INTERNAL ENVIRONMENT – All factors within a human which affect well-being.

INTERPERSONAL COMMUNICATION – The ability to process thoughts, feelings, needs and wants with others.

INTERPERSONAL SKILLS – Behaviors that promote positive relationships between persons.

LEADERSHIP – A dynamic process incorporating styles and techniques utilized to motivate and direct the activities of others. This includes the ability to communicate effectively to facilitate change and resolve conflict.

LEARNING – A continuous process through which individuals acquire knowledge which results in a change in behavior, attitude, and/or way of thinking.

LEARNING CENTERED THEORY: Teaching with the following characteristics: achieving clarity about learning outcomes, coordinating teaching and assessment to promote student learning, aligning structures and resources to serve student learning, and working continuously to improve the environment for learning. (Alverno College Institute. 2002). *Student Learning: A central Focus for Institutions of Higher Education*. Milwaukee, Wisconsin: Alverno College

LEVELS OF PREVENTION

PRIMARY – Interventions during the stage of susceptibility before pathological changes have begun. Primary preventive efforts include both health promotion and specific protection.

SECONDARY – Interventions which focus on presymptomatic disease or clinical disease. Secondary preventive efforts include early diagnosis, prompt treatment and disability limitation.

TERTIARY – Interventions which focus on minimizing the residual disability and help the client learn to live productively with limitations. Tertiary preventive efforts are aimed at returning the client to the highest level of functioning possible and includes the utilization of community resources.

LIFE SPAN – The entire course of events from conception to death.

MUTUALITY – Reciprocal relationships directed toward the achievement of outcomes based on shared concerns and contributions.

NURSE GENERALIST – A professional who utilizes critical thinking, nursing theory, research, nursing process, carative factors and clinical skills while assuming responsibility and accountability for providing nursing care to clients in a variety of settings. This professional is able to demonstrate leadership and management skills in organization, change, advocacy, coordination, collaboration and communication with other health disciplines in order to provide comprehensive care.

NURSING – A caring, creative, dynamic, and interactive process which utilizes scientific and humanistic knowledge to assist the client in attainment of a dynamic state of well-being with a focus on human responses to actual or potential health problems.

NURSING PROCESS - A systematic approach of assessment, diagnosis, planning, implementation, and evaluation for promoting, maintaining or restoring a dynamic state of well-being. It is a form of problem-solving, decision making and critical thinking which has been adapted to the needs of nursing and directed toward meeting the needs of clients.

PERSONAL DEVELOPMENT – The demonstration of skills that enable the individual to pursue lifelong self development, to function optimally in today’s complex society, and to serve as a positive influence in the community.

PRINCIPLES – Accepted knowledge and rules of action or conduct.

- Humanistic – derived from the study of human behavior/interaction
- Scientific – derived from the study of the physical and/or natural world
- Technologic – derived from applied sciences.

PRIORITIZATION – Identifying a sequence of actions or ideas in order of importance.

PROFESSIONAL ACTIVISM – Functions that promote the goals of the profession and the well-being of society.

PROFESSIONAL NURSE – An individual who has graduated from an approved nursing program and has achieved RN licensure status.

PROFESSIONAL ROLE DEVELOPMENT – Acquiring the characteristics defined as professionalism.

PROFESSIONALISM – Conduct and/or qualities that characterize a professional. Characteristics of the nursing profession are: general education, scientific body of knowledge, acceptance of a code of ethics, legal and personal accountability and responsibility, leadership ability, autonomy and dedication to excellence.

PSYCHOMOTOR SKILLS – Behaviors that integrate physical activity and mental processes.

REHABILITATION – Interventions that focus on helping the client to live productively with limitations by facilitating maximum functioning and independence.

RESTORATION - Return of individuals to their previous state of health.

RISK REDUCTION - Preventive efforts that decrease the likelihood of health disruption.

SERVICE-LEARNING – A pedagogy that incorporates community service into academic coursework. It allows students to provide service that enhances their understanding through a reflective process while meeting course outcomes and community-identified needs.

SHARED LEARNING PARTNERSHIPS – A collaborative process between participants from the college, community members, and health care partners for the purpose of enabling students to learn to provide nursing care to people wherever they may be.

SHARED PARTNERSHIPS – A collaborative process between participants from the college, community members, and health care partners for the purpose of improving or maintaining the health and well-being of a community.

SOCIAL JUSTICE – A perception of fairness within the boundaries of a society’s value system.

STANDARD OF PRACTICE – Standards of care and standards of professional performance as outlined in the American Nurses’ Association *Standards of Clinical Practice* and AACN *Essentials of Baccalaureate Education*.

TEACHING – An interactive process that uses a system of actions to promote the acquisition, application, integration and synthesis of knowledge.

