



**THIBODAUX REGIONAL
SCHOOL OF NURSING**
————— AT —————
NICHOLLS STATE UNIVERSITY

**Department of Nursing
Bachelor of Science in Nursing Program
STUDENT HANDBOOK**

2024-2025

The Bachelor of Science in Nursing Program Student Handbook is published by Nicholls State University.

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SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

STUDENT HANDBOOK STATEMENT

All students enrolled in the Bachelor of Science in Nursing (BSN) Program are responsible for all information in the BSN Student Handbook as long as they are in the BSN Program. This responsibility is validated upon acceptance to the BSN Program and each semester thereafter by student signatures kept on file in the Department of Nursing. The BSN Student Handbook is accessible via the Nicholls State University Department of Nursing website at the following link: www.nicholls.edu/BSN-Student-Handbook-2024-2025

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STUDENT SIGNATURE SHEET

Student Handbook

I, _____, understand that I am responsible for the
(Print Name)

information including, but not limited to, the policies and procedures regarding the Department of Nursing's *Essential Academic and Technical Standards, Retention & Progression, Clinical Practice, Uniforms, Academic Dishonesty, Professional Behavior*, etc. within the handbook. I am to refer to it as necessary as long as I am in the nursing program. I can access the BSN Student Handbook via the Nicholls State University Department of Nursing website at the following link:
www.nicholls.edu/BSN-Student-Handbook-2024-2025

Signature _____

Date _____

Confidentiality Statement

I, _____, will maintain strict patient confidentiality
(Print Name)

at all times. Patient confidentiality begins as soon as the patient's name is known, and never ends. Patient confidentiality includes giving out information or acknowledging the admission of the patient to a medical facility. Patient confidentiality includes information obtained directly from the patient or significant others, information documented in the patient's medical records, information discussed during pre- and post-conferences, results of assessments, tests, lab, x-ray, and all pertinent information.

Signature _____

Date _____

Hold Harmless Statement

I, _____, agree to indemnify and hold harmless, and
(Print Name)

protect and defend Nicholls State University, the University of Louisiana System, the Health Care Facility, and their agents, officers, employees and servants from any and all claims, demands, expenses and liability arising out of any injury, alleged injury or death to any person or damage, loss or destruction of any property which may occur or which in any way arises out of any acts or omissions on behalf of Nicholls State University, the University of Louisiana System, and/or the Health Care Facility, their agents, officers, servants, employees, or contractors.

Signature _____

Date _____

Health Insurance Signature Statement

As nursing students may be exposed to a number of communicable diseases while caring for clients in clinical settings, they may be at a higher risk than other University students for contracting a communicable disease. For this reason, the Department of Nursing requires all students enrolled in clinical nursing courses to retain a health/hospitalization insurance policy and provide proof of coverage. I understand that at all times while enrolled in clinical nursing courses, I must carry valid health/hospitalization insurance coverage.

Signature _____

Date _____

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VISION, MISSION/PHILOSOPHY, AND VALUES STATEMENT

Vision:

To be recognized as an innovative leader in the educational preparation of Baccalaureate Nurses.

Mission/Philosophy:

The mission of the Bachelor of Science in Nursing (BSN) Program at Nicholls State University is consistent with the mission statements and goals of the University, the School of Nursing, and the Department of Nursing. The BSN Program is dedicated to offering a state approved and nationally accredited program of study designed to prepare graduates for registered nurse licensure and ultimately to communicate and practice safe, patient-centered, evidence-based care across the lifespan, within a dynamic and complex healthcare system. The mission is further realized by faculty who are committed to teaching through partnership in order to prepare leaders in nursing who are socially responsible, caring, and engaged citizens. Faculty facilitate commitment to the teaching-learning process and lifelong learning by utilizing excellence in teaching, research, and service in a personalized, culturally rich, and vibrant learning environment.

Values:

The BSN program supports and embraces the Nicholls State University core values:

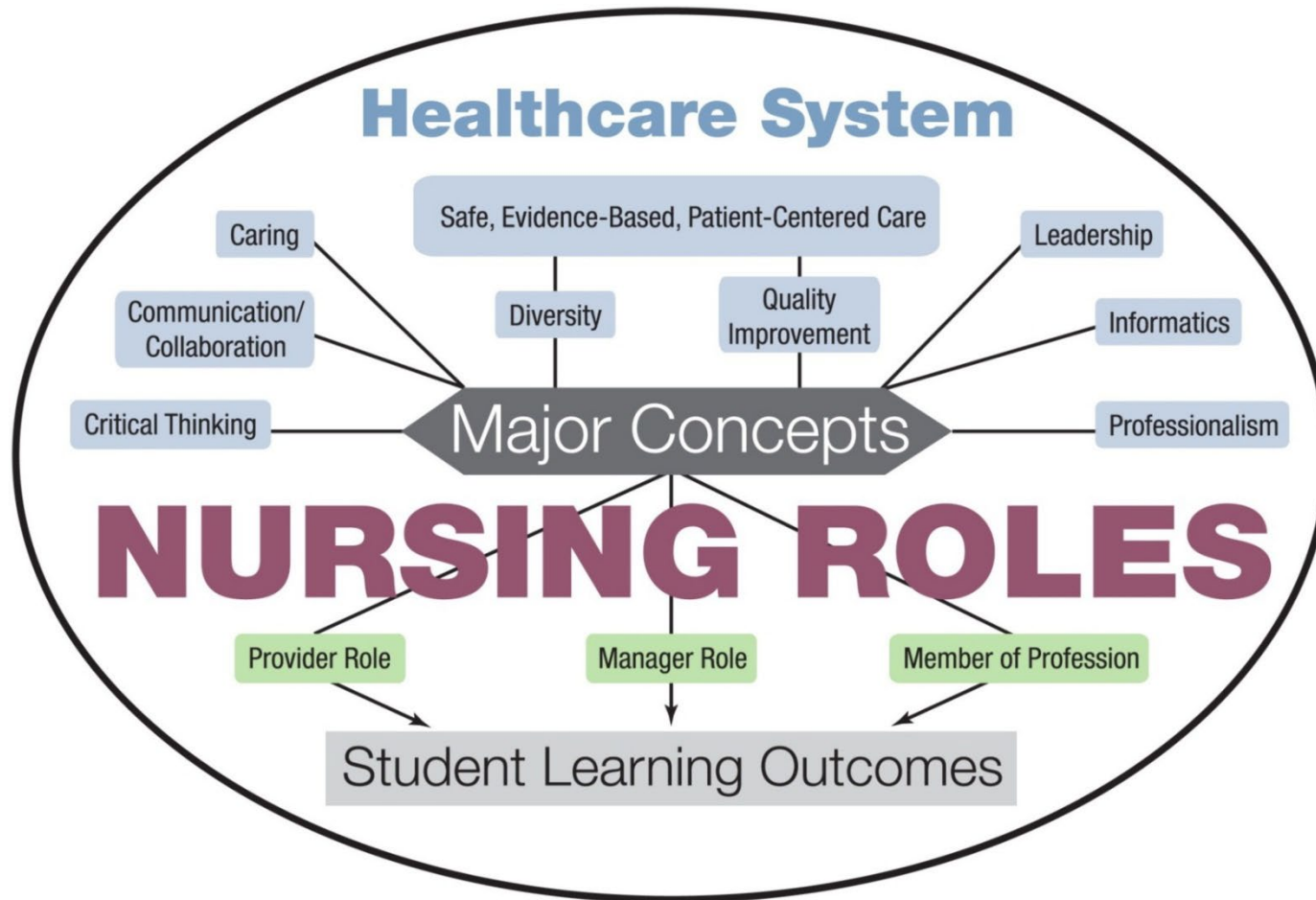
- **Civic Responsibility** – We use our time and talents to serve our community, recognizing that service to others is the cornerstone of nursing.
- **Diversity** – We respect differences among members of society by providing a nurturing and open minded environment.
- **Excellence** – We strive to achieve the highest quality in all endeavors. We strive for excellence in teaching, research, and service, and empowerment through learning.
- **Integrity** – We strive to be fair and truthful in all instances.
- **Leadership** – We are good stewards and representatives of the university because we value our collective role as a regional leader and model for all we serve.
- **Respect** – We commit to the customs and amenities of a civil society. We respect the rights of others and respond sincerely to the needs and interests of our constituents.
- **Responsibility** – We are responsible for our actions. We adhere to the doctrine of individual accountability in all our activities and contributions.
- **Caring** – We treat others with empathy and openness in all our encounters while respecting each one's individuality.

- **Professionalism** – We strive to demonstrate integrity in all our actions and to be committed and accountable to our stakeholders.
- **Safety** – We commit to mitigating error through system analysis, quality improvements, and personal accountability and responsibility.

“Professional values and their associated behaviors are foundational to the practice of nursing. Inherent in professional practice is an understanding of the historical, legal, and contemporary context of nursing practice. Professionalism is defined as the consistent demonstration of core values evidenced by nurses working with other professionals to achieve optimal health and wellness outcomes in patients, families, and communities by wisely applying the principles of altruism, excellence, caring, respect, communication, and accountability” (American Association of Colleges of Nursing, 2008, p. 26).

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CONCEPTUAL MODEL



BACHELOR OF SCIENCE IN NURSING PROGRAM CONCEPTUAL MODEL

The realities of a global society, expanding technologies, and an increasingly diverse population require nurses to master complex information, to coordinate a variety of care experiences, to use technology for health care delivery and to evaluate nursing outcomes, while assisting patients and families with managing an increasingly complex system of care. The extraordinary explosion of knowledge in all fields also requires an increased emphasis on lifelong learning. Nursing education must keep pace with these changes and prepare individuals to meet these challenges. Change, however cannot occur in isolation. Nursing education must collaborate and work in tandem with the health care delivery system to design education and practice that are truly patient-centered, interprofessional, generate quality outcomes, and are cost-effective. Significant changes must occur in both education and the practice setting to produce the delivery system desired by all constituents (American Association of Colleges of Nursing [AACN], 2007).

As a result, the BSN Program Conceptual Model embodies the major concepts of Critical Thinking; Communication/Collaboration; Caring; Safe, Evidence-Based, Patient-Centered Care; Diversity; Quality Improvement; Leadership; Informatics; and Professionalism within the greater healthcare system leading to the realization of the nursing roles of Provider and Manager of Care, Designer/Manager/Coordinator of Care, and Member of the Profession. The model reflects the relationships between and among the concepts, the roles of the nurse, and the student learning outcomes as it relates to the healthcare system. Varied teaching-learning strategies and experiences across settings lead the learner toward meeting the student learning outcomes of the BSN Program through knowledge acquisition, skill performance, and attitudes requisite of contemporary nursing.

Each of the major concepts progresses and pervades the curriculum, each building upon itself, and is reflected in the student learning outcomes for each course. These outcomes provide breadth and depth to the curriculum content. As an example, the major concept of Patient-Centered Care is inclusive, building on care of the individual, family, community, and populations. Patient-Centered Care reflects and includes actions to identify, respect, and care about patients' differences, values preferences, and expressed needs; relieve pain and suffering; coordinate continuous, safe, evidence-based care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health as it pervades each course of the curriculum. Course outcomes were derived from overarching program outcomes and establish direction for course content and teaching strategies.

Conceptual Definitions

Critical Thinking – All or part of the process of questioning, analyzing, synthesizing, interpreting, inferring, inducting and deducting, intuiting, applying, and creating. Critical thinking underlies independent and interdependent decision making.

Communication/Collaboration – Communication is a complex, ongoing, interactive process and forms the basis for building interpersonal relationships. Communication includes critical listening, critical reading, and quantitative literacy, as well as oral, nonverbal, and written communication skills. Communication requires the effective use of a wide range of media, including not only face-to-face interactions, but also rapidly evolving technological modalities. Further, communication includes effectiveness in group interactions, particularly in task-oriented, convergent, and divergent group situations. Communication requires the acquisition of skills necessary to interact and collaborate with other members of the interprofessional health care team as well as to develop a therapeutic alliance with the patient.

Caring – Caring is comprehensive and focuses on the mind, body, and spirit as well as emotions recognizing the important distinction between disease and the individual's illness experience. Nurses recognize that determining the health status of the patient within the context of the patient's values is essential in providing a framework for planning, implementing, and evaluating outcomes of care. The nurse provides care in and across all environments focusing on individual, family, community, and population healthcare.

Safe, Evidence-Based, Patient-Centered Care – Includes actions that integrate the best current evidence with clinical expertise and patient preferences to identify, respect and care about patients' differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous, safe, evidence-based care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health while minimizing the risk of harm to patients and providers through both system effectiveness and individual performance.

Diversity – The range of human variation, including age, race, gender, culture, disability, ethnicity, nationality, religious and spiritual beliefs, sexual orientation, political beliefs, economic status, native language, and geographical background and the effects these variations have on health status and response to healthcare.

Quality Improvement – The use of data to monitor the outcomes of care processes and the use of improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems.

Leadership – The ability to assess, adapt, and communicate information and ideas through self-awareness, self-management, social awareness, and relationship management to assist patients toward well-being, validate professional practice, enhance professional growth, and motivate others toward goal attainment.

Informatics – Use information and technology to communicate, manage knowledge, mitigate error, and support decision making. Information technology includes traditional and developing methods of discovering, retrieving, and using information in nursing practice. Knowledge of and effective use of information technology is necessary for evidence-based practice and for

effective, appropriate health teaching. The use of technology is critical for the documentation and evaluation of patient care outcomes.

Professionalism – The consistent demonstration of core values evidenced by nurses working with other professionals to achieve optimal health and wellness outcomes in patients, families, and communities by wisely applying principles of altruism, excellence, caring, ethics, respect, communication, and accountability. Professionalism also involves accountability for one’s self and nursing practice, including continuous professional engagement and lifelong learning.

The definitions of the Concepts and Nursing Roles were derived from the AACN Essentials of Baccalaureate Education for Professional Nursing Practice (2008) and the Quality and Safety Education for Nurses [QSEN], (2007).

Nursing Roles

Provider of Care – In this role, nurses are patient advocates and educators with an emphasis on building partnerships with patients in order to foster and support the patient’s active participation in determining healthcare decisions. The nurse uses research findings and other evidence in designing and implementing care that is multi-dimensional, high quality, and cost effective governed by professional, ethical, and legal standards.

Designer/Manager/Coordinator of Care – In this role, nurses possess the knowledge and authority to delegate tasks to other healthcare personnel as well as to supervise and evaluate those personnel. Nurses are accountable for their professional practice and image as well as for outcomes of their own and delegated nursing care. As a member of the healthcare team, nurses bring a unique blend of knowledge, judgment, skills, and caring.

Member of Profession – In this role, nurses are advocates for the patient and the profession, accountable for one’s professional identity and professional image. Nurses are knowledge workers who use a well-delineated and broad knowledge base for practice requiring strong critical thinking, clinical judgment, communication, and assessment skills. As advocates for high quality care for all patients, nurses are knowledgeable and active in the policy processes defining healthcare delivery and systems of care.

Curriculum

Sophomore Students – As the foundations of nursing care are established, students are concurrently introduced to the clinical setting and patient care as the faculty selects patients with well-defined health alterations, those illnesses which are singularly and commonly identified.

Health care is presented as goal driven by the patient and delivered by the student through directed care to promote optimal health. Through didactic presentation, the student is

introduced to healthcare system, attainability of healthcare through consumers' rights, and delivery of patient-centered care, in all settings.

Nursing and the nursing process are introduced to students. And central to the curriculum there is a focus on health promotion, disease, and injury prevention across the lifespan in relation to professionalism in nursing with legal and ethical standards emphasized. Evidence-based nursing care is activated through patient-centered care with accountability stressed in the performance of therapeutic interventions. Students are guided in the development of a nursing care map and the resources needed to complete the plan of care.

NURS 222, Basic Nursing Process I introduces key concepts underlying the nursing process, skills, and practice.

NURS 223, Basic Nursing Process II introduces the application of the nursing process, skills, and practice. The focus of nursing care is on the provision of comfort with the promotion of safety for both patient and nurse as provider of care.

Nursing 226, Health Assessment and the Adult Client introduces concepts underlying assessment and the application of basic assessment skills.

Nursing 228, Gerontic Nursing Care Concepts is a didactic course that examines nursing care of older adults; increased complexity and variations in care; increased co-morbidities and chronic illnesses and associated treatments; and methods to overcome potential barriers to communication with older adults.

NURS 241, Health and Disease Concepts for Nursing Professionals is a didactic course that examines health and disease concepts at the cellular level while using the nursing process to promote clinical nursing judgment in professional nursing practice.

NURS 242, Clinical Drug Therapy for Nursing Professionals is a didactic course that introduces basic clinical drug therapy principles through evidence-based application of the nursing process. Integrates medications, pharmacokinetics, clinical judgment, patient safety, legal, cultural and ethical considerations to prepare nursing students for safe professional clinical practice.

Nursing 255, Nursing and the Adult I introduces the student to well-defined health alterations, through selected patients, and the necessary interventions for health maintenance. The focus of the nursing process is on nursing diagnosis and planning. Students provide care to patients in the acute care setting and are introduced to primary and tertiary care through observational experiences.

Junior Students – Care is expanded to include collaboration with interprofessionals. Nursing roles are explored in more depth. Planning and implementation within the nursing process are the emphasis. In the clinical courses, students provide care to multiple patients and their

families, and collaborate with other providers to assist patients to optimal health. Planning for patient and family education is stressed, focusing on awareness of diversity.

Nursing 340, Interprofessional Concepts for Contemporary Nursing is a didactic course which emphasizes professionalism through exploration of ethical and legal matters related to nursing and the healthcare system. Issues are explored through the use of media review, value clarification, critical thinking activities, student presentations, and discussion of current health issues.

Nursing 355, Nursing and the Adult Health II focuses on health promotion, disease, and injury prevention of adult patients and their families through the use of support systems. Clinical learning takes place within acute care settings with observational experiences in primary and tertiary healthcare settings.

Nursing 371, Nursing and the Childbearing Family focuses on the newborn, childbearing adult, immediate and extended family and the adaptive processes of the family unit. Clinical learning is facilitated through the use of primary and secondary healthcare delivery systems with observational experiences in both primary and tertiary settings. Use of support systems focusing on health promotion, disease, and injury prevention is stressed.

Nursing 381, Nursing and the Childrearing Family focuses on the infant, child, adolescent, and their families including the adaptive processes of the family unit. Clinical learning is facilitated through the use of a variety of settings in the healthcare delivery systems. Use of support systems focusing on health promotion, disease, and injury prevention is stressed.

Senior Students – Healthcare delivery is coordinated with agencies targeting health promotion, disease, and injury prevention. The nursing process is utilized to assist in the management and direction of care with a focus on implementation and evaluation. Students work with patients of varying ages in primary, secondary, and/or tertiary care settings.

Nursing 400, Mental Health Nursing focuses on the mental health needs of the patient and the promotion of optimal mental health. The emphasis of nursing care is on therapeutic communications skills and therapeutic use of self.

Nursing 417, Professional Nursing Practice incorporates the experiences of the Registered Nurse while emphasizing professionalism through exploration of ethical and legal matters related to Nursing and the healthcare system. Issues are explored through the use of media review, value clarification, critical thinking activities, student presentation, on-line discussion, and field experiences.

Nursing 420, Community Health Nursing incorporates a family-centered, community-based nursing process. Community demographics, in conjunction with public health sciences and resources, are stressed for health care delivery.

Nursing 422, Nursing Research and Evidence for Best Practice is a didactic course which explores the language of nursing research and critical analysis of nursing research, and application of evidence-based research findings in clinical practice.

Nursing 427, Nursing Leadership/Management is a didactic course that focuses on the role of the nurse as a leader and manager in affecting change in health promotion, disease, and injury prevention for patients of all ages in various health care settings. Group dynamics, integration of professional nursing roles with an emphasis on member of profession, knowledge of health care trends and evidence-based practice are stressed.

Nursing 428, Preceptorship Experience in Professional Nursing is designed to merge theory, research, and practical application to management of health care team to provide competent nursing care incorporating critical thinking and decision-making skills.

Nursing 429, Synthesizing the NCLEX-RN® is a didactic course that is designed to offer students a structured yet individualized approach to national licensure examination preparation with a focus on clinical reasoning and clinical judgment.

Nursing 435, Informatics for Health Care Providers is a didactic course that emphasizes informatics processes and technologies used to manage and improve the delivery of safe, high-quality, and efficient health care services in accordance with best practice and professional and regulatory standards.

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COGNATE COURSE DEVELOPMENT

The core nursing curriculum builds upon the supporting courses consisting of sciences, humanities, languages, and the arts. The science courses, consisting of human anatomy and physiology (BIOL 114, 115, 116, 117), microbiology (BIOL 205), and chemistry (CHEM 109) lay the foundation for understanding the human body, its processes and functioning, and threats to its stability. English composition courses, both at the fundamental (ENGL 101, 102) and advanced levels (ENGL 468), teach important communication skills in the written format that support later nursing documentation skills as well as enhancing the student's ability to complete nursing course written projects. Humanities such as history and literature, and fine arts lay the foundation for deeper understanding of nursing theory and the history of nursing and health care. Algebra (MATH 101) or Contemporary Math/Quantitative Analysis (MATH 117) and Statistics (MATH 214) courses support the understanding of many complex nursing functions including medication administration, patient fluid volume status, and evidence-based nursing practice. Psychology 101 begins the introduction into understanding the human mind that is built upon in NURS 400, Mental Health Nursing. Sociology 204, Cultural Diversity in America, supports understanding of cultures and populations in an increasingly diverse society both at the patient peer level. Students are required to complete Office Information Systems (OIS) 200 as a prerequisite course to the BSN clinical sequence. This course includes the major Microsoft applications for data entry, storage, retrieval, and manipulation for statistical purposes thereby providing a foundation to understand electronic medical records (EMRs) and other patient data base applications. A University prep course (UNIV 101) helps students to begin the adjustment to college life by promoting an understanding of the learning process and through engaging in career exploration. A majority of the supporting courses are completed in the student's first two semesters and comprise the first 35 hours (freshman year) of the BSN curriculum, providing an assessment of the student's academic ability and the basis by which students are evaluated for potential acceptance into the clinical sequence.

ADULT LEARNING THEORY

- Adults will commit to learning when the goals and objectives are considered realistic and important to them. Application in the 'real world' is important and relevant to the adult learner's personal and professional needs.
- Adult learners need to see that the professional development learning and their day-to-day activities are related and relevant.
- Adult learners need direct, concrete experiences in which they apply the learning in real work.
- Adult learning has ego involved. Professional development must be structured to provide support from peers and to reduce the fear of judgment during learning.
- Adults need to receive feedback on how they are doing and the results of their efforts. Opportunities must be built into professional development activities that allow the learner to practice the learning and receive structured, helpful feedback.
- Adults need to participate in small-group activities during the learning to move them beyond understanding to application, analysis, synthesis, and evaluation. Small-group activities provide an opportunity to share, reflect, and generalize their learning experiences.
- Adult learners come to learning with a wide range of previous experiences, knowledge, self-direction, interests, and competencies. This diversity must be accommodated in the professional development planning.
- Transfer of learning for adults is not automatic and must be facilitated. Coaching and other kinds of follow-up support are needed to help adult learners transfer learning into daily practice so that it is sustained.
- Adults are *autonomous* and *self-directed*. They need to be free to direct themselves. Their teachers must actively involve adult participants in the learning process and serve as facilitators for them. They should allow the participants to assume responsibility for presentations and group leadership. They have to be sure to act as facilitators, guiding participants to their own knowledge rather than supplying them with facts. Finally, they must show participants how the class will help them reach their goals (e.g., via a personal goals sheet).

- Malcolm Knowles

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PROGRAM AND COURSE STUDENT LEARNING OUTCOMES

Program Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes
The graduate should be able to:	By the end of N222, the student should be able to:	By the end of N223, the student should be able to:	By the end of N226, the student should be able to:
1. Demonstrate the ability to provide quality, safe, patient-centered, evidence-based care governed by professional, ethical, and legal standards in all settings and at all levels of health.	1. Identify knowledge of the nursing process while demonstrating respect for patient preferences, values, and needs to provide safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards in all settings and at all levels of health.	1. Demonstrate knowledge of the nursing process while demonstrating respect for patient preferences, values, and needs to provide safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards in all settings and at all levels of health.	1. Demonstrate a knowledge base of the assessment of the adult patient while incorporating safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards.
2. Incorporate information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.	2. Identify how informational and clinical technology are essential tools in critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.	2. Demonstrate how informational and clinical technology are essential tools in critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.	2. Discuss how the assessment of the adult patient utilizes information and technology as essential tools in critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.
3. Integrate the three roles of provider of care, designer/manager/coordinator of care, and member of the profession in all areas of nursing practice with a commitment to lifelong learning through continuous self-evaluation.	3. Identify professional values for functioning as provider of care, designer/manager/coordinator of care, and member of the profession in all areas of nursing practice with a commitment to lifelong learning through continuous self- evaluation.	3. Discuss professional values for functioning as provider of care, designer/manager/coordinator of care, and member of the profession in all areas of nursing practice with a commitment to lifelong learning through continuous self- evaluation.	3. Identify the three roles of provider of care, designer/manager/coordinator of care, and member of the profession necessary to assess health needs in all areas of nursing practice with a commitment to lifelong learning through continuous self-evaluation.
4. Analyze the health care environment and its impact to determine patient safety needs.	4. Identify risks to patients and providers in the health care environment and its impact in order to determine patient safety needs.	4. Describe risks to patients and providers in the health care environment and its impact in order to determine patient safety needs.	4. Recognize risk factors during an adult assessment and their impact to determine patient safety needs.
5. Function effectively within organizational systems as a leader in nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care.	5. Identify the nursing knowledge and skills necessary to work within organizational systems as a leader in nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care.	5. Recognize the nursing knowledge and skills necessary to work within organizational systems as a leader in nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care.	5. Identify knowledge and skills while functioning as an inter-professional team member within an organizational system for the collection of assessment data that fosters open communication, mutual respect, and shared decision making to provide quality care.
6. Value the impact of economic and political dynamics in the context of health care for participation and contribution in the shaping of health care policy.	6. Discuss the impact of legal and ethical responsibilities on economic and political dynamics in the context of health care and participates in the shaping of health care policy.	6. Recognize the impact of legal and ethical responsibilities on economic and political dynamics in the context of health care and participates in the shaping of health care policy.	6. Describe the impact of economic and political dynamics on assessed needs in the context of health care and participate in the shaping of health care policy.

Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes
By the end of N228, the student should be able to:	By the end of N241, the student should be able to:	By the end of N242, the student should be able to:	By the end of N255, the student should be able to:
1. Identify a knowledge base regarding the care of older adults in providing quality, safe, patient-centered, evidence-based care governed by professional, ethical, and legal standards.	1. Identify physiological principles and how disease process impacts safe, quality, patient-centered, evidence-based nursing care in all settings.	1. Identify how pharmacology principles impact safe, quality, patient-centered, evidence-based nursing care in all settings.	1. Initiate safe, quality, patient-centered that is evidence-based and governed by professional, ethical, and legal standards in the adult acute care setting.
2. Determine therapeutic nursing interventions in the care of older adults incorporating information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.	2. Interpret information using scientific reasoning and critical thinking to support safe nursing clinical judgment.	2. Interpret information and technology using evidence-based nursing and critical thinking to support safe nursing clinical judgment when utilizing pharmacology principles.	2. Interpret information and technology using critical thinking for improved communication to manage care, mitigate errors, and support decision-making at the bedside.
3. Explore the three roles of provider of care, designer/manager/ coordinator of care, and member of the profession in nursing practice of older adults with a commitment to lifelong learning through continuous self-evaluation.	3. Recognize the role of provider of care, designer/manager/coordinator of care, and member of the profession in the healthcare setting with a commitment to scientific reasoning and life-long learning through self-evaluation.	3. Recognize the role of provider of care, designer/manager/coordinator of care, and member of the profession in the healthcare setting with a commitment to safe pharmacology practices and life-long learning through self-evaluation.	3. Recognize their role as provider of care, designer/manager/coordinator of care, and member of the profession in the adult acute care setting with a commitment to lifelong learning through continuous self-evaluation.
4. Analyze strategies to prevent risk and promote quality and safety in the nursing care of older adults.	4. Identify key disease concepts to determine patient care needs among diverse patient populations in the healthcare setting.	4. Describe the impact of safe pharmacology principles to determine patient care needs among diverse patient populations in the healthcare setting.	4. Describe the impact the acute care environment has on patient safety needs.
5. Demonstrate leadership in inter-professional communication in the care of older adults fostering mutual respect and shared decision making.	5. Recognize disease processes and its impact on inter-professional teams to provide quality patient care.	5. Recognize safe pharmacology principles and its impact on inter-professional teams and shared decision-making to provide quality patient care.	5. Provide quality care in an acute care setting while recognizing organization systems and the leadership role of the interprofessional team, as well as, utilizing effective communication skills, mutual respect, and shared decision-making.
6. Identify actual or potential mistreatment of older adults including economic and political influences impacting care.	6. Discuss the impact of economic factors regarding disease process and how it influences nursing care.	6. Discuss the impact of economic, legal, and ethical factors regarding clinical pharmacology and how it influences nursing care.	6. Recognize the impact of economics and political dynamics on vulnerable populations and the importance of a nurse advocate on issues concerning health care delivery, promoting safety, and quality in practice.

Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes
By the end of N340, the student should be able to:	By the end of N355, the student should be able to:	By the end of N371, the student should be able to:	By the end of N381, the student should be able to:
1. Demonstrate the impact nursing theory has on the provision of safe, quality, patient-centered, evidence-based care in all settings and at all levels of health.	1. Demonstrate safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards that contribute to competent nursing care to adults and their families in the acute care setting.	1. Demonstrate quality, safe, patient-centered, evidence-based care governed by professional, ethical, and legal standards for the obstetric patient and the childbearing family.	1. Demonstrate safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards in all pediatric settings.
2. Apply critical thinking skills utilizing information and technology to manage knowledge to foster quality improvement, mitigate error, and support decision making.	2. Analyze informatics and technologies using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making while providing patient centered care to adults.	2. Analyze information and technology while caring for obstetric patients and their families by using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.	2. Analyze information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making when caring for the child and childrearing family.
3. Refine the three roles of provider of care, designer/manager/coordinator of care, and member of the profession.	3. Distinguish the three roles of the provider of care, designer/manger/coordinator of care, and member of the profession in adult care with a commitment to academic achievement through lifelong learning and self-appraisal.	3. Distinguish the three roles of provider of care, designer/manager/coordinator of care, and member of the profession in the area of nursing and the childbearing family with a commitment to lifelong learning through continuous self-evaluation.	3. Distinguish the three roles of provider of care, designer/manager/ coordinator of care, and member of the profession in pediatric nursing practice with a commitment to lifelong learning through continuous self-evaluation.
4. Evaluate the health care environment to determine changes that impact patient safety.	4. Examine the health care environment and its impact on health to in order to determine appropriate patient safety needs in the acute care setting.	4. Examine the health care environment specific to the childbearing patient and their families and as well its impact in order to determine patient safety needs.	4. Examine the health care environment and its impact in order to determine pediatric patient and family safety needs.
5. Discuss the impact open communication, mutual respect, and shared decision-making has on fostering nursing and inter-professional teams and improving the quality of care provided.	5. Prioritize nursing care of multiple patients with several health care alterations with members of the inter-professional team while fostering open communication and mutual respect to promote quality care in the acute care setting.	5. Prioritize as a leader in nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care to childbearing patients and their families.	5. Prioritize nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care to pediatric patients.
6. Determine the importance of the impact economic and political dynamics has on the health care environment and initiates participation in shaping health care policy.	6. Distinguish the impact of economic and political dynamics on the healthcare system as it relates to the acute care setting and advocate for diverse populations in health care policy development.	6. Distinguish the impact of economic and political dynamics in the context of health care and participate in the shaping of health care policy as it relates to the obstetric patient and the childbearing family.	6. Distinguish the impact of economic and political dynamics in the context of pediatric health care and participates in the shaping of health care policy.

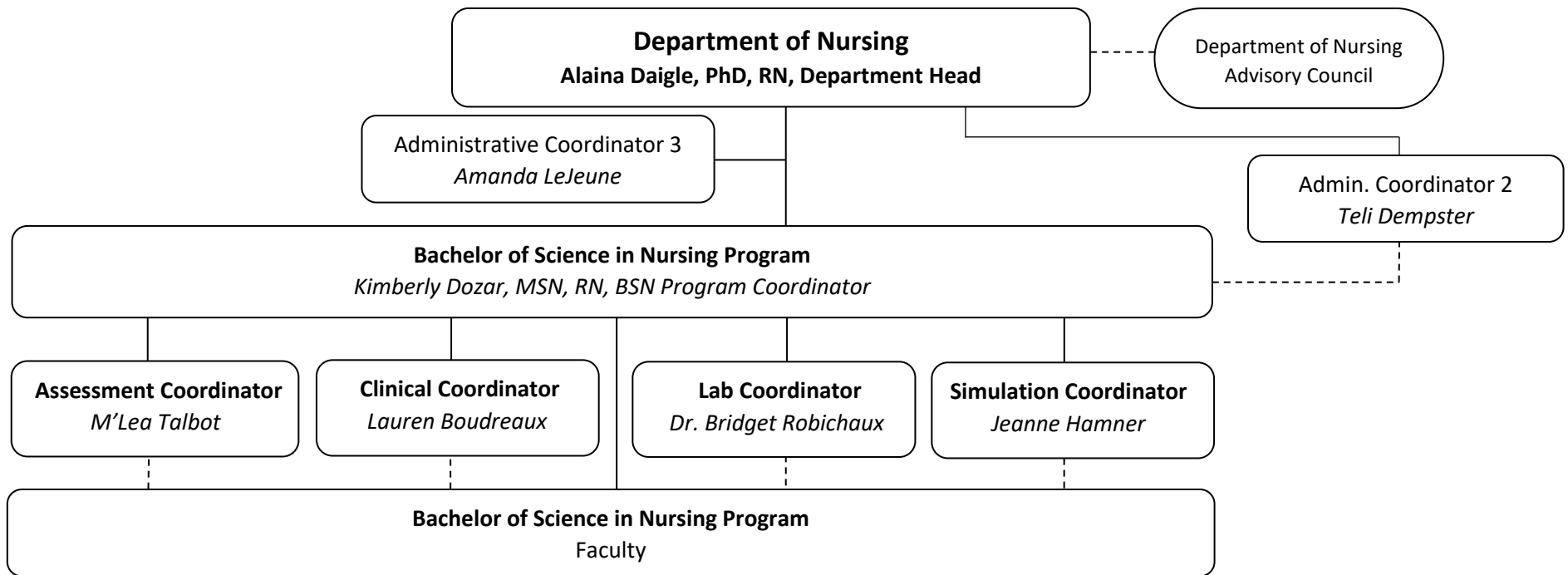
Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes
By the end of N400, the student should be able to:	By the end of N420, the student should be able to:	By the end of N422, the student should be able to:
1. Provide safe, quality, patient-centered, evidence-based care for patients with mental health needs governed by professional, ethical, and legal standards in all settings and at all levels of health.	1. Provide safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards in the community setting with the focus on prevention.	1. Evaluate the evidence to provide quality, safe, patient-centered, evidence-based care governed by professional, ethical and legal standards in all settings and at all levels of health.
2. Synthesize information and technology using critical thinking for clinical reasoning and quality improvement to form a basis for mental health nursing practice to communicate, manage knowledge, mitigate error, and support decision making.	2. Incorporate information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making in the community setting focusing on at risk groups.	2. Interpret the content in a research report by using information and technology for clinical reasoning, quality improvement, mitigation of errors, and support decision making.
3. Incorporate the three roles of provider of care, designer/ manager/coordinator of care, and member of the profession in all areas of mental health nursing practice with a commitment to lifelong learning.	3. Integrate the three roles of provider of care, designer/manager/ coordinator of care, and member of the profession in the community setting with a commitment to lifelong learning through continuous self-evaluation.	3. Value the ideal of lifelong learning to support excellence in nursing practice and nursing research.
4. Evaluate the mental health care environment and its impact in order to determine patient safety needs.	4. Analyze the health care environment and its impact on the community and at risk groups.	4. Describe the relationship between evidence-based nursing research and the development of the profession of nursing to impact patient safety needs.
5. Lead mental health nursing and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality mental health care.	5. Analyze the leadership role of the community health nurse within organizational systems and inter-professional teams fostering open communication, mutual respect, and shared decision making to provide quality care.	5. Relate the process of research to the information contained in a research report as a basis for acquiring, developing, critiquing, and conveying health information to the interprofessional team.
6. Critique the impact of economic and political dynamics in the context of mental health care and participate in the shaping of mental health care policy.	6. Critique the impact of economic, political and regulatory dynamics in the context of community health, and participate in the shaping of health care policy.	6. Critique the components of research reports, which focus on improvement of health care delivery and the shaping of health care policy.

Course Student Learning Outcomes	Course Student Learning Outcomes	Course Student Learning Outcomes
By the end of N427, the student should be able to:	By the end of N428, the student should be able to:	By the end of N429, the student should be able to:
1. Provide safe, quality, patient-centered, evidence-based care as a leader and manager governed by professional, ethical, and legal standards in all settings and at all levels of health.	1. Provide patient-centered, evidence-based care governed by professional, ethical, and legal standards that contributes to safe and high quality outcomes in all settings.	1. Determine safe, quality, patient-centered, evidence-based care governed by professional, ethical, and legal standards in all settings and at all levels of health.
2. Synthesize information and technology at the organizational level using critical thinking for clinical reasoning and quality improvement as a leader and manager to communicate, manage knowledge, mitigate error, and support decision making.	2. Synthesize information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making with emphasis on time management.	2. Synthesize information and technology using critical thinking for clinical reasoning and quality improvement to communicate, manage knowledge, mitigate error, and support decision making.
3. Incorporate the three roles of provider of care, designer/manager/ coordinator of care, and member of the profession at the administrative level in all areas of nursing practice with a commitment to lifelong learning through continuous self-evaluation.	3. Integrate the roles of provider of care, designer/manager/ coordinator of care, and member of the profession to maintain a commitment to the highest standards in clinical practice and all academic endeavors and professional role development.	3. Differentiate the three roles of provider of care, designer/manager/ coordinator of care, and member of the profession in all areas of nursing practice with a commitment to lifelong learning through continuous self-evaluation.
4. Evaluate the organizational health care environment and its impact to determine and manage patient safety needs.	4. Evaluate the health care environment and its impact to determine patient safety needs in providing and managing nursing care for diverse groups.	4. Evaluate the health care environment and its impact to determine and manage patient safety needs.
5. Lead nursing and inter-professional teams at the organizational level fostering open communication, mutual respect, and shared decision making to provide quality care.	5. Lead the professional health care team as well as, patients and families in shared decision making to provide quality care through collaboration, mutual respect and effective communication.	5. Develop skills to function effectively as a nurse within the inter-professional team and at the organizational level fostering open communication, mutual respect, and shared decision making to provide quality care.
6. Critique the impact of economic and political dynamics in the context of health care and participate in the shaping of health care policy at the organizational level.	6. Critique the impact of economic and political dynamics of various patient populations and participate in the shaping of health care policy.	6. Examine the impact of economic and political dynamics in the context of health care and participate in the shaping of health care policy at the organizational level.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

ORGANIZATIONAL CHART

The Bachelor of Science in Nursing Program Organizational Chart depicts the flow of communication, areas of responsibility and accountability, and the structural framework of the BSN faculty.



Adopted: 6/92

Revised: 8/94; 8/95; 8/01; 8/02; 1/03; 7/03; 7/04; 7/05; 7/06; 7/07; 7/10; 4/11; 8/11; 5/12; 07/14; 08/15; 8/16; 8/17; 8/18; 7/19; 8/20; 8/2021; 9/2022; 11/2022; 1/2023; 7/2024

Reviewed: 8/96; 8/97; 8/98; 8/99; 8/00; 7/08; 7/09; 7/10; 7/2023

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APPROVAL AND ACCREDITATION

The Bachelor of Science in Nursing Program holds full approval status by the Louisiana State Board of Nursing (LSBN). For further information contact:

Louisiana State Board of Nursing
17373 Perkins Road
Baton Rouge, LA 70810
1-225-755-7500
<http://www.lsbn.state.la.us>

The baccalaureate degree program in nursing at Nicholls State University is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.

LOUISIANA STATE BOARD OF NURSING'S POLICIES

GUIDELINES FOR ENROLLMENT IN A CLINICAL NURSING COURSE

I. Statutory Authority in the Nurse Practice Act:

Louisiana Revised Statutes 37:911 et. Seq., provides for the regulation of students seeking permission to enroll in clinical nursing courses in nursing programs in Louisiana preparing candidates for Registered Nurse licensure. Included in this authority is a criminal history record information check in accordance with R.S. 37:918 and 920.1., and is effective for students seeking admission for August 1, 2005 and thereafter.

The student must meet the related criteria for licensure by examination as stated in L.R.S. 37:920.A. (1), (a) – (g). These criteria can be found here: <http://legis.la.gov/Legis/Law.aspx?d=94509>, and include:

§920. Licensure; qualifications; examination; renewal; temporary permits

- A. (1) The board shall issue a license to each applicant who applies for licensure as a registered nurse or an advanced practice registered nurse who files an application upon a form and in such manner as the board prescribes, accompanied by such fee as required in R.S. 37:927, and who furnishes evidence to the board that he:
 - (a) Is of good moral character.
 - (b) Has completed the requirements of a nursing education program approved by the board which prepares him for initial licensure as a registered nurse.
 - (c) Passes an examination to the satisfaction of the board.
 - (d) Has completed certain course work as required by the board.
 - (e) Is not in violation of this Part and the rules and regulations.
 - (f) Has committed no acts or omissions which constitute grounds for disciplinary action as defined in R.S. 37:921, or if found guilty of committing such acts or omissions, the board finds, after investigation, that sufficient restitution, rehabilitation, and education have occurred.
 - (g) Is proficient in the English language if he graduated from a nursing education program offered in a foreign country.

II. **§3324. Permission to Enroll or Progress in Undergraduate Clinical Nursing Courses**

- A. Approval by the board is required prior to student enrollment in undergraduate clinical nursing courses.
- B. Requirements to enroll/progress in clinical nursing courses include:
 - 1. evidence of good moral character;
 - 2. eligibility for admission to clinical nursing courses at a program approved by the board;
 - 3. verification of eligibility for admission by the chief nurse administrator or designee of the administrative nursing unit;

4. a complete application form to include the permission to obtain criminal history record information as specified in LAC 46:XLVII.3330, fees and costs as may be incurred by the board in requesting and obtaining state and national criminal history record information on the applicant and remittance of the required fee as specified in LAC 46:XLVII.3341 prior to the deadline date established by the board;
 5. freedom from violations of R.S. 37:911 et seq., or of grounds for delay/denial of permission to enroll in clinical nursing courses as specified in LAC 46:XLVII.3331 or other administrative rules;
 6. freedom from acts or omissions which constitute grounds for disciplinary action as defined in R.S. 37:921 and LAC 46:XLVII.3403 and 3405; or if found guilty of committing such acts or omissions, the board finds, after investigation, that sufficient restitution, rehabilitation, and education has occurred.
- C. Applicants who falsify the application or fail to disclose information that should have been reported to the board will be denied enrollment/progression in clinical nursing courses and will not be eligible to resubmit an application until completion of the disciplinary process. Falsifying an application shall result in denial of permission to enroll in clinical nursing courses or application for licensure as a registered nurse in Louisiana for a minimum of five years.
- D. Approval to enroll/progress expires upon 12 months if not enrolled in clinical nursing courses.
- E. Evidence of violation of R.S. 37:911 et seq., or of grounds for denial or delay of approval to enroll in clinical nursing courses as specified in LAC 46:XLVII.3331 or acts or omissions which constitute grounds for disciplinary action as defined in R.S. 37:921 and LAC 46:XLVII.3403 and 3405 shall result in immediate denial to progress in clinical nursing courses until completion of the disciplinary process.
- F. Incidents which constitute grounds for disciplinary action that occur after initial approval is granted and which may affect progression in clinical nursing courses shall be immediately disclosed on the clinical nursing student disclosure form.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Nursing, LR 42:753 (May 2016).

III. §3325. Licensure by Examination

- A. In order to be licensed as a registered nurse in Louisiana, all registered nurse applicants shall take and pass the National Council Licensure Examination for Registered Nurses (NCLEX-RN).
1. The licensing examination (NCLEX-RN) shall be authorized by the Board of Nursing in accordance with the contract between the board and the National Council of State Boards of Nursing, Inc.
 2. Each examination shall be given under the direction of the executive director of the board or another designee of the board.

3. Individual results from the examination shall be released to individual candidates and to the director of their nursing education program. Aggregate results are published for statistical purposes.
- B. Requirements for eligibility to take the NCLEX-RN in Louisiana include:
1. evidence of good moral character;
 2. successful completion of a nursing education program approved by the board, or successful completion of a nursing education program located in another country or approved by another board of nursing which program meets or exceeds the educational standards for nursing education programs in Louisiana;
 3. recommendation by the director of the school of nursing;
 4. completion of the application form to include criminal records check as directed by the executive director of the board;
 5. remittance of the required fee;
 6. freedom from violations of R.S. 37:911 et seq., or of §3331 or other administrative rules;
 7. freedom from acts or omissions which constitute grounds for disciplinary action as defined in R.S. 37:921 and §§3403 and 3405; or if found guilty of committing such acts or omissions, the board finds, after investigation, that sufficient restitution, rehabilitation, and education have occurred; and
 8. evidence of proficiency in the English language if a graduate of a nursing program offered in a foreign country. Graduates of foreign nursing schools (except Canadian schools) must produce evidence of successful completion of the Commission on Graduates of Foreign Nursing Schools (COGNFS) Examination.
- C. Requirements for retaking the NCLEX-RN: Applicants for licensure by examination shall pass the exam within four attempts and within four years of graduation.
- D. Applicants who falsify the application for examination will be denied licensure in accordance with LAC 46:XLVII.3331.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918, 37:920 and 37:921.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Nursing, LR 7:77 (March 1981), amended by the Department of Health and Hospitals, Board of Nursing, LR 21:804 (August 1995), LR 23:960 (August 1997, LR 24:1293 (July 1998).

IV. §3330. Criminal History Record Information

- A. Authority of the Louisiana State Board of Nursing (board). The board derives its authority to obtain criminal history record information from R.S. 37:920.1.
- B. The following applicants for licensure or permission to enroll in clinical nursing courses shall submit to a criminal history record information check:
 1. registered nurse by examination;
 2. registered nurse by endorsement;
 3. advanced practice registered nurse, if records not checked in relation to the

- RN license;
 - 4. reinstatement of RN and/or APRN license, if license has not been active for five years or more;
 - 5. registered nurse students prior to enrollment in the first clinical nursing course.
- C. The board may require criminal history record information checks of the following individuals:
- 1. an applicant for any license, permit, reinstatement, or permission to enroll in clinical nursing courses if there is reason to believe there is information relative to evaluating the applicants eligibility or disqualification for licensure;
 - 2. a licensee as part of the investigation process if there is reason to believe there is information relative to eligibility or disqualification for continued licensure.
- D. The board shall require from students seeking admission to clinical nursing courses, a completed Application for Approval to Enroll in A Clinical Nursing Course and a \$20 enrollment application fee prior to the student's enrollment in a clinical nursing course.
- E. The applicant or licensee must review and sign the Authorization to Disclose Criminal History Record Information.
- F. The applicant or licensee must contact the state or local police/sheriff department and submit two fingerprint cards to be completed. The law enforcement agency may specify a designated location and fee for the completion of the fingerprint cards.
- G. The two completed fingerprint cards must be returned to the board office by the applicant or licensee with the required fee. The cards and fee will be forwarded to the Louisiana Department of Public Safety. The second card will be forwarded to the Federal Bureau of Investigations by the Louisiana Department of Public Safety.
- H. The submission of the fingerprint cards and the signed Authorization to Disclose Criminal History Record Information must be received prior to the license being processed or during the semester that the first clinical nursing course has begun.
- I. The processing of the license or the entry into clinical nursing courses may not be delayed awaiting these reports; however, future action may result if the criminal history record information so indicates. If the criminal history record reveals criminal activity which constitutes grounds for denial under R.S. 37.921. or LAC 46:XLVII.3331, then the license issued shall be recalled or the progression in clinical nursing courses may be denied.
- J. If the fingerprints are returned from the Department of Public Safety as inadequate or unreadable, the applicant, or licensee must submit a second set of fingerprints and fees, if applicable, for submission to the Department of Public Safety.
- K. If the applicant or licensee fails to submit necessary information, fees, and or fingerprints, the applicant or licensee may be denied licensure on the basis of an incomplete application or, if licensed, denied renewal, until such time as the applicant or licensee submits the applicable documents and fee.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:920.1.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Nursing, LR 26:1614 (August 2000), amended LR 30:2829 (December 2004), LR 35:1888 (September 2009).

V. §3331. Denial or Delay of Licensure, Licensure by Endorsement, Reinstatement, or the Right to Practice Nursing as a Student Nurse

A. Denial of Licensure, Licensure by Endorsement, Reinstatement, or the Right to Practice Nursing as a Student Nurse

1. Applicants for licensure, licensure by endorsement, reinstatement, or the right to practice as a student nurse shall be denied approval for licensure, for reinstatement, to receive a temporary working permit, to be eligible for NCLEX-RN, or to enter or progress into any clinical nursing course, if the applicant has pled guilty, *nolo contendere*, or “best interest of” to, or the equivalent thereto in jurisdictions other than Louisiana, or has been convicted of committing, attempting to commit, or conspiring to commit:

a. any of the following crimes:

- i. R.S. 14:28.1, solicitation for murder;
- ii. R.S. 14:30, first degree murder;
- iii. R.S. 14:30.1, second degree murder;
- iv. R.S. 14:32.6, first degree feticide;
- v. R.S. 14:34, aggravated battery;
- vi. R.S. 14:34.1, second degree battery;
- vii. R.S. 14:34.7, aggravated second degree battery;
- viii. R.S. 14:37.1, assault by drive-by shooting;
- ix. R.S. 14:42, aggravated or first-degree rape;
- x. R.S. 14:42.1, forcible or second-degree rape;
- xi. R.S. 14:43, simple or third-degree rape;
- xii. R.S. 14:43.1, sexual battery;
- xiii. R.S. 14:43.2, second degree sexual battery;
- xiv. R.S. 14:43.3, oral sexual battery;
- xv. R.S. 14:43.5, intentional exposure to AIDs virus;
- xvi. R.S. 14:44, aggravated kidnapping;
- xvii. R.S. 14:44.1, second degree kidnapping;
- xviii. R.S. 14:44.2, aggravated kidnapping of a child;
- xix. R.S. 14:45, simple kidnapping;
- xx. R.S. 14:46.2, human trafficking;
- xxi. R.S. 14:46.3, trafficking of children for sexual purposes;
- xxii. R.S. 14:52, aggravated arson
- xxiii. R.S. 14:64, armed robbery;
- xxiv. R.S. 14:64.1, first degree robbery
- xxv. R.S. 14:64.3, armed robbery use of firearm, additional penalty;
- xxvi. R.S. 14:64.4, second degree murder;

- xxvii. R.S. 14.81.1, pornography involving juveniles;
 - xxviii. R.S. 14:81.2, molestation of a juvenile or a person with a physical or mental disability;
 - xxix. R.S. 14.84.4, prohibited sexual conduct between educator and student;
 - xxx. R.S. 14.82.2 (C)(4)(5), purchase of commercial sexual activity;
 - xxxi. R.S. 14.89, crime against nature;
 - xxxii. R.S. 14.89.1, aggravated crime against nature;
 - xxxiii. R.S. 14:93.2.3, second degree cruelty to juveniles;
 - xxxiv. R.S. 14:93.3, cruelty to persons with infirmities;
 - xxxv. R.S. 14:93.5, sexual battery of persons with infirmities;
 - xxxvi. R.S. 14:128.1, terrorism; or
 - xxxvii. an equivalent crime in jurisdictions other than Louisiana; or
- b. a crime designated or defined as an “aggravated offense,” as a “criminal offense against a victim who is a minor,” as a “sexual offense,” or as a “sexual offense against a victim who is a minor,” as listed, defined, enumerated, or designated within R.S. 15:541, or any other later-enacted and comparable law(s); or an equivalent crime in jurisdictions other than Louisiana.
2. For purposes of this Section, a first offender pardon, suspension of imposition of sentence, expungement, or similar action shall not negate or diminish the applicability of this Section.
 3. Applicants who are denied licensure, licensure by endorsement, reinstatement, or the right to practice nursing as a student nurse pursuant to this Section shall not be eligible to submit a new application.
 4. These provisions of this Section shall not apply to the reinstatement of a license that has been revoked, suspended, or surrendered as a result of disciplinary action taken against a licensee by the board or which reinstatement otherwise would be subject to the provisions of LAC 46:XLVII.3415.
- B. Denial of Licensure, Reinstatement, or the Right to Practice Nursing as a Student Nurse for up to Five Years
1. Applicants for licensure, licensure by endorsement, reinstatement, or the right to practice as a student nurse shall be denied approval for licensure, for reinstatement, to receive a temporary working permit, to be eligible for NCLEX-RN, or to enter or progress into any clinical nursing course for up to five years, if the applicant has pled guilty, *nolo contendere*, or “best interest of” to, or the equivalent thereto in jurisdictions other than Louisiana, or has been convicted of committing, attempting to commit, or conspiring to commit:
 - a. felony which reflects an inability to practice nursing safely with due regard for the health and safety of clients or patients not previously mentioned or related to the aforementioned Paragraph A.1-A.1.b of this Section, or any of the following crimes:
 - i. R.S. 14:31, manslaughter;

- ii. R.S. 14:32.1, vehicular homicide;
- iii. R.S. 14:32.7, second degree feticide;
- iv. R.S. 14:34.2, battery of a police officer;
- v. R.S. 14:37, aggravated assault;
- vi. R.S. 14:37.2, aggravated assault upon a peace officer;
- vii. R.S. 14:37.4, aggravated assault with a firearm;
- viii. R.S. 14:37.7, domestic abuse aggravated assault;
- ix. R.S. 14:38.1, mingling harmful substances;
- x. R.S. 14:40.2, stalking;
- xi. R.S. 14:46.1, false imprisonment; offender armed with a dangerous weapon;
- xii. R.S. 14:55, aggravated criminal damage to property;
- xiii. R.S. 14:60, aggravated burglary;
- xiv. R.S. 14:62.8, home invasion;
- xv. R.S. 14:64.2, carjacking;
- xvi. R.S. 14:65, simple robbery;
- xvii. R.S. 14:65.1, purse snatching;
- xviii. R.S. 14:66, extortion;
- xix. R.S. 14:67.3, unauthorized use of "access card" as theft;
- xx. R.S. 14:67.11, credit card fraud by persons authorized to provide goods and services;
- xxi. R.S. 14:67.16, identity theft;
- xxii. R.S. 14:67.21, theft of assets of a person who is aged or person with a disability;
- xxiii. R.S. 14:67.22, fraudulent acquisition of a credit card;
- xxiv. R.S. 14:68.2, unauthorized use of supplemental nutrition assistance program benefits or supplemental nutrition assistance program benefit access devices;
- xxv. R.S. 14:70.1, Medicaid fraud;
- xxvi. R.S. 14:70.4, access device fraud;
- xxvii. R.S. 14:80, felony carnal knowledge of a juvenile;
- xxviii. R.S. 14:81, indecent behavior with juveniles;
- xxix. R.S. 14:81.3, computer-aided solicitation of a minor;
- xxx. R.S. 14:82.1, prostitution; persons under 18;
- xxxi. R.S. 14:82.2, purchase of commercial sexual activity;
- xxxii. R.S. 14:83, soliciting for prostitutes;
- xxxiii. R.S. 14:83.1, inciting prostitution;
- xxxiv. R.S. 14:83.2, promoting prostitution;
- xxxv. R.S. 14:84, pandering;
- xxxvi. R.S. 14:85, letting premises for prostitution;
- xxxvii. R.S. 14:86, enticing persons into prostitution;
- xxxviii. R.S. 14:92, contributing to the delinquency of a minor;
- xxxix. R.S. 14:94, illegal use of weapons or dangerous instrumentalities;
- xl. R.S. 14:102, cruelty to animals, simple;

- xli. R.S. 14:106(A)(5), obscenity (by solicitation of a person under the age of 17);
 - xlii. R.S. 14:108.1(C), aggravated flight from an officer;
 - xliii. R.S. 14:283, video voyeurism;
 - xliv. R.S. 14:283.1, voyeurism (second or subsequent conviction); or
- b. a crime involving the production, manufacturing, distribution or dispensing of a controlled dangerous substance as provided for and defined in R.S. 40:961 through 40:995, otherwise referred to as the uniform controlled dangerous substances law, or an equivalent crime in jurisdictions other than Louisiana, including without limitation:
- i. R.S. 40:962.1.1, possession of 12 grams or more of ephedrine, pseudoephedrine, or phenylpropanolamine or their salts, optical isomers, and salts of optical isomers;
 - ii. R.S. 40:962.1.2, restriction on the sale and purchase of nonprescription products containing dextromethorphan, its salts or optical isomers, and salts of optical isomers;
 - iii. R.S. 40:966, penalty for distribution or possession with intent to distribute narcotic drugs listed in schedule I; possession of marijuana, possession of synthetic cannabinoids, possession of heroin;
 - iv. R.S. 40:967, prohibited acts—schedule II, penalties;
 - v. R.S. 40:968, prohibited acts—schedule III, penalties;
 - vi. R.S. 40:969, prohibited acts—schedule IV, penalties;
 - vii. R.S. 40:970, prohibited acts—schedule V, penalties;
 - viii. R.S. 40:971, prohibited acts; all schedules;
 - ix. R.S. 40:971.1, prohibited acts; false representation;
 - x. R.S. 40:971.2, unlawfully prescribing, distributing, dispensing, or assisting in illegally obtaining controlled dangerous substances;
 - xi. R.S. 40:979, attempt and conspiracy;
 - xii. R.S. 40:981, distribution to persons under 18;
 - xiii. R.S. 40:981.1, distribution to a student;
 - xiv. R.S. 40:981.2, soliciting minors to produce, manufacture, distribute, or dispense controlled dangerous substances;
 - xv. R.S. 40:981.3, violation of uniform controlled dangerous substances law; drug free zone;
 - xvi. R.S. 40:983, creation or operation of a clandestine laboratory for the unlawful manufacture of a controlled dangerous substance; definition; penalties;
 - xvii. R.S. 40:983.1, creation or operation of a clandestine laboratory for the unlawful manufacture of controlled dangerous substance on or within one thousand feet of school property;
 - xviii. R.S. 40:989, dangerous chemical substances; butyl nitrate, nitrous oxide, and amyl nitrate; use and transference;
 - xix. R.S. 40:989.1, unlawful production, manufacture, distribution, or

- possession of hallucinogenic plants;
 - xx. R.S. 40:989.2, unlawful production, manufacturing, distribution, or possession of prohibited plant products;
 - xxi. R.S. 40:989.3, unlawful distribution of products containing *Mitragyna speciosa* to minors;
 - xxii. R.S. 40:996.6, violations (stop order); or
 - c. two or more misdemeanors which reflect an inability to practice nursing safely with due regard for the health and safety of clients or patients, including but not limited to:
 - i. R.S. 14: 35, simple battery;
 - ii. R.S. 14:37, aggravated assault;
 - iii. R.S. 14: 43, sexual battery;
 - iv. R.S. 14:59, criminal mischief;
 - v. R.S. 14:63.3, entry on or remaining in places after being forbidden;
 - vi. R.S. 14:83, soliciting for prostitutes;
 - vii. any crimes related to alcohol or drugs; or
 - d. a misdemeanor which reflects an inability to practice nursing safely with due regard for the health and safety of clients or patients where aggravating circumstances also exist, including but not limited to ongoing substance abuse or dependency, discovered as part of an investigation.
2. Applicants who are denied licensure, licensure by endorsement, reinstatement, or the right to practice nursing as a student nurse as set forth in Paragraph B.1 of this Section shall not be eligible to submit a new application until the following conditions are met:
- a. the applicant presents evidence of:
 - i. the final disposition of the criminal case involving the applicant including, if applicable, the completion of all court-ordered probation and/or parole; community supervision, restitution; and
 - ii. the applicant can practice nursing safely. The evidence may include, but not be limited to, certified court documents, comprehensive evaluations by board approved-evaluators, employer references, and other evidence of rehabilitation. Prior to requesting a board hearing, all evidence the applicant desires to be considered shall be presented to board staff; and
 - b. a hearing or conference shall be held before the board to review the evidence, to afford the applicant the opportunity to prove that the cause for the denial no longer exists, and to provide an opportunity for the board to evaluate the evidence presented and determine whether or not a new application can be submitted and considered without being subject to the mandatory delay provisions of Paragraph B.1 of this Section when no new or other grounds for such delay exist.
- C. Delay of Licensure, Licensure by Endorsement, Reinstatement, or the Right to Practice Nursing as a Student Nurse

1. Applicants for licensure, licensure by endorsement, reinstatement, and for practice as a student nurse may be delayed approval for licensure, for reinstatement, to receive a temporary working permit, to be eligible for NCLEX-RN, or to enter or progress into any clinical nursing course, if the applicant:
 - a. has a pending criminal charge involving any violence or danger to another person, or involving a crime that constitutes a threat to patient care, or one that involves drug possession, use, production, manufacturing, distribution or dispensing; or
 - b. has any pending disciplinary action or any restrictions of any nature by any licensing/certifying board in any state; or
 - c. has pled guilty, *nolo contendere*, “best interest of”, or the equivalent thereto in jurisdictions other than Louisiana, or has been convicted of committing, attempting to commit, or conspiring to commit, or allowed to participate in a pre-trial diversion program or a district attorney’s probation program in lieu of prosecution for, a crime which may not constitute grounds for denial, but nonetheless reflects the inability of the applicant to practice nursing safely; and the conditions of the court or the pre-trial diversion program have not been met; or the applicant is currently serving a court ordered probation or parole at the time the applicant submits an application; or
 - d. has been diagnosed with or treated for a physical or mental condition which may interfere with or affect the ability of the applicant to practice nursing safely;
 - e. has been diagnosed with or treated for substance dependence or substance use disorders.
2. Applicants who are delayed licensure, licensure by endorsement, reinstatement, or the right to practice nursing as a student nurse are not eligible for consideration of a new application until the following conditions are met:
 - a. if the delay is based on the existence of a pending criminal charge, the applicant shall present evidence the charge(s) has/have been dismissed, said evidence to include documents indicating the dismissal was predicated upon the applicant’s successful completion of a pre-trial diversion program, a district attorney’s probation program, or completion of conditions imposed for consideration of suspension of sentence under La. C.Cr.P. arts. 893 or 894 or their respective equivalents in jurisdictions other than Louisiana; or
 - i. if the charge results in a felony conviction, other than for the commission of a crime which constitutes grounds for denial of the application, the applicant shall present evidence of the final disposition of the criminal case involving the applicant including, if applicable, the completion of all court-ordered probation and/or parole;
 - ii. if the charge results in a misdemeanor conviction, other than for the commission of a crime which constitutes grounds for denial of the application, the applicant shall present evidence of the final disposition of the criminal case including, if applicable, the

- completion of all court ordered probation and/or parole;
- b. if the delay is based upon pending disciplinary action, the applicant shall present evidence of unencumbered license(s) or certification from all affected jurisdictions, which evidence shall prove the matter has been resolved satisfactorily; or
 - c. if the delay is based upon the existence of a physical or mental condition, the applicant shall present comprehensive psychological, psychiatric, chemical dependency and/or other appropriate medical evaluations completed with board-approved evaluators, which may include, but not be limited to, forensic evaluations with polygraph examination, and any other evidence which demonstrates the ability of the applicant to practice nursing safely;
 - d. if the delay is based on the existence of a substance use disorder or dependency and/or treatment for that disorder/dependency, the applicant shall demonstrate to the board's satisfaction continuous, on-going, and consistent sobriety and successful participation in, or completion of, all treatment recommendations, all of which shall be reviewed on a case-by-case basis;
 - e. a hearing or conference may be held before the board to review and to evaluate any evidence, to afford the applicant an opportunity to prove the cause for the delay no longer exists, or the cause is being treated successfully, or is in remission, and to provide an opportunity for the board to determine whether or not a new application may be submitted and considered without being subject to the delay provisions of Paragraph B.1 of this Section when no new or other grounds for such a delay exist.
3. The provisions of this Section shall not apply to the reinstatement of a license which has been revoked, suspended, or surrendered as a result of disciplinary action taken against a licensee by the board or which reinstatement otherwise would be subject to the provisions of LAC 46:XLVII.3415.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918, 920 and 921.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Nursing, LR 23:961 (August 1997), repromulgated LR 24:1293 (July 1998), amended LR 27:202 (February 2001), LR 38:818 (March 2012), amended by the Department of Health, Board of Nursing, LR 44:1010 (June 2018).

VI. §3403. Proceedings against a Registered Nurse, Advanced Practice Registered Nurse, Registered Nurse Applicant, APRN Applicant or a Student Nurse

- A. The board may deny, revoke, suspend, probate, limit, reprimand, or restrict any license to practice as a registered nurse or an advanced practice registered nurse, impose fines, assess costs, or otherwise discipline an individual in accordance with R.S. 37:921-925 and the board may limit, restrict, delay or deny a student nurse from entering or continuing the clinical phase of education in accordance with R.S. 37:921-925.

- B. Every individual subjected to disciplinary proceedings shall be afforded an opportunity for a hearing before the board or its duly appointed hearing officer or committee.
- C. A complaint that an individual has engaged in, or is engaging in, any conduct proscribed by R.S. 37:921, may be made by any person or the board. Such complaints shall be in writing.
- D. Grounds for disciplinary proceedings are specified in R.S. 37:921:
 1. is guilty of selling or attempting to sell, falsely obtaining, or furnishing any nursing diploma or license to practice as a registered nurse;
 2. is convicted of a crime or offense which reflects the inability of the nurse to practice nursing with due regard for the health and safety of clients or patients or enters a plea of guilty or nolo contendere to a criminal charge regardless of final disposition of the criminal proceeding, including, but not limited to, expungement or nonadjudication;
 3. is unfit or incompetent by reason of negligence, habit, or other cause;
 4. has demonstrated actual or potential inability to practice nursing with reasonable skill and safety to individuals because of use of alcohol or drugs; or has demonstrated inability to practice nursing with reasonable skill and safety to individuals because of illness or as a result of any mental or physical condition;
 5. is guilty of aiding or abetting anyone in the violation of any provisions of this Part;
 6. is mentally incompetent;
 7. has had a license to practice nursing or to practice as another health care provider denied, revoked, suspended, or otherwise restricted;
 8. is guilty of moral turpitude;
 9. violated any provision of this Part.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918, R.S. 37:921, R.S. 37:922 and R.S. 37:923.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Nursing, LR 7:74 (March 1981) amended by the Department of Health and Hospitals, Board of Nursing, LR 24:1293 (July 1998), LR 26:1614 (August 2000), LR 31:1585 (July 2005).

VII. Responsibility of Student to Notify LSBN:

If a student is admitted to the clinical sequence of the program, any subsequent disciplinary action, arrest, criminal charge or conviction, addiction, or impairment shall be reported immediately to the Department Head and the Board. All required documents shall be forwarded to the Board for evaluation in determining the student's eligibility to continue in the clinical sequence of the program. As per the "Instructions for Application to Enroll in Clinical Nursing Courses":

Students approved by LSBN to enroll and progress in the clinical portion of their nursing program and all licensees are responsible for reporting incidents and events as required in

rules including but not limited to provisions in section 3405 regarding Definitions of Terms such as failing to report and section 3915 regarding Standards of Practice (i.e. standard 7).

Revised: 8/17; 7/19; 7/2020

Reviewed: 7/14, 7/15, 8/16; 6/18; 8/2021; 8/2022; 7/2023; 7/2024

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

PROCEDURE FOR NATIONAL COUNCIL LICENSURE EXAMINATION (NCLEX-RN)

All students seeking licensure as a registered nurse must successfully write the National Council Licensure Examination (NCLEX-RN) administered by the Louisiana State Board of Nursing.

1. The Department of Nursing provides a list of students seeking candidacy for licensure and their application packet to the Louisiana State Board of Nursing (LSBN), 17373 Perkins Road, Baton Rouge, LA 70810.
2. Once candidates are entered into the LSBN Nurse Portal by the LSBN, the candidate completes the application and submits appropriate fees online through the LSBN Nurse Portal by the specified deadline.
3. Upon graduation the Department of Nursing will have the student request an official transcript. In the LSBN Nurse Portal, the Department Head will attest to the student's graduation upon degree conferral.

Candidates seeking licensure as a registered nurse outside of Louisiana must specify this intent to the Department of Nursing in a timely manner prior to graduation.

THE NURSE PRACTICE ACT

Nursing practice in Louisiana is regulated by the Louisiana State Board of Nursing in accordance with Louisiana Revised Statutes 37:911. The purpose of this legislation is quoted from Part I, 911:

Therefore, it is the legislative intent and the purpose of this Part to promote, preserve, and protect the public health, safety, and welfare by regulating nursing education and practice and ensuring that any individual practicing or offering to practice nursing or using the title "registered nurse" or "advanced practice registered nurse" shall be licensed before engaging in such practice.

Acts 1976, No. 351, §1; Acts 1995, No. 633, §1, eff. Jan. 1, 1996.

Definitions as stated in Part I, 913, are as follows:

1. "Approved program" means a nursing education program approved by the board.
2. "Authorized prescriber" means a licensed physician, dentist, or other health care provider authorized by law to prescribe drugs, medications, medical devices or appliances, and health care regimens.
3. "Board" means the Louisiana State Board of Nursing.
4. "Clinical phase of nursing education" means those nursing courses that require a student to provide nursing care, under faculty supervision, to individuals, families, and communities in diverse health care settings.
5. "Collaboration" means a cooperative working relationship with licensed physicians, dentists, or other health care providers to jointly contribute to providing patient care and may include but not be limited to discussion of a patient's diagnosis and cooperation in the management and delivery of health care with each provider performing those activities that he is legally authorized to perform.
6. "Endorsement" means certification of an applicant who is duly licensed as a registered nurse or advanced practice registered nurse in another state, territory, or country for licensure to practice as a registered nurse or advanced practice registered nurse in this state.
7. "Nationally recognized certifying body" means a national certification organization which certifies qualified licensed nurses as advanced practice registered nurses and which requires certain eligibility criteria related to education and practice, offers an examination in an advanced nursing area which meets current psychometric guidelines and tests, and is approved by the board.
8. "Nursing diagnosis" means the identification of actual or potential responses to health needs or problems based on collecting, analyzing, and comparing data with appropriate nursing standards to serve as the basis for indicating nursing care or for which referral to appropriate medical or community resources is necessary.

9. "Practice of nursing" means the performances, with or without compensation, by an individual licensed by the board as a registered nurse, of functions requiring specialized knowledge and skills derived from the biological, physical, and behavioral sciences. The practice of nursing or registered nursing shall not be deemed to include acts of medical diagnosis or medical prescriptions of therapeutic or corrective nature.
10. "Registered nursing" means the practice of the scope of nursing which is appropriate to the individual's educational level, knowledge, skills, and abilities, including:
 - a. Assessing the health status of an individual or group of individuals.
 - b. Establishing a nursing diagnosis and identifying health care needs, or both.
 - c. Establishing goals to meet identified health care needs.
 - d. Planning nursing care measures.
 - e. Implementing nursing care through such services as case finding, health instruction, health counseling, providing care supportive to or restorative of life and well-being, and executing health care regimens as prescribed by licensed physicians, dentists, or other authorized prescribers.
 - f. Delegating nursing interventions to qualified nursing personnel in accordance with criteria established by the board.
 - g. Maintaining nursing care rendered directly or indirectly.
 - h. Evaluating human responses to interventions.
 - i. Teaching the theory and practice of nursing.
 - j. Managing and supervising the practice of nursing.
 - k. Collaborating with licensed physicians, dentists, and other health care providers in the management of health care.
 - l. Performing additional acts which are recognized within standards of nursing practice and which are authorized by the board.
11. "Registered nurse" means any individual licensed under this Part to engage in the practice of nursing as defined in Paragraph (14) of this Section.
12. "Student nurse" means any individual who is enrolled in an approved program preparing for licensure as a registered nurse.

Acts 1976, No. 351, §1; Acts 1995, No. 633, §1, eff. Jan. 1, 1996; Acts 1995, No. 1209, §1; Acts 1997, No. 720, §1, eff. July 9, 1997; Acts 1999, No. 315, §1, eff. June 16, 1999; Acts 2001, No. 480, §1; Acts 2003, No. 1094, §1, eff. July 2, 2003; Acts 2019, No. 414, §1.

Louisiana licensure guidelines in Part I, 920 are as follows:

§920. Licensure; qualifications; examination; renewal; temporary permits

A.(1) The board shall issue a license to each applicant who applies for licensure as a registered nurse or an advanced practice registered nurse who files an application upon a form and in such manner as the board prescribes, accompanied by such fee as required in R.S. 37:927, and who furnishes evidence to the board that he:

(a) Is of good moral character.

(b) Has completed the requirements of a nursing education program approved by the board which prepares him for initial licensure as a registered nurse.

(c) Passes an examination to the satisfaction of the board.

(d) Has completed certain course work as required by the board.

(e) Is not in violation of this Part and the rules and regulations.

(f) Has committed no acts or omissions which constitute grounds for disciplinary action as defined in R.S. 37:921, or if found guilty of committing such acts or omissions, the board finds, after investigation, that sufficient restitution, rehabilitation, and education have occurred.

(g) Is proficient in the English language if he graduated from a nursing education program offered in a foreign country.

(2) Any individual applying for licensure as an advanced practice registered nurse shall submit proof that he holds a current, unencumbered, unrestricted registered nurse license, has satisfactorily completed a formal education program preparing graduates to practice specialized and advanced nursing practice, and holds a current certification for advanced practice granted by a nationally recognized certifying agency whose certification program is approved by the board, or in the absence of the availability of such certification, has met commensurate requirements as may be established by the board. After January 1, 1996, the applicant must show evidence of completion of a minimum of a master's degree with a concentration in the respective advanced practice nursing specialty, except for those applicants who provide documentation that the applicant completed or enrolled in a formalized post-basic education program preparing individuals in the advanced practice nursing specialty as approved by the board prior to December 31, 1995. Those applicants submitting enrollment in a formalized post-basic education program preparing individuals in the advanced practice nursing specialty prior to December 31, 1995, must maintain continuous enrollment prior to December 31, 1995, through completion.

B.(1) The board may by endorsement issue a license to practice as a registered nurse or an advanced practice registered nurse to any applicant who is duly licensed as a registered nurse under the laws of another state, territory, or country, who files an application upon a form and in such manner as the board prescribes, accompanied by the fees required in R.S. 37:927, meets the requirements of Subparagraphs (A)(1)(a), (b), (d), (e), (f), and (g) of this Section and who furnishes satisfactory evidence to the board that he:

(a) Had passed an examination for licensure and met, upon graduation, all other qualifications for licensure as a registered nurse in this state at the time he was initially licensed as a registered nurse.

(b) Holds a current license issued directly from the jurisdiction of his last employment.

(c) Meets other criteria established by the board.

(2) The board may by endorsement issue a license to practice as an advanced practice registered nurse if the applicant has practiced as an advanced practice registered nurse under the laws of another state and, in the opinion of the board, has met the requirements of Paragraph (A)(2) of this Section.

(3) The board may conduct licensure by endorsement only in accordance with the provisions of this Subsection.

C. The board shall authorize the administration of the examination to applicants for licensure as registered nurses.

D. The board may issue temporary permits under rules and regulations adopted and promulgated by the board in accordance with the Administrative Procedure Act.

E. (1) The board shall renew the license of each individual licensed under this Part on a schedule to be determined by the board. Each licensee shall submit an application, pay the appropriate renewal fee established by the board, and meet such other requirements of the board prior to the expiration of his license.

(2) Any individual licensed by this Part who is no longer practicing as a registered nurse in this state may, by submitting a written request to the board, be granted inactive status. No payment of an annual licensing fee shall be required by any individual who has been granted inactive status. Such individual may be granted active status by submitting an application form, paying the appropriate fee established by the board, and meeting other such requirements of the board.

(3) Any individual who is no longer engaged in the practice of nursing may be granted a license with a retired status upon filing an application requesting such status and paying the fee established by the board.

(4) Any individual whose license has lapsed by failing to renew the license may have his license reinstated by submitting an application, paying the appropriate fee established by the board, and meeting other such requirements of the board.

F. Upon findings of sufficient evidence that the public health and safety are at risk, the board may require licensees and applicants for licensure to submit to a physical or mental examination by a health care provider designated by the board who is licensed to perform such examination. The licensee or applicant may request a second health care provider to perform an independent medical examination. Refusal of or failure by the licensees or applicant to submit to such examination and to sign for release the findings of such examination to the board shall constitute evidence of any allegations related to such conditions.

Acts 1976, No. 351, §1; Acts 1995, No. 633, §1, eff. Jan. 1, 1996; Acts 2016, No. 598, §1.

The above are excerpts from the Nurse Practice Act. A complete copy of the Nurse Practice Act may be obtained by writing to the Louisiana State Board of Nursing, 17373 Perkins Road, Baton Rouge, LA 70810.

<http://legis.la.gov/legis/Law.aspx?d=94509>

STUDENT'S PROFESSIONAL RESPONSIBILITIES

The following Code of Ethics with Interpretive Statements (2015) has been developed by the American Nurses Association (ANA) to provide guidelines for the nurse's professional role.

Code of Ethics

Provision 1 – The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Provision 2 – The nurses' primary commitment is to the patient, whether an individual, family, group, community, or population.

Provision 3 – The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Provision 4 – The nurse has authority, accountability, and responsibility for nursing practice; make decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

Provision 5 – The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6 – The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Provision 7 – The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Provision 8 – The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9 – The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principle of social justice into nursing and health policy.

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. American Nurses Publishing.

Revised: 8/17

Reviewed: 8/15, 8/16, 6/18; 7/19; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

CODE OF ACADEMIC AND CLINICAL CONDUCT

The following Code of Academic and Clinical Conduct (2018) was adopted by the National Student Nurses Association (NSNA) Board of Directors to provide a framework to help guide nursing students in ethical analysis of responsibilities, professional conduct, and decision making in academic and clinical settings.

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

National Student Nurses' Association. (2022). *Code of ethics*. <https://www.nсна.org/nsna-code-of-ethics.html>

Adopted: 7/19

Reviewed: 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

STUDENTS' BILL OF RIGHTS/RESPONSIBILITIES

The Baccalaureate Nursing faculty adopted the following Student Bill of Rights/Responsibilities from the National Student Nurses Association (NSNA) in 1994. The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). Further amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 7, 2017 in Dallas, TX. Adopted in April 2020 by the 2019-20 NSNA Board of Directors. Further amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 8, 2022, in Salt Lake City, Utah.

1. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes, or economic status.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures which provide for and safeguard the students' freedom to learn.
4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.
5. Students should be free to take reasoned exception in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.
6. Students should have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.
8. The student should have the right to advocate for themselves and other students in the construction, delivery and evaluation of the curriculum.
9. Institutions should have a clearly written published policy as to the disclosure of private and confidential information which should be a part of a student's permanent academic record in compliance with state and federal laws.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately.

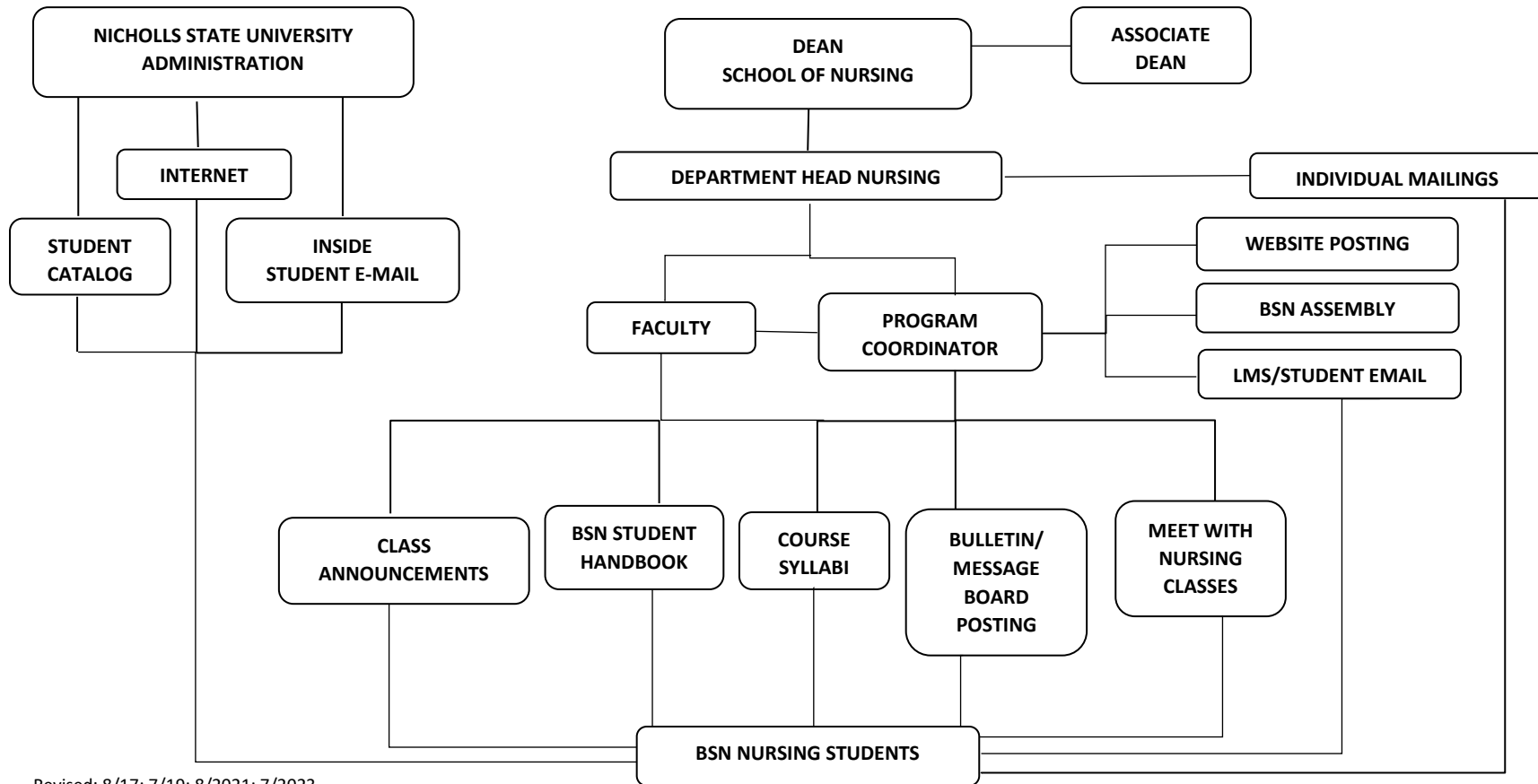
11. Students should be allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.
13. The institution has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and its objectives and philosophy. These may include, but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.
15. The nursing program should have readily available a set of clear, defined grievance procedures.
16. As citizens and members of an academic community, students are exposed to many opportunities and they should be mindful of their corresponding obligations.
17. Students have the right to belong to or refuse membership in any organization.
18. Students have the right to personal privacy in their individual/personal space to the extent that their wellbeing and property are respected.
19. Adequate safety precautions should be provided by nursing programs and clinical sites to ensure a safe and protected environment emotionally, socially, and physically. For example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.
20. Dress code, if present in school, should be established with student input in conjunction with the school administration and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.
21. Grading systems should be carefully reviewed initially and periodically with students and faculty for clarification and better student-faculty understanding.
22. Students should have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.
23. The nursing program should track their graduates' success in finding entry-level employment as registered nurses and make this information available to all who apply and enroll.
24. The nursing program should provide comprehensive, clear and concise information related to student loans, scholarships and any other student financial aid.
25. The nursing program should facilitate various methods to ensure that clinical sites provide an environment that supports the development of diverse, inclusive, and equitable Professional Identity in Nursing. This may be accomplished through assessment of clinical sites including, but not limited to, ongoing feedback from

students, faculty, and facility staff; implementation of methods and plans for improvements based on clinical site evaluations. Clinical sites should be suitable for students to demonstrate attainment of required clinical competencies.

National Student Nurses' Association. (2022). *Code of Ethics*. <https://www.nsna.org/nsna-code-of-ethics.html>

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COMMUNICATION OF POLICY CHANGE TO STUDENTS



Revised: 8/17; 7/19; 8/2021; 7/2023
 Reviewed: 6/18; 8/2022; 7/2024

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ESTIMATED STUDENT EXPENSES

There are expenses unique to the BSN Program above University expenses the student incurs upon acceptance into Nursing 222.

Clinical requirements – Documentation for clinical compliance is a self-managed process through the clinical compliance management system. There is a one-time fee of \$73 paid at the time of account creation. This fee covers OSHA and HIPAA eLearning modules, verification of initial clinical compliance, and ongoing tracking of clinical compliance. Additionally, students are responsible for the cost of renewing and maintaining up-to-date status for CPR certification, professional liability insurance, TB skin testing, and vaccinations as part of clinical requirements.

ExamSoft: The BSN Program within the Department of Nursing at Nicholls State University uses ExamSoft for exams in all core courses. ExamSoft is an easy to use computerized exam platform. The cost for students is approximately \$35 per semester and each semester thereafter as a course requirement.

*Supply Kit – There are expenses unique to the BSN Program above University expenses the student incurs upon acceptance into Nursing 222. *Students are required to purchase these kits upon acceptance into the program with a money order in the amount of \$515 payable to Nicholls Association of Student Nurses.* The kits are used in all clinical nursing courses.

<u>Equipment:</u>	Skills Trainer	\$180.00
	Basic Supply Kit	\$295.00
	Lab shirt	\$20.00
	Name Pins	\$20.00
		\$515.00

Uniforms – Clinical nursing uniforms are required. The prices below are estimated. Please do not purchase uniforms until after class begins in order to assure uniform policy compliance. The BSN insignia can be purchased from the University Bookstore at any time.

***Prices are subject to change.**

<u>Uniforms:</u>	
Top/Dress	\$40.00
Pant	\$40.00
Lab Coat	\$35.00
2 BSN Insignia	\$30.00
White Shoes	\$50.00

Additional Estimated Expenses beyond the First Clinical Semester

This information is given in advance so necessary planning can be made for these expenses. Prices and fees for the above items are subject to change over time.

1. Each semester students are required to purchase course specific textbooks and/or resources – the cost varies; when possible, textbook bundles are offered through the bookstore.
2. Purchase of Professional Liability Insurance with annual renewal – approximately \$50 per year.
3. Random urine drug screening throughout the program: \$35.00 for each screening. All students are subject to a mandatory drug screen on admission to the BSN program, then randomly thereafter throughout the BSN program.
4. Nursing t-shirts and sweatshirts are offered for purchase each semester through the Nicholls Association for Student Nurses (NASN). These shirts are considered lab uniforms and are a required purchase. Price range \$15-\$25.
5. Nursing polo shirt will be required for Nursing 400 Mental Health Nursing. Price range \$25-\$30.
6. Students are strongly encouraged to join and become active in NASN while enrolled in the nursing program. Annual dues are \$50 and include national and local membership.
7. Costs incurred during the last clinical semester include:
 - a. Application for State Board Licensure and Application for NCLEX-RN semester - \$339.25
 - b. Class Pin - \$100 - \$400.00 (sterling silver to 10K)
 - c. Class and individual Photos (optional) - \$100.00
 - d. NCLEX-RN Review Course - \$400.00

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APPLYING FOR ADMISSION INTO NURSING 222/223

1. Students intending to apply to the Bachelor of Science in Nursing Program must first meet the admission requirements of Nicholls State University.
2. Students may apply for admission in Nursing 222/223 by completing an Application to the BSN Program. The BSN application may only be obtained after attending a mandatory nursing information sessions (NIS). If a student did not attend Nicholls the semester prior to application date, a completed transcript of grades from all other colleges and universities must be submitted to the Office of Admissions prior to the application deadline.
3. The student should seek information from the Department of Nursing website or the BSN Program Coordinator within the Department of Nursing regarding information sessions and appropriate application deadlines for submission of application for Nursing 222/223.
4. Requirements for entry into the beginning clinical nursing course (Nursing 222/223) are as follows:
 - a. Completion of required first 35 hours of the BSN Curriculum.
 - b. Grade-point average of at least 2.75 (4.0 scale) in all required courses with no grade below a "C". Only the first 35 hours of required courses in the Nicholls BSN curriculum will be utilized to determine GPA. The Department of Nursing considers only the last grade or last attempt at coursework to calculate the GPA.
 - c. Students are limited to a total of three (3) repeats among the 35 prerequisite hours to be eligible to apply to the clinical component of the BSN program.
 - d. Completion of the Anatomy/Physiology and Biology sections of the HESI (Health Education System, Inc.) Admissions Assessment Test (A²) with minimum score of 75% in each section.
 - e. Students on probationary status are not permitted to enroll in nursing courses with a clinical component.
 - f. Students previously enrolled in any RN program will require a letter of good standing from the nursing program(s) AND proof of prior clinical approval from the Louisiana State Board of Nursing.
 - g. Transfer students who have a grade of D, F, or W in any two NURS courses may apply for admission seven (7) years from the date of initial enrollment in the first clinical course.
5. Following application/transcript evaluation for Nursing 222 applicants, students will be placed into one of the following categories:

- a. Qualified and offered acceptance into the clinical sequence:
 - i. Meets all criteria and ranks in the top 80 candidates – Candidates will be e-mailed and offered a seat in the BSN Program.
 - ii. Students are required to accept or decline the seat via e-mail. If a student declines admission and plans to enter the clinical sequence in a following semester they must reapply and complete the application and ranking process again.
 - b. Qualified and denied:
 - i. Meets all criteria, but the number of applicants exceeds the number of available seats.
 - ii. These students will be notified by letter sent via U.S. Mail. Students in this category must reapply in a subsequent semester if they wish to be considered. No “waiting lists” are maintained in the BSN program.
 - c. Unqualified:
 1. Lacks qualification – GPA, prerequisite courses, and/or HESI scores.
 2. Incomplete application material.
 3. Application received after deadline.
 4. Lacks LSBN approval to enter a clinical nursing course.
 5. These students will be notified by letter via U.S. Mail detailing the requirements that were not met.
 6. Students in this category must, at a minimum, meet the requirements of application eligibility and reapply in a subsequent semester if they wish to be considered.
6. A social security number is required to apply for a student clinical permit through the Louisiana State Board of Nursing (LSBN). Student must receive approval from the Louisiana State Board of Nursing to enter clinical nursing courses:

Meeting admission criteria for the BSN Program **does not** guarantee admission to the BSN Program. Due to the limited number of faculty positions and size limitations in the hospitals utilized for the clinical component of the nursing courses, a quota must be placed upon the number of students enrolled in nursing courses with a clinical component.

Adopted: 1982

Revised: 1990; 10/14/96; 8/98; 8/99; 6/02; 7/03; 7/05; 08/12; 08/14; 8/15; 8/17; 6/18; 7/19; 8/2021; 8/2022; 7/2023

Reviewed: 8/01; 8/10; 8/16; 8/2020; 8/2021; 7/2024

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RETENTION AND PROGRESSION

1. To progress in the Nursing sequence, students must maintain a minimum grade of C and a cumulative grade point average of at least 2.0 (4.0 scale) in all required courses in the curriculum and satisfy all prerequisites requirements.
2. A student is permitted one failure or withdrawal once admitted to the clinical nursing sequence. A second failure or withdrawal, in any clinical nursing course, constitutes dismissal from the program. This is known as the “two course, two take” rule.
3. All students who receive I’s or W’s must submit a written explanation of this grade for priority consideration for re-entry.
4. Students who do not successfully complete a required clinical course, who fall below a GPA of 2.0 in the Nursing curriculum, or who withdraw from a required course must submit an application requesting re-entry into the clinical sequence no later than ten (10) business/work days (i.e. days the University is open for business; classes are not necessarily in session on or during those days) after final grades for that clinical nursing course from the preceding semester are available in Banner.
5. Requirements for graduation must be completed within seven years from the date of entry into Nursing 222. Failure to do so will necessitate the individual having to repeat all Nursing courses.
6. Evidence of the following are required while enrolled in any clinical nursing course:
 - a) Current certificate of health insurance submitted and verified by the clinical compliance management system.
 - b) Copy of current liability (malpractice) insurance certificate submitted and verified by the clinical compliance management system.
 - c) Compliance with health requirements submitted and verified by the clinical compliance management system.
 - d) Copy of current American Heart Association or American Red Cross BLS card submitted and verified by the clinical compliance management system.
 - e) Official verification of licensure status submitted and verified by the clinical compliance management system for LPN or RN students.
7. Once a student is admitted to the clinical component of the program, the student is expected to progress in sequence through the established BSN curriculum with no stop-out

unless it is related to a documented extenuating circumstance, illness, or military obligation. Each will be handled on a case-by-case basis. Students not adhering to consecutive and sequential progression must seek re-admission into the BSN Program as outlined in the “Re-admission into Clinical Nursing Courses” policy. Any leave requiring more than one semester may require reevaluation of the student’s course of study. Additionally, students could be required to enroll in a clinical course during one summer session to maintain state board requirements for faculty/student ratios.

8. Withdrawal or failure with final grade of “D” or “F” in any two (2) nursing courses taken during the same semester, will constitute automatic dismissal from the BSN Program based upon the “two course, two take” rule.
9. If a student withdraws from or is otherwise unsuccessful in NURS 226 prior to the commencement of clinical learning experiences in N223, that student will not be permitted to participate in those clinical learning experiences in NURS 223. Hence, as per the requirements in the current NURS 223 syllabus, that student will receive a final grade in NURS 223 of not higher than “D”.
10. Students seeking re-admission in fall 2020 or beyond, if eligible, will be re-admitted under the new catalog if they have not successfully completed the NURS 222, NURS 223, NURS 226, NURS 228, NURS 255, and NURS 355.
11. Students seeking re-admission in fall 2020 or beyond, if eligible, will be re-admitted under the previous catalog/curriculum if they have successfully completed NURS 222, NURS 223, NURS 226, NURS 228, NURS 255, and NURS 355.
12. Any current Nicholls State University BSN clinical student who is ineligible to return to the BSN program, related to the progression policy, may re-apply for admission seven (7) years from the date of initial enrollment in the first clinical nursing course. If accepted, based on the most current admission criteria, the student will be enrolled in Nursing 222, 226, and 228.

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RE-ADMISSION INTO CLINICAL NURSING COURSES

All students seeking re-admission into any clinical nursing course for a particular semester:

1. Must submit the Application for Re-Admission to the BSN Program no later than 10 business/work days (i.e. days the University is open for business; classes are not necessarily in session on or during those days) after final grades for that clinical nursing course from the preceding semester are available in Banner. Applications for re-admission will not be considered after those 10 days have elapsed.
2. Will be re-admitted to the BSN Program on a space available basis. There is no guarantee that any student, much less all students, seeking re-admission to the BSN Program will be re-admitted.
3. Will be ranked according to initial admission scoring procedures in the event that there are more applicants for re-admission than there are available seats in a particular clinical nursing course. Those with the higher ranking scores will be re-admitted in decreasing order until all the available seats are filled in the clinical nursing course to which the re-admission is sought. It is therefore possible that for students seeking re-admission to a particular clinical nursing course, some may be re-admitted and others may not.

Adopted: 9/03

Revised: 08/12; 8/2021

Reviewed: 7/10; 7/11; 7/13; 7/14; 8/15; 8/16; 6/18; 7/19; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

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TRANSFER STUDENTS SEEKING CREDIT FOR CLINICAL NURSING COURSES

A student wishing to transfer into this curriculum must have a transcript of all prior credits on file in the Office of Admissions, and evaluated by said office before a request for admission can be submitted to the Committee for Admissions and Progressions. Students not officially granted admission into Nicholls State University will not be considered for acceptance into the BSN program.

Transfer students applying for entry into nursing clinical courses must:

1. Have a 2.75 or better GPA in the first 35 hours of the Nicholls BSN curriculum.
2. Maintain a minimum grade of "C" in all required courses.
3. Have no more than three (3) repeats in all co-requisite courses within the first 35 hours of the Nicholls BSN curriculum.
4. Completion of the Biology and Anatomy/Physiology sections of the HESI (Health Education System, Inc.) Nursing Admissions Assessment Test (A²) with minimum score of 75% in each section.
5. Have no more than one (1) clinical nursing course failure in their current program.
6. Maintain a minimum cumulative GPA of 2.0 in all required courses in the curriculum.
7. Satisfy prerequisite requirements to courses for which entry is sought.
8. Have on file a letter of good standing, indicating eligibility to return to their current program of nursing, from the school from which transfer is sought.
9. Satisfy residence requirements for a Bachelor's degree at Nicholls State University.

When the above requirements have been satisfied:

1. Admission into clinical nursing courses will be on a space available basis.
2. A transfer student seeking placement in any clinical nursing course beyond Nursing NURS 223 will be ranked, based upon the first 35 hours of the BSN curriculum, along with any repeating student seeking enrollment in the same course. The ranking score will be instituted only if there are more transfer and/or repeating students than spaces available.
3. In order for students to be granted a course substitution for a clinical nursing course, the student must submit a syllabus for any course for which credit is sought at least one semester prior to anticipated admission. The syllabus will be reviewed by the appropriate course coordinator. If the course is deemed by the course coordinator to be equivalent in content and scope, a course substitution will be submitted through the appropriate University channels. This information must be submitted one semester prior to anticipated admission.

NOTE:

1. Clinical nursing course failures from the student's current nursing program will follow the student if accepted as a transfer student.
2. If a student has failed out of their current/previous clinical nursing program and is not eligible to continue at that school, the student will not be eligible to apply to the Nicholls State University BSN program for a period of seven (7) years from when they entered their first clinical nursing course of the previous program.
3. Transfer students who have a grade of D, F, or W in any two NURS courses may apply for admission seven (7) years from the date of initial enrollment in the first clinical course.

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BSN CURRICULUM GUIDE/DEGREE PLAN

First Year

	<u>Hrs</u>		<u>Hrs</u>
Biology 114-115	4	Biology 116-117	4
Chemistry 109	3	Biology 205	3
English 101	3	English 102	3
History (3 hours total)	3	Humanities (3 hours total)	3
Mathematics 101 or 117	3	OIS 200	2
UNIV Course	<u>1</u>	Psychology 101	<u>3</u>
	17		18

Second Year

	<u>Hrs</u>		<u>Hrs</u>
Fine Arts Elective	3	Nursing 241	3
Nursing 222	3	Nursing 242	3
Nursing 223	2	English Literature	3
Nursing 226	3	Nursing 255	<u>7</u>
Nursing 228	2		16
Sociology 204	<u>3</u>		
	16		

Third Year

	<u>Hrs</u>		<u>Hrs</u>
English 468	3	Nursing 340	3
Math 214	3	Nursing 371	5
Nursing 355	<u>7</u>	Nursing 381	<u>5</u>
	13		13

Fourth Year

	<u>Hrs</u>		<u>Hrs</u>
Nursing 400	5	Nursing 427	3
Nursing 420	5	Nursing 428	4
Nursing 422	<u>3</u>	Nursing 429	1
	13	Nursing 435	3
		Nursing Elective	<u>3</u>
			14

Total Credit Hours: 120

The BSN program curriculum is subject to change as deemed necessary by the faculty and administration to ensure an effective program of study. Students are expected to schedule an appointment with an advisor of the program prior to registration.

SUPPORT COURSE DESCRIPTIONS

BIOL 114. Human Anatomy and Physiology I. 3-3-0. Prerequisite: Eligibility for MATH 100 or 117. A descriptive presentation of the structure and function of the organ systems of the human body covering cells, tissues, bones, muscles and nervous system. Credit toward graduation may not be earned in this course and in BIOL 124. [LCCN: C BIO 2213] (26.0403)

BIOL 115. Human Anatomy and Physiology Laboratory I. 1-0-3. Prerequisite: Concurrent enrollment or prior completion of BIOL 114 or BIOL 124. A laboratory course to accompany BIOL 114 or BIOL 124 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: C BIO 2211] (26.0403)

BIOL 116. Human Anatomy and Physiology II. 3-3-0. Prerequisites: BIOL 114 or BIOL 124. A descriptive presentation of the structure and function of the organ systems of the human body covering the cardiovascular, immune, respiratory, digestive, endocrine, excretory and reproductive systems. Credit toward graduation may not be earned in this course and in BIOL 126. [LCCN: C BIO 2223] (26.0707)

BIOL 117. Human Anatomy and Physiology Laboratory II. 1-0-3 Prerequisite: Concurrent enrollment or prior completion of BIOL 116 or BIOL 126. A laboratory course to accompany BIOL 116 or BIOL 126 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: C BIO 2221] (26.0707)

BIOL 205. Microbiology. 3-3-0. Prerequisites: C or better in BIOL 114 and C or better or concurrent registration in BIOL 116. Principles of microbiology, with emphasis on health and disease. This course is not designed for natural science majors. [LCCN: C BIO 2103 or 2113] (26.0503)

CHEM 109, General, Organic, and Biological Chemistry. 3-3-0. Prerequisite: Eligibility for MATH 100 or MATH 117. Emphasis is on broad aspects of general, organic, and biochemistry necessary for the comprehension of biological processes occurring within the human body. [LCCN: C CEM 1003] (40.0599)

ENGL 101. English Composition I. 3-3-0. Prerequisites: Initial placement by ACT score of 18 or better in English, or C or better in ENGL 003, or satisfactory score on departmental placement test. Introduction to expository writing and critical thinking. [LCCN: C ENL 1013] (23.1301)

ENGL 102. English Composition II. 3-3-0. Prerequisite: C or better in ENGL 100 or 101 or satisfactory score on placement test. Further development of writing in various genres and critical thinking with an introduction to research. C or better in ENGL 102 is required for graduation. [LCCN: C ENL 1023] (23.1301)

ENGLISH LITERATURE. 3-3-0. From English literature courses numbered 200 level or above.

ENGL 468. Technical Writing for the Sciences. 3-3-0. Prerequisite: C or better in ENGL 102. Application of writing skills to specialized tasks in technical and scientific areas. Individual and collaborative writing projects. (23.0101)

FINE ARTS ELECTIVE. 3-3-0. A total of 3 hours of any Board of Regents approved Fine Arts course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

HISTORY. A total of 3 hours of History from any HIST prefix courses.

HUMANITIES. A total of 3 hours of any Board of Regents approved Humanities course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

MATH 101. College Algebra. 3-3-0. Prerequisite: Grade of C or better in MATH 003, C or better in MATH 115, or Grade of D in MATH 100, or Math ACT subscore of 21 or better, or satisfactory score on placement test. Linear equations and inequalities, linear applications, systems of linear equations, quadratic equations and inequalities, absolute-value equations and inequalities, radical equations, functions and graphs, polynomial and exponential and logarithmic functions. For MATH 101 WWW (web), priority is given to students enrolling in MATH 101 for the first time. Credit in MATH 100 is equivalent to MATH 101. [LCCN: CMAT 1213] (27.0101) **OR**

MATH 117. Contemporary Mathematics and Quantitative Analysis. 3-3-0. Prerequisite: Grade of C or better in MATH 003, or 115, grade of D or better in MATH 100 or 101, or MATH ACT subscore of 19 or better, or satisfactory score on placement test. Degree credit will be granted in only one of the following courses: MATH 116, MATH 117. This course applies basic college-level mathematics to real-life problems and is appropriate for students whose majors do not require college algebra. This course covers selected topics in reasoning, data analysis, financial mathematics, measurement, and applications of mathematics to everyday problem-solving. *Credit in MATH 116 is equivalent to MATH 117.* [LCCN: CMAT 1103] (27.0101)

MATH 214. Introductory Statistics. 3-3-0. Prerequisites: C or better in MATH 100, 101, 115, 116, or 117. Organizing data, averages and variations, stem-and-leaf and box plots and other graphical presentations of data, conducting experiments, elementary probability theory, distributions, estimations, hypothesis testing, regression and correlation. [LCCN: CMAT 1303] (27.0101)

OIS 200. Computers in the Office. 2-2-0. Prerequisite: Eligibility for MATH 100 or higher. Use of computers in processing business information using typical software packages available for personal computers—focusing on spreadsheet and database processing techniques but also including moderate coverage of word processing techniques. [LCCN: CBUS 2203] (11.1099)

PSYC 101. General Psychology. 3-3-0. Prerequisite: Eligibility for enrollment in ENGL 101 or higher. An introduction to the science and profession of psychology. [LCCN: CPSY 2013] (42.0101)

SOCI 204. Cultural Diversity in American Society. 3-3-0. Examines the cultural characteristics, contributions and patterns of contact of diverse groups in American society, including Native Americans, African Americans, Hispanic Americans, Asian Americans and European Americans. [LCCN: CSOC 2413] (45.1101)

UNIV 101. University Prep. 1-1-0. First time entering freshman and transfer students with less than 30 hours. Helps students adjust to the university, provides a support system and promotes understanding of the requirements of the major. Career exploration/assessment pertinent to the major. Satisfies university freshman seminar requirement. (37.0199)

NURSING COURSE WORK FOR BSN COMPLETION

NURS 222. Basic Nursing Process I. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226 and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom and laboratory setting. (51.3801)

NURS 223. Basic Nursing Process II. 2-1-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 226, and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom, laboratory, and clinical setting. (51.3801)

NURS 226. Health Assessment and the Adult Client. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 223, and 228, Fine Arts Elective, SOCI 204. RN to BSN students must see an advisor. Introduction of the concepts underlying assessment and the application of basic assessment skills. (51.3801)

NURS 228. Gerontic Nursing Care Concepts. 2-2-0. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226, Fine Arts Elective, and SOCI 204. Examines nursing care of older adults; increased complexity and variations in care; increased co-morbidities and chronic illnesses and associated treatments; and methods to overcome potential barriers to communication with older adults. Formerly NURS 316. (51.1601)

NURS 241. Health and Disease Concepts for Nursing Professionals. 3-3-0. Prerequisites: BIOL 116, NURS 222, NURS 223, credit or registration with NURS 226, Co-requisite: NURS 255. Examine health and disease concepts at the cellular level while using the nursing process to promote clinical nursing judgment in professional nursing practice. (51.3801)

NURS 242. Clinical Drug Therapy for Nursing Professionals. 3-3-0. Prerequisites: NURS 222, NURS 223, credit or registration in NURS 226, NURS 228, Co-requisite: NURS 255. Introduction

to basic clinical drug therapy principles through evidence-based application of the nursing process. The integration of medications, pharmacokinetics, clinical judgment, patient safety, legal, cultural and ethical considerations prepare nursing students for safe professional clinical practice. (51.3801)

NURS 255. Nursing and the Adult I. 7-4-9. Prerequisite: Completion of first 51 semester hours of baccalaureate nursing curriculum. Prerequisites or co-requisites: NURS 241, 242, English Literature Elective. Nursing of the adult individual with selected well defined health alterations. Lecture, laboratory, clinical components utilize nursing process with emphasis on assessment, nursing diagnosis, and planning. (51.3801)

NURS 340. Interprofessional Concepts for Contemporary Nursing. 3-3-0. Prerequisite: NURS 355. Examines the historical development of nursing and its relationship to contemporary issues and trends. Focus is on social, legal, and ethical components of professional nursing. (51.3801)

NURS 355. Nursing and the Adult II. 7-4-9. Prerequisite: NURS 255. Prerequisites or co-requisites: ENGL 468 and MATH 214. Knowledge, skills and attitudes essential to health needs of adults experiencing multiple health alterations. Clinical components utilize nursing process, emphasizing planning and implementation. (51.3801)

NURS 371. Nursing and the Childbearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 381. Emphasis on knowledge, skills, and attitudes essential to health needs of healthy obstetric/newborn clients and those experiencing multiple health alterations within the family. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 381. Nursing and the Childrearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 371. Emphasis on knowledge, skills, and attitudes essential to health needs of pediatric clients from infancy to adolescence experiencing multiple health alterations within the family unit. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 400. Mental Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisites: NURS 420, 422. Promotion, maintenance, and restoration of optimal mental health with emphasis on therapeutic communication skills and therapeutic use of self in providing care to individuals, groups, aggregates, and communities. (51.3801)

NURS 420. Community Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisite: NURS 400 and 422. RN to BSN students must see an advisor. Incorporates family centered, community based nursing process in providing health care to individuals, groups, aggregates, and communities. (51.3801)

NURS 422. Nursing Research and Evidence for Best Practice. 3-3-0. Prerequisite: MATH 214. Emphasis is on the language of nursing research, critical analysis of nursing research, and

application of evidence-based research findings in clinical practice. Formerly NURS 440. (51.3801)

NURS 427. Nursing Leadership/Management. 3-3-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 428, 429, and 435. Nursing Leadership and management of healthcare organizations with emphasis on theory, research, management functions, and practical application. (51.3801)

NURS 428. Preceptorship Experience in Professional Nursing. 4-0-12. Prerequisites: NURS 400, 417, 420, and 422. Co-requisite: NURS 427, 429, and 435. RN to BSN students must see an advisor. Theory, research, and practical application to management of a health care team for individuals, families, aggregates, and communities by incorporating critical thinking and decision-making skills. The clinical focus is on utilization of plan of care with emphasis on implementation and evaluation in providing and managing nursing care. (51.3801)

NURS 429. Synthesizing the NCLEX-RN®. 1-1-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 427, 428, and 435. Analysis and synthesis of baccalaureate nursing curriculum content with a focus on clinical judgment while preparing students to write the national licensure examination. (51.3801)

NURS 435. Informatics for Health Care Providers. 3-3-0. Prerequisites: Senior standing, and CMPS 101 or OIS 200, or permission of department head. Co-requisites: NURS 427, 428, and 429. Computer applications in health care delivery systems. (51.3899)

NURSING ELECTIVE. 3-3-0. Any 3 credit hour Nursing Elective offered through the Department of Nursing.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
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DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

LPN TO BSN ARTICULATION

The LPN-BSN Articulation provides an opportunity for Licensed Practical Nurses (LPNs) to pursue a BSN degree, and is designed to validate and award credit for existing knowledge, while remaining consistent with the BSN Program student learning outcomes.

Admission Criteria

1. Accepted to Nicholls State University.
2. Application for the Bachelor of Science in Nursing Program on file in the Department of Nursing.
3. Completion of first 35 hours of BSN curriculum with a minimum grade of "C" and 2.75 GPA (on a 4.0 scale) in the first 35 hours. Maintain a minimum grade of "C" in all required courses.
4. Approval to enroll in a clinical nursing course by the Louisiana State Board of Nursing.
5. Official license verification from the Louisiana State Board of Practical Nurse Examiners.
6. Score of 77% or higher on the NLN NACE-I Foundations of Nursing Exam
7. Prior work experience as LPN is not required for admission to the LPN-BSN Articulation.
8. Qualified students will be enrolled on a space available basis.
9. Evidence of health requirements must be provided and validated through the clinical compliance management system *prior* to participating in any clinical experience.

Retention/Progression Criteria

1. Retention and progression is in compliance with BSN Program guidelines.
2. Official license verification from the Louisiana State Board of Practical Nurse Examiners annually.
3. A student is permitted one failure or withdrawal once admitted to the clinical nursing sequence. A second failure or withdrawal, in any clinical nursing course, constitutes dismissal from the program.
4. Students who do not successfully complete a required clinical course, who fall below a GPA of 2.0 in the BSN curriculum, or who withdraw from a required course must submit an application requesting re-entry into the clinical sequence prior to regular registration.
5. Students seeking re-admission in fall 2020 or beyond, if eligible, will be readmitted under the new catalog if they have not successfully completed the NURS 226, NURS 228, NURS 255, and NURS 355.
6. Students seeking re-admission in fall 2020 or beyond, if eligible, will be readmitted under the previous catalog/curriculum if they have successfully completed NURS 226, NURS 228, NURS 255, and NURS 355.

7. A student must earn at least 33 credit hours in residence and earn a majority of the credits in the BSN major through this University. Required credits in nursing courses = 57.
8. Requirements for graduation must be completed within seven years from the date of entry into the first semester of the sophomore year. Failure to do so will necessitate the individual having to repeat all Nursing-prefixed courses.

Course Substitutions

Course substitutions may be submitted for equivalent course work taken at Nicholls and other universities if a grade of “C” or better has been earned. Credit is awarded following approval by the Vice-President of Academic Affairs.

Credit by Examination/Competency Testing

A maximum of fifty percent of Nicholls degree requirements may be earned through correspondence, extension, military service, military service schools, College Level Examinations Program (CLEP), or any accumulation from all categories of testing, placements, and similar programs. Since the university policy on granting credit for CLEP scores excludes certain academic areas, the student should request further information on the policy regarding CLEP from the Office of Records and Registration or the Academic Testing Center. Courses for which credit by examination may be earned include the following:

<u>Course</u>	<u>Credit Hours</u>	<u>Department</u>	<u>Phone</u>
OIS 200 – Computers in the Office	2	Computer Information Systems	(985) 449-7014
Nursing Electives	3	BSN Program	(985) 448-4695
Nursing 222 – Basic Nursing Process I	3	BSN Program	(985) 448-4695
Nursing 223 – Basic Nursing Process II	2	BSN Program	(985) 448-4695
Nursing 241 – Health and Disease Concepts for Nursing Professionals	3	BSN Program	(985) 448-4695
Nursing 242 – Clinical Drug Therapy for Nursing Professionals	3	BSN Program	(985) 448-4695
Nursing 371 – Nursing and the Childbearing Family	5	BSN Program	(985) 448-4695
Nursing 381 – Nursing and the Childrearing Family	5	BSN Program	(985) 448-4695

Three (3) examinations are available:

- a. NACE-I Foundations Exam for NURS 222 & NURS 223
- b. NACE-I Care of the Childbearing Family Exam for NURS 371
- c. NACE-I Care of the Childrearing Family Exam for NURS 381

Successful completion requires a score at the norm of each individual exam plus three (3) points within two attempts. Exams are administered by the BSN Program Office once each semester. Students must successfully complete NACE-I Foundation of Nursing exam by semester three (3) for possible entrance into clinical sequence in semester four (4). Students must complete NACE-I Nursing Care of Child and Nursing Care of Childbearing Family exams by clinical semester two (2) for progression in the LPN-BSN articulation. Students not successfully completing either or both of the exams will revert to the traditional BSN curriculum progression.

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LPN to BSN ARTICULATION CURRICULUM GUIDE/DEGREE PLAN

First Year

	Hrs.		Hrs.
Biology 114-115	4	Biology 116-117	4
Chemistry 109	3	Biology 205	3
English 101	3	English 102	3
History (3 hours total)	3	Humanities (3 hours total)	3
Mathematics 101 or 117	3	OIS 200	2
UNIV Course	<u>1</u>	Psychology 101	<u>3</u>
	17		18

Second Year

	Hrs.		Hrs.
Fine Arts Elective	3	Nursing 226	3
Sociology 204	3	Nursing 228	2
Nursing 241	3	Nursing 255	7
Nursing 242	3	Nursing 340	<u>3</u>
English Literature	<u>3</u>		15
	15		

Third Year

	Hrs.		Hrs.
English 468	3	Nursing 400	5
Math 214	3	Nursing 420	5
Nursing 355	<u>7</u>	Nursing 422	<u>3</u>
	13		13

Fourth Year

	Hrs.
Nursing 427	3
Nursing 428	4
Nursing 429	1
Nursing 435	3
Nursing Elective	<u>3</u>
	14

Total Credit Hours: 120***

***Total hours for degree is 120 credit hours: 105 earned curriculum credits plus a possible 15 credits awarded after successful completion of Credit by Examination as listed above.

SUPPORT COURSE DESCRIPTIONS

BIOL 114. Human Anatomy and Physiology I. 3-3-0. Prerequisite: Eligibility for MATH 100 or 117. A descriptive presentation of the structure and function of the organ systems of the human body covering cells, tissues, bones, muscles and nervous system. Credit toward graduation may not be earned in this course and in BIOL 124. [LCCN: C BIO 2213] (26.0403)

BIOL 115. Human Anatomy and Physiology Laboratory I. 1-0-3. Prerequisite: Concurrent enrollment or prior completion of BIOL 114 or BIOL 124. A laboratory course to accompany BIOL 114 or BIOL 124 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: C BIO 2211] (26.0403)

BIOL 116. Human Anatomy and Physiology II. 3-3-0. Prerequisites: BIOL 114 or BIOL 124. A descriptive presentation of the structure and function of the organ systems of the human body covering the cardiovascular, immune, respiratory, digestive, endocrine, excretory and reproductive systems. Credit toward graduation may not be earned in this course and in BIOL 126. [LCCN: C BIO 2223] (26.0707)

BIOL 117. Human Anatomy and Physiology Laboratory II. 1-0-3 Prerequisite: Concurrent enrollment or prior completion of BIOL 116 or BIOL 126. A laboratory course to accompany BIOL 116 or BIOL 126 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: C BIO 2221] (26.0707)

BIOL 205. Microbiology. 3-3-0. Prerequisites: C or better in BIOL 114 and C or better or concurrent registration in BIOL 116. Principles of microbiology, with emphasis on health and disease. This course is not designed for natural science majors. [LCCN: C BIO 2103 or 2113] (26.0503)

CHEM 109, General, Organic, and Biological Chemistry. 3-3-0. Prerequisite: Eligibility for MATH 100 or MATH 117. Emphasis is on broad aspects of general, organic, and biochemistry necessary for the comprehension of biological processes occurring within the human body. [LCCN: C CEM 1003] (40.0599)

ENGL 101. English Composition I. 3-3-0. Prerequisites: Initial placement by ACT score of 18 or better in English, or C or better in ENGL 003, or satisfactory score on departmental placement test. Introduction to expository writing and critical thinking. [LCCN: C ENL 1013] (23.1301)

ENGL 102. English Composition II. 3-3-0. Prerequisite: C or better in ENGL 100 or 101 or satisfactory score on placement test. Further development of writing in various genres and critical thinking with an introduction to research. C or better in ENGL 102 is required for graduation. [LCCN: C ENL 1023] (23.1301)

ENGLISH LITERATURE. 3-3-0. From English literature courses numbered 200 level or above.