THERAPEUTIC NURSING INTERVENTION – Any direct or indirect activity arising out of an independent or dependent nursing function to promote and/or restore health, prevent illness, and care for the sick and dying, using humanistic, scientific, and technological principles.

VALUE – A belief which an individual holds about the worth of given ideas or behaviors.

VULNERABLE POPULATIONS – Groups at risk for unmet needs.

WELLNESS – A state of maximized personal potential.

WELLNESS-ILLNESS CONTINUUM – A model that illustrates the progression of health from a neutral point toward optimum holistic health, or from the neutral point toward a progressively worsening state of health.

WELL-BEING – Perception of one's own holistic health.

Paul, R. (1995). *Critical thinking: How to prepare students for a rapidly changing world*. Santa Rosa, CA: Foundation for Critical Thinking.

Salovey, P., & Mayer, J.D. (1990). Emotional intelligence. *Imagination, Cognition, and Personality*, 9, 185-211.

Watson, J. (1985). *Nursing: The philosophy and science of caring*. Boulder, CO: University of Colorado Press.

Revised 5/00, 4/02, 8/06, 8/08, 7/11

Reviewed 4/01, 1/03, 8/04, 1/05, 8/07, 7/09, 8/10, 7/11

Appendix A-1
NEBRASKA METHODIST COLLEGE
Department of Nursing
Students Enrolled at NMC Fall 2006 - Fall 2008

PRE-REQUISITE/CO-REQUISITE GRID FOR NURSING COURSES WITH CORE CURRICULUM REQUIREMENTS

Nursing Course	Pre-Requisite	Pre-Requisite/Co-Requisite	Co-Requisite
	<i>Requirement that must be met before registering for the Nursing course</i>	<i>Requirement that must be met with a course, but can also be taken before the nursing course</i>	<i>Requirement that must be met with the Nursing course</i>
NRS 100 /100C (Intro CB NS)	COM 101 English SCI 225 A & P I SCI 103 Chemistry Satisfactory Math Competency or course	HUM 150 World of Ideas – Critical Reasoning SCI 226 A & P II SC I280 Microbiology SSC 101 Intro to Psychology	NRS 102/102L (Health Assess I)
NRS 102/102L (Health Assess I)			NRS 100/ 100C (Intro CB NS)
NRS 220/220C (CB NS with Adults)	All year 1 courses (except HUM 2___ World of Ideas	SCI 315 Pathophysiology (can also be taken with NS 100)	SCI 265 Pharmacology
NRS 240/240C (CB NS Families)	All year 1 courses NRS 220/220C	SSC 215 Life span Psychology SCI 240 Nutrition	NRS 245 (Pub Health I)
	SCI 315 Pathophysiology SCI 265 Pharmacology	SSC 235 Sociology of Culture HUM 2___ World of Ideas (completion of 1 out of 3 World of Ideas courses)	
NRS 245 (Pub Health I)	NRS 220/220C		NRS 240/240C (CB NS with Families)
NRS 302/302L (Health Assess II)			NRS 340/340C (CB NS Lifespan)
NRS 340/340C (CB NS Lifespan)	All year 1 & 2 courses	COM 2 ___ Language/Culture SSC 360 Statistics	NRS 302/302L (Health Assess II)

Appendix A-2
Students Enrolled at NMC Fall 2006 – Fall 2008

Nursing Course	Pre-Requisite	Pre-Requisite/Co-Requisite	Co-Requisite
NRS 350/350C (Advanced Concepts)	All year 1 & 2 courses	COM 320 Health Care Collaboration (May be taken after the completion of NRS 240 with either NRS340 or NRS350. COM 320 is not a required Co-Requisite with NS 350 but is a pre-requisite to NRS 445)	NRS 345 (Pub Health II)
	NRS 302 (Health Assess II)	SS 370 Research (can be taken with NS 220,240,340 or 350)	
	NRS 340/340C (CB Lifespan)	HUM 210 Ethics (can be taken with NRS 220, 240, 340 or 350)	
	SSC360 Statistics		
NRS 345 (Pub Health II)			NRS 350/350C (Advc Concepts)
Non Clinical Nursing Electives NRS ____	Non-clinical NS Elective may be taken with NRS 240, NRS 340, NRS 350, or NRS 450 according to pre-requisite requirements.	Refer to Pre-requisite requirements for Non Clinical Nursing electives in Appendix C	
NRS 450/450C (CB Nsg. Lifespan Adv)	All year 1, 2, & 3 courses	Non-clinical NS Elective	NRS 445 (NS Global Society)
	COM 320 Healthcare Collaboration & Mgmt	HU M 2__ World of Ideas (completion of 2 out of 3 World of Ideas courses)	
NRS 445 (Nsg Global Society)	All year 1, 2, & 3 courses		NRS 450/450C
	COM 320 Healthcare Collaboration & Mgmt		
NRS 460/460C (CB Nsg Aging)	All year 1, 2, & 3 courses	HUM 2__ World of Ideas (completion of all 3 World of Ideas courses)	SSC 465 Capstone: The Educated Citizen
	NRS 445 (NS. Global Soc)		
	NRS 450/450C		
NRS 470(Sr. Synthesis)	All year 1, 2, & 3 courses	HUM 2__ World of Ideas (completion of all 3 World of Ideas courses)	NRS 470P (Preceptorship)
	NRS 460/460C		SSC 465 Capstone: The Educated Citizen
NRS 470P (Preceptorship)			NRS 470 (Senior Synthesis)

Revised 07/06, 8/08, 12/08, 6/09

Reviewed 8/07, 8/10, 7/11

Appendix B-1
Nebraska Methodist College
Department of Nursing
Students Enrolled Spring/Fall 2009

PRE-REQUISITE/CO-REQUISITE GRID FOR NURSING COURSES WITH CORE CURRICULUM REQUIREMENTS

Nursing Course	Pre-Requisite	Pre-Requisite/Co-Requisite	Co-Requisite
	<i>Requirement that must be met before registering for the Nursing course</i>	<i>Requirement that must be met with a course, but can also be taken before the nursing course</i>	<i>Requirement that must be met with the Nursing course</i>
NRS 100 /100C (Intro CB NS)	COM 101 English SCI 225 A & P I SCI 103 Chemistry Satisfactory Math Competency or course	HUM 150 World of Ideas – Critical Reasoning COM 2 ___ Language/Culture SCI 226 A & P II SCI 280 Microbiology SSC 101 Intro to Psychology	
NRS 220/220C (CB NS with Adults)	All year 1 courses (except HUM 2__ World of Ideas)	SCI 315 Pathophysiology (can also be taken with NRS 100) SSC 215 Life span Psychology	NRS 202/202L (Health Assess Lifespan)
NRS 202/202L (Hlth Assess Lifespan)			NRS 220/ 220C (CB NS with Adults)
NRS 240/240C (CB NS with Families)	All year 1 courses NRS 220/220C SCI 315 Pathophysiology	SCI 265 Pharmacology SCI 240 Nutrition SSC 235 Sociology of Culture HU M 2___ World of Ideas (completion of 1 out of 3 World of Ideas courses)	NRS 245 (Pub Health I)
NRS 245 (Pub Health I)			NRS 240/240C (CB NS with Families)
Non Clinical Nursing Electives NRS ____	Non-clinical NRS Elective may be taken with NRS 240, NRS 340, NRS 350, or NRS 450 according to pre-requisite requirements.	Refer to Pre-requisite requirements for Non Clinical Nursing electives in Appendix C	
NRS 340/340C (CB NS Lifespan)	All year 1 & 2 courses	SSC 360 Statistics *COM 320 can be taken with NRS 340	

Appendix B-2
Students Enrolled at NMC Spring/Fall 2009

Nursing Course	Pre-Requisite	Pre-Requisite/Co-Requisite	Co-Requisite
NRS 350/350C (Advanced Concepts)	All year 1 & 2 courses	*COM 320 Health Care Collaboration (May be taken after the completion of NRS 240 with either NRS340 or NRS350. COM 320 is not a required Co-Requisite with NRS 350 but is a pre-requisite to NRS 445)	NRS 345 (Pub Health II)
	NRS 340/340C (CB NS Lifespan)	SSC 370 Research (can be taken with NRS 220,240,340 or 350)	
	SSC 360 Statistics	HUM 210 Ethics (can be taken with NRS 220, 240, 340 or 350)	
NRS 345 (Pub Health II)			NRS 350/350C (Advanced Concepts)
NRS 450/450C (CB NS Lifespan Adv)	All year 1, 2, & 3 courses	HUM 2__ World of Ideas (completion of 2 out of 3 World of Ideas courses)	NRS 445 (NS Global Society)
	COM 320 (Healthcare Collaboration & Mgmt)	Non-Clinical Nursing Elective NRS _____	
NRS 445 (NS Global Society)	All year 1, 2, & 3 courses		NRS 450/450C (CB NS Lifespan Adv)
	*COM 320 (Healthcare Collaboration & Mgmt)		
NRS 460/460C (CB NS Aging)	All year 1, 2, & 3 courses		SSC 465 (Capstone: The Educated Citizen)
	Non-Clinical Nursing Elective		
	NRS 445 (NS Global Soc)		
	NRS 450/450C (CB NS Lifespan)	HUM 2__ World of Ideas (completion of all 3 World of Ideas courses)	
NRS 470(Sr. Synthesis)	All year 1, 2, & 3 courses	HUM 2__ World of Ideas (completion of all 3 World of Ideas courses)	NRS 470P (Preceptorship)
	NRS 460/460C		SSC 465 (Capstone: Educated Citizen)
NRS 470P (Preceptorship)			NRS 470 (Senior Synthesis)

Revised 07/06, 8/08, 12/08, 6/09, 8/10

Reviewed 8/07, 7/11

Appendix C
NEBRASKA METHODIST COLLEGE
Department of Nursing

Spring 2010 Non Clinical Nursing Elective Pre-Requisite Requirements

As of the Spring 2011 Semester students will be allowed to register for Non Clinical Nursing Electives only if they meet the pre-requisite requirements indicated below.