ENGL 468. Technical Writing for the Sciences. 3-3-0. Prerequisite: C or better in ENGL 102. Application of writing skills to specialized tasks in technical and scientific areas. Individual and collaborative writing projects. (23.0101)

FINE ARTS ELECTIVE. 3-3-0. A total of 3 hours of any Board of Regents approved Fine Arts course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

HISTORY. A total of 3 hours of History from any HIST prefix courses.

HUMANITIES. A total of 3 hours of any Board of Regents approved Humanities course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

MATH 101. College Algebra. 3-2-3. Prerequisite: Grade of C or better in MATH 003, C or better in MATH 115, or Grade of D in MATH 100, or Math ACT subscore of 21 or better, or satisfactory score on placement test. Linear equations and inequalities, linear applications, systems of linear equations, quadratic equations and inequalities, absolute-value equations and inequalities, radical equations, functions and graphs, polynomial and exponential and logarithmic functions. For MATH 101 WWW (web), priority is given to students enrolling in MATH 101 for the first time. Credit in MATH 100 is equivalent to MATH 101. [LCCN: CMAT 1213] (27.0101) **OR**

MATH 117. Contemporary Mathematics and Quantitative Analysis. 3-3-0. Prerequisite: Grade of C or better in MATH 003, or 115, grade of D or better in MATH 100 or 101, or MATH ACT subscore of 19 or better, or satisfactory score on placement test. Degree credit will be granted in only one of the following courses: MATH 116, MATH 117. This course applies basic college-level mathematics to real-life problems and is appropriate for students whose majors do not require college algebra. This course covers selected topics in reasoning, data analysis, financial mathematics, measurement, and applications of mathematics to everyday problem-solving. *Credit in MATH 116 is equivalent to MATH 117.* [LCCN: CMAT 1103] (27.0101)

MATH 214. Introductory Statistics. 3-3-0. Prerequisites: C or better in MATH 100, 101, 115, 116, or 117. Organizing data, averages and variations, stem-and-leaf and box plots and other graphical presentations of data, conducting experiments, elementary probability theory, distributions, estimations, hypothesis testing, regression and correlation. [LCCN: CMAT 1303] (27.0101)

OIS 200. Computers in the Office. 2-2-0. Prerequisite: Eligibility for MATH 100 or higher. Use of computers in processing business information using typical software packages available for personal computers—focusing on spreadsheet and database processing techniques but also including moderate coverage of word processing techniques. [LCCN: CBUS 2203] (11.1099)

PSYC 101. General Psychology. 3-3-0. Prerequisite: Eligibility for enrollment in ENGL 101 or higher. An introduction to the science and profession of psychology. [LCCN: CPSY 2013] (42.0101)

SOCI 204. Cultural Diversity in American Society. 3-3-0. Examines the cultural characteristics, contributions and patterns of contact of diverse groups in American society, including Native Americans, African Americans, Hispanic Americans, Asian Americans and European Americans. [LCCN: CSOC 2413] (45.1101)

UNIV 101. University Prep. 1-1-0. First time entering freshman and transfer students with less than 30 hours. Helps students adjust to the university, provides a support system and promotes understanding of the requirements of the major. Career exploration/assessment pertinent to the major. Satisfies university freshman seminar requirement. (37.0199)

NURSING COURSE WORK FOR BSN COMPLETION

NURS 222. Basic Nursing Process I. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226 and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom and laboratory setting. (51.3801)

NURS 223. Basic Nursing Process II. 2-1-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 226, and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom, laboratory, and clinical setting. (51.3801)

NURS 226. Health Assessment and the Adult Client. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 223, and 228, Fine Arts Elective, and SOCI 204. RN to BSN students must see an advisor. Introduction of the concepts underlying assessment and the application of basic assessment skills. (51.3801)

NURS 228. Gerontic Nursing Care Concepts. 2-2-0. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226, Fine Arts Elective, and SOCI 204. Examines nursing care of older adults; increased complexity and variations in care; increased co-morbidities and chronic illnesses and associated treatments; and methods to overcome potential barriers to communication with older adults. Formerly NURS 316. (51.1601)

NURS 241. Health and Disease Concepts for Nursing Professionals. 3-3-0. Prerequisites: BIOL 116, NURS 222, NURS 223, credit or registration with NURS 226, Co-requisite: NURS 255. Examine health and disease concepts at the cellular level while using the nursing process to promote clinical nursing judgment in professional nursing practice. (51.3801)

NURS 242. Clinical Drug Therapy for Nursing Professionals. 3-3-0. Prerequisites: NURS 222, NURS 223, credit or registration in NURS 226, NURS 228, Co-requisite: NURS 255. Introduction

to basic clinical drug therapy principles through evidence-based application of the nursing process. The integration of medications, pharmacokinetics, clinical judgment, patient safety, legal, cultural and ethical considerations prepare nursing students for safe professional clinical practice. (51.3801)

NURS 255. Nursing and the Adult I. 7-4-9. Prerequisite: Completion of first 51 semester hours of baccalaureate nursing curriculum. Prerequisites or co-requisites: NURS 241, 242, English Literature Elective. Nursing of the adult individual with selected well defined health alterations. Lecture, laboratory, clinical components utilize nursing process with emphasis on assessment, nursing diagnosis, and planning. (51.3801)

NURS 340. Interprofessional Concepts for Contemporary Nursing. 3-3-0. Prerequisite: NURS 355. Examines the historical development of nursing and its relationship to contemporary issues and trends. Focus is on social, legal, and ethical components of professional nursing. (51.3801)

NURS 355. Nursing and the Adult II. 7-4-9. Prerequisite: NURS 255. Prerequisites or co-requisites: ENGL 468 and MATH 214. Knowledge, skills and attitudes essential to health needs of adults experiencing multiple health alterations. Clinical components utilize nursing process, emphasizing planning and implementation. (51.3801)

NURS 371. Nursing and the Childbearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 381. Emphasis on knowledge, skills, and attitudes essential to health needs of healthy obstetric/newborn clients and those experiencing multiple health alterations within the family. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 381. Nursing and the Childrearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 371. Emphasis on knowledge, skills, and attitudes essential to health needs of pediatric clients from infancy to adolescence experiencing multiple health alterations within the family unit. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 400. Mental Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisites: NURS 420, 422. Promotion, maintenance, and restoration of optimal mental health with emphasis on therapeutic communication skills and therapeutic use of self in providing care to individuals, groups, aggregates, and communities. (51.3801)

NURS 420. Community Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisite: NURS 400 and 422. RN to BSN students must see an advisor. Incorporates family centered, community based nursing process in providing health care to individuals, groups, aggregates, and communities. (51.3801)

NURS 422. Nursing Research and Evidence for Best Practice. 3-3-0. Prerequisite: MATH 214. Emphasis is on the language of nursing research, critical analysis of nursing research, and

application of evidence-based research findings in clinical practice. Formerly NURS 440. (51.3801)

NURS 427. Nursing Leadership/Management. 3-3-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 428, 429, and 435. Nursing Leadership and management of healthcare organizations with emphasis on theory, research, management functions, and practical application. (51.3801)

NURS 428. Preceptorship Experience in Professional Nursing. 4-0-12. Prerequisites: NURS 400, 417, 420, and 422. Co-requisite: NURS 427, 429, and 435. RN to BSN students must see an advisor. Theory, research, and practical application to management of a health care team for individuals, families, aggregates, and communities by incorporating critical thinking and decision-making skills. The clinical focus is on utilization of plan of care with emphasis on implementation and evaluation in providing and managing nursing care. (51.3801)

NURS 429. Synthesizing the NCLEX-RN®. 1-1-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 427, 428, and 435. Analysis and synthesis of baccalaureate nursing curriculum content with a focus on clinical judgment while preparing students to write the national licensure examination. (51.3801)

NURS 435. Informatics for Health Care Providers. 3-3-0. Prerequisites: Senior standing, and CMPS 101 or OIS 200, or permission of department head. Co-requisites: NURS 427, 428, and 429. Computer applications in health care delivery systems. (51.3899)

NURSING ELECTIVE. 3-3-0. Any 3 credit hour Nursing Elective offered through the Department of Nursing.

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RN TO BSN ARTICULATION

The RN-BSN Articulation provides an opportunity for Registered Nurses (RNs) to pursue a BSN degree and is designed to validate and award credit for existing knowledge, while remaining consistent with the BSN Program student learning outcomes. The RN-BSN Articulation is offered through Nicholls Online.

General Expectations

1. Student must meet admission requirements of the University, School of Nursing and Department of Nursing.
2. Student must meet all pre-requisite and/or general education core requirements for the degree.
3. Student must be a graduate of a state licensing board approved program and nationally accredited program.

Admission/Retention/Progression Criteria

1. Yearly documentation of unencumbered, unrestricted Louisiana license as a Registered Nurse.
2. Maintenance of a minimum grade of "C" and a cumulative grade point average of at least 2.0 (4.0 scale) in all required courses in the curriculum.
3. A student is permitted one failure or withdrawal in N226, N228, N417, N420, N422, N427, N428, and N429.
4. Requirements for graduation must be completed within seven years from the date of entry into N417.
5. Evidence of health requirements must be provided and validated through the clinical compliance management system *prior* to participating in any clinical experience.
6. A student must earn at least 30 credit hours in residence and earn a majority of the credits in the BSN major through this University.

Course Substitutions

Course substitutions may be submitted for equivalent course work taken at Nicholls and other Colleges and/or universities if a grade of "C" or better has been earned. Credit is awarded following approval by the Vice President for Academic Affairs.

Credit by Examination/Competency Testing

A maximum of fifty percent of Nicholls degree requirements may be earned through correspondence, extension, military service, military service schools, College Level Examinations Program (CLEP), or any accumulation from all categories of testing, placements, and similar

programs. Since the university policy on granting credit for CLEP scores excludes certain academic areas, the student should request further information on the policy regarding CLEP from the Office of Records and Registration or the Testing Center. Courses for which credit by examination may be earned include the following:

<u>Course</u>	<u>Credit Hours</u>	<u>Department</u>	<u>Phone</u>
OIS 200 – Computers in the Office	2	Computer Information Systems	(985) 449-7014
Nursing Electives	3	BSN Program	(985) 448-4695
Nursing 226 – Health Assessment of the Adult	3	BSN Program	(985) 448-4695
Nursing 241 – Health and Disease Concepts for Nursing Professionals	3	BSN Program	(985) 448-4695
Nursing 242 – Clinical Drug Therapy for Nursing Professionals	3	BSN Program	(985) 448-4695
Nursing 420 – Community Health Nursing	5	BSN Program	(985) 448-4695
Nursing 427 – Leadership & Management	3	BSN Program	(985) 448-4695

Transfer Courses

A student may transfer coursework from a regionally accredited college or university as long as the following two criteria are followed: (1) 25% of the degree requirements must be earned at Nicholls, and (2) 24 of the last 30 credit hours must be earned at Nicholls. Copies of the Louisiana Master Course Articulation Matrix can be obtained in the Department of Nursing equivalencies of courses among Louisiana’s public colleges and universities. A list of transfer course equivalencies can also be accessed on the Nicholls website at www.nicholls.edu/transfer

Major Nursing Courses

The curriculum in the RN-BSN Articulation is consistent with the curriculum for the traditional BSN degree, with the following exceptions:

1. Major nursing courses in the RN-BSN Articulation consist of:
 - NURS 226 Health Assessment for the Adult Client (3-2-3)
 - NURS 228 Gerontic Nursing Care Concepts (2-2-0)
 - NURS 241 Health and Disease Concepts for Nursing Professionals (3-3-0)
 - NURS 242 Clinical Drug Therapy for Nursing Professionals (3-3-0)
 - NURS 417 Professional Nursing Practices (5-3-6) – Transition/Bridge Course
 - NURS 420 Community Health Nursing (5-4-3)
 - NURS 422 Nursing Research and Evidence for Best Practice (3-3-0)
 - NURS 427 Nursing Leadership and Management (3-3-0)
 - NURS 428 Preceptorship Experience in Professional Nursing (4-0-12)
 - NURS 429 Synthesizing the NCLEX-RN (1-1-0)
 - NURS 435 Informatics for Health Care Providers (3-3-0)

Upon successful completion of the transition/bridge course, NURS 417, the RN is awarded credit in the following courses for a total of 32 nursing credit hours awarded. In other words, 52% of the credit hours in the nursing courses required for the degree are awarded as credit after successful completion of the transition/bridge course, NURS 417.

2. Courses for which nursing credit may be awarded for successful completion of NURS 417 transition/bridge course are:
 - NURS 222 Basic Nursing Process I (3-2-3)
 - NURS 223 Basic Nursing Process II (2-1-3)
 - NURS 255 Nursing and the Adult I (7-4-9)
 - NURS 340 Inter-professional Concepts for Contemporary Nursing (3-3-0)
 - NURS 355 Nursing and the Adult II (7-4-9)
 - NURS 371 Nursing and the Childbearing Family (5-4-3)
 - NURS 381 Nursing and the Childbearing Family (5-4-3)
 - NURS 400 Mental Health Nursing (5-4-3)

3. RN-BSN students must complete four hours of electives (3 credit hours of a nursing elective and 1 credit hour of a general elective).

4. The designated oral communication competency courses for the BSN students are NURS 417, 420, and 422.

Estimated Time to Completion

Once admitted to the professional component of the BSN Program, the student can typically complete the program in one year of full time continuous study.

RN-BSN Articulation Guideline

<u>General Education and Support Courses:</u>	<u>Sem. Hrs.</u>
Biology 114, 115, 116, 117, 205	11
Chemistry 109	3
English 101*, 102*	6
English Literature (200 or above)*	3
English 468	3
Fine Arts Elective	3
History*	3
Humanities*	3
Math 101* or 117*, 214	6
OIS 200**	2
Psychology 101*	3
Sociology 204	3
General Elective	<u>1</u>
Total	50

<u>Prerequisite Nursing Courses:</u>	<u>Sem. Hrs.</u>
Nursing 241**	3
Nursing 242**	3
Nursing 435	<u>3</u>
Total	9

*May earn credit via examination (CLEP, etc.)

**May earn credit via examination through Nicholls.

Major Nursing Courses:

<u>Fall Semester</u>	<u>Credit Hrs.</u>
Nursing 226.....	3*
Nursing 228.....	2*
Nursing Elective.....	3*
Nursing 417 (Fall only).....	5
Nursing 420.....	5**
Nursing 422.....	<u>3</u>
Total	21

(Upon successful completion of Nursing 417, an additional 32 credit hours titled nursing will be awarded)

<u>Spring Semester</u>	<u>Credit Hrs.</u>
Nursing 427.....	3**
Nursing 428.....	4*
Nursing 429.....	<u>1</u>
Total	8

Total General Education and Support Hours = 50

Total Nursing Hours = 70 (38 by enrollment, 32 by credit awarded; of the 38, up to 11 by examination/competency testing)

Total Hours for Degree = 120

*Nursing courses; may earn credit via examination/competency testing

**Nursing 420 and Nursing 427 – may earn credit via examination/competency testing in either, but not both

SUPPORT COURSE DESCRIPTIONS

BIOL 114. Human Anatomy and Physiology I. 3-3-0. Prerequisite: Eligibility for MATH 100 or 117. A descriptive presentation of the structure and function of the organ systems of the human body covering cells, tissues, bones, muscles and nervous system. Credit toward graduation may not be earned in this course and in BIOL 124. [LCCN: CBIO 2213] (26.0403)

BIOL 115. Human Anatomy and Physiology Laboratory I. 1-0-3. Prerequisite: Concurrent enrollment or prior completion of BIOL 114 or BIOL 124. A laboratory course to accompany BIOL 114 or BIOL 124 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: CBIO 2211] (26.0403)

BIOL 116. Human Anatomy and Physiology II. 3-3-0. Prerequisites: BIOL 114 or BIOL 124. A descriptive presentation of the structure and function of the organ systems of the human body covering the cardiovascular, immune, respiratory, digestive, endocrine, excretory and reproductive systems. Credit toward graduation may not be earned in this course and in BIOL 126. [LCCN: CBIO 2223] (26.0707)

BIOL 117. Human Anatomy and Physiology Laboratory II. 1-0-3 Prerequisite: Concurrent enrollment or prior completion of BIOL 116 or BIOL 126. A laboratory course to accompany BIOL 116 or BIOL 126 using specimens, models and instruments to investigate the structure and function of the human body. [LCCN: CBIO 2221] (26.0707)

BIOL 205. Microbiology. 3-3-0. Prerequisites: C or better in BIOL 114 and C or better or concurrent registration in BIOL 116. Principles of microbiology, with emphasis on health and disease. This course is not designed for natural science majors. [LCCN: CBIO 2103 or 2113] (26.0503)

CHEM 109, General, Organic, and Biological Chemistry. 3-3-0. Prerequisite: Eligibility for MATH 100 or MATH 117. Emphasis is on broad aspects of general, organic, and biochemistry necessary for the comprehension of biological processes occurring within the human body. [LCCN: CCEM 1003] (40.0599)

ENGL 101. English Composition I. 3-3-0. Prerequisites: Initial placement by ACT score of 18 or better in English, or C or better in ENGL 003, or satisfactory score on departmental placement test. Introduction to expository writing and critical thinking. [LCCN: CENL 1013] (23.1301)

ENGL 102. English Composition II. 3-3-0. Prerequisite: C or better in ENGL 100 or 101 or satisfactory score on placement test. Further development of writing in various genres and critical thinking with an introduction to research. C or better in ENGL 102 is required for graduation. [LCCN: CENL 1023] (23.1301)

ENGLISH LITERATURE. 3-3-0. From English literature courses numbered 200 level or above.

ENGL 468. Technical Writing for the Sciences. 3-3-0. Prerequisite: C or better in ENGL 102. Application of writing skills to specialized tasks in technical and scientific areas. Individual and collaborative writing projects. (23.0101)

FINE ARTS ELECTIVE. 3-3-0. A total of 3 hours of any Board of Regents approved Fine Arts course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

HISTORY. A total of 3 hours of History from any HIST prefix courses.

HUMANITIES. A total of 3 hours of any Board of Regents approved Humanities course. A list of approved courses can be found here: <https://www.nicholls.edu/general-education>

MATH 101. College Algebra. 3-2-3. Prerequisite: Grade of C or better in MATH 003, C or better in MATH 115, or Grade of D in MATH 100, or Math ACT subscore of 21 or better, or satisfactory score on placement test. Linear equations and inequalities, linear applications, systems of linear equations, quadratic equations and inequalities, absolute-value equations and inequalities, radical equations, functions and graphs, polynomial and exponential and logarithmic functions. For MATH 101 WWW (web), priority is given to students enrolling in MATH 101 for the first time. Credit in MATH 100 is equivalent to MATH 101. [LCCN: CMAT 1213] (27.0101) **OR**

MATH 117. Contemporary Mathematics and Quantitative Analysis. 3-3-0. Prerequisite: Grade of C or better in MATH 003, or 115, grade of D or better in MATH 100 or 101, or MATH ACT subscore of 19 or better, or satisfactory score on placement test. Degree credit will be granted in only one of the following courses: MATH 116, MATH 117. This course applies basic college-level mathematics to real-life problems and is appropriate for students whose majors do not require college algebra. This course covers selected topics in reasoning, data analysis, financial mathematics, measurement, and applications of mathematics to everyday problem-solving. *Credit in MATH 116 is equivalent to MATH 117.* [LCCN: CMAT 1103] (27.0101)

MATH 214. Introductory Statistics. 3-3-0. Prerequisites: C or better in MATH 100, 101, 115, 116, or 117. Organizing data, averages and variations, stem-and-leaf and box plots and other graphical presentations of data, conducting experiments, elementary probability theory, distributions, estimations, hypothesis testing, regression and correlation. [LCCN: CMAT 1303] (27.0101)

OIS 200. Computers in the Office. 2-2-0. Prerequisite: Eligibility for MATH 100 or higher. Use of computers in processing business information using typical software packages available for personal computers—focusing on spreadsheet and database processing techniques but also including moderate coverage of word processing techniques. [LCCN: CBUS 2203] (11.1099)

PSYC 101. General Psychology. 3-3-0. Prerequisite: Eligibility for enrollment in ENGL 101 or higher. An introduction to the science and profession of psychology. [LCCN: CPSY 2013] (42.0101)

SOCI 204. Cultural Diversity in American Society. 3-3-0. Examines the cultural characteristics, contributions and patterns of contact of diverse groups in American society, including Native Americans, African Americans, Hispanic Americans, Asian Americans and European Americans. [LCCN: CSOC 2413] (45.1101)

UNIV 101. University Prep. 1-1-0. First time entering freshman and transfer students with less than 30 hours. Helps students adjust to the university, provides a support system and promotes understanding of the requirements of the major. Career exploration/assessment pertinent to the major. Satisfies university freshman seminar requirement. (37.0199)

NURSING COURSE WORK FOR BSN COMPLETION

NURS 222. Basic Nursing Process I. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226 and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom and laboratory setting. (51.3801)

NURS 223. Basic Nursing Process II. 2-1-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 226, and 228, Fine Arts Elective, and SOCI 204. Introduction of the key concepts underlying nursing practice and the application of basic nursing skills in the classroom, laboratory, and clinical setting. (51.3801)

NURS 226. Health Assessment and the Adult Client. 3-2-3. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 222, 223, and 228, Fine Arts Elective, and SOCI 204. RN to BSN students must see an advisor. Introduction of the concepts underlying assessment and the application of basic assessment skills. (51.3801)

NURS 228. Gerontic Nursing Care Concepts. 2-2-0. Prerequisite: First 35 hours in the BSN Curriculum. Prerequisites or co-requisites: NURS 226, Fine Arts Elective, and SOCI 204. Examines nursing care of older adults; increased complexity and variations in care; increased co-morbidities and chronic illnesses and associated treatments; and methods to overcome potential barriers to communication with older adults. Formerly NURS 316. (51.1601)

NURS 241. Health and Disease Concepts for Nursing Professionals. 3-3-0. Prerequisites: BIOL 116, NURS 222, NURS 223, credit or registration with NURS 226, Co-requisite: NURS 255. Examine health and disease concepts at the cellular level while using the nursing process to promote clinical nursing judgment in professional nursing practice. (51.3801)

NURS 242. Clinical Drug Therapy for Nursing Professionals. 3-3-0. Prerequisites: NURS 222, NURS 223, credit or registration in NURS 226, NURS 228, Co-requisite: NURS 255. Introduction

to basic clinical drug therapy principles through evidence-based application of the nursing process. The integration of medications, pharmacokinetics, clinical judgment, patient safety, legal, cultural and ethical considerations prepare nursing students for safe professional clinical practice. (51.3801)

NURS 255. Nursing and the Adult I. 7-4-9. Prerequisite: Completion of first 51 semester hours of baccalaureate nursing curriculum. Prerequisites or co-requisites: NURS 241, 242, English Literature Elective. Nursing of the adult individual with selected well defined health alterations. Lecture, laboratory, clinical components utilize nursing process with emphasis on assessment, nursing diagnosis, and planning. (51.3801)

NURS 340. Interprofessional Concepts for Contemporary Nursing. 3-3-0. Prerequisite: NURS 355. Examines the historical development of nursing and its relationship to contemporary issues and trends. Focus is on social, legal, and ethical components of professional nursing. (51.3801)

NURS 355. Nursing and the Adult II. 7-4-9. Prerequisite: NURS 255. Prerequisites or co-requisites: ENGL 468 and MATH 214. Knowledge, skills and attitudes essential to health needs of adults experiencing multiple health alterations. Clinical components utilize nursing process, emphasizing planning and implementation. (51.3801)

NURS 371. Nursing and the Childbearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 381. Emphasis on knowledge, skills, and attitudes essential to health needs of healthy obstetric/newborn clients and those experiencing multiple health alterations within the family. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 381. Nursing and the Childrearing Family. 5-4-3. Prerequisite: NURS 355. Prerequisites or co-requisites: NURS 340 and 371. Emphasis on knowledge, skills, and attitudes essential to health needs of pediatric clients from infancy to adolescence experiencing multiple health alterations within the family unit. Laboratory and clinical components utilize nursing process with emphasis on planning and implementation. (51.3801)

NURS 400. Mental Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisites: NURS 420, 422. Promotion, maintenance, and restoration of optimal mental health with emphasis on therapeutic communication skills and therapeutic use of self in providing care to individuals, groups, aggregates, and communities. (51.3801)

NURS 417. Professional Nursing Practice. 5-3-6. Prerequisites: Completion of first 59 credits of RN to BSN Articulation and unrestricted registered nurse licensure. Seminars and field experiences assist the registered nurse in the transition to the role of the professional baccalaureate nurse. (51.3801)

NURS 420. Community Health Nursing. 5-4-3. Prerequisites: NURS 371, 381, and 340. Prerequisite or co-requisite: NURS 400 and 422. RN to BSN students must see an advisor.

Incorporates family centered, community based nursing process in providing health care to individuals, groups, aggregates, and communities. (51.3801)

NURS 422. Nursing Research and Evidence for Best Practice. 3-3-0. Prerequisite: MATH 214. Emphasis is on the language of nursing research, critical analysis of nursing research, and application of evidence-based research findings in clinical practice. Formerly NURS 440. (51.3801)

NURS 427. Nursing Leadership/Management. 3-3-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 428, 429, and 435. Nursing Leadership and management of healthcare organizations with emphasis on theory, research, management functions, and practical application. (51.3801)

NURS 428. Preceptorship Experience in Professional Nursing. 4-0-12. Prerequisites: NURS 400, 417, 420, and 422. Co-requisite: NURS 427, 429, and 435. RN to BSN students must see an advisor. Theory, research, and practical application to management of a health care team for individuals, families, aggregates, and communities by incorporating critical thinking and decision-making skills. The clinical focus is on utilization of plan of care with emphasis on implementation and evaluation in providing and managing nursing care. (51.3801)

NURS 429. Synthesizing the NCLEX-RN®. 1-1-0. Prerequisites: NURS 400, 420, and 422. Co-requisites: NURS 427, 428, and 435. Analysis and synthesis of baccalaureate nursing curriculum content with a focus on clinical judgment while preparing students to write the national licensure examination. (51.3801)

NURS 435. Informatics for Health Care Providers. 3-3-0. Prerequisites: Senior standing, and CMPS 101 or OIS 200, or permission of department head. Co-requisites: NURS 427, 428, and 429. Computer applications in health care delivery systems. (51.3899)

NURSING ELECTIVE. 3-3-0. Any 3 credit hour Nursing Elective offered through the Department of Nursing.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
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DEPARTMENT OF NURSING**

CLASSROOM ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

POLICY:

It is the policy of Nicholls State University and the Department of Nursing not to discriminate and to render all services without regard to race, color, religion, national origin, age, sex, veteran status, political affiliation, disabilities, or in accordance with EWE 92-7 because of an individual's sexual orientation. Thus, in compliance with the Americans with Disability Act of 1990, all individuals regardless of disability are afforded equal opportunity for admission and to achieve the same results for progression as specified in course student learning outcomes as that afforded others. Students requesting accommodations must identify themselves with the Student Access Center, following the steps outlined by the Student Access Center and the Louisiana Center for Dyslexia and/or Related Learning Disorders. For individuals with disabilities, reasonable modifications are made to policies or procedures, when such modifications are necessary to measure achievement of course student learning outcomes; unless doing so would fundamentally alter course student learning outcomes and/or patient safety. These modifications are offered for no additional charge. The student reserves the right to refuse these accommodations.

Students who have been identified as having the characteristics of dyslexia and/or a related learning disorder are entitled to accommodations. Eligible students should contact the Louisiana Center for Dyslexia and Related Learning Disorders at 985-448-4214 or 163 Peltier Hall. Additional information for the center can be found at www.nicholls.edu/education/support-programs/dyslexia.

Students (with a documented disability) who have identified themselves with the Student Access Center and/or Louisiana Center for Dyslexia and related Learning Disorders with documented disability and who have requested modifications to policies, practices, or procedures in the Department of Nursing may file a grievance with the department head if they have been treated in a discriminatory manner. The department head will process the grievance according to procedures set forth in the Department of Nursing's student Handbook.

PROCEDURE:

1. The student will hand deliver the letter of recommendations from the Student Access Center/Louisiana Center for Dyslexia and/or Related Learning Disorders to the faculty.
2. Upon receipt of the letter of recommendations for accommodations from the student, the faculty are to perform a careful review of these recommendations. The Academic and Technical Standards outlined in the Student and Faculty Handbooks are to be used as a guideline for this review.

3. The faculty are to approve or disapprove the proposed recommendations. If approved, the faculty and student are to sign and each retain a copy of the letter. Disapproval will result in renegotiations.
4. Faculty may have recommendations to make, and renegotiations may be warranted.

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ESSENTIAL ACADEMIC AND TECHNICAL STANDARDS FOR BSN STUDENTS

Nicholls State University Department of Nursing, following the American Association of Colleges of Nursing (AACN) position statements on accommodating student with disabilities, has identified essential functional abilities (technical abilities) necessary for the safe practice of nursing. "As a profession, necessitating licensure to practice, nursing education requires thoughtful consideration of the academic and technical standard required to prepare high quality nurses" (Marks & Ailey, n.d., p. 8). These standards also incorporate the AACN's set of competencies as outlined in Essentials for Baccalaureate Education in all types of settings and highlights concepts central to the BSN Conceptual Model.

As nursing is recognized as a practice discipline incorporating the knowledge, skills, and attitudes necessary for safe practice, these technical standards are consistent with the minimum standards needed to be successful in a nursing education program. The technical standards listed are necessary for students with or without accommodations.

Potential students are advised of the Essential Academic and Technical Standards for BSN Students during the application period. Incoming students will then be informed of the standards during program orientation/assembly. Students are required to validate, by signature, receipt of and responsibility for the standards upon admission to the program and every semester thereafter.

Faculty are responsible for monitoring student performance and behavior in the classroom, laboratory, and clinical setting to determine whether the student is meeting the essential academic and technical standards.

Requirement	Standard	Examples
Acquiring fundamental knowledge	<ol style="list-style-type: none"> 1. Ability to learn in classroom and educational settings 2. Ability to find sources of knowledge and acquire the knowledge 3. Ability to be a life-long learner 4. Novel and adaptive thinking 	<ol style="list-style-type: none"> 1. Acquire, conceptualize and use evidence-based information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through online coursework, lecture, group seminar, small group activities and physical demonstrations

Requirement	Standard	Examples
		2. Develop health care solutions and responses beyond that which is rote or rule-based
Developing communication skills	<ol style="list-style-type: none"> 1. Communication abilities for sensitive and effective interactions with patients (persons, families and/or communities) 2. Communication abilities for effective interaction with the health care team (patients, their supports, other professional and non-professional team members) 3. Sense-making of information gathered from communication 4. Social intelligence 	<ol style="list-style-type: none"> 1. Accurately elicit or interpret information: medical history and other info to adequately and effectively evaluate a client or patient's condition 2. Accurately convey information and interpretation of information using one or more means of communication (verbal, written, assisted (such as TTY) and/or electronic) to patients and the health care team 3. Effectively communicate in teams 4. Determine a deeper meaning or significance in what is being expressed 5. Connect with others to sense and stimulate reactions and desired interactions
Interpreting data	<ol style="list-style-type: none"> 1. Ability to observe patient conditions and responses to health and illness 2. Ability to assess and monitor health needs 3. Computational thinking 4. Cognitive load management 	<ol style="list-style-type: none"> 1. Obtain and interpret information from assessment maneuvers such as assessing respiratory and cardiac function, blood pressure, blood sugar, neurological status, etc. 2. Obtain and interpret information from diagnostic representations of physiologic phenomena during a comprehensive assessment of patients 3. Obtain and interpret information from assessment of patient's environment and responses to health across the continuum

Requirement	Standard	Examples
		<ol style="list-style-type: none"> 4. Obtain and interpret for evaluation information about responses to nursing action 5. Translate data into abstract concepts and to understand data-based reasoning
Integrating knowledge to establish clinical judgment	<ol style="list-style-type: none"> 1. Critical thinking, problem-solving and decision making ability needed to care for persons, families and/or communities across the health continuum and within (or managing or improving) their environments –in one or more environments of care 2. Intellectual and conceptual abilities to accomplish the essentials of the nursing program (for example, baccalaureate essentials) 3. New-media literacy 4. Transdisciplinary 5. Design mindset 	<ol style="list-style-type: none"> 1. Accomplish, direct or interpret assessment of persons, families and/or communities and develop, implement and evaluate of plans of care or direct the development, implementation and evaluation of care 2. Critically assess and develop content that uses new media forms, and to leverage these media for persuasive communication 3. Literacy in and ability to understand concepts across disciplines 4. Represent and develop tasks and work processes for desired outcomes
Incorporating appropriate professional attitudes and behaviors into nursing practice	<ol style="list-style-type: none"> 1. Concern for others, integrity, ethical conduct, accountability, interest and motivation 2. Acquire Interpersonal skills for professional interactions with a diverse population of individuals, families and communities 3. Acquire Interpersonal skills for professional interactions with members of the health care team including patients, their supports, other health care professionals and team members 	<ol style="list-style-type: none"> 1. Maintain effective, mature, and sensitive relationships with clients/patients, students, faculty, staff and other professionals under all circumstances 2. Make proper judgments regarding safe and quality care 3. Function effectively under stress and adapt to changing environments inherent in clinical practice 4. Demonstrate professional role in interactions with patients, intra and inter professional teams

Requirement	Standard	Examples
	4. Acquire the skills necessary for promoting change for necessary quality health care 5. Cross-cultural competency 6. Virtual collaboration	5. Operate in different cultural settings (including disability culture) 6. Work productively, drive engagement, and demonstrate presence as a member of a virtual team

Marks, B., & Ailey, S. (n.d.) *White Paper on Inclusion of Students with Disabilities in Nursing Educational Programs for the California Committee on Employment of People with Disabilities*. Retrieved from: <https://www.aacnnursing.org/Portals/0/PDFs/Teaching-Resources/Student-Disabilities-White-Paper.pdf>

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DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

GRADUATION REQUIREMENTS

The University awards a Bachelor of Science in Nursing to those students successfully completing requirements for the degree. The basic requirements include:

- The student must satisfactorily complete a total of 120 semester hours to earn a BSN degree (See Nicholls State University Catalog).
- The student must earn at least 25% of credit hours in residence at Nicholls State University and be enrolled during the last semester in residence at the University in a college from which the degree is sought.
- Achieve competencies in computer literacy and oral communication as determined by individual department or curricula.
- Earn at least 50% of degree requirements at Nicholls State University or in-residence at some other accredited university or college. The remaining 50% of these requirements may be gained through correspondence, extension, military service, military service schools, College Level Examination program (CLEP), or any accumulation from all categories of testing, placements, etc.
- Minimum cumulative grade point average of 2.0 upon graduation.
- Earn a grade of “C” or better in all required English courses.
- Earn at least 40 semester hours in courses numbered 300 or above.
- Apply for the degree with the Office of Records and Registration during the registration period for the semester or summer session in which degree requirements are to be completed.
- A graduation fee is required of each BSN candidate. Pay fees during the registration period for the semester or summer session in which degree requirements are to be completed.
- All financial obligations must be settled with the University before a student receives a diploma.
- Attendance at commencement exercises is required of all degree candidates unless written permission to be awarded the degree in absentia is submitted to the academic dean.

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ADVISING

Advising is an important component of the retention and success of students at Nicholls State University. Upon completion of the Academic Advising Center requirements, the nursing student's academic records are transferred to the School of Nursing. After the academic records are transferred to the School of Nursing, advising of the nursing majors is coordinated by the Department of Nursing.

Clinical nursing students are notified in writing of their advisor's name upon admission to the clinical component of the nursing program. Any information regarding assigned nursing advisors, such as advisors name, telephone number, and office number, can be obtained in the BSN Program office. All nursing students are to meet with a nursing advisor each semester for class scheduling. The advisor will aid in counseling, career planning, and class scheduling; including a review of the student's academic and testing transcript as they progress through the curriculum. The assigned advisor will assist the student until completion of the nursing program.

Students unaware of their nursing advisor should contact the BSN Program office or reference their Banner Self-Service account. It is the student's responsibility to schedule advising appointments with their assigned nursing advisor each semester. Furthermore, topics included in advising sessions shall include overall performance and progress in the BSN Program. Students are advised during registration by assigned faculty. Faculty utilize GradesFirst™ as a mechanism for communication and documentation of student advising.

Meeting with a nursing advisor is mandatory.

Students will remain with the assigned advisor throughout the nursing program. Advisors must approve the students schedule for each semester. During advisement of the student at periodic intervals and/or at registration, documentation will be recorded regarding acceptable course substitutions and/or any other pertinent communications.

It is the student's responsibility to follow curriculum and published policies in the University Catalog.

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STUDENT ATTENDANCE POLICY

Students enrolled in nursing courses are expected to attend all classes, lab, and clinical learning experiences in order to derive the maximum benefit. Absences and tardiness are neither excused nor approved, but should untoward circumstances arise, students are expected to notify the proper person.

Class: Absences exceeding ten (10) percent may subject the student to dismissal from the course. If unable to attend any class or lab experience, students must notify the Course Coordinator *prior* to the start of the class or lab experience, and if unable to reach, they notify the department office (985-448-4696). Students arriving after the start of a class or lab should not expect to enter the classroom until the next scheduled break out of courtesy to faculty and students.

Exams: Examinations are to be taken on the scheduled date. Should extenuating circumstances (serious illness, death in the family, military obligation) occur at the time of any scheduled examination, it is the student's responsibility to contact the course coordinator *prior* to the examination. Students reporting late for tests may not be allowed to take the test at that time. The instructor reserves the right to administer a different form of the test, including essay or oral, if a student is tardy or absent for an examination. Make-up exams are to be administered during the last week of the semester or at the discretion of the Course Coordinator. When a student misses an exam, documentation may be required at the discretion of the instructor.

Lab: If unable to attend any lab experience, students must notify the Course Coordinator *prior* to the start of the lab experience. If unable to contact the Course Coordinator, then contact the department office (985-448-4696). Students arriving after the start of a lab experience should not expect to enter the lab until the next scheduled break out of courtesy to faculty and students.

Clinical: If unable to attend any clinical experience, students must first notify the respective clinical instructor no earlier than 6:00 a.m. If unable to reach the clinical instructor by phone, then an email must be sent to the clinical instructor. Failure to do so will result in an unexcused absence. Unexcused absences may result in a clinical unsatisfactory grade.

Make up days for any class, lab, and clinical absences are at the discretion of the instructor. The student who misses 10% of class or lab/clinical time may be unable to meet the course student learning outcomes/objectives and may be unsuccessful in the course. When the student misses

a scheduled learning activity, documentation may be required at the discretion of the instructor.

Formula: 10% rule calculations

Total of _____ class or lab/clinical

10% of the total = _____ absences

Round off # of allowed absences to the nearest day. (Partial day missed constitutes a full day absence.)

Extended Student Illness: For extended illness beyond the 10% rule, the student is required to submit a physician's written permission to return and participate in learning activities essential to meeting course outcomes/objectives.

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BACHELOR OF SCIENCE IN NURSING PROGRAM**

TESTING POLICY

Examinations are to be taken on the scheduled date. Should extenuating circumstances (serious illness, death in the family, military obligation) occur at the time of any scheduled examination, it is the student's responsibility to contact the course coordinator *prior* to the examination. Students reporting late for tests may not be allowed to take the test at that time. The instructor reserves the right to administer a different form of the test, including essay or oral, if a student is tardy or absent for an examination. Make-up exams are to be administered during the last week of the semester or at the discretion of the course coordinator. When the student misses a scheduled exam, documentation may be required at the discretion of the instructor.