The following Non Clinical Nursing electives require NS 220 as a pre-requisite.

- NRS 310 HIV/AIDS: A Challenge to society
- NRS 312 Infectious diseases: Don't bug me
- NRS 355 Transcultural perspectives of health and illness
- NRS 358 Parish Nursing: Basic Parish nurse preparation
- NRS 363 Perspectives on grief and suffering
- NRS 364 Survey of complementary and alternative therapies in nursing
- NRS 365 History of Nursing seminar
- NRS 399 Immersion Experience Prerequisite: Laredo Trip

The following Non Clinical Nursing electives require NS 240 as a pre-requisite.

- NRS 361 Pain Management
- NRS 362 Empowering the Professional Nurse
- NRS 366 Women's Health Issues
- NRS 368 Genetics for Nursing Practice
- NRS 369 Leadership Development - limited to students in a Student Leadership Position
- NRS 371 Bio-Psychosocial Perspectives of Intimate Partner Violence
- NRS 399 Immersion Experience Prerequisite: Rosebud trip

The following Non Clinical Nursing electives require NS 340 as a pre-requisite.

- NRS 325 Current trends and controversies in transplantation
- NRS 367 Violence in society

*Effective 1/1/2011
Reviewed 7/11*

Appendix D
Checklist for Summer
BSN Clinical Courses

To be completed by the student and their nursing advisor.

1.	Provide GPA (rounded to the nearest hundredth) as of the Fall semester before entering the summer clinical course(s) (must be => 3.00). Attach a current copy of the transcript.	_____ GPA												
2.	Will all prerequisite courses be completed before summer BSN nursing course(s) begins. List any remaining any pre/co-requisite coursework that will be taken with the summer clinical course below.	<input type="checkbox"/> YES <input type="checkbox"/> NO												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><i>Pre/Co-Requisite Coursework to be taken with the nursing clinical course</i></td> </tr> <tr> <td style="height: 20px;"> </td> </tr> <tr> <td style="height: 20px;"> </td> </tr> </table>	<i>Pre/Co-Requisite Coursework to be taken with the nursing clinical course</i>												
<i>Pre/Co-Requisite Coursework to be taken with the nursing clinical course</i>														
3.	Has student failed more than one general education course?	<input type="checkbox"/> YES <input type="checkbox"/> NO												
	List failed general education courses below.													
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;"><i>Course and Date</i></th> <th style="width: 10%;"><i>Grade</i></th> <th style="width: 25%;"><i>Course Retake and Date</i></th> <th style="width: 10%;"><i>Grade</i></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	<i>Course and Date</i>	<i>Grade</i>	<i>Course Retake and Date</i>	<i>Grade</i>									
<i>Course and Date</i>	<i>Grade</i>	<i>Course Retake and Date</i>	<i>Grade</i>											
4.	Has student failed any nursing courses?	<input type="checkbox"/> YES <input type="checkbox"/> NO												
	List failed nursing courses below.													
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;"><i>Course and Date</i></th> <th style="width: 10%;"><i>Grade</i></th> <th style="width: 25%;"><i>Course Retake and Date</i></th> <th style="width: 10%;"><i>Grade</i></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	<i>Course and Date</i>	<i>Grade</i>	<i>Course Retake and Date</i>	<i>Grade</i>									
<i>Course and Date</i>	<i>Grade</i>	<i>Course Retake and Date</i>	<i>Grade</i>											

5. List courses remaining to complete the BSN program, **including the summer semester.**

<i>Course Number</i>	<i>Credit Hours</i>	<i>Course Number</i>	<i>Credit Hours</i>

Total remaining credits to complete the NS Program _____

Student Signature		Date
Faculty Advisor Signature		Date

Reviewed 7/02, 1/03, 8/04, 1/05, 8/07, 8/08, 08/10, 7/11

Revised 12/05, 12/0, 6/09

Appendix E-1
Nebraska Methodist College
Department of Nursing BSN Student Team
Communication Tool

The Nebraska Methodist College BSN Admissions and Advancement Team wishes to encourage students to bring forward their suggestions or concerns for discussion. The Department of Nursing is committed to students and wants to hear from you.