All exams given in nursing are the property of the department. When paper/pencil exam is administered, each exam is to be returned to the instructor along with accompanying answer sheet. Each exam and answer sheet is numbered correspondingly. If either examination or answer sheet is missing a grade of "zero" will be recorded.

Classroom Management during Tests

In accordance with the National Council of State Boards of Nursing (NCSBN) practice, the following rules and regulations will be adhered to during exams and reviews administered by the BSN Program.

1. Personal items not to be accessed
 - a. Any educational, test preparation or study materials
 - b. Cell/mobile/smart phones, tablets, smart watches, MP3 players, fitness bands, jump drives, cameras or any other electronic devices
 - c. Bags, purses, wallets, non-smart watches
 - d. Coats, hats, scarves, gloves
2. Confidentiality
 - a. Students are not to disclose or discuss with anyone information about the items or answers seen on exams, including posting or discussing questions on the internet and social media websites).
 - b. Exam items may not be reconstructed using memory of the exam
 - c. Exam items and/or responses (in any format) or notes about the exam may not be created.
3. Test Administration
 - a. Exams are administered through ExamSoft via computer.
 - b. When student computers are used, the exam must be downloaded by the designated date/time. When University computers are used, the exam will be downloaded prior to the start of the exam.

- c. Students must take their own exam.
 - d. When exams are administered electronically, students may not tamper with the computer or use it for any other function other than taking the exam.
 - e. Students may not engage in disruptive behavior at any time.
4. Only calculators provided by the Department of Nursing or enabled on the exam platform may be used.
 5. Ear plugs may be allowed at the discretion and inspection of the exam proctor. Other personal belongings may be prohibited at the proctor's discretion.
 6. Students are not allowed to ask questions during the exam.
 7. Students are allowed to leave the room during testing at the discretion of the proctor and may be monitored while outside of the room.
 8. No food or drinks allowed during testing.
 9. Faculty will take appropriate action upon suspicion of academic misconduct.
 10. Any scratch paper provided to the student must be returned to the proctor prior to the student leaving the room.

Posttest Discussion

1. In-class posttest discussions are driven by the test analysis.
2. Students must use professional, respectful communication during posttest discussions.
3. Students are not to disclose or discuss with anyone exam content discussed during the posttest discussion.
4. Students have one week to notify the course coordinator of their request to discuss exam items after the posttest discussion.
5. All students earning less than a 77% on an exam must make an appointment with the faculty. Students who do not follow this policy will be contacted by the faculty for a discussion of the importance of remediation for success in the nursing program.

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GRADING SCALE

100 – 93	=	A
92 – 85	=	B
84 – 77	=	C
76 – 69	=	D
68 – 00	=	F

Students must achieve an average of at least “C” on all theory work and a “Satisfactory” on all clinical work to successfully complete the course. Satisfactory completion of both theory and clinical are required. For example, a 90% on theory and “Unsatisfactory” on clinical will result in failure of the course and vice versa. Additionally, there is no rounding of grades. For example, a 76.9% equals a grade of D.

Adopted: January 1987

Revised: 5/92; 8/98; 7/14

Reviewed: 8/00; 8/01; 7/05; 7/15; 8/16; 8/17; 7/19; 8/2020; 8/2021; 8/2022; 7/2023

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ACADEMIC DISHONESTY POLICY

As members of the Nicholls State University community, nursing students are expected to uphold the highest standards of academic and personal conduct. Academic dishonesty violates these standards as well as the trust and commitment among students and faculty to instill and to maintain the principles of integrity, responsibility, and respect for others.

Cheating, which includes plagiarism, is the actual or even the attempted use of deception or fraud to improve one's grade or academic standing or to aid another student in doing so. Examples of cheating and plagiarism include, but are not limited to:

- Use of unauthorized materials during an exam, to include smart watches, phones, tablets, etc.
- Giving aid to or receiving aid from another student during any exams or individual assignments
- Standing in for another student during an exam
- Stealing, distributing, or having any unauthorized access to a copy of an exam or revising one's answer on a graded exam for the purpose of claiming a grading error
- Use of falsified data and/or references
- Divulging any item or items, all or in part, on an exam, to any person or entity for any reason
- Possessing, reproducing, taking a picture of the exam/quiz, or disclosing any exam materials, including the nature and content of exam items, to include notes/notes from students in higher courses/program graduates, test study guides, etc. that specifically indicate test items or answers
- Use of unauthorized materials in preparation of an assignment or representation of the work and ideas of others as one's own. Students should only use resources approved by the department
- Copying someone else's phrase(s) or sentence(s) without placing quotation marks around the copied phrases(s) or sentence(s)
- Not supplying proper documentation or bibliographical information for the ideas, arguments, findings, or interpretations of data made by others paraphrased or quoted in an assignment
- Submitting another person's work as one's own (including, but not limited to submitting a paper or report purchased from a term paper service or one composed by a tutor, hired writer, student, friend, or relative)
- Recording and/or disseminating lectures/discussion without the expressed permission of the faculty

ARTIFICIAL INTELLIGENCE (AI) USE POLICY: This policy covers any generative AI tool, such as ChatGPT, Elicit, etc. This includes any work or content submitted by a student for course credit.

- You are discouraged from using AI tools UNLESS under direct instruction to do so from your instructor. If you are unsure or have questions, contact your instructor BEFORE using AI for any assignment.
- If the use of AI is permitted, you must indicate what part of the assignment AI produced and what you produced.
- Failure to correctly acquire permission and/or attribute generated content is plagiarism and will be treated as such.

And while individual faculty members are allowed to restrict, extend, or modify the university's general definition of cheating to better accommodate specific course learning outcomes, the Department of Nursing is unified in its definition and interpretation of cheating and the resultant consequences. Hence, the Department of Nursing has a zero tolerance for cheating. Any/all student(s) who are caught cheating/plagiarizing, to include students who solicited the information, and those students who are in receipt of the information, unsolicited, but failed to report the action, will receive a grade of "F" in the course and is grounds for dismissal from the program. The Academic Dishonesty Reporting Form will be completed by the faculty member and submitted to the Office of Academic Affairs via the Dean of the School of Nursing. All students should carefully review the course syllabus, the [Student Policy and Procedure Manual](#), and the BSN Student Handbook for the Academic Grievance Procedure for Students.

Additionally, it is important the faculty member has sufficient evidence to substantiate the allegation (i.e., cheating) in the event a grievance is filed or litigation is pursued by the student outside the university. Hearsay is not sufficient evidence. If students are making the allegation of cheating against another student(s), the allegation or charge should be obtained in writing and dated stating specifically what was witnessed (not what was heard). The student(s) making the allegation must also agree to testify before a grievance committee at the college and/or university level if that becomes necessary. If the student(s) making the allegation is unwilling to put in writing what was seen and possibly testify before a committee, then the allegation or charge of cheating or any other violation of the [Student Policy and Procedure Manual](#) should be dismissed.

Multiple cheating offenses: The Academic Integrity Section of the Student Policy and Procedure Manual includes a requirement that faculty file a charge complaint statement with their respective dean whenever a student is confronted or disciplined for cheating. The Office of Academic Affairs will maintain these records, and any student confronted and/or disciplined for multiple offenses of academic dishonesty will be brought before the Academic Affairs Integrity Committee for further review and potential sanctions. Please read the [Student Policy and Procedure Manual](#) for further details regarding this policy.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

GENERAL STUDENT COMPLAINTS: PROCEDURE FOR STUDENTS

The BSN program follows the established policies of the University for Student Complaints. The full policy and procedures are located in the [Student Policy and Procedure Manual](#). *The Student Policy and Procedure Manual* and the *General Complaint and Reporting Form* can be accessed online through the University website.

General Student Complaints

General complaints related to this policy typically involve unfair treatment, generally unequal treatment, substandard physical facility conditions, behavior that a student may feel is unjust or creates unnecessary hardship, or other general concerns that warrant actions and are not included in the exclusions list below which have separate complaint policies and protocols.

Students are encouraged to seek informal resolution of complaints with the individual or department with whom the issue is associated. If the result is unsatisfactory to the student or directly approaching the individual or department is inappropriate or unsafe, students may file a formal written complaint by completing the *General Complaint and Reporting Form* which can be found on the web pages of Student Affairs, Dean of Students, Student Policy and Procedure Manual, University Police, Student Government Association, and Human Resources. Note, the student must file the formal complaint within 6 months of the date the alleged incident occurred.

Exclusions

The general complaint process does not apply to certain situations that may have specific sets of protocols for response governed by other entities, regulations, or mandates. The list below addresses most of these but should not be considered exhaustive. If you are looking for a particular area that is not on this list, please contact the Dean of Students office for assistance.

Academic Grievance
Student Misconduct
Title IX/Power Based Violence
Residential Living Exemptions
Parking
Discrimination
Academic Suspension/Probation Appeal
Financial Aid Appeal
Immunization Exceptions

Revised: 8/15; 7/18; 7/19; 7/2024

Reviewed: 8/16; 8/17; 8/2020; 8/2021; 8/2022; 1/2023; 7/2023

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

STUDENT ACADEMIC GRIEVANCES: PROCEDURE FOR STUDENTS

The BSN program follows the established policies of the University for Student Academic Grievances, namely, academic matters and grade appeals. The full policy and procedures are located in the [Student Policy and Procedure Manual](#), under the section heading of “Academic Affairs.” The *Student Policy and Procedure Manual* can be accessed online through the University website. Information on informal and formal procedures, along with the *Student Academic Grievance Form*, can be located on the respective webpage.

Student Academic Grievances

Each academic college will implement the following procedures for the resolution of academic grievances filed by students. These procedures are to be followed by a student who feels he/she has been mistreated with respect to an *academic matter*. These procedures are also to be used in *grade appeals*. The student may seek the assistance of the Student Government Association (SGA) Director of Student Rights and Grievances at any time during the informal and formal procedures. All academic grievances must be initiated within the prescribed time period(s) indicated in the following *Informal* and *Formal Procedures*.

Informal Procedures

1. The student must attempt to resolve the academic grievance with the faculty member involved within 60 calendar days of the alleged incident.
2. If the matter is not resolved with the faculty member, for whatever reason, the student may pursue the issue with the head of the faculty member’s department within 90 calendar days of the alleged incident by completing a Student Academic Grievance Form and submitting it to the head of the department in which the faculty member teaches. The department head may use a department based grievance committee to review and make recommendations regarding the matter. A copy of the Academic Grievance Form is available in every academic department office and Student Life.
3. If the matter is not resolved at the department level, the student may submit a copy of his/her academic grievance form to the Academic Dean of the College in which the faculty member teaches. The grievance form must be filed with the Academic Dean within six (6) months of the alleged incident. The Dean should informally review the merits of the complaint and attempt to facilitate a resolution of the matter before initiating the formal process.

Formal Procedures

1. The Academic Dean shall verify that the 6 month deadline for filing the academic grievance has been met. If so, the Academic Dean shall refer the matter to the College Academic Grievance Committee within ten (10) work days after receipt of the grievance

form and/or attempts to facilitate an informal resolution. If the form is not submitted to the Academic Dean within six months of the alleged incident, the Academic Dean shall inform the student in writing that the period for acting on the matter has expired; and therefore, the form (petition) is rejected and the matter closed.

2. If the student has met the deadline, the Academic Dean shall provide the chair of the committee with copies of all pertinent documents related to the academic grievance.
3. The hearing will be scheduled by the chair at a date and time agreed upon by the complainant and the alleged offender. If an agreement is not reached, the chair will set the date and time for the hearing. The chair will make every attempt to schedule the hearing within 30 work days of receiving the grievance. The chair may postpone the hearing for good cause. The decision of the chair to postpone or reschedule a hearing is final and not subject to appeal.
4. The chair will caution both parties that there should be no communication between them concerning the grievance. Both the grievant and the faculty member shall refer all matters pertinent to the academic grievance to the chair.
5. The grievant and the faculty member will provide the chair with a list of witnesses to be called. Each party is responsible for notifying his/her witnesses of the meeting. The chair may assist with summoning witnesses to the hearing; however, the responsibility of producing witnesses rests with the respective parties involved.

The Academic Grievance Committee composition, duties, hearing procedures, and appeal procedures can be found in the [Student Policy and Procedure Manual](#) under the section heading “Academic Affairs” opening subsection “Academic Grievance Committee.”

**THIBODAUX REGIONAL
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DEPARTMENT OF NURSING**

CLINICAL COMPLIANCE: STUDENTS

STUDENTS

Evidence of all requirements must be provided and validated through the clinical compliance management system *prior* to participating in any clinical experience. Approval for entry into clinical is authorized by the respective program clinical coordinator.

1. **CPR Certification:** Must be *American Heart Association* or American Red Cross BLS Course. Copy of BOTH the front AND the back of your card is required and the card MUST be signed. Renewal date will be set based on expiration of certification. E-cards are also acceptable. Temporary certificate or letter from provider will be accepted and temporarily approved for 30 days by which time the permanent documentation must be uploaded.
2. **Health Insurance:** As nursing students may be exposed to a number of communicable diseases while caring for clients in clinical settings, they may be at a higher risk than other University students for contracting a communicable disease. For this reason, the Department of Nursing requires all students enrolled in clinical nursing courses to retain a health/hospitalization insurance policy. Provide a copy of both sides of your current health insurance card OR proof of coverage.
3. **Physical Examination:** Upon admission to the nursing program, a physical examination must be completed. The physical exam form is to be filled out by a physician or nurse practitioner.
4. **Professional Liability Insurance:** Nursing students enrolled in clinical nursing courses are required to have liability insurance. Professional Liability Insurance for Nursing Students with a minimum of \$1,000,000 coverage for each claim and \$6,000,000 annual aggregate. Students holding an LPN or RN license must have coverage for the applicable license with a Student Nurse rider. Provide documentation of current Professional Liability insurance coverage. The date of expiration will be set as the renewal date.
5. **Professional License:** If a student is an LPN or RN upon admission to the clinical nursing course, the appropriate license must be uploaded annually.
6. **Proof of LSBN Approval:** Students must provide documentation of initial and ongoing approval to enroll in clinical nursing courses.
7. **Influenza Vaccination:** Students must provide documentation of flu shot administered during the current flu season (September-March).
8. **Varicella:** Students must provide documentation of 2 vaccines or a positive antibody titer. A series in process is acceptable with documentation of vaccination and the next actions scheduled according to CDC guidelines. Titers are only accepted if submitted on a Lab Report. For negative or equivocal titers, documents of a repeated vaccine series is required.

9. **Measles, Mumps & Rubella:** Students must provide documentation of 2 vaccines or 3 component positive antibody titer. A series in process is acceptable with documentation of vaccination and the next actions scheduled according to CDC guidelines. Titers are only accepted if submitted on a Lab Report. For negative or equivocal titers, documentation of a repeated vaccine series is required
10. **Tetanus/Pertussis:** Students must provide documentation of vaccination administered within the past 10 years.
11. **Hepatitis B:** Students must provide documentation of three vaccines or a positive antibody titer. A series in process is acceptable with documentation of vaccination and the next actions scheduled according to CDC guidelines. Titers are only accepted if submitted on a Lab Report. For negative or equivocal titers, documentation of repeated vaccine series is required.
12. **Tuberculosis (TB):** Students must provide documentation of one of the following:
 - Negative 1-Step TB skin test
 - If positive, get blood test.
 - Negative blood test (lab report required)
 - If have a negative blood test after a positive skin test, submit questionnaire with negative blood test results and yearly thereafter.
 - If both skin test and blood test give a positive result, ALL of the following are required:
 - Clear chest x-ray administered in the past 12 months
 - Symptom free TB questionnaire (available to download in the clinical compliance management system)
 - Physician clearance documented on letterhead
 - The renewal date will be set at 1 year for skin and blood tests and will have to submit a symptom free TB questionnaire yearly.
 - Upon renewal, one of the following is required:
 - Negative 1-Step TB skin test
 - Negative blood test (lab report required)
 - Symptom free TB questionnaire for those who have had a positive result in the past
 - Note: Symptomatic TB questionnaires require:
 - Physician clearance documented on letterhead AND
 - Clear chest x-ray after reported symptomatic TB questionnaire
13. Successful completion of **HIPAA & OSHA** certification course upon admission to the program with no renewal requirements.
14. **COVID 19:** Students must provide their COVID-19 vaccination status per agency guidelines to the Nicholls BSN Clinical Coordinator. Students who are not fully vaccinated should adhere to agency guidelines.

Additional requirements not uploaded to the clinical compliance management system include:

1. Written physician's release if required to return to any class, laboratory, and/or clinical experience for any event, injury, illness, or other health related situation that may affect safety.
2. It is your ethical responsibility to know your HIV status. If you believe you are at risk for HIV exposure or HIV antibody development, then it is your professional obligation to be tested via your individual physician and follow his/her orders for care/treatment.
3. Student Responsibility to Inform Regarding a Limitation of Condition – In the event a student is experiencing any limitation or condition (for example, pregnancy, high blood pressure, epilepsy, diabetes) or is on prescription medication that may impede performance whereby safety is jeopardized, it is the responsibility of the student to disclose this information and/or list of medications to their clinical instructor.

No waivers for vaccines are accepted. Students who are not fully vaccinated should adhere to agency guidelines. Students who fail to provide required evidence of clinical compliance as listed above will not be allowed to enter clinical nor remain enrolled in any clinical course. Failure to renew health requirements that are expired during the semester will prevent the student's participation in clinical activities, which will constitute an unexcused absence.

The department assumes no liability for students with compromised immune systems acquiring other communicable diseases while assigned to specific units and/or patients in clinical learning experiences.

Adopted: February 1992

Revised: August 1996; January 1999; May 2002; 7/09; 6/13; 7/14; 7/15; 8/16; 8/17; 7/19; 8/2021; 8/2022; 7/2024

Reviewed: August 2001; 7/18; 8/2020; 7/2023

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

(MALPRACTICE) INSURANCE – STUDENTS

POLICY:

Malpractice is a negligent act or acts of persons engaged in professions or occupations in which highly technical or professional skills are employed. The elements of proof for nursing malpractice are: a) a duty of the nurse to the client; b) a breach of the duty on the part of the nurse; c) an injury to the client; and d) a causal relationship between the breach of the duty and the client's subsequent injury.

Registered nurses and nursing students are responsible for their own actions, whether they are independent practitioners, employees, or students of an institution. To avoid charges of malpractice, registered nurses and nursing students need to anticipate and recognize nursing situations in which negligent actions may occur and take the appropriate preventive actions.

As a measure of protecting the nursing student in situations of actual or potential malpractice, all nursing students enrolled in clinical nursing courses are required to have liability insurance in the amount of \$1,000,000 per occurrence with \$6,000,000 aggregate coverage. The liability insurance policy must remain current while enrolled in all clinical nursing courses.

PROCEDURE:

1. Nursing students will be informed of the Liability Insurance Policy upon admission to clinical nursing courses. The liability insurance policy will be published in the nursing student handbook and nursing faculty handbook.
2. Copy of current liability (malpractice) insurance certificate must be electronically submitted to and verified by the clinical compliance management system. The BSN Program Coordinator and BSN Clinical Coordinator will have electronic access to view student documentation compliance status. The BSN Clinical Coordinator will communicate student compliance status to the respective Course Coordinators. The Department Head will document the verification of liability insurance via electronic file.
3. Students who fail to produce evidence of current liability insurance will not be permitted to attend clinical and may jeopardize course/program eligibility.

Adopted: January 1999

Revised: 5/06; 8/15; 8/16; 8/17; 7/18

Reviewed: 8/01; 7/05, 7/14; 7/19; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

**THIBODAUX REGIONAL
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at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

STUDENT DRUG AND ALCOHOL TESTING POLICY

Student drug testing in the Department of Nursing is necessary pursuant to Louisiana Revised Statute 49:1015 (<http://legis.la.gov/Legis/Law.aspx?d=103477>) as nursing students occupy both safety and security sensitive positions. Responsibilities include administering, monitoring, and accounting for controlled substances and other drugs in the clinical environment. In addition, nursing students deal with patient care situations where critical thinking and judgment must occur in a split second and where human life can be in jeopardy. Individuals practicing in a clinical setting who are impaired by drugs and/or alcohol may be placing themselves, as well as the public, at risk.

Nicholls State University's Department of Nursing is committed to providing a safe, productive, healthy and wholesome environment for the public, patients, and students. Nicholls State University's Department of Nursing is committed to creating and maintaining a drug-free environment.

The use of illegal drugs and/or the abuse of legal drugs or alcohol by our undergraduate or graduate nursing students is incompatible with our goal of delivering the highest quality nursing education programs and safe, patient care.

POLICY:

It is the policy of the Department of Nursing to prohibit the use, abuse and presence of alcohol, illegal or unauthorized drugs, and other dangerous substances in the bodies of its undergraduate or graduate nursing students *while on duty* engaged in any course, classroom, laboratory, and/or clinical setting, on or off Nicholls State University's premises. This includes, but not limited to, any breaks and meal periods outside of the class, lab, and/or clinical setting.

It is the policy of the Department of Nursing to provide drug/alcohol testing for *all program-enrolled nursing students* who occupy both safety and security sensitive positions, for reasonable suspicion of a student's drug and/or alcohol involvement, for post-accidents, and random testing.

SCOPE:

- A. All new students admitted to the program of study after admission has been granted and as a condition of enrollment. Students selected for admission to the undergraduate or graduate nursing program are admitted pending a negative drug test. Admission may be withdrawn for a student testing positive.
- B. After reasonable suspicion of substance abuse by a current, program-enrolled student, also known as "for cause".

- C. Post-accident for current, program-enrolled students.
- D. Randomly in the fall, spring, and exceptional session (as applicable) of each academic year for any/all current, program-enrolled students.
- E. Admission and/or continued progression in the undergraduate or graduate nursing program is contingent upon a willingness to comply with this policy AND a negative drug test. ***A positive drug test, a student's refusal to submit to a drug test, or failure to report for drug testing within a specified time frame may result in termination with no recourse for re-application.***

SUBSTANCES TESTED:

- A. Amphetamines, Barbiturates, Benzodiazepines, Cannabinoids, Cocaine, Methadone, Opiates, OxyContin, Phencyclidine, and Propoxyphene
- B. Alcohol

TESTING METHODOLOGY:

- A. Urine testing for ten (10) drug panel
- B. Breath Alcohol Test (for cause only)

DEFINITIONS:

For purposes of this policy, the following words or phrases shall have the following meanings:

- A. **Clinical Student/Program-Enrolled Student** – a student admitted to the undergraduate or graduate nursing program and/or enrolled in a nursing course that requires clinical and/or laboratory experience and who is involved in the aspects of actual or simulated clinical experience, and/or enrolled in any cognate course as defined by the curriculum for each program.
- B. **Controlled or Illegal Drug** – includes narcotics, hallucinogens, depressants, stimulants, look-alike drugs, or other substances which can affect or hamper the senses, emotions, reflexes, judgment, or other physical or mental activities. Included are controlled medications or substances requiring prescriptions by a licensed practitioner in a medical setting to address a specific physical, emotional, or mental condition.
- C. **Drug** – any chemical substance that either produces physical, mental or emotional changes in the user, or one that is capable of altering the mood, perception, pain level, or judgment of that individual.
- D. **Legal Drug** – includes drugs prescribed by a licensed practitioner and over-the-counter drugs, which have been legally obtained and are being used solely by the individual and for the purpose for which they were prescribed or manufactured in the appropriate amount.
- E. **Job-Related Accident/Injury** – any student behavior, action or inaction, which resulted in an accident, injury, or illness. Usually the accident/incident results in loss work time by the student, serious or significant injury or illness to a patient, visitor, colleague, or an accident involving a vehicle, equipment or property.

- F. **Medical Review Officer (MRO)** – a licensed physician knowledgeable in the medical use of prescription drugs and the pharmacology and toxicology of illicit drugs. The MRO will review and interpret positive test results and will examine any alternative medical explanations for the results. The MRO also reviews the chain of custody documentation to ensure that the integrity of the specimen is maintained throughout the entire process.
- G. **Negative Result** – no detection of an illicit substance in the pure form or its metabolites at or above the threshold level by a drug-screening test.
- H. **New Student** – any nursing student accepted for admission to the undergraduate or graduate nursing program, and/or admission to the first clinical course(s) and/or any cognate course of the program of study, any transfer student entering into the program, or any student applying to re-enter a clinical nursing course after being out of school for one year or more.
- I. **Non-negative Drug Test** – defined as testing positive for a specific drug at a specific ng/ml and constitutes confirmatory testing.
- J. **Post-Accident/Incident** – any student involved in either a work-related accident or a work-related incident involving safety or patient care will be subject to drug/alcohol testing.
- K. **Random Testing** – unannounced drug/alcohol testing spread throughout each academic semester.
- L. **Reasonable Suspicion Testing or “For Cause”** – any student may be tested who is suspected of being under the influence of alcohol or drugs where the suspicion is based on, *but not limited to*, any of the following:
 1. Observable behavior or physical symptoms such as staggered gait, slurred speech, glassy, blood shot eyes, body odors, and unsatisfactory work performance
 2. A pattern of inappropriate, abnormal or erratic behavior
 3. Reliable objective information/observation from independent sources
 4. Evidence of drug tampering or misappropriation
 5. Arrest or conviction of a drug/alcohol related offense
 6. Being identified as the subject of a criminal investigation regarding drugs
 7. Post-accident when accompanied by individualized suspicion that the individual may be under the influence of alcohol or drugs
 8. Patterns of absenteeism or tardiness
 9. Unkempt appearance
 10. Absent from class/lab/clinical unit without explanation
- M. **Safety-sensitive or Security-sensitive position** – a position that has duties of such nature that the compelling interest to keep the student drug-free outweighs the student’s privacy interests. The following may fall in this category:
 1. Positions with duties that allow access to controlled substances
 2. Positions with duties that are required to handle or transport hazardous materials or waste infectious material
 3. Positions with duties to operate equipment.
 4. Positions for which there is a high likelihood of causing serious harm to self, other colleagues, the general public, if the student is under the influence of drugs or alcohol
 5. Positions for which the consequences of failure to perform duties in a safe and proper manner are likely to result in serious injury or harm

- 6. Positions which involve the custody of data that are of such a nature that it effects or may affect the security of the position, department, or unit to which the student is assigned
- 7. Positions with any access to patients
- N. **SAMHSA Laboratory** – a laboratory certified for forensic urine drug testing by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- O. **Stand Down** – the term used to indicate the period of time that occurs when a non-negative screen is obtained and then confirmed as either negative or positive at which time the student is not allowed in any class, lab, and/or clinical setting.
- P. **Substance Abuse** – the term used to indicate excessive and/or inappropriate use as defined by this policy of a drug/alcohol regardless of whether an individual has reached the point of true dependence on it.
- Q. **Under the Influence** – being unable to perform work in a safe and productive manner, being in a physical or mental condition, which creates or is likely to create a risk to the safety and well-being of the individual, colleagues, patients, the public, or school/hospital property. Receiving a positive test result.
- R. **While on Duty** – includes the time from the beginning to the end of a student’s scheduled course/work period/class/lab or clinical including breaks and meal periods. Includes all times when a student is involved in the aspects of a course/class, actual, observational, or simulated clinical experiences.

PROCEDURE for DRUG TESTING:

- I. OVERVIEW: Significant aspects of the administration process for urine drug testing:
 - A. **Confidentiality**. All drug testing under this policy will be performed in strict confidence. Qualitative information regarding results, such as the identification of a substance, will be provided only to the designated Medical Review Officer (MRO) pursuant to current law who will report final results to the department head. Results of the test will be released to appropriate licensing agencies, i.e., Louisiana State Board of Nursing, on a need to know basis. All drug test results will be accessible by the Company.
 - B. **Privacy**. All urine specimens shall be collected with regard to the privacy of the individual at a designated, qualified laboratory (on-and/or off-site collection). However, direct observation of the individual during collection of the urine specimen may be allowed if there is reason to believe the individual may alter or substitute the specimen to be provided, has provided a urine specimen outside of the acceptable temperature range, has provided a urine specimen which was verified by the MRO as being adulterated based upon the determination of the laboratory, has been observed by the collection site person in conduct indicating an attempt to substitute or adulterate the sample, has previously been determined to have a urine specimen positive for one or more drugs, or is being tested post-accident or based upon reasonable suspicion or cause. The Department Head of Nursing shall review and concur in advance with any decision by collection site

personnel to obtain a specimen under direct observation. All direct observation shall be conducted by a same gender collection site person.

- C. **Chain of Custody**. All samples collected for drug testing shall be packaged, sealed, labeled, and transported with the proper chain of custody procedures for analysis to a SAMHSA lab. These procedures shall require an appropriate chain of custody form be used from the time of collection by the laboratory and that upon receipt in the laboratory, an appropriate chain of custody forms shall, at a minimum, include an entry documenting date and purpose each time a specimen is handled or transferred and shall identify each individual in the chain of custody.
- D. **Split Sample Collection**. All specimens received will be a split sample. The donor shall urinate into a collection container, which the collection site person, in presence of the donor, after the initial examination, pours into two specimen bottles. The first bottle is to be used for the Department of Nursing's mandated test, and shall have at least 30 milliliters (30 ml) of urine. Up to sixty milliliters (60 ml) of the remainder of the urine shall be poured into the second split specimen bottle. A chain of custody form shall accompany each bottle processed under split specimen procedures. The first sample shall be sealed, labeled, and stored in strict accordance with SAMHSA guidelines. The second sample shall be analyzed by the company as contracted. Specimens that test positive on the initial screening or are adulterated shall be recorded as such and the first sample of the split specimen collection shall be forwarded to a SAMHSA lab for confirmatory testing. The results of the initial screening drug test shall not be used as a basis for rendering permanent, mandatory, or discretionary consequences to the student submitting the specimen.
- E. **Review of Test Results by MRO**. The Department of Nursing contracts with the Company who provides neutral, professional medical personnel and certified laboratories for the collection (on-and/or off-site), custody, storage, and analysis of urine specimens. The Medical Review Officer (MRO) has a complete understanding of substance abuse disorders, chain of custody, collection and laboratory analysis and client requirements and combines professionalism with state-of-the-art computer applications to deliver timely, quality results.

Specimens will be collected at the Company's sanctioned collection sites and/or during an on-site collection. All negative results of drug testing shall be *electronically* accessible by the department head. A secured database/data storage system is provided by the Company that is accessed through the Internet.

The MRO shall receive all results from the laboratory and will review all confirmed non-negative drug testing results and shall contact the student directly, on a confidential basis, to determine if the student wishes to discuss the test results. The MRO will question the student regarding prescription and over-the counter drug use to validate the reason for the positive result. If the student is able to present satisfactory evidence to the MRO, the student may be permitted to continue in the clinical course. Prescriptions are valid for one calendar year. If, after making all reasonable, documented efforts, and the MRO is unable to reach the student

directly, the MRO shall contact the department head who shall direct the student to contact the MRO as soon as possible. The MRO may verify a test is positive without having communicated directly with the student if the student expressly declines the opportunity to discuss the test, or, more than seven (7) working days have passed since the student was successfully contacted by the department head. The MRO may authorize re-analysis of the original sample and shall do so if the student requests it within seventy-two (72) hours of the student's having received actual notice of his/her positive test.

The MRO shall report a test as negative if there is a legitimate medical explanation for a positive test result or if the evidence is scientifically insufficient. In the event of a non-negative result, the student is not permitted to attend class or clinical until a conclusion is reached. This time period is also known as "stand-down".

II. Breath Alcohol Testing: Breath Alcohol Testing will be performed by a qualified lab contacted by the company for reasonable suspicion or "for cause" only. An instructor or Department of Nursing designee will accompany the student to the screening location and will afford the student visual and oral privacy to the greatest extent practical. A confirmatory test will be conducted using an approved Evidential Breath Test (EBT). If breath alcohol concentration (BAC) is 0.020 or greater, a second confirmation test will be performed at that time. A confirmed alcohol concentration of 0.020 or greater will be considered a positive test.

III. Violations that may Result in Termination from the Nursing Program:

1. Refusal to sign consent/authorization/release to submit to drug testing.
2. Refusal to submit to a drug or alcohol test.
3. Leaving the test site prior to submitting a specimen.
4. Failure to cooperate in any way that prevents the completion of the test.
5. Failure to report for testing within a specified time frame.
6. Submission of an adulterated or substitute urine sample.
7. Buying, selling, dispensing, distributing, possessing alcohol or unauthorized controlled substances while on duty on or off Nicholls State University premises.
8. Unjustifiable possession of drug-related paraphernalia while on duty on or off Nicholls State University premises.
9. Unjustifiable possession of prescription drugs or any dangerous controlled substances

IV. Financial: All costs associated with drug testing are the responsibility of the student.

V. Steps:

1. The Department Head of Nursing or designee will notify the student to report for drug testing. Note, if there is a legitimate, documented scheduling conflict, the student is expected to contact the Department Head or designee immediately.

2. Upon notification, the student must create/access their respective clinical compliance management system account to order and pay for the drug test and choose the nearest/most convenient collection site.
3. Once the order is processed, the student will receive, via email, an e-chain of custody. The student must print the e-chain and report to the respective collection site for drug testing.
NOTE: From the time the e-chain is issued to the student, the student has 5 days to report for drug testing.
4. In order to test, the student must present a valid driver's license or official government issued identification. Students are expected to maintain professional behavior at all times.

VI. Agreement to Submit to Drug Testing and Authorization for the Release of Results to the Department Head:

1. Each student is required to complete and sign the *Agreement to Submit to Drug Testing and Authorization for the Release of Results* form. By signing the document, the student indicates that they have read, understand, and agree to the Department of Nursing Drug and Alcohol Testing Policy. By signing the form, the student indicates consent for drug testing by the designated laboratory and the subsequent release of the results to the Department Head of the Department of Nursing, Louisiana State Board of Nursing (LSBN), or any governing bodies. The signed Agreement form is valid for the duration of the student's enrollment in the program of study. The signed form will be placed in the student's file in the Department of Nursing office.

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AGREEMENT TO SUBMIT TO DRUG TESTING AND AUTHORIZATION FOR RELEASE OF RESULTS

I understand that as a requirement for admission to the Nicholls State University undergraduate or graduate nursing program, I must submit to a drug test at a designated laboratory (on-and/or off-site), which will provide the results of the test to the Department Head of Nursing. I understand that if the test result is positive, I may be denied admission to the program of study.

I further understand that I will be subject to drug testing while enrolled in the undergraduate or graduate nursing program. A positive drug test, refusal to submit to testing, or failure to report for drug testing within a specified time frame may result in dismissal from the program of study.

By signing this document, I indicate that I have read, I understand, and I agree to the Department of Nursing Student Drug and Alcohol Testing policy. I understand that a negative drug test is required for admission and progression in the program of study.

This signed document constitutes my consent for drug testing by a Nicholls State University, Department of Nursing designated laboratory. It also constitutes consent for the laboratory to release the result of my drug test to the Department Head of Nursing, Louisiana State Board of Nursing (LSBN), or any governing bodies.

In Witness Whereof, this agreement is executed this _____ day of _____, 20__.

Student Signature

Student Printed Name

Witness Signature

Witness Printed Name

Adopted: 8/2011

Revised: 1/12; 1/13; 7/13; 8/2022

Reviewed: 7/14; 8/15; 8/16; 7/18; 7/19; 8/2020; 8/2021; 7/2023; 7/2024

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

POLICIES FOR CLINICAL PRACTICE

The Louisiana Revised Statute 37: 911 through 37:935 and the Nurse Practice Act refer to the practice of registered nurses. Within this part are provisions referring to student nurses and the practice of nursing as a portion of a program of study in an approved school of nursing.

Section 913 (4) – “Approved program” means a nursing education program approved by the board.

Section 913 (12) – “Nursing diagnosis” means the identification of actual or potential responses to health needs or problems based on collecting, analyzing, and comparing data with appropriate nursing standards to serve as the basis for indicting nursing care or for which referral to appropriate medical or community resources is necessary.

Section 913 (13) – “Practice of nursing” means the performance, with or without compensation, by an individual licensed by the board as a registered nurse, of functions requiring specialized knowledge and skills derived from the biological, physical, and behavioral sciences. The practice of nursing or registered nurse shall not be deemed to include acts of medical diagnosis or medical prescriptions of therapeutic or corrective nature.

Section 913 (16) – “Student nurse” means any individual who is enrolled in an approved program preparing for licensure as a registered nurse.

Section 929 (4) – Exceptions. The practice of nursing as an integral part of a program of study by student nurses enrolled in an approved school of nursing; however the board shall have jurisdiction to assert a disciplinary action over a student nurse who violates any provisions of this Part.

According to the Legal Consultant on the Louisiana State Board of Nursing, student nurses may legally perform any function of a staff RN in this state, provided they have demonstrated knowledge and competence to the faculty who supervises them.

Therefore, Nicholls State University’s Department of Nursing in accordance with the Louisiana State Board of Nursing does state that student nurses may legally perform any function of a staff RN in this state, provided they have demonstrated knowledge and competence to do so and are supervised by the respective faculty. The Department adds the following policies for the practice of student nurses.

In the event that the clinical agency utilized has a more stringent or different policy than those stated below, the policy of the institution will be adhered to.

Blood and Blood Products

1. Students may assist in checking cross matching slips with blood and blood products for compatibility, but are not to be one of the two persons required to do so.
2. Students may administer Rhogam.
3. Students may prime blood tubing and filter with normal saline (only) and initiate infusions (of normal saline only).
4. Students may monitor vital signs during blood and blood products administration.
5. Students must keep staff nurse informed of changes in patient status during administration of blood and blood products.
6. In the event of transfusion reaction, the staff nurse is responsible for reporting the event to the physician and receiving any orders.
7. Students may gather data and specimens required in the event of transfusion reaction.
8. Students may terminate infusions of blood and blood products.

Cancer and Therapeutic/Investigational Drugs

1. Students will not administer any cancer therapeutic or investigational drugs.
2. Students are responsible to know classification, action, potential side effects, dose, contraindications, and nursing implications of each drug their patient receives.
3. Students are responsible to assess their patients regarding their response to these drugs.

IV Medications

Upon satisfactory completion of IV therapy laboratory:

1. Students may check patency of IV lines and flush saline locks.
2. Students may administer IV push/IV piggyback medications.

Hyperalimentation Solutions

1. Students may administer hyperalimentation solutions.
2. Students may perform site care and tubing changes necessary.
3. Students are responsible to monitor urine glucose and ketone values and to observe available serum indicators of nutrition.

Phlebotomy

1. Students may draw blood for lab.
2. Students may draw blood from central lines according to physician and hospital guidelines.

3. Students may draw blood from arterial lines according to physician and hospital guidelines.
4. Students may perform finger/heel sticks for appropriate lab.

Narcotic Administration

1. Students are not responsible for keys to narcotic lock-up.
2. Students will sign out narcotic with faculty member co-signing (dependent upon hospital dispensing system).
3. Students are not responsible for participating in change-of-shift narcotic count, but are responsible to determine accuracy of count with each narcotic removed from lock-up
4. Students will not give narcotics if count is incorrect.

Transcribing Orders

1. Students may transcribe orders on their own patients or those of their team members.
2. Orders must be co-signed by the staff nurse, who first ascertains that all orders have been transcribed correctly.