Please use this tool to submit your suggestions and/or concerns. Depending on the nature of the suggestion and/or concern, your submission may be forwarded to another, more appropriate team/committee or individual for consideration. You may be invited to engage in an open dialogue about your suggestion or concern.

Your suggestion and/or concern will be treated with respect. Each communication tool received will be reviewed with regard to the most appropriate action to take in order to meet the interests of all involved.

The form is to be submitted to Dr. Linda Hughes, Director of the Undergraduate Nursing Programs, and it will be reviewed or forwarded to the appropriate party.

(May be sent via interoffice mail or email as an attachment)

Date Submitted _____

Student(s) Name(s): _____

Contact information: _____

Suggestion and/or concern: *Please provide by completing the back side of the form -->*

.....
Lower portion to be completed by the Department of Nursing

Team/Committee or Individual responsible for responding to the suggestion and/or concern: _____

Date of Action: _____

Response to Student(s): *Provide details of discussion and or actions taken and responses to student(s).*

*Effective 8/07
Revised 7/09, 8/10, 7/11
Reviewed 8/08, 8/09,*

Appendix E-2
Communication Tool
Identify The Problem or Suggestion (BE SPECIFIC)



THEN, PUT YOURSELF IN THEIR SHOES....
WHAT ARE SOME OPTIONS TO SOLVING THE PROBLEM



<u>WHAT ARE YOUR INTERESTS??</u>	<u>WHAT ARE THEIR INTERESTS??</u>
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____
6. _____	6. _____
7. _____	7. _____

OR IMPLEMENTING YOUR SUGGESTION?

- 1.
- 2.
- 3.

Effective/07
Revised 7/09,
Reviewed 8/07, 8/08, 8/10, 7/11

APPENDIX F-1
NEBRASKA METHODIST COLLEGE
TRANSFER GUIDELINES (BSN TRADITIONAL and ACE Programs)

PURPOSE:

The purpose of these guidelines is to assist faculty and students in determining eligibility for transfer between the Traditional BSN Program and ACE program and identifying the process for transfer.

GUIDELINES:

Transferring from Traditional BSN Program into ACE Program

Students in the Traditional BSN program that have completed an Associate or Bachelor degree with a GPA of 2.75, and have completed all general education pre-requisite coursework prior to the semester in which they desire to transfer, will be considered. Students will not be eligible for transfer into the ACE program if they have failed any NMC course.

Students who desire a transfer from the Traditional BSN program into the ACE program will:

1. Communicate to BSN Nursing Program Director desire to transfer
2. Complete the *Application for Transfer of Program (see below)*
3. Complete an interview with the ACE Program Coordinator

Following completion of the above steps, Nursing Department Administration will:

1. Determine student eligibility
2. Determine availability of space in the ACE program
3. Determine program cost (Student Business Accounts)

Transferring from ACE Program to Traditional BSN Program

Students in the ACE program that desire a transfer into the Traditional BSN program will be considered based on their academic record and successful completion of courses. If a student has failed a course, the student must repeat the course as outlined in the Grading Nursing Courses Policy in the Department of Nursing Student Handbook. Each student will be reviewed on an individual basis.

Students who desire a transfer from the ACE program into the Traditional BSN program will:

1. Communicate to the ACE Program Coordinator desire to transfer
2. Complete the *Application for Transfer of Program (see below)*
3. Complete an interview with BSN Nursing Program Director

Following completion of the above steps, Nursing Department Administration will:

1. Determine the student's academic status
2. Determine the student's eligibility
3. Determine availability of space in the Traditional Program
4. Determine program cost (Student Business Accounts)

Any ACE student who fails NS350A or lower and transitions to the traditional program, must take HU 152 Portfolio Introduction for 1 credit. Any ACE student who fails NS450A and/or NS 446A higher must take HU 155 Portfolio Transition course for 0 credits.

Effective 1/09

Revised 08/10

Reviewed 7/11

WRITTEN STATEMENT

Please provide an explanation to substantiate your request to transfer to a different program in the Nursing Dept.

STUDENT SIGNATURE: _____ DATE: _____

*Effective 1/09
Revised 08/10
Reviewed 7/11*

Appendix F-3

NURSING DEPARTMENT USE ONLY:

DATE: _____

ACE to BSN

BSN Program Guidelines met: _____

BSN Director Signature: _____

BSN to ACE

ACE Program Guidelines met: _____

Special Programs Coordinator signature: _____

RECOMMEND CHANGE OF PROGRAM

ADVISOR: _____

SEMESTER EFFECTIVE: ____

*Effective 1/09
Revised 8/10
Reviewed 7/11*

Appendix G
STUDENT ILLNESS/INURY OR EXPOSURE REPORT

NMC Student Health Office
720 North 87th Street, Omaha, Nebraska 68114
Phone: 402-354-7210 FAX: 402-354-7010

TO BE COMPLETED BY STUDENT AND INSTRUCTOR/PRECEPTOR:

Name		Student ID#	Age	Date of Birth						
Home Address			Home and Cell Phone							
Program of Study		Witness to Incident								
Circle One	Date of Incident	Time of Incident	Location of Incident							
Male Female										
<input type="checkbox"/> Illness/Injury Describe how the accident or injury occurred in detail (job task performing, what was involved that led to the incident and part of the body affected). Please be specific										
<input type="checkbox"/> Exposure <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Source Pt. ID</td> <td style="width: 20%;">Source Pt. Room</td> <td style="width: 40%;">If sharps injury indicate type & brand of device used</td> </tr> <tr> <td colspan="2">Source Pt. Doctor</td> <td></td> </tr> </table> Describe how the exposure occurred in detail (job task performing, what was involved that led to exposure and part of body affected). Please be specific					Source Pt. ID	Source Pt. Room	If sharps injury indicate type & brand of device used	Source Pt. Doctor		
Source Pt. ID	Source Pt. Room	If sharps injury indicate type & brand of device used								
Source Pt. Doctor										
What action could have been taken to prevent this incident or its recurrence:										

Instructor/Preceptor Name _____ Notified? YES NO Date Specified _____

Instructor/Preceptor Signature _____ Phone# _____

Student Signature _____ Date _____

Effective 1/09
Reviewed 8/10
Reviewed 7/11

Appendix H-1
Nebraska Methodist College
UNSATISFACTORY/UNSAFE PRACTICES OCCURRENCE REPORT

**COMPLETE PAGES 4-6 AND SUBMIT TO THE ASSOCIATE DEAN OF NURSING
 (COMPLETE A CLINICAL PERFORMANCE PLAN)**

STUDENT		PROGRAM/COURSE	
DATE OF INCIDENT		INSTRUCTOR	

GENERAL EVENT INFORMATION:

CLINICAL SITE:	CLIENT DESCRIPTION: (CIRCLE ONE)		
	MALE	FEMALE	AGE
LOCATION OF INCIDENT:			
	INPATIENT	OUTPATIENT	HOME CARE EXTENDED CARE
TIME OF INCIDENT:			

EVENT DETAILS:

GENERAL INCIDENT TYPE:	INFLUENCING FACTORS:		
DESCRIBE HOW THE INCIDENT OCCURRED IN DETAIL:			
DESCRIBE ACTION TAKEN:			
IDENTIFY ACTION THAT COULD HAVE BEEN TAKEN TO PREVENT THIS INCIDENT OR ITS RE-OCCURRENCE:			
INSTRUCTOR SIGNATURE		DATE	
STUDENT SIGNATURE		DATE	

THIS FORM TO BE TURNED IN TO THE ASSOCIATE DEAN OF NURSING.

Appendix H-4
Nebraska Methodist College
Clinical Review Panel Recommendation

Student Name:		
----------------------	--	--

Points for occurrences will be tracked by the Associate Dean of Nursing

UNSAFE/UNSATISFACTORY Each incident will be assigned one point

	<u>Paperwork</u>		<u>Absence/Tardy</u>		<u>Patient Care Issues</u>		<u>Unprofessional Behavior</u>
_____	Failure to meet the client and gather assessment data prior to the clinical experience.	_____	Failure to call faculty and/or the unit prior to assigned time of arrival for illness or tardiness.	_____	Inadequate knowledge of treatments, medications, or plan of care.	_____	Communication with staff, faculty, fellow students, or clients that is disrespectful or otherwise unprofessional.
_____	Failure to complete clinical preparation assignments, as determined per course.	_____	Repeated tardiness.	_____	Medication error.	_____	Inappropriate dress.
_____	Failure to complete clinical paperwork on time as designated by clinical faculty.	_____	Unexcused absence (no call, no show or leaving assigned area without proper communication with instructor/staff).	_____	Error occurring as result of lack of consultation by faculty/staff.	_____	Any behavior deemed unsatisfactory by the clinical faculty or course faculty.

CRITICAL UNSAFE/UNSATISFACTORY (Place date next to all that apply). This will result in immediate review of the incident. *Contact Course Coordinator and Undergraduate Nursing Programs Director ASAP.

	Any life-threatening error or action by the student to client, staff, faculty, or others.
	Implementing any action that is in direct violation of the course, school, or Agency HIPPA Confidentiality Policy.
	Violation of the Personal Conduct Policies: College Code of Conduct and Alcohol and Drug policies.