Verbal/Phone Orders

1. Students cannot accept verbal or phone orders.

**THIBODAUX REGIONAL
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CLINICAL EXPERIENCE – BLOOD-BORNE DISEASE

POLICY:

The Department of Nursing prepares students for technical and professional practice. It is paramount to the educational process that students demonstrate compassionate, humane, and equitable treatment to all persons, regardless of these person's diagnoses, conditions, or treatment regimens. This philosophy of care for students in the department is especially applicable in all clinical experiences regarding blood-borne diseases such as, but not limited to, Human Immunodeficiency Virus (HIV) infection/disease, Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV).

Hereafter in this policy statement, the term blood-borne disease will be used to refer to persons with one or more of the following conditions or infection with a blood-borne pathogen:

- a) A medical diagnosis of HIV infection
- b) A medical diagnosis of AIDS
- c) A medical diagnosis of HBV infection
- d) A medical diagnosis of HCV infection
- e) A medical diagnosis of Human T-Lymphocytic Virus Type I/II (HTLV-I/II)
- f) A positive laboratory result indicating infection with HIV, HBV, HCV, HTLV-I/II

In relation to blood-borne diseases both faculty and students, as participants in an educational program accredited by the CCNE have obligations. The faculty shall:

- a) Impart technical skills and knowledge to students that will reduce the risk of exposure to blood-borne pathogens.
- b) Emphasize to students the importance of "hands on" clinical care, psychosocial skills, and understanding in the care of clients with blood borne diseases.
- c) Provide counseling and support to students throughout the delivery of nursing care to clients with blood-borne diseases.
- d) Reinforce with students the importance of professional accountability in nursing care of the client with blood-borne diseases, especially regarding education, dignity, and confidentiality.
- e) Insist that students adhere at all times to the guidelines issued by the Centers for Disease Control or Occupational Safety and Health Administration or the clinical agency in which the student is participating in a clinical learning experience, concerning both the prevention of infection/transmission of blood-borne pathogens and the care of the patient with blood-borne diseases. These guidelines are usually referred to as Standard Precautions (Universal Precautions) or OSHA Blood-borne Pathogens Standard.

Infections control precautions following the CDC “Standard Precautions” guidelines are taught and validated in Nursing 222 and 223 in the BSN Program prior to clinical experience. These skills are validated in each subsequent course. Students shall appropriately implement “Standard Precautions” for all patients as part of their professional nursing responsibility. OSHA guideline updates will be presented to students and faculty on an as needed basis as major revisions of guidelines are received. Additionally, effective fall 2015, all students enrolled in clinical courses will complete a medical OSHA and HIPAA e-learning module; the completion certificates are a component of clinical compliance.

The student professionally and ethically should:

- a) Provide care to all clients assigned to them regardless of the client’s respective diagnosis, conditions, or treatment regimens. This obligation especially applies to clients with blood-borne diseases. Refusal or failure to do so is contrary to the Nursing Code of Ethics and does not meet the minimum standard for professional nursing practice. Hence, such behavior is unacceptable by any student in the Department of Nursing.
- b) Realize that any person may actually be infected with a blood-borne pathogen but be asymptomatic without clinical evidence of the infection and/or a formal medical diagnosis of a blood-borne disease. Hence, in all client contacts in every clinical experience, students must protect themselves and all others against exposure to blood-borne pathogens by practicing Universal Precautions.

Students are required to respect the confidentiality of clients with blood-borne disease. When a student, while in clinical, experiences an accidental exposure with the potential to transmit infection, the student should be aware that the University will make every effort to maintain confidentiality.

The Department of Nursing hereby asserts that it will not be held responsible if a student, as part of the clinical learning experience, is, in any way or manner:

- a) Exposed to blood-borne pathogens secondary to failure to follow the CDC, OSHA, or clinical agency guidelines for blood-borne pathogens/diseases.
- b) Accidentally exposed to blood-borne pathogens. If the CDC, OSHA, or clinical agency guidelines for blood-borne pathogens/diseases are rigorously followed, the risks of accidental occupational exposures are reduced. However, exposure to or infection to blood-borne pathogens remains a possibility despite adherence to these guidelines.
- c) Intentionally infected by the person/patient with a blood-borne pathogen. Most intentional infection instances can be foreseen, and therefore can be avoided. However, intended exposure to or infection with a blood-borne pathogen may occur with minimal or no warning.

Guidelines for Exempting Students from Clinical Assignment to Patients with a Blood-borne Disease

A value central to the practice of nursing is to provide health care to patients regardless of personal risk of exposure to infectious disease. In order to continue this value, students are required to care for patients with blood-borne (communicable) diseases on the same basis as they are required to care for other patients exercising all due precaution to protect the health of the students/faculty.

In certain situations, students/faculty are relieved of responsibility for care of patients with blood-borne disease. The situations warranting relief of responsibility are when the student has been diagnosed with one of the following:

1. Infections that can be transmitted to the patient
2. Immune-suppressed conditions

Students Who Have Tested Positive for or Contracted a Blood-borne/Communicable Disease

It shall be the legal and ethical obligation of any student who has tested positive or contracted any communicable disease to report this fact immediately to the BSN Clinical Coordinator, BSN Program Coordinator, and Department Head of the Department of Nursing. The student with a communicable disease will be relieved of clinical responsibilities that involve direct patient contact as long as the student has a disease warranted to specific conditions. The student is also obligated to the welfare of fellow students to institute behaviors to prevent spread of any communicable diseases.

The Department assumes no liability for students with compromised immune systems acquiring other communicable diseases while assigned to specific units and /or patients in clinical learning experience.

Adopted: 9/93

Revised: 1/99; 4/02; 7/15; 7/18; 7/19

Reviewed: 8/01; 7/05; 6/13; 7/14; 8/16; 8/17; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

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ACCIDENTAL EXPOSURE TO BLOOD OR BODY FLUID BY SURFACE CONTACT OR BY PUNCTURE

When accidental exposure to blood or body fluid or other potentially infectious materials by surface contact and/or puncture occurs to a Nicholls State University student, while participating in a scheduled clinical experience at an outside agency, the instructor must be notified immediately and subsequently notify the respective Program Coordinator and Department Head of Nursing.

The University Health Services established procedure will be implemented as follows:

1. The student, following the clinical agency's policies and procedures, is to report to the agency's emergency room for treatment, initial testing, and care immediately after the incident. The results will be disseminated to the student according to the clinical agency's policy. The cost of any emergency medical care of treatment shall be the responsibility of the individual receiving the care or treatment. Although it is highly recommended to seek immediate treatment, the student does have the right to refuse treatment.
2. Variance reports are to be filled out to meet both the agency's and the University's requirements. University variance reports are to be delivered to the Head of the Department of Nursing via the Program Coordinator. The Department of Nursing will then deliver a copy of the report to the University Health Services, as applicable, while maintaining confidentiality of the report.
3. University Health Services will then attempt to contact the student as soon as possible following receipt of the variance report. University Health Services will provide written material and information as requested and refer the student to their local health unit or family physician for follow-up. University Health Services will document contact/conversation with the student via the Blood and Body Fluid Exposure form and file with the affiliated variance report. University Health Services will maintain confidentiality of all variance reports. The cost of any medical follow-up care or treatment shall be the responsibility of the individual receiving the follow-up care or treatment.
4. In the event that a student administers care to a client who later in their hospitalization, tests positive for communicable disease, it will be the student's responsibility to undergo testing and follow-up as may be recommended by the clinical agency. The cost of medical care or treatment shall be the responsibility of the individual receiving the care or treatment.

Adopted: February 1994

Revised: January 1999; April 2002; 7/19

Reviewed: August 2001; July 2005; 6/13; 7/14; 7/15; 8/16; 7/18; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

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VARIANCE REPORTING

POLICY:

It is the policy of the Department of Nursing that all variances involving students and/or faculty are to be reported to the Program Coordinator and Department Head as soon as possible (within 24 hours minimum) on a Nicholls State University Department of Nursing "Variance Report" form.

A variance is defined as:

1. Any occurrence on-campus or within a clinical facility that is not consistent with the routine day-to-day operation of the respective agency.
2. Any occurrence that involves treatment or care that is not consistent with the respective agency policies and/or procedures.
3. Any accident, injury or work-related illness (including but not limited to back injuries, strains, sprains, cuts, contusions, fractures, eye injuries, needle-stick injuries, restraint injuries, slips, trips or falls, etc.) which involves a client and student or faculty of Nicholls State University's Department of Nursing.
4. Any variance from physician's orders in the dosage, route, type, quantity, or time of administering of any form of medication or treatment to a patient.
5. All variances in the count of controlled substances (narcotics).
6. Any malfunction of equipment being utilized in the care of a patient (medication and/or treatment).
7. Any abnormalities or reactions resulting from the administering of medication or treatment.
8. Any violation of the Department of Nursing's "Policies for Clinical Practice".

Policies and procedures of the involved clinical agency must be followed at all times. The agency's unit supervisor and/or Risk Management Department is to be notified as soon as possible. Appropriate variance report forms for the clinical agency and nursing department are to be completed and submitted within 24 hours. If needed, faculty anecdotal records may be attached to the University's departmental variance report form.

The following guidelines should be utilized in completing a variance report:

1. Give incident reports high priority.
2. Take responsibility for reporting.
3. Report immediately.
4. Be a witness and refrain from judgment, complaining, retaliation, and blaming.

5. Report only the facts. Report what you saw, what you heard, what you did. Be brief. Use wording that cannot be misinterpreted by outsiders. Quote what was said by the patient, visitors, etc.

If the variance involves injury of a student or faculty member, the student and/or faculty member has the option to report to the agency's emergency department, University Health Services, or their private physician for assessment, treatment, and evaluation using the following guidelines.

- 1) If the nature of the injury is deemed urgent (requiring treatment within one hour) or emergent (requiring immediate treatment), the student or faculty member should report to the nearest emergency department.
- 2) If the nature of the injury is triaged as routine (treatment needed within 24 hours), the student and/or faculty member should consider seeking treatment with the following
 - a. University Health Services,
 - b. their private physician, or
 - c. the local health unit.

If treatment is indicated, students or faculty reserves the right to refuse treatment; however, a waiver must be signed releasing the University of any responsibility associated with the injury. The cost of any emergency care or treatment shall be the responsibility of the individual receiving the care of treatment.

Variance reports must not be filed with or become part of the involved patient's record. All reports and pertinent attachments must be delivered to the Department of Nursing in a sealed envelope as soon as possible (within 24 hours). Variance reports and all information contained therein are the property of Nicholls State University's Department of Nursing and must be treated as privileged and confidential information. The report must be prepared in ink or typed with the full signature and title of the faculty person preparing the report.

PROCEDURE:

1. Notify appropriate agency authorities (unit supervisor, risk management, etc.).
2. Obtain agency and Department variance report forms. Complete agency form as directed by unit supervisor or risk management department.
3. Complete each section of the Department variance report form as instructed on the form.
4. Notify Course Coordinator of variance and forward report to Program Coordinator as soon as possible.
5. Program Coordinator forwards report to Department Head upon receipt.
6. Follow all facility guidelines in the care of a patient involved in a variance.

VARIANCE REPORT FORM

This report is not part of a patient's medical record and is not to be copied or reproduced.

Student Name: _____ Program of Study: _____

N#: _____ Course Name/Number: _____

Agency/Unit: _____

Date of Variance: _____ Time of Variance: _____

Type of Variance (check all that apply)

<input type="checkbox"/> back injury	<input type="checkbox"/> strain	<input type="checkbox"/> sprain	<input type="checkbox"/> laceration
<input type="checkbox"/> contusion	<input type="checkbox"/> fracture	<input type="checkbox"/> eye injury	<input type="checkbox"/> needle-stick
<input type="checkbox"/> slip	<input type="checkbox"/> trip	<input type="checkbox"/> fall	<input type="checkbox"/> dislocation
<input type="checkbox"/> burn	<input type="checkbox"/> allergic	<input type="checkbox"/> equipment	<input type="checkbox"/> restraint injury
<input type="checkbox"/> abrasion	<input type="checkbox"/> reaction	<input type="checkbox"/> malfunction	<input type="checkbox"/> avulsion

other: _____

Unusual Occurrence:

(describe) _____

Variation in Policy or Procedure:

(describe) _____

Medication Variance:

Medication involved: _____

Date discovered: _____ Time discovered: _____ AM _____ PM

Type of variance (check all that apply):

<input type="checkbox"/> med given to wrong patient	<input type="checkbox"/> wrong dose given
<input type="checkbox"/> wrong med given	<input type="checkbox"/> wrong route of admin
<input type="checkbox"/> med not given on time	<input type="checkbox"/> wrong injection site
<input type="checkbox"/> contaminated med	<input type="checkbox"/> adverse reaction
<input type="checkbox"/> med not given	<input type="checkbox"/> IV infiltration
<input type="checkbox"/> narcotic count incorrect	<input type="checkbox"/> IV rate fast/slow
<input type="checkbox"/> IV infusion pump/controller malfunction	

Other: _____

Was unit/agency supervisor notified? yes no

Name of Supervisor: _____

Instructions from Supervisor: _____

Was physician notified? yes no Name of MD: _____

Date notified: _____ Time notified: _____

Notified By: _____

Injured party examined/treated by: University Health Services MD at site

Emergency Dept. MD Agency Employee Health Personal MD

Local Health Dept. Exam/treatment refused

*If exam/treatment is refused, injured party's signature here verifies acceptance of responsibility for seeking medical care.

Injured Party: _____ Date: _____

Witness: _____ Date: _____

Complete the following if applicable:

Patient Name: _____ Medical Record #: _____

Attending Physician: _____

Narrative

Objectively describe in detail what actually occurred. Give facts only. Do not include opinions, conclusions, allegations, conjecture, hearsay, or any nonobjective observation. If additional space is required, use plain paper.

Action Taken

Describe in detail if any action was taken to detect or counteract the possible cause/effect of the variance. Use plain paper for additional space.

Condition

Describe any changes in the patient's condition following the variance. Use plain paper for additional space.

Print name of faculty preparing this report: _____

Faculty Signature: _____ Date: _____

Student Signature: _____ Date: _____

Deliver this report and all pertinent attachments to the Department of Nursing in a sealed envelope as soon as possible (within 24 hours). This document is not part of the patient's medical record and may not be copied or reproduced.

Date Received by Program Coordinator: _____

Program Coordinator Signature: _____

Date Received by Department Head: _____

Department Head Signature: _____

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BACHELOR OF SCIENCE IN NURSING PROGRAM**

STANDARDIZED TESTING POLICY: HESI

POLICY:

The BSN Program uses the Health Education Systems, Inc. (HESI) program as an academic measuring tool. HESI is a comprehensive assessment and review program in an online format that offers focused assessment and remediation resources to students based directly on the NCLEX-RN test plan. HESI Exam Scores can be indicative of the student's level of risk for success in the program and on NCLEX. Full participation in the program allows for the early identification of student's areas for improvement with focused remediation strategies for diverse learning styles. Expected student achievement on the proctored HESI Specialty and Comprehensive Exit Examination exams is a score of 900 or above indicating recommended performance.

Upon entry into the Department of Nursing students utilize the testing program; individual as well as aggregate data, both formative and summative, is obtained. Individual data is utilized to assess student learning and provide an impetus for student-managed preparation and remediation and is a component of student advising. Course-specific aggregate data is monitored by the BSN Program's Coordinator of Assessment and shared with the BSN Program Coordinator, course coordinators, and course faculty to inform course improvement as applicable. HESI data is disseminated to the faculty at the BSN Faculty Assembly meetings. Trended data are a component of the Systematic Plan for Program Evaluation.

Test Preparation

Students are required to complete HESI preparation assignments by the due date and time as indicated on course calendars to derive the maximum benefit. Completion of HESI assignments will serve as entry into the HESI exam. However, when assignments are used as a grade in the course, the first attempt will be used for grade assignment.

- A. For each exam administered in NURS 222, 223, 226, students will be assigned at least one (1) assignment from Sherpath and one (1) assignment from Elsevier Adaptive Quizzing for the NCLEX-RN (EAQ). Additionally, achievement of 77% on the assigned HESI Practice Test is required to enter the course specific HESI test.
- B. For each exam administered in NURS 255, 355, 371, 381, 400, and 420, students will be assigned at least two (2) assignments from Sherpath and one (1) assignment from Elsevier Adaptive Quizzing for the NCLEX-RN (EAQ). Additionally, achievement of 77% on the assigned HESI Practice Test is required to enter the course specific HESI test.

- C. Students enrolled in NURS 427 will be assigned at least six (6) assignments from Elsevier Adaptive Quizzing for the NCLEX-RN (EAQ). Additionally, achievement of 77% on the assigned HESI Practice Test is required to enter the course specific HESI test.
- D. Students enrolled in NURS 428 and 429 will be assigned a variety of adaptive quizzes and/or practice tests based on areas of strength and opportunity from prior cohort reports. Achievement of 77% on any assigned HESI Practice Tests is required.
- E. Students in each clinical course will be assigned Pharmacology questions in EAQ format related to HESI and course outcomes. Sophomore students will complete a minimum of 20 questions in each course; Junior students will complete a minimum of 30 questions in each course; and Senior students will complete a minimum of 50 questions in each course.
- F. Students are required to submit the HESI Student Entry Ticket by the assigned date set by the course coordinator, with the exception of students in NURS 429. Each of the assignments required prior to the assigned HESI exams will be listed on the Entry Ticket. Students not completing course assignments will sit for the course assigned HESI specialty exam(s) as scheduled, and their HESI gradebook score will be lowered by 8 points.

Testing and Grading

Each semester, every student admitted to the Bachelor of Science in Nursing Program and those students enrolled in one or more BSN clinical nursing courses, will be expected to complete all scheduled national standardized exams. Failure to comply may result in the student's ineligibility to sit for the respective final exam(s) and may jeopardize progression in the BSN Program. The financial cost of these exams is included in the assessed student lab fees. Exams are administered and proctored by the BSN Program administration and faculty on dates and times communicated to students in advance. HESI exams will be administered no earlier than the second to last full week of classes each semester.

The course assigned HESI Specialty exams will account for:

- NURS 223 and NURS 226- 8% of the course grade
- NURS 255, NURS 355, NURS 371, NURS 381, NURS 400, NURS 420, and NURS 427- 12% of the course grade for
- NURS 428- 15% for the HESI Pharmacology exam and 20% for the Comprehensive E² exam
- NURS 429- 40% of the course grade from a combination of multiple specialty exams

Grades for the test are assigned based on the student's performance on the initial take of the mandatory proctored exam:

- Students achieving a HESI score of >900 will be assigned a grade of 100.
- Students achieving a HESI score of 876-899 will be assigned a grade of 92.
- Students achieving a HESI score of 850-875 will be assigned a grade of 84.
- Students achieving a HESI score of 800-849 will be assigned a grade of 76.
- Students achieving a HESI score of 750-799 will be assigned a grade of 69.
- Students achieving a HESI score of 700-749 will be assigned a grade of 65.
- Students achieving a HESI score of 650-699 will be assigned a grade of 60.
- Students achieving a HESI score of 600-649 will be assigned a grade of 55.
- Students achieving a HESI score of ≤599 will be assigned a grade of 50

Students scoring below 700, indicating a severe need for further preparation, are required to meet with the respective Course Coordinator, and/or faculty designee to determine the next course of action. A meeting with the Head of the Department of Nursing and/or BSN Program Coordinator may be required. Nursing faculty and/or administration will document student meetings in GradesFirst.

Remediation Plan

1. Following HESI Specialty and the Comprehensive Exit exams, all students are required to remediate. Each student's remediation requirements will be generated following the exam.
2. The student will:
 - a. Receive the HESI Exam reports and correlating online remediation within 48 hours of the exam being closed.
 - b. Complete all remediation packets and case studies provided in HESI Next Gen Student Access specific to the Specialty or Comprehensive exit exam.
3. Remediation must be completed by the designated time and date set by the course coordinator.
4. Work must be completed independently. Sharing of information or working with other students is considered academic dishonesty and may lead to student dismissal.
5. Students will be administered a second version of HESI exams in NURS 429. NURS 429 faculty will ensure that all remediation packets/case studies from prior HESI exams have been completed. Students will be unable to sit for HESI version 2 exams if they have not completed all remediation and may therefore receive a grade of zero on those exams.

NURS 428 Course Policy: HESI Pharmacology Test

In order to begin the preceptorship experience, students must achieve a score of > 850 on the HESI Pharmacology Test. If the student is unsuccessful on the initial attempt, a second attempt will be provided. The student is required to participate in an individualized remediation plan and retake the test as scheduled. If the student is unsuccessful on the second attempt, the student will not be allowed to begin the preceptorship experience but will continue to remediate pharmacology, and a final third attempt will be provided. If the student achieves a score of > 850 on the third attempt, the student will begin the preceptorship experience.

If the student is unsuccessful on the third attempt of the HESI Pharmacology Test, and does not have a previous course withdrawal or failure in the program, the student is *eligible* to re-register for the course in the subsequent semester.

If the student is unsuccessful on the third attempt of the HESI Pharmacology Test, and has a previous course withdrawal or a failure in the program, the student is *ineligible* to continue in the program and will receive a grade of no higher than "D" in the course.

NOTE: If a student is required to retake the pharmacology test, the score from the initial attempt will be recorded in Canvas®.

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STUDENT ENTRY TICKET

Student Name: _____ Course: _____

Students are responsible for completing course assignments located in the Evolve platform in order to sit for the course assigned HESI specialty exam. Students not completing course assignments will sit for the course assigned HESI specialty exam(s) as scheduled, and their HESI gradebook score will be lowered by 8 points. Each of the required components are listed below.

All requirements listed for NURS _____ are due by 4:00 PM on _____.

You must present this worksheet to enter the NURS _____ HESI Exam.

Clinical Videos

Title Score _____

Title Score _____

Sherpath Assignments

Title Score _____

Title Score _____

Elsevier Adaptive Quizzing for the NCLEX-RN (EAQ)

Title Score _____

Title Score _____

HESI Practice Test

Title Score _____

Title Score _____

I verify that all the above requirements are completed to the best of my ability.

Student Signature

Date

I verify that I will complete the remediation plan following this exam per the Standardized Testing HESI Policy.

Student Signature

Date

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at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

SENIOR EXIT INTERVIEW

As a critical component of program assessment, all graduating seniors must schedule a senior exit interview with the Department Head prior to the end of the graduating semester. Students are notified electronically of available dates and times.

Revised: 8/15

Reviewed: 8/16; 8/17; 7/18; 7/19; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL FACILITIES

Clinical nursing practice, under the supervision of the nursing faculty, is provided through formal contracts with the Bachelor of Science in Nursing Program and health agencies. The formal contracts are binding to the nursing students and faculty. Students will be informed of their assigned clinical agency prior to each clinical experience. Failure to adhere to these regulations may forfeit the student's privileges in the agency and affect the student's clinical evaluation.

Types of Agencies Utilized:	Public and private hospitals, public health departments, public and private mental health treatment facilities nursing homes, and rehabilitation centers.
Assignment of Students:	The instructor assigns the students to the agency which provides the learning objectives appropriate to the individual student's needs.
Transportation:	To and from any clinical assignment is the responsibility of the student.
Clinical Hours:	During clinical hours, students are to remain on the hospital premises during all breaks, lunch, dinner, etc. unless specific alternate arrangements have been approved and directed by the clinical faculty. Failure to adhere to this policy will result in an overall grade of unsatisfactory for the clinical semester with a grade of no higher than "D" in the course.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

FACULTY/STUDENTS VISITING PATIENTS AND/OR RESEARCH SUBJECTS IN THEIR PRIVATE HOMES

This policy applies to faculty/students in either clinical practice/learning experiences and/or research/data collection.

Rationale: Patient/research subject privacy and confidentiality are paramount. This is especially so in their private homes, whether it be for patient care and/or research purposes.

Faculty and/or students:

1. SHOULD NOT contact by phone and/or in person any private home without first obtaining clinical agency approval/consent to make said contact (Example: if you are contacting a private home for XYZ home care agency, XYZ home care agency should have obtained written consent in advance from that private home for you to contact it/them and have informed said private home that Nicholls State University faculty and/or students would be contacting them).
2. SHOULD the evening before, phone the private home and inform them of the upcoming visit for the next day and the number/name(s) of all persons who will be visiting, and contact for an exact time for the visit. In all cases, a minimum of two (2) students should be included in the visit.
3. SHOULD the evening before in this same phone conversation request that any in-home caregiver(s) be present for/during the upcoming visit.
4. SHOULD, on the day of the visit, 30-45 minutes before the contracted time for the visit, again phone the private home to remind them of the upcoming visit.
5. SHOULD, in the cases of either a missed or canceled visit or a visit that occurred with some question or problem, immediately inform both the referring clinical agency and nursing administration at Nicholls State University.
6. SHOULD NOT, unless necessary, obtain SSNs or any other personal or confidential information that is not directly related to the case/patient care.

Adopted: 6/04

Reviewed: 7/14; 8/15; 8/16; 8/17; 7/18; 7/19; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

POLICY FOR CLINICAL EVALUATION OF STUDENT'S PROGRESS

During every clinical learning experience, the student is simultaneously:

1. An individual learner
2. A member of a group of learners (i.e. the clinical group)
3. A member of the inter professional health care team
4. A provider of patient care

During any clinical nursing course, from each clinical learning experience to the next it is necessary that each student demonstrate evident progression toward achievement of course and clinical outcomes.

Evidence of this progression includes all of the following:

1. What the student verbalizes during the clinical learning experience
2. What the student writes during (i.e. charting) and in conjunction with (i.e. care plans) the clinical learning experience
3. What the student does during the clinical learning experience

The evaluation of this progression is made by the clinical instructor using the "Clinical Performance Evaluation Tool" (see "Tool Guidelines" below), accepted standards for nursing practice, and common sense.

The inability and/or unwillingness of a student to evidently progress from each clinical learning experience to the next adversely affects all of the following:

1. The quality of patient care
2. The functioning of the inter-professional health care team
3. The learning of the clinical group
4. The learning of the student, and equates to "Unsatisfactory" performance as a clinical nursing student.

Every opportunity will be afforded to the student to evidently and satisfactorily progress from each clinical learning experience to the next. In this endeavor, both the clinical student and the clinical instructor have responsibilities:

Responsibilities of the clinical student –

1. Strive to be satisfactory in every clinical learning experience and satisfactory progress from each clinical learning experience to the next.
2. Know the status of one's clinical performance/evaluation at all times

Responsibilities of the clinical instructor –

1. Strive to assist each student to be satisfactory in every clinical learning experience and satisfactorily progress from each clinical learning experience to the next
2. If the student is unsatisfactory in any clinical learning experience and/or is not satisfactorily progressing from one clinical learning experience to the next, using the Clinical Performance Remediation (CPR) tool immediately inform the student in writing of:
 - a. Specific examples, parameters, behaviors, etc. of how/why the student is unsatisfactory
 - b. Specific strategies to become satisfactory and satisfactorily progress during subsequent clinical learning experiences.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
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DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL GUIDELINES

- The clinical performance evaluation tool is used for all clinical nursing courses. Each nursing course builds on prior knowledge, skills, and attitudes.
- All clinical learning experiences will be evaluated upon completion and/or as deemed necessary by the faculty. Students who are not meeting clinical outcomes will be counseled individually as needed.
- Each student will fill out a self-evaluation at (1) mid-clinical and (2) final.
- Each faculty member will fill out an evaluation at (1) mid-clinical and (2) final.
- Each row item (boxes) must be checked by placing a “✓” in appropriate box at (1) mid-clinical and (2) final.
- The score for Clinical Evaluation will be either “S” “NI” or “U” at mid-clinical.
- The score for Clinical Evaluation will be either “S” or “U” at final.
- Clinical faculty will initiate the Clinical Performance Remediation (CPR) Tool for any of the following reasons, including but not limited to:
 - Unsatisfactory student performance in any clinical learning experience
 - Unsatisfactory progression from one clinical learning experience to the next
 - A score of “U” on the mid-clinical evaluation
 - The CPR Tool may also be initiated for a score of “NI”
 - At any time at the discretion of the Clinical faculty
- Reassessment of the student with a CPR Tool in place will be completed at each clinical experience.
- Final grades for any nursing clinical related component must be “S” or “U”.
- A passing grade will only be assigned if all the items are checked “S” at the time of the final evaluation.
- An unsatisfactory, “U”, for any clinical learning experience at final evaluation constitutes an overall unsatisfactory clinical grade.

Core Competency Statements

- Each core competency (as outlined in **BOLD**) has associated statements, which specifies individual guidelines.
- The core competency statements are based upon matriculation in each clinical course.
- Each clinical course has a unique clinical evaluation tool specific to the course.

Grading Guidelines

- Clinical Performance will be evaluated with a Clinical Performance Tool, and will be scored either “S”, “NI”, or “U”.
- Every student must receive a score of “S” on the Clinical Performance Tool during the final clinical evaluation to pass the course.
- If a student receives a “U” on the Clinical Performance Tool during the final clinical evaluation, the student will receive a grade of no higher than “D” for the course.

Grade Descriptions

A grade of Satisfactory or “S” means the student:

- Functions satisfactory with minimum guidance in the clinical situation.
- Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes.
- Engages consistently in self-direction in approach to learning.
- Provides evidence of preparation for all clinical learning experiences.
- Follows directions and performs safely.
- Identifies own learning needs and seeks appropriate assistance.
- Demonstrates continued improvement during the semester.
- Uses nursing process and applies scientific rationale.

A grade of Needs Improvement or “NI” means the student:

- Functions safely with moderate amount of guidance in the clinical situation.
- Demonstrates adequate knowledge and requires moderate assistance in integrating knowledge with skills.
- Requires some direction in recognizing and utilizing learning opportunities.

A grade of Unsatisfactory or “U” means the student:

- Requires intense guidance for the performance of activities at a safe level.
- Clinical performance reflects difficulty in the provision of nursing care.
- Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills.
- Requires frequent and detailed instructions regarding learning opportunities and is often unable to utilize them.
- Is often unprepared and has limited insight into own behavior.
- Is unable to identify own learning needs and neglects to seek appropriate assistance.
- Not dependable.
- Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality.

Individual Clinical Performance Evaluation tools for clinical courses, with the associated Clinical Performance Remediation tools, can be found in each course syllabus.

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 223

Student Name: _____

Semester _____

Self-Evaluation _____

Faculty Name: _____

Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N223, the student should be able to:					
I. Patient-Centered Care					
a. Develop an individualized plan of care with a focus on assessment and planning utilizing the nursing process					
b. Demonstrate caring behaviors					
c. Conduct a comprehensive assessment while eliciting patient values, preferences and needs					
d. Respect diversity of individuals					
e. Assess the presence and extent of pain and suffering					
f. Demonstrate beginning competency in skills					
II. Teamwork and Collaboration					
a. Develop effective communication skills (verbally and through charting) with patients, team members, and family					
b. Identify relevant data for communication in pre and post conferences					
c. Identify intra and inter-professional team member roles and scopes of practice					
d. Establish appropriate relationships with team members					
e. Identify need for help when appropriate to situation					
III. Evidence-Based Practice					
a. Locate evidence-based literature related to clinical practice and guideline activities					
b. Reference clinical related activities with evidence-based literature					
c. Value the concept of evidence-based practice in determining best clinical practice					
IV. Quality Improvement					
a. Deliver care in timely and cost effective manner					
b. Seek information about processes/projects to improve care (QI)					
c. Value the significance of variance reporting					
V. Safety					
a. Demonstrate effective use of technology and standardized practices that support safety and quality					
b. Implement strategies to reduce risk of harm to self or others					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N223, the student should be able to:					
c. Demonstrate appropriate clinical decision making					
d. Identify national patient safety goals and quality measures					
e. Use appropriate strategies to reduce reliance on memory					
f. Communicate observations or concerns related to hazards and errors to patient, families, and the health care team					
g. Organize multiple responsibilities and provide care in a timely manner					
VI. Informatics					
a. Navigate the electronic health record for patient information where appropriate for clinical setting					
b. Document clear and concise responses to care in the electronic health record, where appropriate for clinical setting					
c. Identify information and clinical technology using critical thinking to collect, process, and communicate data					
d. Manage data, information, and knowledge of technology in an ethical manner					
e. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

**THIBODAUX REGIONAL
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CLINICAL PERFORMANCE REMEDIATION (CPR) TOOL - NURS 223

Student Name: _____

Semester _____

Self-Evaluation _____

Faculty Name: _____

Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Date			Date			Date		
	S	NI	U	S	NI	U	S	NI	U
By the end of N223, the student should be able to:									
I. Patient-Centered Care									
a. Develop an individualized plan of care with a focus on assessment and planning utilizing the nursing process									
b. Demonstrate caring behaviors									
c. Conduct a comprehensive assessment while eliciting patient values, preferences and needs									
d. Respect diversity of individuals									
e. Assess the presence and extent of pain and suffering									
f. Demonstrate beginning competency in skills									
II. Teamwork and Collaboration									
a. Develop effective communication skills (verbally and through charting) with patients, team members, and family									
b. Identify relevant data for communication in pre and post conferences									
c. Identify intra and inter-professional team member roles and scopes of practice									
d. Establish appropriate relationships with team members									
e. Identify need for help when appropriate to situation									
III. Evidence-Based Practice									
a. Locate evidence-based literature related to clinical practice and guideline activities									
b. Reference clinical related activities with evidence-based literature									
c. Value the concept of evidence-based practice in determining best clinical practice									
IV. Quality Improvement									
a. Deliver care in timely and cost effective manner									
b. Seek information about processes/projects to improve care (QI)									
c. Value the significance of variance reporting									
V. Safety									

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 255

Student Name: _____

Semester _____

Faculty Name: _____

Self-Evaluation _____

Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N255, the student should be able to:					
I. Patient-Centered Care					
a. Institute an individualized plan of care with a focus on assessment and planning utilizing the nursing process					
b. Communicate care provided and needed at each transition in care					
c. Implement interventions to address physical and emotional comfort, pain, and/or suffering					
d. Describe the pathophysiology and pharmacotherapy for selected patients					
e. Interpret patient assessment data					
f. Teach patients/family members regarding health promotion, wellness, disease management, and prevention					
g. Utilize comprehensive assessment data, incorporating the patient's values, preferences, needs, and diversity					
II. Teamwork and Collaboration					
a. Utilize communication skills with patients, family, and inter-professional team					
b. Demonstrate awareness of own strengths and limitations as a team member					
c. Initiate requests for help when appropriate to situation					
d. Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care (SBAR)					
e. Recognize roles of the health care team members appropriate to meet the well-defined health needs of adults					
f. Function competently within own scope of practice as a member of the intra and inter-professional team					
III. Evidence-Based Practice					
a. Reference clinical based activities with evidence-based literature					
b. Recognize clinical opinion from research and evidence					
IV. Quality Improvement					
a. Recognize that nursing and other health professions are parts of systems of care and care processes that affect outcomes for patients and families					
b. Identify quality improvement projects in the care setting					
c. Appreciate how unwanted variation affects care					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N255, the student should be able to:					
V. Safety					
a. Demonstrate effective use of technology and standardized practices that support safety and quality					
b. Adhere to national patient safety guidelines that affect outcomes for patients and families					
c. Implement strategies to reduce risk of harm to self or others					
d. Use appropriate strategies to reduce reliance on memory					
e. Communicate observations or concerns related to hazards and errors to patients, families, and the health care team					
f. Organize multiple responsibilities and provide care in a timely manner					
VI. Informatics					
a. Navigate and document within the electronic health record, where appropriate for clinical setting					
b. Apply technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
c. Manage data, information, and knowledge of technology in an ethical manner					
d. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 355

Student Name: _____

Semester _____

Self-Evaluation _____

Faculty Name: _____

Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N355, the student should be able to:					
I. Patient-Centered Care					
a. Institute an individualized plan of care including assessment, planning, intervention, and evaluation of multiple patients with multiple health alterations					
b. Assess health status, health potential, and learning needs of adult individuals and their families using appropriate data collection tools					
c. Deliver care based on knowledge of pathophysiology and pharmacotherapy with respect for individual values, preferences, needs, and diversity					
d. Modify the established goals and/or time frame based on interpretation of individual's achievement of objectives/outcomes					
e. Recommend interventions to address physical and emotional comfort, pain, and/suffering					
II. Teamwork and Collaboration					
a. Communicate effectively with the patient and inter-professional team to acquire and convey information about the patient					
b. Participate in conferences/ discussions using SBAR to communicate relevant data to inter-professional team					
c. Collaborate with members of intra and inter-professional team to identify patient needs and deliver care					
d. Collaborate with fellow students to establish team approach that delivers timely administration of care					
e. Function competently within own scope of practice as a member of the intra and inter-professional team					
f. Distinguish between professional nursing roles appropriate to meet the needs of individuals and family with multiple health alterations					
g. Initiate requests for help when appropriate to situation					
III. Evidence-Based Practice					
a. Integrate evidence-based practice in the formulation of an individualized plan of care for the adult patient with multiple health alterations					
b. Differentiate clinical opinion from research and evidence					
c. Implement evidence-based care					
d. Inform intra-professional team members of current evidence-based practice					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N355, the student should be able to:					
IV. Quality Improvement					
a. Promote cost containment through an understanding of the development and use of managed care systems while providing quality care					
b. Participate in quality improvement processes in the health care setting					
V. Safety					
a. Integrate effective use of technology and standardized practices that support safety and quality					
b. Perform nursing tasks/skills safely and timely					
c. Demonstrate safe, timely administration of medications, stating pharmacologic implications as they relate to the adult patient with multiple health alterations					
d. Recommend interventions to improve safety hazards and concerns to patient, families, and inter-professional team					
e. Incorporate national patient safety goals in the delivery of care					
VI. Informatics					
a. Navigate and document within the electronic health record where applicable to clinical setting					
b. Simulate accurate, thorough documentation of adult health assessment with computer documentation program					
c. Document medication administration in medication delivery system where applicable					
d. Utilize technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
e. Manage data, information, and knowledge of technology in an ethical manner					
f. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)**Faculty:****Student:****Student Signature:** _____ **Date:** _____**Faculty Signature:** _____ **Date:** _____**Final Comments:** (Address Strengths and Weaknesses)**Faculty:****Student:****Student Signature:** _____ **Date:** _____**Faculty Signature:** _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 371

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N371, the student should be able to:					
I. Patient-Centered Care					
a. Compile and document assessment data on intra-partum, post-partum, and newborn patients					
b. Apply the nursing process with a focus on planning and implementation of care of the laboring, post-partal, newborn, and family					
c. Recognize personally held attitudes about working with patients from diverse backgrounds					
d. Initiate effective treatments to relieve pain and suffering respective of patient values, preferences, and expressed needs					
e. Prioritize care based on knowledge of pathophysiology and pharmacotherapy with respect for diverse patient backgrounds					
f. Value continuous improvement of own communication and conflict resolution skills while communicating care provided and needed at each transition in care					
g. Empower patients or families in all aspects of health care process					
II. Teamwork and Collaboration					
a. Demonstrate awareness of own strengths and limitations as a team member					
b. Participate in conferences/ discussions using I-SBAR to communicate relevant data to inter-professional team					
c. Function competently within own scope of practice as a member of the intra and inter-professional team					
d. Initiate requests for help when appropriate to situation					
e. Recognize professional roles of the health care team members appropriate to meet the needs of the child bearing family					
f. Adapt own style of communicating to needs of the patient, family, team and situation					
g. Value teamwork by initiating collaboration and assistance with fellow students in delivering care					
III. Evidence-Based Practice					
a. Reference clinical based activities with evidence-based literature					
b. Disseminate current evidence-based practice with intra and inter-professional team members related to the area of practice					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N371, the student should be able to:					
c. Integrate evidence-based practice in the formulation of an individualized plan of care for intra-partal, post-partal, and newborn patients					
d. Differentiate clinical opinion from research and evidence-based practice					
e. Incorporate an evidence-based nursing intervention relative to the nursing diagnosis					
IV. Quality Improvement					
a. Examine quality improvement projects in the clinical care setting					
b. Give examples of tension between professional autonomy and system functioning					
V. Safety					
a. Examine the health care environment of the childbearing patient and their family to determine patient safety needs					
b. Integrate effective use of technology and standardized practices that support safety and quality					
c. Implement interventions to improve safety hazards and concerns to patient, families, and inter-professional team					
d. Align with national patient safety goals in care delivery of the child bearing family					
VI. Informatics					
a. Navigate and document within the electronic health record where applicable to clinical setting					
b. Document medication administration in medication delivery system where applicable					
c. Utilize technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
d. Manage data, information, and knowledge of technology in an ethical manner					
e. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