Notification letter sent on:		
------------------------------	--	--

Below To be completed by Clinical Review Panel Only

Date for Clinical Review Panel:		
---------------------------------	--	--

Comments from Panel:	
----------------------	--

Signatures:		Date:	
		Date:	
		Date:	

*Effective 1/1/09
 Revised 12/09
 Reviewed 7/09, 8/10, 7/11*

Appendix I
**Family Educational Rights and
Privacy Act
(FERPA)
Student Signature Page**



The purpose of the Family Educational Rights and Privacy Act of 1974 is to assure all students, including those attending an institution of postsecondary education, access to their educational records and to protect such individuals' right to privacy by limiting the transferability of their records without their consent.

Nebraska Methodist College (NMC) supports this act and maintains access for the students to review the validity of their NMC educational records.

NMC will not release non-directory information to the public or others who request it unless the College has a Waiver Release Form on file noting the record to be released and to whom. The College recognizes and complies with the exceptions listed in the Act.

“Directory Information” used by Nebraska Methodist College is as follows:

student name, address, telephone number, photographs, date and place of birth, field or program of study, dates of attendance, email address, class rosters, class schedules, advisor, academic awards and degrees, previous schools attended, achievements in campus organizations, graduation date (anticipated and official), academic class (freshman, sophomore, junior, senior), enrollment status (full-time, part-time, undergraduate/graduate).

Waiver Release Form

I, _____, understand the Family Educational Rights and Primacy Act explained above and waive those rights of privacy to disclose information to any clinical site that I am assigned to throughout my time as a student at NMC.

Student's Signature

Date of Signature

Please supply the following information to facilitate the time needed to gather this information by the Registrar:

Name: _____

Social Security #: _____

Birth date 00/00/0000 : _____

Current Address : _____

College Email address: _____

Appendix J
Confidentiality Agreement



Confidentiality Agreement

I understand/agree that as a student at Nebraska Methodist College (NMC), I must maintain the confidentiality of all medical, personal, proprietary, and financial information derived from my participation in NMC clinical and/or community experiences. This information includes, but is not limited to, written information, electronic information, and verbal communication.

I agree to follow all NMC, Methodist Health System (MHS), and all other health care agency policies and procedures with respect to individually identifiable information. I understand that I may access such information on a “need to know” basis only to the extent needed to perform my duties.

I understand MHS and other health care agencies conduct audits of its information systems to verify that information is being accessed by authorized individuals only.

I understand that violation of this confidentiality agreement may result in possible fines and civil or criminal penalties under state or federal law, as well as disciplinary or other correction action, including termination of access and/or suspension/dismissal from NMC.

DATE	PRINTED NAME	SIGNATURE
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User Access Code

I understand, as a student at Nebraska Methodist College, I may receive user access code(s). The code(s) are confidential. I will be held accountable for the code(s) and am responsible to ensure the security of the code(s) at all times. I understand that:

- My user access code is the equivalent of my signature.
- I will not disclose the code to anyone except as required by MHS or other health care agency policies.
- I will not attempt to access any information to which I am not authorized and/or to which I do not have a specific, work-related need to know.
- My accessing MHS or other health care agency computer systems via my code is recorded permanently.
- If I have reason to believe the security of my access code has been compromised, I will immediately contact my clinical instructor, and the supervisor of the clinical area. At MHS, the Information Technology Help Desk will be notified so that the code can be deleted and a new code assigned to me. In other health care agencies, I will follow their policies.
- I understand my user identification code will be deleted from the System when I no longer hold a position that requires that code(s).
- I further understand, if I violate any of these provisions, my instructor/department will be notified and that appropriate corrective action, up to and including suspension/dismissal, will be taken.

PRINTED NAME	SIGNATURE	DATE
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*Effective 8/08
Revised 8/09
Reviewed 8/10, 7/11*

Appendix K-1
Nebraska Methodist College
Nursing Division
Technical Standards Signature Page

REQUIRED: *Initial each paragraph & sign at bottom of second page*

Technical Standards for BSN Nursing Students

In preparation for professional nursing roles nursing students are expected to demonstrate the ability to meet the demands of a professional nursing career. Certain functional abilities are essential for the delivery of safe, effective nursing care. An applicant to the Bachelors of Science in Nursing program must meet the following technical standards and maintain satisfactory demonstration of these standards for progression throughout the program. Students unable to meet these technical standards will not be able to complete the program. Students shall notify faculty of any change in their ability to meet technical standards.

Initial here _____

The technical standards include but are not necessarily limited to the following:

General Ability:

The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses is integrated, analyzed and synthesized in a consistent and accurate manner. The student is expected to possess the ability to perceive pain, pressure, temperature, position, vibration, and movement in order to effectively evaluate patients. A student must be able to respond promptly to urgent situations.