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Faculty Signature: _____ **Date:** _____

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Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 381

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N381, the student should be able to:					
I. Patient-Centered Care					
a. Compile pediatric assessments with respect for individual values, preferences, and needs					
b. Apply the nursing process with a focus on planning and implementation of care of pediatric patients and family					
c. Integrate growth and development stages of infant, child, and adolescent into plan of care					
d. Conduct clinical skills and identifies rationale for interventions and potential associated complications					
e. Initiate effective treatments to relieve pain and suffering respective of patient values, preferences, and expressed needs					
f. Prioritize care based on pathophysiological pediatric patient conditions					
g. Modify care with respect for diversity					
II. Teamwork and Collaboration					
a. Recognize own strengths and limitations as a team member					
b. Function competently within own scope of practice as a member of the intra and inter-professional team					
c. Initiate requests for help when appropriate to situation					
d. Adapt own style of communicating to needs of the patient, family, team and situation					
e. Value teamwork by initiating collaboration and assistance with fellow students in delivering care					
III. Evidence-Based Practice					
a. Reference clinical based activities with evidence-based literature					
b. Disseminate current evidence-based practice with intra and inter-professional team members related to the area of practice					
c. Plan and implement care utilizing evidence-based nursing interventions					
IV. Quality Improvement					
a. Examine strategies focused on health promotion and maintenance within a variety of health care systems					
b. Examine quality improvement projects in health care settings					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N381, the student should be able to:					
c. Recognize self as parts of a systems of care and care processes that affects outcomes for patient and families					
V. Safety					
a. Implement interventions to improve safety hazards and concerns to patients, families and health care team					
b. Provide safe effective nursing care through the identification of pharmacological implications of pediatric medications					
c. Recognize unsafe practices by self and others					
d. Integrate effective use of technology and standardized practices that support safety and quality in care of pediatric patients					
e. Align with national patient safety goals in care delivery of pediatric patients					
VI. Informatics					
a. Navigate and document within the electronic health record to plan patient care and monitor changes in patient status where applicable to clinical setting					
b. Utilize the electronic health record as a means to educate patient, family, and/or caregiver where applicable to clinical setting					
c. Utilize technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
d. Manage data, information, and knowledge of technology in an ethical manner					
e. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Comments:

Date: _____

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Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 400

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N400, the student should be able to:					
I. Patient-Centered Care					
a. Appraise and reflect on personally held attitudes about working with patients from diverse backgrounds					
b. Examine pathophysiology of patient conditions and associated pharmacological interventions					
c. Advocate support for patient care in the mental health care setting whose values differ from own					
d. Support and respect individual patient expression of values, preferences, and expressed needs during interactions and interviews with patients in the mental health care setting					
e. Provide emotional support to patients in the mental health care setting					
f. Engage in learning opportunities with patients in multiple mental health care settings					
g. Facilitate the nursing process to institute an individualized plan of care with a focus on implementation and evaluation					
II. Teamwork and Collaboration					
a. Critique own strengths and limitations as a team member					
b. Coordinate communication with intra-professional and inter-professional team members, and reframe communication techniques to meet needs of the team and situation					
c. Evaluate own functioning within scope of practice as a member of the health care team					
d. Interpret the roles, perspectives, and expertise of all health care team members					
III. Evidence-Based Practice					
a. Reference all clinical related assignments with evidence-based literature					
b. Interpret evidence-based research related to mental health nursing					
c. Facilitate distribution of current evidence-based practice to team members					
IV. Quality Improvement					
a. Summarize approaches for changing processes of care					
b. Generate strategies for learning about the outcomes of care in the mental health care setting					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N400, the student should be able to:					
c. Appraise own and others' contributions to outcomes of care in local mental health care settings					
V. Safety					
a. Facilitate effective use of strategies to reduce risk of harm to self or others in the mental health care setting					
b. Examine factors that create a culture of safety in the mental health care setting					
c. Evaluate safety hazards and errors to patients, families, and the health care team					
d. Display safety in communication and interview techniques in the mental health care setting					
VI. Informatics					
a. Utilize high quality electronic sources of healthcare information					
b. Synthesize technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
c. Manage data, information, and knowledge of technology in an ethical manner					
d. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE REMEDIATION (CPR) TOOL - NURS 400

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Date			Date			Date		
	S	NI	U	S	NI	U	S	NI	U
	By the end of N400, the student should be able to:								
I. Patient-Centered Care									
a. Appraise and reflect on personally held attitudes about working with patients from diverse backgrounds									
b. Examine pathophysiology of patient conditions and associated pharmacological interventions									
c. Advocate support for patient care in the mental health care setting whose values differ from own									
d. Support and respect individual patient expression of values, preferences, and expressed needs during interactions and interviews with patients in the mental health care setting									
e. Provide emotional support to patients in the mental health care setting									
f. Engage in learning opportunities with patients in multiple mental health care settings									
g. Facilitate the nursing process to institute an individualized plan of care with a focus on implementation and evaluation									
II. Teamwork and Collaboration									
a. Critique own strengths and limitations as a team member									
b. Coordinate communication with intra-professional and inter-professional team members, and reframe communication techniques to meet needs of the team and situation									
c. Evaluate own functioning within scope of practice as a member of the health care team									
d. Interpret the roles, perspectives, and expertise of all health care team members									
III. Evidence-Based Practice									
a. Reference all clinical related assignments with evidence-based literature									
b. Interpret evidence-based research related to mental health nursing									
c. Facilitate distribution of current evidence-based practice to team members									
IV. Quality Improvement									

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

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Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

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Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 420

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N420, the student should be able to:					
I. Patient-Centered Care					
a. Develop a written community health plan utilizing the nursing process					
b. Respect diverse perspectives of communities and at-risk groups while considering individual values, preferences, and needs					
c. Validate the significance of conducting appropriate follow-up at each level of prevention, with a focus on secondary prevention					
d. Synthesize knowledge of infectious disease pathophysiology for prevention of communicable diseases					
e. Apply pharmacological implications in administration of vaccines in immunization clinics					
f. Advocate at the community and aggregate/population level					
g. Integrate Healthy People 2030 across the life span in a variety of community settings (schools, public health units, university health services, rehabilitation, home health, hospice)					
II. Teamwork and Collaboration					
a. Examine roles and responsibilities of the community health nurse in various community practice settings					
b. Incorporate roles and responsibilities of the community health nurse in various community practice settings					
c. Collaborate effectively as an inter-professional health care team member to provide high quality, cost-effective, and integrated health care to individuals, families, aggregates, and communities					
d. Initiate requests for help when appropriate to situation					
III. Evidence-Based Practice					
a. Integrate evidence-based practice in various community health settings					
b. Critique the impact of current issues and trends in health care delivery on communities and at-risk groups					
c. Compare and contrast impact of environmental health on individuals, families, aggregates and communities					
IV. Quality Improvement					
a. Support strategies to improve community health (policy making, health care initiatives)					
b. Analyze community quality improvement methodologies					
V. Safety					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N420, the student should be able to:					
a. Interpret treatment guidelines in various community health nursing practice settings					
b. Critique unsafe practices by self and others					
c. Facilitate effective use of strategies to reduce risk of harm to self or others					
VI. Informatics					
a. Utilize Louisiana's online immunization registry (Louisiana Immunization Network for Kids Statewide -LINKS)					
b. Utilize national and international databases relevant to community health nursing practice and settings					
c. Manage data, information, and knowledge of technology in an ethical manner					
d. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Maintain professional behavior and appearance					
c. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
d. Accept constructive criticism and develop plan of action for improvement					
e. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
f. Provide evidence of preparation for clinical learning experiences					
g. Arrive to clinical experiences at assigned times					
h. Demonstrate expected behaviors and complete tasks in a timely manner					
i. Accept individual responsibility and accountability for nursing interventions, outcomes, and other actions					
j. Engage in self evaluation					
k. Assume responsibility for learning					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE REMEDIATION (CPR) TOOL - NURS 420

Student Name: _____

Semester _____

Self-Evaluation _____

Faculty Name: _____

Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Date			Date			Date		
	S	NI	U	S	NI	U	S	NI	U
By the end of N420, the student should be able to:									
I. Patient-Centered Care									
a. Develop a written community health plan utilizing the nursing process									
b. Respect diverse perspectives of communities and at-risk groups while considering individual values, preferences, and needs									
c. Validate the significance of conducting appropriate follow-up at each level of prevention, with a focus on secondary prevention									
d. Synthesize knowledge of infectious disease pathophysiology for prevention of communicable diseases									
e. Apply pharmacological implications in administration of vaccines in immunization clinics									
f. Advocate at the community and aggregate/population level									
g. Integrate Healthy People 2030 across the life span in a variety of community settings (schools, public health units, university health services, rehabilitation, home health, hospice)									
II. Teamwork and Collaboration									
a. Examine roles and responsibilities of the community health nurse in various community practice settings									
b. Incorporate roles and responsibilities of the community health nurse in various community practice settings									
c. Collaborate effectively as an inter-professional health care team member to provide high quality, cost-effective, and integrated health care to individuals, families, aggregates, and communities									
d. Initiate requests for help when appropriate to situation									
III. Evidence-Based Practice									
a. Integrate evidence-based practice in various community health settings									
b. Critique the impact of current issues and trends in health care delivery on communities and at-risk groups									
c. Compare and contrast impact of environmental health on individuals, families, aggregates and communities									
IV. Quality Improvement									

Comments:

Date: _____

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

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Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CLINICAL PERFORMANCE EVALUATION TOOL - NURS 428

Student Name: _____ **Semester** _____
Faculty Name: _____ **Self-Evaluation** _____
Faculty Evaluation _____

Fill in appropriate fields to the right & below. **Student must obtain a Satisfactory "S" grade in all competencies at the Final Evaluation to pass the Course.**

Core Competencies	Midterm			Final	
	S	NI	U	S	U
By the end of N428, the student should be able to:					
I. Patient-Centered Care					
a. Provide comprehensive patient care in compliance with clinical agency policy and procedure					
b. Synthesize pathophysiology of patient conditions and associated pharmacological interventions					
c. Modify interventions to address physical, emotional, and spiritual comfort, pain, and/or suffering					
d. Assess family history and predisposition to genetic disorders					
e. Promote health and maintenance in acute care settings with respect to diversity					
f. Evaluate effectiveness of patient and family teaching and modify plan of care as needed					
g. Advocate for patients/families' based on patient/family values, preferences, needs, and diversity					
h. Implement discharge planning					
II. Teamwork and Collaboration					
a. Delegate to the inter-professional healthcare team within the scope of practice					
b. Communicate changes in patient status to the inter-professional team					
c. Conduct patient care reports (hand-off communication)					
d. Engage patient and family in a partnered relationship by providing relevant information, resources, access, and support					
e. Interpret physician and inter professional orders and communicate accordingly					
f. Examine roles of inter-professional health care team					
g. Initiate requests for help when appropriate to situation					
III. Evidence-Based Practice					
a. Interpret evidence-based practice in healthcare settings					
b. Discriminate clinical opinion from research and evidence					
IV. Quality Improvement					
a. Focus efforts to improve quality of healthcare					
b. Critique approaches for changing processes of care					

Core Competencies	Midterm			Final	
	S	NI	U	S	U
c. Value ongoing self-assessment and commitment to excellence in practice					
V. Safety					
a. Appraise health care environment to determine patient safety needs					
b. Support national patient safety goals in care delivery					
c. Perform safe medication administration					
d. Perform clinical procedures demonstrating appropriate knowledge and skills					
e. Facilitate effective strategies to reduce risk of harm to self or others through both system effectiveness and individual performance					
f. Demonstrate time management skills by working independently					
VI. Informatics					
a. Conduct and document patient admit and shift assessments within the electronic health record where applicable to clinical setting					
b. Integrate informatics and communication technologies					
c. Navigate and document within the electronic health record					
d. Synthesize technology and information management tools using critical thinking for clinical reasoning and quality improvement to support safe processes of care					
e. Manage data, information, and knowledge of technology in an ethical manner					
f. Protect confidentiality of electronic health records					
VII. Professionalism					
a. Demonstrate core professional values (caring, altruism, autonomy, integrity, human dignity, and social justice)					
b. Accept constructive criticism and develop plan of action for improvement					
c. Maintain a positive attitude and interact with inter-professional team members, faculty, and fellow students in a positive, professional manner					
d. Arrive to clinical experiences at assigned times					
e. Assume full accountability for professional behavior during the experience and perform within ethical/legal norms					
f. Advocate for the nursing profession					
g. Assume responsibility for learning experiences					
h. Comply with the Code of Ethics, Standards of Practice, and policies and procedures of Nicholls State University, Department of Nursing, and clinical agencies					
i. Accept expanded personal responsibility and accountability for nursing interventions, treatment outcomes and the changes occurring in health care provisions					
j. Execute a self-evaluation of own ability to provide nursing care that is in accordance with professional standards of nursing care					
k. Coordinate nursing functions based on assessed competencies and abilities of peers while functioning in a leadership role					

Midterm Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Final Comments: (Address Strengths and Weaknesses)

Faculty:

Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Mid-clinical Evaluation: faculty and student must complete documentation for remediation of unsatisfactory areas. CPR Tool must be initiated for any unsatisfactory areas.

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

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Date: _____

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Student:

Student Signature: _____ **Date:** _____

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Student:

Student Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Unsatisfactory Area	Remediation Strategy

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING
BACHELOR OF SCIENCE IN NURSING PROGRAM**

CARE MAP GRADING RUBRIC

The Care Map is a vital tool that provides structure for inclusive patient-centered assessment recognizing the uniqueness of individuals, families, communities, and populations respective of wellness, health promotion, illness and disease management across the lifespan and in a variety of settings. Utilizing the nursing process, patient assessment and inter and intraprofessional collaborative, evidence-based care is planned, provided, evaluated, and re-assessed while maximizing safety, quality, and effective care delivery all within the established professional, ethical, and legal standards.

The Care Map grading rubric provides the mechanism for student evaluation and a component of program assessment. Based on the points earned, a percentage is generated, and an overall level of student performance is determined. The overall levels of performance include: **Distinguished, Proficient, Needs Improvement, and Non-Performance**. The levels of Distinguished and Proficient equate to Satisfactory performance. The levels of Needs Improvement and Non-Performance equate to Unsatisfactory performance. **Importantly, an overall performance evaluation of Needs Improvement or Non-Performance cannot be awarded post mid-clinical or as a final clinical grade.**

If a level of Needs Improvement or Non-Performance is earned, the student must seek assistance from faculty for remediation. The Care Map must be revised and re-submitted as indicated. A CPR tool may be initiated at the discretion of the faculty.

The final grade for any nursing clinical related component is Satisfactory or Unsatisfactory. All elements of the Care Map assignment must be addressed or a grade of "Unsatisfactory" will be assigned. In addition, failure to address any of the following criteria will result in an automatic "Unsatisfactory" grade:

Criteria	Element of Performance
A	Chief complaint
C	Ten (10) basic concepts as depicted on care map
E	Lines showing relationships between problems
N	Evidence-based/research article or guideline supporting an intervention
P	Plan of care evaluation
R, S, T	Supplementary documents to include pathophysiology, labs/diagnostics, and medications
U	Citations and references

Care map scoring is aligned with the BSN Program curriculum, thus indicating an expectation of progression of knowledge, skills, and attitudes respective of patient-centered care and all that it encompasses. The following scoring tables are:

Scoring Table for NURS 223, 255

Performance Category	Points	Percentage	Grade
Distinguished	71-84	85-100%	Satisfactory
Proficient	59-70	70-84%	Satisfactory
Needs Improvement*	47-58	56-69%	Unsatisfactory
Non-Performance*	≤ 46	≤ 55%	Unsatisfactory

Scoring Table for NURS 355, 371, 381

Performance Category	Points	Percentage	Grade
Distinguished	76-84	90-100%	Satisfactory
Proficient	63-75	75-89%	Satisfactory
Needs Improvement*	50-62	60-74%	Unsatisfactory
Non-Performance*	≤49	≤59%	Unsatisfactory

Scoring Table for NURS 400

Performance Category	Points	Percentage	Grade
Distinguished	80-84	95-100%	Satisfactory
Proficient	67-79	80-94%	Satisfactory
Needs Improvement*	55-66	65-79%	Unsatisfactory
Non-Performance*	≤54	≤64%	Unsatisfactory

Care Map Grading Rubric

CRITERIA	Distinguished (4 pts)	Proficient (3 pts)	Needs Improvement (2 pts)	Non-Performance (1 pt)
A. ASSESSMENT Reason patient came to hospital/chief complaint	Prioritizes chief complaint based on current patient status and co-morbidities.		Attempts to identify chief complaint but not based on current patient status and/or co-morbidities.	Does not identify chief complaint.
B. ASSESSMENT Current Medical and/or Surgical Diagnosis(es)	Prioritizes medical and/or surgical diagnosis(es) based on current patient status and comorbidities.	Identifies medical and/or surgical diagnosis(es).	Attempts to identify medical and/or surgical diagnosis(es).	Does not identify medical and/or surgical diagnosis(es).
C. ASSESSMENT Pertinent assessment information to address 10 basic concepts including those collected from interprofessional resources, of all medications, labs, and diagnostic tests, history, growth and development, treatments, vital signs, pain, I&O, diet, etc.	Demonstrates comprehensive inclusion of assessment findings in all areas, including those collected from interprofessional resources, all medications, labs, and diagnostic tests, history, growth and development, treatments, vital signs, pain, I&O, diet, etc. on concept care map.	Aligns assessment findings with all areas of the care map, including those collected from interprofessional resources, all medications, labs, and diagnostic tests, history, growth and development, treatments, vital signs, pain, I&O, diet, etc. on concept care map.	Attempts to identify pertinent assessment findings, including those collected from interprofessional resources, all medications, labs, and diagnostic tests, history, growth and development, treatments, vital signs, pain, I&O, diet, etc. on concept care map.	Assessment is incomplete.
D. ASSESSMENT Identify problems/needs, focused assessment, analyze, and prioritize by numbering the top 2 based on Maslow's hierarchy of needs	Relates focused & general assessment findings to determine the 2 priority problems/needs related to current condition according to Maslow's hierarchy of needs.	Identifies focused & general assessment findings to determine the 2 priority problems/needs related to current condition according to Maslow's hierarchy of needs.	Attempts to identify focused &/or general assessment findings to determine the 2 priority problems/needs but not necessarily according to current condition and/or Maslow's hierarchy of needs.	Does not identify focused &/or general assessment findings to determine the 2 priority problems/needs.
E. ASSESSMENT Lines drawn to show relationship between problems (min. 3 lines)	Draws a minimum of three (3) lines that differentiates inclusive relationships between problems/needs based on current patient status/co-morbidities focus/wellness, health promotion, illness and disease management.	Draws a minimum of three (3) lines between problems/needs to show relationships between problems related to current condition.	Draws a minimum of three (3) lines between problems/needs to show relationships between problems but not necessarily related or related to current condition.	Does not draw a minimum of three (3) lines to show relationships between problems/needs.

CRITERIA	Distinguished (4 pts)	Proficient (3 pts)	Needs Improvement (2 pts)	Non-Performance (1 pt)
F. DIAGNOSIS Nursing diagnosis and goal statement written with correct descriptors for each prioritized problem or need: Nursing diagnosis descriptor with R/T__S/T and is based on Maslow's Hierarchy of Needs.	Writes two (2) inclusive, prioritized nursing diagnoses with goal statements based patient-centered assessment findings and is linked to Maslow's Hierarchy of Needs.	Writes two (2) nursing diagnoses with R/T and S/T descriptors and accompanying goal statements based on Maslow's Hierarchy of Needs and linked to current condition.	Attempts to write two (2) nursing diagnoses with R/T and S/T descriptors and accompanying goal statements based on Maslow's Hierarchy of Needs but not necessarily related to current condition.	Does not write two (2) nursing diagnoses.
G. DIAGNOSIS Sophomore Students: provide assessment findings to support nursing diagnoses i.e. "as evidenced by"	Prioritizes knowledge of inclusive assessment findings to support the nursing diagnoses.	Provides basic assessment findings to support the nursing diagnoses.	Attempts to provide assessment findings to support the nursing diagnoses.	Does not provide assessment findings to support the nursing diagnoses.
H. PLANNING Statement of at least 2 patient-centered, attainable and measurable objectives for each nursing diagnosis	Integrates patient assessment findings into the construction of at least 2 patient-centered, measurable, attainable objectives with appropriate timeframe for each nursing diagnosis.	Constructs at least 2 measurable and realistically attainable objectives with appropriate timeframe related to current condition.	Attempts to write at least 2 objectives for each nursing diagnosis but not necessarily related to current condition and/or unattainable.	Does not write at least 2 measurable objectives for each nursing diagnosis.
I. IMPLEMENTATION/NURSING INTERVENTIONS Begin with assessment of the pertinent body system(s) affected	Determines comprehensive assessment findings to include those from interprofessional resources, using the appropriate knowledge, skills, and attitudes, in order to provide a prioritized and inclusive review of all pertinent body systems.	Begins nursing interventions with assessment of the primary body system(s) affected and related to current condition.	Attempts to begin nursing interventions with assessment of primary body system(s) affected but not necessarily related to current condition.	Does not begin nursing interventions with assessment of the primary body system(s) affected.

CRITERIA	Distinguished (4 pts)	Proficient (3 pts)	Needs Improvement (2 pts)	Non-Performance (1 pt)
J. IMPLEMENTATION/NURSING INTERVENTIONS Addresses medications and associated pertinent nursing implications. If not applicable to a nursing diagnosis, write N/A and state why	Integrates knowledge of all medications and pertinent nursing implications relative to the nursing diagnosis(es).	Identifies applicable medications and pertinent nursing implications relative to the nursing diagnosis(es) and related to current condition.	Attempts to identify applicable medications and pertinent nursing implications relative to the nursing diagnosis(es) but not necessarily related to current condition.	Does not identify medications or pertinent nursing implications relative to the nursing diagnosis(es).
K. IMPLEMENTATION/NURSING INTERVENTIONS Addresses lab/diagnostic tests and pertinent nursing implications. If not applicable to a nursing diagnosis, write N/A and state why	Integrates knowledge of all lab tests, diagnostic test, and related nursing implications relative to the nursing diagnosis(es).	Identifies applicable lab tests, diagnostic tests, and related nursing implications relative to the nursing diagnosis(es) and related to current condition.	Attempts to identify applicable lab tests, diagnostic tests, and related nursing implications relative to the nursing diagnosis(es) but not necessarily related to current condition.	Does not identify lab tests, diagnostic tests, and related nursing implications relative to the nursing diagnosis(es).
L. IMPLEMENTATION/NURSING INTERVENTIONS Patient, Family, and Significant Other Teaching	Prioritizes teaching as an intervention based on patient-centered needs and inclusive assessment findings relative to the nursing diagnosis(es).	Includes teaching as an intervention relative to the nursing diagnosis(es) and related to current condition.	Attempts to identify/include a teaching an intervention relative to the nursing diagnosis(es) but not necessarily related to current condition.	Does not identify a teaching intervention relative to the nursing diagnosis(es).
M. IMPLEMENTATION/NURSING INTERVENTIONS Other pertinent therapeutic nursing interventions; including patient, family, and significant other participation	Incorporates patient/family participation in "other" therapeutic nursing interventions such as diet, nutrition, turning, etc. based on specific, yet inclusive assessment findings.	Identifies patient/family participation in "other" therapeutic nursing interventions such as diet, nutrition, turning, etc. and related to current condition.	Attempts to identify patient/family participation in "other" therapeutic nursing interventions such as diet, nutrition, turning, etc. relative to the nursing diagnosis(es) but not necessarily related to current condition.	Does not include "other" therapeutic nursing interventions such as diet, nutrition, turning, etc.
N. IMPLEMENTATION/NURSING INTERVENTIONS Provide copy or link to one evidence-based or research article and reference for at least one of the previously	Incorporates evidence-based nursing interventions into the plan of care for each of the prioritized nursing diagnoses.	Provides at least one evidence-based nursing intervention relative to the nursing diagnosis(es) and related to current condition.	Attempts to identify at least one evidence-based nursing intervention relative to the nursing diagnosis(es) but not necessarily related to current condition.	Does not provide an evidence-based/research article or guideline for at least one nursing intervention.

CRITERIA	Distinguished (4 pts)	Proficient (3 pts)	Needs Improvement (2 pts)	Non-Performance (1 pt)
stated nursing interventions				
O. IMPLEMENTATION Sophomore students must state scientific rationales for interventions	Relates knowledge of scientific rationales of nursing interventions in both written and verbal aspects.	Identifies scientific rationales for all nursing interventions and related to current condition.	Attempts to identify a rationale for all nursing interventions but not necessarily related to current condition.	Does not state scientific rationales for all nursing interventions.
P. EVALUATION Determine if goals and objectives were accomplished and specifically note evidence	Incorporates inclusive evaluation of objectives to determine if overall goal(s) met.	Evaluates each objective and goal statement(s) and provides the rationale for patient meeting or not meeting objective.	Attempts to evaluate each objective and goal statement(s) but does not link to assessment findings.	Does not evaluate patient objectives and goal statement(s).
Q. EVALUATION Note any changes necessary to the plan of care. This constitutes re-assessment of the patient, objectives, and any necessary revisions	Prioritizes changes in assessment and revises the plan of care accordingly.	Revises plan of care based on assessment findings and current condition.	Attempts to revise plan of care but not necessarily related to current condition.	Does not provide for any re-assessment of patient objectives/revisions to plan of care.
R. SUPPLEMENTARY Pathophysiology, nursing treatment, signs and symptoms document	Prioritizes patho/nursing treatments/signs and symptoms on document based on inclusive patient assessment findings.	Completes patho/nursing treatments/signs and symptoms document.	Attempts to complete patho/nursing treatments/signs and symptoms document but not necessarily related to current condition.	Does not complete patho/nursing treatments/signs and symptoms document.
S. SUPPLEMENTARY Lab and Diagnostic Test document	Prioritizes lab/diagnostic findings on document based on inclusive patient assessment findings.	Completes lab/diagnostic test document.	Attempts to complete lab/diagnostic test document but not necessarily related to current condition.	Does not complete lab/diagnostic test document.
T. SUPPLEMENTARY Medication Document	Evaluates medication information based on inclusive assessment findings.	Identifies medication information based on patient requirements and assessment findings.	Attempts to complete medication information document but not necessarily related to current condition.	Does not complete medication document.
U. REFERENCE PAGE in APA format	All scientific rationales and references are in APA format with no errors	All scientific rationales and references are in APA format with 1-2 errors	All scientific rationales and references are in APA format with more than 2 errors	No evidence of in-text citations or references

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STUDENT EVALUATION OF FACULTY, COURSE, AND CLINICAL FACILITY

POLICY

Upon completion of each nursing course, students will be given an opportunity to evaluate the faculty, the course, and the facility (as applicable) during the semester. It is an expectation of course completion that students will value the opportunity to provide feedback through the evaluation process.

BACKGROUND INFORMATION

Student evaluation of didactic/clinical teacher effectiveness should be predicated on the notion that constructive feedback is invaluable to faculty as they strive to perfect teacher performance. Student input serves to enhance the teaching-learning process by providing faculty with objective appraisals of areas of strength as well as areas of needed change/improvement.

Students should regard evaluation of faculty as both a privilege and a right with a responsibility for objectivity. Such a concept necessitates that evaluation be given in a positive manner which focuses on teacher expertise, knowledge and presentation of content rather than on teacher personality. Student objectivity, therefore, is an essential component in the evaluation process. It requires maturity and a sincerely genuine commitment on the part of the student to provide input directed toward attainment of maximum teaching effectiveness.

Student evaluation is a reciprocal process in that faculty regard student input in the constructive and positive manner in which it is intended and presented. As consumers in this educational market, students have the right to expect faculty accountability and responsiveness to their learning needs. Faculty responsibility in the student evaluation process, therefore, is to give serious and thoughtful consideration to student input, and to implement changes when appropriate and consonant with curricula design constraints.

USE

The Department of Nursing Student End of Course Evaluations are used in making recommendations for course changes to the Committee on the BSN Curriculum. Recommended changes in the following areas are to be approved by the Committee on the BSN Curriculum with final approval by the BSN Faculty Assembly:

1. Course Description
2. Course Outcomes
3. Textbooks
4. Major Content Revision

The student evaluation of faculty (Course Evaluation) are to be used by the faculty for personal professional growth and is used for promotion, merit and/or tenure.

PROCEDURE

1. Each semester dates for the Department of Nursing Student End of Course Evaluation(s) and/or specific course evaluations are determined and included on all course calendars. Evaluations are completed electronically.
2. Students are required to access, complete, and submit the evaluation(s) in the defined time-period.
3. Course Evaluation(s) are distributed electronically by the Office of Assessment and Institutional Research. For completion of the Course Evaluation, students are required to access, complete, and submit the evaluation(s) in the defined time-period.

The results of the evaluations are accumulated through the Office of Institutional Research, Effectiveness, and Planning (IREP) at Nicholls State University thereby insuring the anonymity of student responses. Students are expected to be thoughtful, honest, and constructive in their evaluative comments.

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NURSING LABORATORY POLICY

The BSN skills and simulation labs provide the clinical nursing student opportunities for practicing and being evaluated on skills used in the clinical areas assigned. The hours of labs will be determined by faculty members involved in the various clinical courses. Labs will remain locked when not in use.

1. Students are required to sign in and out of the lab.
2. Students are not allowed in the lab without faculty supervision. No outside visitors are allowed in the laboratory setting at any time. The labs are to be utilized by clinical nursing students only.
3. Students are required to wear a Nicholls State University student ID (Colonel) card and name badge at all times when on campus and during any aspect of the clinical experience (i.e. clinical assignment, observation, simulation, and clinical day). Students must have a working badge to scan during campus lab days and simulation experiences. Additional agency specific ID badges may be required.
4. Mannequins, lab supplies, and equipment:
 - a. Not for use on humans. Supplies and equipment are for use on mannequins only.
 - b. Must be handled with same respect given to humans – keep draped at all times.
 - c. Universal precautions are expected at all times to protect students and faculty.
 - d. Report broken equipment to faculty and course coordinator.
 - e. Clean all supplies and equipment after every use.
 - f. Return to proper location after each use.
5. On scheduled laboratory days, to include checkoffs, students must wear the designated Nicholls State University Department of Nursing short or long sleeve shirt or sweatshirt. Bottoms must be comfortably fitting, full length khaki pants, jeans, or approved black scrub pants. Shorts, scrubs, and exercise pants are not allowed. Clothing must not have holes, not be revealing and provide full coverage. Shoes must have closed toes and heels, with sole not thicker than 2 inches. Hair, makeup, and jewelry are to follow the BSN Program Uniform policy.
6. On scheduled simulation days, students must follow the designated clinical uniform policy.
7. Scheduled lab time requires mandatory attendance. Absence during this time will be considered a lab/clinical absence.
8. Non-clinical activities, course meetings, or conferences are not to be scheduled in the labs unless it has been cleared with the clinical nursing faculty utilizing the lab in question.
9. The labs are to be kept in an orderly manner as is expected in the hospital/clinical setting. Students are expected to pick-up after themselves. Leave beds neatly made and in the

low, locked position with top rails up. Place trash & soiled linen into the proper receptacles. All trash receptacles should be placed outside of over bed tables.

10. No smoking, eating, or drinking is allowed in the lab.
11. Personal belongings left in the labs are not the responsibility of the Nursing Department or University.
12. No students are allowed in the supply room located in the lab. Storage closets should remain locked at all times.

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CLINICAL SKILLS EVALUATION TOOL GUIDELINES

- The purpose of the Clinical Skills Evaluation Tool (CSET) is to document evidence of progression of clinical skills which are verified in the lab and/or clinical setting throughout the nursing curriculum. The CSET is used for all clinical nursing courses. Each nursing course builds on prior knowledge, skills, and attitudes.
- The CSET encompasses cognitive and psychomotor skills based on Quality and Safety in Nursing Education (QSEN). The major concepts defined by QSEN are integrated into the curriculum didactically and reflected clinically on the CSET. Some psychomotor skills are required as a lab check-off each semester. Cognitive and other psychomotor skills listed on the CSET are verified by the clinical faculty as opportunities arise.
- Each student is responsible for his or her CSET in the lab and clinical setting. At the end of each semester each student will provide a copy of the CSET to the respective clinical instructor to retain for records.
- Students are expected to preserve the master CSET in a two prong report cover throughout the nursing curriculum.
- Upon completion of or exiting the nursing program, the student will provide the original copy to the Department of Nursing for the purpose of permanent records.

Grading Guidelines and Descriptions

- Each attempt in lab or clinical should be identified by placing the score, date, and observer initials in the appropriate box. Once the student achieves a score of “S” with supervision but no assistance in the clinical setting, no further signature is required.
- Skill Performance will be evaluated on the CSET, and will be scored either “S” or “U”.
- Every student must receive a score of “S” on the CSET prior to entering the clinical setting.
- If a student receives a “U” on the CSET, a second attempt to achieve an “S” will be permitted, at the discretion of the instructor. If on the second attempt, the student is unable to achieve an “S”, the student will not be permitted to enter the clinical setting and will receive a grade of no higher than “D” for the course.

A grade of “S” means the student:

1. Functions satisfactorily with minimum guidance in the clinical situation.
2. Demonstrates accurate and appropriate knowledge and integrates knowledge with skills and attitudes.
3. Engages consistently in self direction in approach to learning.
4. Provides evidence of preparation for all lab/clinical learning experiences.
5. Follows directions and performs safely.

6. Identifies own learning needs and seeks appropriate assistance.
7. Demonstrates continued improvement during the semester.
8. Uses nursing process and applies evidence-based practice.

A grade of "U" means the student:

1. Requires intense guidance for the performance of activities at a safe level.
2. Lab/Clinical performance reflects difficulty in the provision of nursing care.
3. Demonstrates gaps in necessary knowledge and requires frequent or almost constant assistance in integrating knowledge and skills.
4. Requires frequent and detailed instructions regarding learning opportunities and is often unable to utilize them.
5. Is often unprepared and has limited insight into own behavior.
6. Is unable to identify own learning needs and neglects to seek appropriate assistance.
7. Not dependable.
8. Breaches in professional or ethical conduct such as falsification of records and failure to maintain confidentiality

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MASTER CLINICAL SKILLS EVALUATION TOOL

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Basic Human Needs: Promoting Hygiene							
Complete Bathing							
Oral care							
Perineal Care							
Bed Making (occupied, unoccupied, surgical)							
Assessment Skills: Vital Signs							
Measuring body temperature							
Assessing apical pulse							
Assessing radial pulse							
Assessing respirations							
Assessing blood pressure							
Measuring oxygen saturation (pulse oximetry)							
Assessment Skills: Adult/Older Adult							
General Survey							
Physical Systems (Head to Toe)							
Monitoring intake and output							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Infection Control							
Hand hygiene							
Applying personal protective equipment							
Preparing/Maintaining a sterile field							
Sterile gloving							
Dressings and Wound Care							
Performing a wound assessment							
Cleansing wound							
Dressing wound (Dry/Moist-to-dry)							
Irrigating wound							
Emptying/Maintaining drains							
Removing sutures							
Removing staples							
Pressure ulcer wound care							
Negative-pressure therapy (Wound vac)							
Applying elastic bandages							
Applying abdominal and breast binders							
Therapeutic Use of Heat							
Therapeutic Use of Cold							
Activity & Mobility: Safe Patient Handling, Exercise, Transfer, & Positioning							
Transfer techniques							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Moving & positioning patients in bed							
Range of Motion							
Continuous passive motion machine							
Applying elastic stockings & sequential compression devices							
Assisting with ambulation							
Assistive devices							
Care of patient with immobilization devices (brace, cast, splint, or sling, traction)							
Specimen Collection							
Blood glucose monitoring							
Testing for gastrointestinal alterations (gastrocult test, stool specimen, hemocult test)							
Collecting cultures (nose, throat, sputum, wound drainage)							
Promoting Elimination: Urinary							
Bladder scan							
Insertion of indwelling catheter (male or female)							
Insertion of In and Out Catheter							
Obtaining urine specimen (midstream, sterile catheter)							
Collecting 24-hour timed urine specimens							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Catheter Care							
Performing catheter irrigation							
Indwelling catheter removal (2 way)							
Indwelling catheter (3 way)							
Promoting Elimination: Bowel							
Administering an enema							
Ostomy care							
Irrigating an ostomy							
Applying ostomy appliance							
Promoting Nutrition							
Insertion of NG tube							
Verifying placement (nasogastric-NG, gastrostomy, GT)							
Administration of feedings							
Irrigating NG/GT							
Care of NG/GT							
Removing NG tube							
Pain Management: Care of the patient with							
Patient-controlled analgesia							
Epidural analgesia							
Spinal analgesia							
Local anesthetic infusion pump							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Promoting Oxygenation							
Oxygen administration (Nasal, Mask)							
Flow meter adjustment							
Managing chest drainage systems							
Nasal/tracheal suctioning							
Tracheostomy care							
Medication Administration							
Preparation for Safe Medication Administration							
Calculating dosages							
Reading measurement on syringe							
Administration of Nonparenteral Medications							
Administering oral medications							
Administering medications through a feeding tube							
Applying topical medications to the skin							
Instilling eye medications							
Instilling ear medications							
Using inhaled medications							
Administering rectal suppositories							
Administration of Parenteral Medications							
Withdrawing medication from vials and ampules							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Changing needles							
Mixing medications in one syringe							
Using air bubble							
Administering intradermal injections							
Administering SQ injections							
Administering IM injections							
Z-Track injection							
Intravenous Therapy							
Insertion of a Peripheral IV							
Maintenance of an intravenous site							
Discontinue peripheral IV							
Initiate/Maintain a continuous infusion							
Convert infusion to saline lock							
Administer IVPB							
Administer IVP							
Administering and intermittent infusion							
Administering a bolus							
Regulating intravenous flow rates							
Administration of parenteral nutrition							
Care of patient with a blood transfusion							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Collection of a serum blood sample							
Documentation							
Central Venous Therapy							
Care and maintenance of a Central Venous Access Device							
Collection of a serum sample							
Flushing ports							
Discontinuing a central venous access device							
Culturing central venous access device							
Administering medications							
Accessing an implantable port							
De-accessing an implantable port							
Documentation							
Preoperative and Postoperative Care							
Preoperative assessment							
Preoperative teaching							
Physical preparation of surgery							
Providing immediate anesthesia recovery							
Caring for the dying patient							
Newborn Skills							
Vital Signs							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Measurements							
Gestational Age							
Glucose Stick							
Vitamin K injection							
Hepatitis B Vaccine							
Erythromycin eye ointment							
Venipuncture							
PKU Lab							
Antenatal/Postpartum Care							
Fetal heart rate monitoring							
Leopald maneuvers							
Fundal height							
Postpartal fundal assessment							
LATCH assessment							
Cervical assessment							
Application of external fetal monitors							
Pediatric: Assessment							
Infant							
Toddler							
Pre-schooler							
School Age							
Adolescent							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
Pediatric: Medication Administration							
Safe dose calculation							
PO							
IM							
IVP							
IVPB							
IV buretrol							
Initiating pediatric IV							
Securing pediatric IV							
Using autosyringe							
Pediatric: Skills							
Performing diaper weight							
GU bags							
Growth grid							
Bulb suctioning							
Quality & Safety in Nursing Practice: Using Evidence in Nursing Practice							
Steps of evidence-based practice							
Evidence in nursing skills							
Quality & Safety in Nursing Practice: Communication and Collaboration							
Establishing the nurse-patient relationship							
Interviewing							
Communicating with anxious,							

Student Name:							
Nursing Skills with Documentation of Quality & Safety in Nursing Practice	Lab Setting		Clinical Setting With Supervision AND Assistance		Clinical Setting with Supervision but NO Assistance		
	Use only one blank for each attempt. Include the date, score & your initials.						
angry, depressed, and cognitively impaired patients							
Hand-off communications							
SBAR communications							
Quality & Safety in Nursing Practice: Documentation and Informatics							
Documenting nurses' progress notes							
Use of electronic health records							
Documenting an incident / occurrence							
Quality & Safety in Nursing Practice: Patient Safety and Quality Improvement:							
Spring prevention							
Designing a restraint-free environment							
Applying physical restraints							
Aspiration precautions							
Seizure precautions							
Fire, electrical and chemical safety							
Conducting a root cause analysis							

Semester	Course	Lab	Clinical Site	Faculty/Preceptor Signature	Initials

Comments:



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CLINICAL UNIFORM POLICY

Nicholls State University is committed to a safe and healthy work environment while adhering to agency policies. BSN program students are expected to project a professional image to internal and external constituents when wearing approved uniform scrubs.