Initial here _____

Observational Ability:

The student must have the ability to make accurate visual observations and interpret them in the context of clinical/laboratory activities and patient care experiences. The student must be able to document these observations accurately.

Initial here _____

Communication Ability:

The student must communicate effectively verbally and non-verbally to obtain information and explain that information to others. Each student must have the ability to read, write, comprehend and speak the English language to facilitate communication with patients, family members, and other members of the health care team. The student must be able to document and maintain accurate records, present information in a professional manner and provide patient instruction to effectively care for patients and their families.

Initial here _____

Motor Ability:

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

Initial here _____

Intellectual –Conceptual Ability:

The student must have the ability to develop problem-solving skills essential to professional nursing practice. Problem solving skills include the ability to measure, calculate reason, analyze, and synthesize objective and subjective data, and to make decisions, in a timely manner that reflect thoughtful deliberation and sound clinical judgment. The student must demonstrate application of these skills and possess the ability to incorporate new information from peers, instructors, and the nursing and healthcare literature to formulate sound judgment to establish care plans and priorities in patient care activities.

Initial here _____

Behavioral and Social Attributes:

The student is expected to have the emotional stability required to exercise sound judgment, and complete assessment and intervention activities. Compassion, integrity, motivation, and concern for others are personal attributes required of those in the nursing program. The student must fully utilize intellectual capacities that facilitate prompt completion of all responsibilities in the classroom and clinical settings; the development of mature, sensitive, and effective relationships with patients and other members of the health care team. The ability to establish rapport and maintain interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. Each student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; and effectively collaborate in the clinical setting with other members of the healthcare team.

Initial here _____

Ability to Manage Stressful Situations:

The student must be able to adapt to and function effectively in relation to stressful situations encountered in both the classroom and clinical settings, including emergency situations. Students will encounter multiple stressors while in the nursing program. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program related.

Initial here _____

Background Check/Drug Screening:

Clinical facilities require that Nebraska Methodist College perform drug testing and background checks on all students before they are allowed to participate in clinical experiences. Therefore, students will be required to have a background check performed and submit to drug screening before being allowed into clinical practice.

Initial here _____

Nursing Student Handbook Policies:

My signature is a confirmation that I have received and will adhere to the Department of Nursing policies which include the Technical Standards for BSN nursing students. I am aware that the Nursing Student Handbook and the policies that it contains are available on NMC Angel and the NMC Website.

Signature _____ Date _____

*Effective 8/08
Reviewed 7/09, 8/10, 7/11*

Edna A. Fagan Pledging Ceremony

Friday, April 13, 2012 at 4:15pm

St. Andrew's United Methodist Church
15050 W. Maple Rd.

**All nursing students beginning in NS100 are invited to participate
by the Nebraska Methodist College Department of Nursing.**

All nursing students beginning in NS100 Students who are enrolled in their first nursing course and beyond have made a commitment to the profession of nursing. This choice encompasses serving and caring for others. The Department of Nursing at Nebraska Methodist College would like to recognize this milestone in your professional journey with a ceremony. In preparation for this ceremony, each participating student purchases a pin and selects the individual who will pin them during the ceremony as a symbol of their commitment to nursing. The selected individual is to be a registered nurse or higher level nursing student.

History: A century of nursing has seen profound changes in the nursing profession as well as in the nurse's cap and uniform. Historically capping has been a traditional ceremony. The nurse's cap was a distinctive means of identifying with a particular school and a way of distinguishing nurses from other caregivers and professionals. The need to wear a cap originated from a time when all women wore caps indoors for the functional purpose of covering the hair. Today, the cap is seldom visible in the wide variety of settings in which professional nurses' practice. Professional nurses, male and female, can be identified by their nursing pins which signify their institute of learning. Therefore, in preparation for this ceremony, each participating student purchases a pin and selects the individual who will pin them during the ceremony as a symbol of their commitment to nursing. The selected individual is to be a registered nurse or higher level nursing student. The presence of you and your significant others honors your dedication to the profession of nursing and your future service to the global community.

The cost of the pin and ceremony is **\$10.00**. You may register on-line at the time of registration (link will be provided in January 2012) or following your on-line registration you may pay with cash or check (payable to NMC) in the NMC Business Office located in the Riley-Leinart building, rooms 1055 & 1057, Monday thru Fridays from 8:30 am to 4:30 pm. **Payment must be made by Monday April 2nd, 2012.** Tickets for the pinner and guests will be distributed with purchase of the pin.

Pledging will be followed by a reception with appetizers, dessert, and beverages. A professional photographer will be available to take pictures on this special day.

If you have any questions or concerns, please do not hesitate to contact: Cheryl Bouckaert at 354-7232 or via email at cheryl.bouckaert@methodistcollege.edu or Jean Farnham at 354-4485 or jean.farnham@methodistcollege.edu