POLICY:

Approved uniform brand/styles are subject to change based on the availability. Information on purchasing approved uniforms will be communicated directly from the BSN Program Coordinator and/or the Clinical Course Coordinator within the first two weeks of NURS 222.

The following are uniform criteria for students:

1. Clinical uniform: White top and bottom. When choosing a uniform, students should select one that is loose fitting and suitable for clinical movement essential for practice.
2. Lab coat: All white, long sleeves, and knee length.
3. Insignia patches: Need two (2) insignia patches. One will be sewn to the left sleeve of the uniform and the other will be sewn to the left sleeve of the lab coat. Location of insignia will be directly over deltoid muscle. These may be purchased in the Nicholls State University Bookstore.
4. White high round neck tee shirt is required whenever in uniform. A solid white long sleeve stretch tee may be worn under uniforms. These stretch tees have spandex material which prevents baggy sleeves and can be found by various uniform brands.
5. Shoes: Professional nursing shoes. Solid white (including the visible portion of the sole), solid leather upper, soft-soled professional styled shoes. Must have closed toes and heels, with sole not thicker than 2 inches. No sandals or cloth construction. Shoes may be lace up. Keds are not permitted. Brand Logos/Labels that are colored may be acceptable if the size is no more than 1.5 cm (approximately the size of a quarter) and pending approval by the course instructor. No other colors on the shoe (such as stitching, colored Nike checks or colored laces) will be acceptable. Any question about shoe compliancy needs to be directed to your clinical instructor prior to purchasing.
6. Socks (white), worn with slacks, should be at least 2 inches above ankle. Undergarments should be neutral and solid (ex. Beige or white to wear under the white uniform). Thongs are not allowed as an undergarment. Undershirts should not contain visible print or color.
7. Name pins: Two (2) need to be purchased. One will be pinned to the left chest of the uniform top, and other will be pinned to left chest of lab coat. BSN Program pins have blue background.
8. Bandage scissors: 5 ½ inches long with dressing lip.

9. Dual head stethoscope, provided in the Physical Assessment kit, with at least 20-inch tubing. Cardiology stethoscopes are not acceptable.
10. Wrist watch with “second” hand. No digital dials. Neutral color (white, black, or brown) utility style band: not jeweled, no cloth or leather band, must be able to be cleaned. Smart watches (i.e. Apple, Samsung, Fitbit, Pebble) and designer fashion watches are not allowed. Size and style need to be consistent with professional dress.
11. Penlight is required.
12. For the NURS 400 Mental Health rotation, a grey polo style shirt with the approved Nicholls State University, School of Nursing logo is required and is purchased through an authorized vendor. Approved black uniform pant brand/styles will be communicated directly from the BSN Program Coordinator and/or Clinical Course Coordinator.
13. Hair and General Appearance. Professional, either short cut above collar or pinned up neat and secure off collar and out of face. No extreme hair style or coloring. No bleaching or dying with primary colors (examples: red, blue, purple, orange, yellow or green). Mild natural shades of color or highlights are permitted. No hair bows. Barrettes, clips, and headbands the same color as student’s hair (neutral color) are acceptable. Make up may be worn in moderation. A neatly trimmed mustache and beard will be permitted, when sanctioned by the clinical faculty policy.
14. Jewelry: Earring size should not exceed ¼ inch width, one per ear, place in lobe of ear, and flush with ear lobe surface. If pair is worn, they will match. No visible body piercing or tongue piercing is allowed, other than a single pair of earrings. Ear gauging is discouraged. For students with existing ear plugs (ear gauging), a flesh tone hider plug will be required while students are in clinical and lab settings. A flesh color plug is also required for large tongue and nose piercing that leave visible holes. Necklaces, chains are discouraged for safety reasons, but if a fine chain is worn, it will be inside of a high cut neckline. A wedding ring may be worn, and suggestion is that rings be plain and without stones (for safety reasons). Advertisement or holiday jewelry is not considered professional. No additional jewelry.
15. Fingernails must be short, clean, filed, and not polished. Artificial nails of any kind are unacceptable.
16. Visible tattoos must be concealed/covered.
17. At all times, clothing will be pressed, clean, and in good repair.
18. Maternity uniforms should comply with the uniform policy. Tops should have a collar, button down, should be mid-hip length and require final approval from faculty.

Additional Requirements for All Students

1. Students will be required to follow institution’s guidelines. If they should differ from the above, permission for exceptions will be at the discretion of clinical faculty. Each student should refer to their clinical syllabus for course and facility considerations.
2. When obtaining assignments at clinical facility, students are to wear a lab coat (with insignia and name tag) and be dressed in **full** uniform. Appearance should be as “Professional” as any clinical day.
3. Uniforms and lab coats with insignias and nametag are to be worn in clinical facilities only during scheduled clinical activities. For example: do not wear these clothes when on duty as

employee, as a Nurse Tech, or CNA, even if you are employed at the same facility at which you are assigned academic clinical days.

4. Students are required to wear a Nicholls State University student ID (Colonel) card and name badge at all times during any aspect of the clinical experience, (i.e. clinical assignment, observation and clinical day). Additional agency specific ID badges may be required to be worn.
5. In the clinical setting, soiled or torn uniforms should be promptly changed. Designated agency staff will provide a change of clothing, if necessary; it is the student's responsibility to return the clean, borrowed clothing to appropriate area in a timely manner.
6. Additional requirements may be identified by faculty and communicated to students.

The Department of Nursing reserves the right to determine extremes in style of uniform apparel.

****Students in violation of the Department of Nursing's Uniform Policy will receive one (1) warning. Any additional violations will result in an unsatisfactory in professionalism for that clinical day.**

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STUDENT CLASSROOM DRESS POLICY

Nicholls State University is committed to a safe and healthy classroom environment while adhering to agency policies. BSN program students are expected to project a professional image to internal and external constituents when attending class.

1. BSN students are expected to be groomed and neatly dressed for class. Clothing should be clean and in good repair.
2. Dress should be appropriate to a learning environment. Dress codes or uniforms specific to the program or department should be followed: exposed chests, midriffs, cleavage, buttocks, very tight and skimpy garments, as well as short shorts, skirts and/or dresses are considered non-professional and unacceptable.
3. Pajamas and slippers are not to be worn in class.

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CIVILITY STATEMENT

Civility is defined as polite and courteous behavior in all interactions, both verbal and nonverbal (Merriam-Webster Online Dictionary, 2013). Incivility is defined as speech or action that is discourteous, rude, or impolite (Merriam-Webster Online Dictionary, 2008). Faculty in the Department of Nursing are committed to maintaining a classroom and online environment where all members have the freedom to teach and learn. A culture of respect that honors the rights, safety, dignity, and worth of every individual is essential to preserve such freedom.

Acts of civility include, but are not limited to: listening quietly during lectures and/or other class presentations, respecting the opinions of others, using appropriate language when addressing the class or faculty, expressing anger or other emotions constructively and turning in assignments completed and in the required timeframe.

Student behaviors most often reported as uncivil by both students and faculty are: cheating, use cell phones, distracting conversations, making sarcastic remarks, sleeping, using computers for purposes not related to the class, demanding make-up examination extensions, or other favors, making disapproving groans, dominating class discussion, and refusing to answer a direct question (Clark & Springer, 2007).

Students exhibiting acts of incivility will be subject to a range of sanctions including immediate removal from the learning environment, referral to the appropriate administrative body, administrative withdrawal from the course, and/or program dismissal.

Civil interaction is paramount to an effective, engaged learning milieu. Faculty and students are strongly encouraged to follow the Policy on Professional Behavior. Furthermore, faculty and students in individual courses in the BSN program are encouraged to set classroom “norms” that support established instructional rules and decorum. Agreed upon norms that define important and expected behaviors in the classroom, lab, and clinical settings will contribute to the success of the student and faculty in meeting course student learning outcomes.

Instructional Rules and Decorum for a Disruption Free Learning Environment

The BSN Program seeks to promote a teaching and learning environment free from classroom disruptions. Faculty members have the authority and responsibility to effectively manage their learning environments. Faculty may determine the time and manner for student questions and expression of points of view in the instructional setting. Accordingly, faculty should establish, communicate, and enforce reasonable rules of classroom behavior and decorum via the

syllabus and course orientation. This policy is not intended to discourage appropriate classroom expression, discussion, or disagreement, but to promote respectful interactions. Likewise, respectful student-student relationships are also essential to maintaining a safe and effective learning environment.

Disruptive behavior within the academic setting is any action or effort by a student to disrupt or disturb the academic progress of other individuals within the academic setting or a setting related to academic activities. Furthermore, disruptive behavior includes conduct that distracts or intimidates others in a manner that interferes with instructional activities, fails to adhere to an instructor's appropriate classroom rules or instructions, or interferes with the normal operations of the BSN Program.

Rules and expectations for the instructional setting will be established by the instructor and communicated to the students via the syllabus and course orientation at the outset of the course. Such rules may contain reasonable restrictions in light of the instructional setting, teaching method, and learning objectives; and may vary depending upon the educational context. Instructional rules may include, but not be limited to, prohibiting cell phone use or other electronic devices, refusing to be seated, talking during lectures, sleeping, entering the classroom late or leaving early without authorization, etc.

Disruptive behavior is prohibited. Students who engage in disruptive behavior will be directed by the instructor to leave the class for the remainder of the class period.

This policy is in accordance with the BSN Program Essential Academic and Technical Standards, Policies Regarding Professional Behavior, and the [Student Policy and Procedure Manual](#).

Adopted: 8/13

Revised: 7/18; 7/19

Reviewed: 8/14; 8/15; 8/16; 8/17; 8/2020; 8/2021; 8/2022; 7/2023; 7/2024

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THE RULES OF NETIQUETTE

Netiquette provides basic behavioral “ground rules” in the online course environment. Please keep in mind that communicating in online academic courses is not the same as communicating with friends via social media, nor is it the equivalent to sending text messages to friends or colleagues. Follow the guidelines below to reduce your online miscommunications.

- **Communicate as you would in a face-to-face course.** Online communication lacks non-verbal cues that provide much of the meaning in face-to-face conversations. Choose your words carefully, phrase your sentences clearly and keep your sentences and paragraphs brief. Also, don’t use all capital letters because it represents the vocal equivalent of shouting.
- **Be professional and courteous.** Your coursework is more than learning facts; you are preparing for a career. You are learning to interact with fellow course participants as you would in your future professional life. Your conduct in your online courses should reflect this. Your communication should follow standard rules for grammar and spelling and be clear, concise and intelligent.
- **Proofread your communications** prior to posting to a forum or sending an email.
- **Don’t be afraid to share your opinion in forum posts.** Remember the goal of a forum is for students to share their point-of-view in discussing a topic or an issue.
- **Respect the perspectives of others.** People have the right to disagree with you. However, the disagreement should never be personal. Online discussions are a means to share ideas and practice the skill of persuasion. Do not use hurtful, hateful or inappropriate language when communicating with fellow classmates or your instructor.
- **Ask Questions.** Cultural influences can influence communication in terms of phrasing and word choice. The lack of visual and auditory clues may affect meaning, as well. Before jumping to conclusions, ask for clarification.
- **Be Forgiving.** For the majority of participants, online communication is straightforward. Sometimes unintended meanings are conveyed.
- **Exercise caution with humor** – The use of humor in an online format can often be misinterpreted as sarcasm, criticism, or insulting without the benefit of observing the body language of the sender. Emoticons may be useful to deliver your true intent of the message (if allowed by your faculty).

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**CELL PHONE AND OTHER ELECTRONIC DEVICE USAGE IN THE LEARNING ENVIRONMENT
POLICY**

POLICY:

Student use of cell phones, smartwatches, and other electronic devices in the learning environment is prohibited. The learning environment, also referred to as the instructional setting, includes but is not limited to the classroom, skills laboratories, simulation laboratories, and the clinical setting/agency. Additionally, the BSN Program, its faculty, Nicholls State University, and the clinical agency are not responsible for any damaged, lost, or stolen property.

A violation of this policy will result in a documented notice of deficiency using the Disruption in the Learning Environment form. Additionally, any presence, use, or discharge of an electronic device during an exam may result in an eight (8) point grade reduction up to confiscation of the exam. Confiscation of an exam may result in a grade of zero (0) for that exam. Any presence, use, or discharge of an electronic device in the skills laboratory, simulation laboratory, or clinical setting/agency will result in a grade of unsatisfactory for the day.

A subsequent violation may result in dismissal from the learning environment with a grade not higher than "D" in the course and/or dismissal from the BSN Program.

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POLICIES REGARDING PROFESSIONAL BEHAVIOR

Faculty and students share complementary responsibilities in the maintenance of academic standards and the development of high quality programs. Excellence in education is achieved when both faculty and students are highly motivated, encompass the academic and professional backgrounds necessary to perform at the highest level, and are genuine in their desire to see each other succeed.

Policy Regarding Professional Behavior of Students

As delineated in the [Student Policy and Procedure Manual](#), the mission of the university extends beyond instruction and into the realms of development of good character and responsible citizenship. All Nicholls State University students are expected to be law abiding and respectful of the personal dignity of others. Specifically, students are required to refrain from uncivil, discriminatory behavior especially with regard to topics such as; race, gender, ethnicity, sexual orientation, disability and religion or illegal behavior such as pornography, hazing or sexual harassment. Additionally, School of Nursing students are embarking upon professional careers in which ethical behavior is mandated.

In order to facilitate successful career development, School of Nursing students must develop into dependable, responsible clinicians while pursuing their academic goals at Nicholls State University. Since professionals represent their chosen profession, School of Nursing students should remember that they represent their university, department, program, and profession whether in the classroom, in clinical settings, on field trips, at professional meetings, or in community activities related to campus chapter. It is important for students to learn to conduct themselves through life-style choices such as communication, dress and behavior in a manner considered professionally appropriate. Although there are aspects of life-style choices which may be acceptable in other settings, it is important for the student clinician to learn to successfully style-shift to the professional behavior expected in a clinical setting.

*To this end, it is essential that School of Nursing **students**:*

- Conduct themselves in a mature, professional, and civil manner and demonstrates collegiality (considerate, compassionate, and respectful) during classes, clinical experiences or when representing their student association
 - communication should be of a nature and content respectful of others in the environment; discriminatory, off-color content and the use of profanity is considered non-professional and unacceptable.
 - dress should be appropriate to a learning and/or clinical environment or for a community-based chapter activity; dress codes or uniforms specific to the program or department should be followed: exposed chests, midribs, cleavage,

buttocks, very tight and skimpy garments, pajamas, slippers, as well as short shorts, skirts and/or dresses are considered non-professional and unacceptable.

- behavior should be appropriate to the classroom, clinical or community-based setting; sexual innuendos and comments, as well as, sexual advance to faculty and unwelcomed sexual advances to students and encountered during university activities are considered non-professional and inappropriate.
- work with diverse faculty and peers regardless of their race, gender, religion, sexual orientation, or national origin
- exercise the highest honesty in taking examinations, in collecting, analyzing, and presenting research data, and in professional practice
- take primary responsibility to inform themselves about the specific regulations and policies governing their studies at the department and college levels
- manages time effectively for maximum professional development as well as personal health and well-being, balancing competing demands such as being a student, a parent, a spouse, a caregiver, etc.
- contacts appropriate personnel in a timely fashion when issues arise that affect student's attendance (e.g., accident, illness, extraordinary family issues)
- demonstrates maturity in response to challenges and willingness to ask for help
- appropriately and productively handle disagreement and discussion with instructors and other students.

Policy Regarding Professional Behavior of Faculty

Nicholls State University Faculty endeavor to provide a nurturing environment which affords students faculty access and engagement not afforded at many institutions today. Within the School of Nursing, the Nicholls academic culture coupled with clinical experiences, additionally, develop scholarly, pre-professionals/professionals. In order to provide effective role models for School of Nursing students, faculty are expected to provide leadership and to promote professional behavior in academic and clinical settings, on field trips, at professional meetings, or in chapter-related community activities. Particularly in the areas of communication, dress and behavior, it is important for faculty to provide a professional image and to assist students in learning to present themselves professionally, as well as, to discern situations requiring them to conduct themselves according to professional standards.

School of Nursing faculty are expected to engage in supportive, mentoring relationships with students in order to foster academic and professional development. However, due to the pedagogic nature of this relationship, faculty are expected to avoid developing personal friendships with students. Within the confines of the teacher/student relationship, it is inappropriate for a faculty member to engage in sexual activities or to discuss personal experiences of a sexual nature with a student. Although it is expected that once a professional has attained their education that they may enter into more of a collegial relationship with a past professor, faculty-provided entertainment or travel with students removed from university-related activities is not considered appropriate.

*To this end, it is essential that **faculty** in School of Nursing:*

- act in a manner that best serves the education and professional development of students, serving as a model and guiding students in the use of appropriate professional behavior during this formative period in all students learning situations and university – related activities.
 - communication should be of a professional level indicative of a faculty member; the nature and content is respectful of others in the environment; discriminatory, off-color content and the use of profanity is considered non-professional and unacceptable.
 - dress should be appropriate to a learning and/or clinical environment or for a community-based chapter activity; faculty should encourage students to adopt and follow professional dress codes or uniforms specific to the program/department; faculty should adhere to all program/department dress requirements; exposed chests, midriffs, cleavage, buttocks, very tight and skimpy garments, as well as short shorts, skirts and/or dresses are considered non-professional and unacceptable.
 - behavior should be conducive to the classroom, clinical or community-based setting; sexual innuendos and comments, as well as, sexual advances to students and unwelcomed sexual advances to other professionals and university employees is considered non-professional and inappropriate.
- interact with students in a professional, civil, and collegial manner that represents fairness and respect
- treat all students equally regardless of religion, race, gender, sexual orientation, nationality, or other criteria that are not applicable to academic evaluation
- promise a reasonable degree of confidentiality in communication with students, taking care not to discuss a student’s performance or behavior with other students
- create in the classroom, lab, or clinical site supervisory relations with students that inspire and encourage students to learn independently
- respect the academic freedom for students to express opinions that may differ from those of faculty
- provide current materials that are relevant, evidence-based and are effective for learning
- be on time for didactic and clinical meetings
- provide opportunities for students to seek assistance for a grievance without threat of retaliation

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POLICIES REGARDING THE USE OF SOCIAL MEDIA

Due to the significant potential for expanded information sharing and collaboration, Nicholls State University supports the positive use of social media. Social media provides a rich forum for the sharing of ideas, diverse opinions, and civil debate. It is recognized that the facilitation of communication and networking is potentially beneficial for academic activities, research collaboration and clinically/career-related activities. Individuals engaged in the use of social media should be cognizant that sites such as Facebook tend to be more entertainment-oriented, whereas, a site such as LinkedIn is more oriented to career-networking. To that end, the School of Nursing community is reminded of the permanence and wide accessibility of this form of communication and that civil and legal tenants of appropriate faculty/student behavior apply to this mode of communication. Therefore, individuals using social media are reminded of the importance of monitoring the accuracy, tone and content of their personal interactions.

Policy on Constructive Use of Social media for Students

Students are individually responsible for their postings. Since the personal social media page provides an opportunity to contribute to the building of a student's professional reputation, it is important for the student to purposefully attempt to illustrate aspects of their responsible, respectful, accountable nature through their associations with others. It is recognized that the facilitation of communication and networking is potentially beneficial for academic activities, as well as, to assist potential supervisors and employers to identify appropriate individuals to serve within their organization. Students should be aware that social media may be used as a screening by employers to avoid hiring individuals who do not portray a public image congruent with the standards of the company or organization.

The social media page must be monitored closely, especially for unprofessional material which may reflect negatively on the student that was posted by others. Students should avoid posting or allowing any information on their page which may appear harassing, obscene, threatening, hateful, or embarrassing to anyone else, as well as, words, jokes, or comments of a discriminatory nature with regard to gender, sexual orientation, race, ethnicity, age, or religion. Privacy settings should be used to Nicholls State University that only individuals with authorized access can see a student's information and posting of identification numbers or demographic information should be avoided. Students should monitor photos posted to ensure that they portray the professional image that the student is attempting to develop and restrict tagging of any photos felt to be professionally compromising.

Although students may feel extremely enthusiastic about clinical experiences, posting of identification, reference or photographs of any clinical patients is strictly prohibited in personal social media. These acts are considered a breach of the confidentiality guaranteed to patients

through federal legislation as well as the policies and procedures of the actual healthcare/educational institution.

When disagreeing with a policy of the university, department or even a class, it is important to address the matter in a professional manner and identify your role as a student and the opinion as your own.

Social networking sites should not be accessed during class, work or clinical assignment.

The School of Nursing recommends that students follow these guidelines when using any social media outlet (e.g. Linked-In, Facebook, Twitter) in order to protect yourself and reduce the likelihood of causing harm to others:

- Students should never post any information, photos or identifiable content about current/past clients/patients in their care.
- Students should not post material that is harassing, obscene, defamatory, libelous, threatening, hateful, or embarrassing to any person or entity.
- Students should not post words, jokes, or comments based on an individual's gender, sexual orientation, race, ethnicity, age, or religion.
- Students should not complain about your work, coworkers, patients or organizational policies.
- Students should not post pictures of themselves in compromising positions (drunk, sexually explicit, inappropriately dressed) this may cause problems for you later in life. Employees may check social media sites before hiring.
- Students should avoid posting while under the influence (PUI). When people are under the influence of alcohol they may post things that they might otherwise avoid.
- Students should "defriend" anyone who is harassing them or making them uncomfortable. If the student is scared to completely "unfriend" someone they can possibly alter the settings associated with that person to hide their posts.
- Students should become familiar with the privacy settings on their social media accounts to help ensure that their information is set at the level of privacy in which they are comfortable.

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SCHOLARSHIPS

The Scholarship Office will advertise any available scholarships on their webpage. All nursing students are strongly encouraged to apply for these scholarships as appropriate.

A limited number of scholarships are made available through private donors to the Department of Nursing. The Program Coordinator, through the course coordinators, will announce these scholarship opportunities as they are available.

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STUDENT PROFESSIONAL ORGANIZATIONS

All nursing students are encouraged to join student professional organizations for career growth and development. The *Nicholls Association of Student Nurses (NASN)* and the *Nicholls Association for Men in Nursing (NAMN)* welcome any/all students who wish to support the purpose of the organizations.

NICHOLLS ASSOCIATION OF STUDENT NURSES (NASN)

Professional nursing organizations provide a voice of one for action, service, and the betterment of health care and begins with joining as a student. The opportunity exists within the Nicholls Association of Student Nurses.

PURPOSE AND FUNCTIONS OF NASN

The purpose of NASN is to aid in the development of the individual student of nursing as future health professionals and to be aware of and to contribute to improving the health care of all people. The local organization is the Nicholls Association of Student Nurses, referred to as NASN and the state organization is the Louisiana Association of Student Nurses, referred to as LASN. At the top of the professional organization's hierarchy is the National Student Nurses Association, referred to as NSNA. Membership in all three professional organizations is strongly encouraged.

The functions of NASN include the following:

- To provide a pre-professional organization on a local level to student nurses.
- To prepare students for membership in and participation on all levels of the American Nurses' Association and the National League for Nursing.
- To serve as a channel of communication between student nurses, organizations, and the various units of the American Nurses' Association and the National League for Nursing.
- To encourage student nurses to promote high educational and professional standards, provide opportunity for exchanging ideas and for broadening the member's horizons in health care.
- To promote professional and social unity among the student nurses of the Louisiana Association of Student Nurses.
- To help in the development and growth of the individual student by encouraging good citizenship.
- To serve as a channel of communication between student nurses and the faculty in order to promote higher educational and professional standards.
- To promote professional and social unity among student nurses in the BSN program.

Activities of NASN include:

- Community outreach
- Speakers for meetings
- Welcome Back Day
- Family Day
- Easter Egg Hunt
- Nicholls Orientation
- Manning Passing Academy
- Toy Drive
- Disaster Relief Drive
- Attend state and national conventions for student nurses

All nursing graduates are highly encouraged to join the American Nurses Association (ANA). ANA is the national professional association of registered nurses in the United States fostering high standards of nursing practice, promotes professional growth and development, and advances the economic and general welfare of nurses.

NICHOLLS ASSOCIATION FOR MEN IN NURSING (NAMN)

The Nicholls Association for Men in Nursing provides a supportive organization for men in nursing that promotes academic success while highlighting the contribution of men in nursing and supporting efforts to improve men's health. Membership and attendance are strongly encouraged. NAMN is aligned with the purpose and objectives of its national organization, the American Association for Men in Nursing (AAMN).

PURPOSE AND FUNCTIONS OF NAMN

The purpose of NAMN is to provide a framework for nurses as a group to meet, discuss, and influence factors that affect men as nurses.

The functions of NASN include the following:

- To support the efforts of all nurses to grow professionally and demonstrate to each other and to society the increasing contributions made by men within the profession of nursing.
- To encourage men of all ages to become nurses and join together with all nurses in strengthening and humanizing health care.
- To advocate for continued research, education, and dissemination of information about men's health issues, men in nursing, and nursing knowledge at the local and national levels.
- To support members' full participation in the nursing profession and its organizations and use the Chapter for the limited objectives stated above.

Activities of NAMN include:

- Speakers for meetings

- Welcome Back Day
- Family Day
- Bridge to Independence Health/Wellness
- High School Nursing Recruitment
- Suicide Walk
- Men's Health Events

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STUDENT INFORMATION SHEETS

Each semester students enrolled in core BSN curriculum courses, as well as any nursing elective, are required to complete the Student Information Sheet electronically. The information collected is for data and statistical purposes. Data and statistics are only reported in aggregate and do not identify any individual student information when shared with accrediting and approval organizations. Students will access the electronic Student Information Sheet, for each nursing course in which they are enrolled, through the Canvas® Learning Management System.

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NURSING COMPUTER LAB AND NETWORK USAGE POLICIES

GENERAL POLICIES

Lab Environment. It is expected that the nursing computer lab will maintain a quiet, library-like atmosphere so the students can use their time productively with few distractions. Although students are sometimes required to work in groups for some class projects and need to talk among themselves, this must be done in a controlled manner. If there are groups in the lab doing projects, enforcing the quiet policy will be done. In addition, groups of students are not allowed to remove chairs from operational workstations in order to gather around one computer.

Academic vs. Personal Use. Students may use the computers to check-e-mail and to browse the Internet for personal use as long as computers are available for academic use. If computers are needed for academic use, students doing personal work will be asked to leave. At no time should documents or files be saved on the hard drive of any of the computers.

Student Accounts. All students are required to open a student account in order to use any academic computer lab. All students are expected to safeguard their accounts and not divulge their passwords.

Entrance Policy. A Nicholls Faculty/Staff/Student ID is required for entrance into all open labs. No exceptions will be made. All students must sign-in upon entering the lab.

Audio Distractions. Students are not allowed to listen to any personal digital media in the nursing computer lab. Students are allowed to listen to audio software related to course work. In all cases, headphones must be worn when listening to any audio component in the nursing computer lab. Anyone violating these rules will be required to discontinue the activity.

Food or Drink Products. No food or drink are permitted in the lab at any time.

Cell Phones. All wireless phones/devices shall be on silent.

Game Playing. Game playing is not an appropriate academic usage of university resources and is prohibited in the nursing computer lab. Anyone playing computer games in the nursing computer lab will be required to discontinue the activity or vacate the lab.

Excessive Network Usage. Playing real-time video or audio that is not directly assigned by a faculty member is not an appropriate academic usage of university resources and is prohibited

in the nursing computer lab. Anyone playing real-time video or audio not directly assigned by a faculty member in the nursing computer lab will be required to discontinue the activity.

Patron composition. No children or other non-nursing visitors shall be allowed in the nursing computer lab, as this lab is considered an “extension of the classroom.”

Equipment. Students are not allowed to remove any cables, software, hardware or any other equipment or materials without expressed specific permission.

Network Safety. All jump drives, CDs, or any other materials inserted into any computer for the purpose of copying information from the computer to the disc, MUST be virus free. Under no circumstances are students to purposely or inadvertently introduce any type of virus or worm into the Nicholls State University network or any computer on the Nicholls State University network.

Lab Printing Policies.

- Students must provide their own paper for printing purposes
- The maximum number of pages to be printed is 30.
- Labels cannot be printed anywhere.

Non-academic Use. The nursing computer lab is not to be used for printing nonacademic related materials.

Computer Supplies. Under no circumstances will any student be allowed to leave with supplies/software. Supplies/software are to be handled only by faculty.

Safety Policies:

General Policy. Students are to help maintain a safe environment in the computer labs by not placing their book bags in the aisles.

Accidents. In the case of accidents that result in injury, regardless of how insignificant the injury may appear, students should contact the faculty/staff immediately.

Unsafe Actions. Students shall not engage in any unsafe actions like horseplay or fighting.

Alarms. Students should be able to recognize and evaluate the situation in relation to all alarms. If a fire alarm goes off or a bomb threat is reported, students will be asked to immediately evacuate the lab. Everyone must remain outside until directed by university personnel that it is safe to re-enter the building.

Requirements for Courses Using an Online Learning Management System

Minimal Technical Requirements: The majority of the work in an online class, if not all, will be done asynchronously with the student working alone and on their own time. A student taking an online/hybrid course must have basic computer knowledge, including how to access a given website. Students must be able to use different components of Canvas® learning management system (LMS) (see the tutorial and help icon within the Canvas® learning management system) and Nicholls email. In addition, the individual course instructors may expect additional computer and technical requirements. With the absence of a physical teacher and a set meeting time, an online course requires self-discipline and self-motivation. Additional information on how to be an effective distant learner can be found at nicholls.edu/student-resources.

(Additional hardware and software requirements may be necessary. Contact course instructor for specific requirements).

Q: How do I complete the coursework and communicate with my instructor?

A: WWW courses are delivered through a course management system known as Canvas®.

Hardware

For the best technical performance of courses, please use a desktop computer or laptop when performing course activities. Although Canvas® can be accessed by any web-enabled, handheld devices such as tablets or smartphones, do not attempt to submit or perform course activities using a handheld device. You are likely to encounter issues when submitting assignments and quizzes and participating in forums and chat sessions while using Canvas® with these types of hardware.

Students participating in online courses are also encouraged to purchase a webcam in the event of scheduling an online proctored exam or for course assignments. Course instructors will notify students in course documentation on whether or not having a webcam is a course requirement.

Internet Browser

Minimum supported internet browser versions include:

- Firefox 25.0 (if you have a Mac only Firefox is recommended)
- Google Chrome 30.0

Software/ browser plug-ins

You may need some word processing software such as Microsoft Word for many assignments and exams. Alternatively, you can compose assignments using the Google Docs app available through Google Drive. These features are available through your Nicholls Gmail account. This is an excellent, free, cloud-based alternative to Microsoft Office that allows you to access and compose your documents online. From Google Docs, you can easily export documents to a Word .doc or .docx file type. Learn more <http://www.google.com/drive/about.html>.

You are typically enrolled in course and your login made active the first scheduled class day. The log-on screen is found at nicholls.edu/current-students.

Q: How do I log on to my classes?

- A:
- 1) Locate “Canvas®” on to the Nicholls State University home page or login to my.nicholls.edu and click on the Canvas® link.
 - 2) Enter your myNicholls ID and password and click Log in (see next question for Username and password). First-time Canvas® users must first change their password prior to logging in by clicking on “Forgotten your username or password”.
 - 3) Once logged in, your online classes will appear on the screen. Click on the course you need to enter. You can switch between classes by returning to your Canvas® dashboard or the toggle Navigation menu on the left.
 - 4) Follow the teacher’s instructions listed in Announcements (Main Page)
 - 5) Course content is listed in a sequential/list fashion.

Q: What is my username and password?

A: Nicholls State University offers several online services that require users to login with a username and password. While we are attempting to unify all logins so a single username and password can be used across all services, different credentials must be used for some services in the meantime. Below, you will find the different types of credentials commonly used at Nicholls State University.

Username and Password Help

Nicholls State University offers several online services that require users to login with a username and password. While we are attempting to unify all logins so a single username and password can be used across all services, different credentials must be used for some services in the meantime. Below, you will find the different types of credentials commonly used at Nicholls State University.

- myNicholls ID at my.nicholls.edu is used for Canvas®, Banner Self-Service (SSB), and Zoom.
- E-Mail

1. Banner Self-Service (SSB)

Banner Self-Service is an online service provided by Nicholls State University for students, faculty, and staff. It allows users to manage classes, financial aid, time sheets, and much more. To login to Banner Self-Service, visit my.nicholls.edu and login with your myNicholls ID and select BANNER 8 SELF-SERVICE.

2. myNicholls ID

In the past, you may have heard this referred to as your Active Directory login. We have rebranded this login to myNicholls ID. Your myNicholls ID is commonly used for the following online services:

- myNicholls
- Banner Self-Service
- Canvas®
- WEPA
- Zoom
- Faculty/Staff computer login
- Online Helpdesk
- Colonel Card

Your myNicholls ID is the first part of your email address. For example, if your email address is jdoe123@nicholls.edu, your myNicholls ID will be jdoe123.

If you are a new student or faculty/staff user, and have not logged in before, you must set your password before using your myNicholls ID by going to our Password Self Service site at pwd.nicholls.edu. To reset your password at any time, please visit our Password Self Service site at pwd.nicholls.edu. Passwords expire every 6 months and you will receive a reminder in your email before it is set to expire.

If you need any other assistance using your myNicholls ID, please call our department at 985-448-4400. We are available Monday-Friday 8 AM – 4:30 PM. Please leave a voicemail if no one answers and we will return your call as soon as possible.

3. E-Mail

Nicholls State University uses Google's Gmail service for e-mail. Your Nicholls State University e-mail address also gives you access to other Google services such as Google Drive, Google Docs/Sheets/Slides, Google Calendar, and more.

Before logging in, please make sure you log out of any other Google account you are using. Otherwise, your currently logged in account may show up when you go to Gmail's webpage. Students: Your email address will look similar to: jdoe123@nicholls.edu. You must enter the full e-mail address if you are logging through gmail.com. New students can find their new e-mail address in their acceptance letter. Your initial password will be your N number with a capital N at the beginning (i.e. N00123456). You will be asked to change your password on the first login.

When you log in to your email, you will be prompted to enroll in Google 2-Step Verification. 2-Step Verification is the process of adding a second layer of security to your account to keep attackers out. **You must enroll in 2 – Step Verification or you will get locked out of your account and have to contact IT for assistance.** For more information and instructions on how to enroll in Google 2-Step Verification, please visit <https://www.nicholls.edu/information-tech/gmail-mobile-setup-instructions/>.

NICHOLLS STATE UNIVERSITY

GUIDELINES FOR CLASSWORK DURING EXTREME EMERGENCIES

During extreme weather or other emergency situations, the President of the university may declare either **Closure Status** or **Remote Learning Status** for a period of one or more days. During these times, students and faculty are responsible for reading and remaining familiar with (1) official emergency notifications through the Nicholls website and (2) all emergency guidelines of the university.

CLOSURE STATUS. When the university is officially closed, all teaching operations are suspended. During these days, there will be neither classroom nor online teaching, no expectation of class participation, no assignments due, and no tests or quizzes administered.

REMOTE LEARNING STATUS. When the university is open but it is unsafe to travel to or work on campus, students and faculty are responsible for continued learning through remote (online) means. During these days, teaching will occur and class participation is expected. Assignments, tests, and quizzes will be administered as planned unless otherwise directed by the faculty instructor. Under this status, for learning to continue:

- Students must (1) maintain access to Canvas®, Nicholls email, phone, and textbooks and other course materials and (2) remain in contact with their course instructors.
- Faculty will (1) conduct teaching through online means, (2) ensure opportunities for student progress and completion, and (3) adjust course requirements as necessary to accommodate special courses like labs, studios, and clinicals.

Adopted: May 9, 2007

Revised: 7/14; 9/2020

Reviewed: 8/15, 8/16; 8/17; 7/18; 7/19; 8/2021; 8/2022; 7/2023; 7/2024

NICHOLLS STATE UNIVERSITY

GUIDELINES FOR CONTINUED LEARNING FOLLOWING AN EXTREME EMERGENCY

The following guidelines are meant to help the business of education continue at Nicholls State University in the aftermath of an extreme emergency. The guidelines are meant to help faculty and students understand their roles in completing education requirements for course in progress when the emergency began. The following guidelines are meant to encourage the faculty to be imaginative and resourceful in finding ways to continue the education of students and the work of the University.

1. In order to make continued learning possible following an extreme emergency, students are responsible for:
 - reading regular emergency notifications on the Nicholls website;
 - knowing how to use and access the university designated electronic delivery system (such as Canvas®);
 - being familiar with emergency guidelines;
 - evacuating textbooks and other course materials;
 - knowing their designated electronic delivery system (such as Canvas®) student login and password;
 - contacting faculty regarding their intentions for completing the course.

2. Faculty are responsible for:
 - their development in the use of the designated electronic delivery system (such as Canvas®) software;
 - having a plan for continuing their courses using only the designated electronic delivery system (such as Canvas®) and email;
 - continuing their course in whatever way suits the completion of the course best, and being creative in the continuation of these courses (Zoom);
 - making adjustments or compensations to a student's progress in special programs with labs, clinical sequences or the like only in the immediate semester following the emergency.

3. Students are responsible for:

Students are required to have access to the following to take this course: 1) A computer with broadband internet access. As this course requires the watching of video lessons and the completion of online lessons, an internet connection of 5mbps is a minimum requirement. 2) Access to a webcam and microphone. These will be needed for class discussions, as well as for taking exams. 3) The ability to download the following software (different for each faculty member but could be Zoom, ProctorU, Skype, Discord, etc.).

Additionally, Faculty will communicate to students the timelines for Phase IV of the Office of Academic Affairs Hurricane Emergency Plan – that is, if the campus opens within one week of

storm passing, classes will begin on the day the campus opens. If the campus is closed for more than five working days, classes will resume online through the LMS on the sixth day with accommodations for students as needed.

Adopted: May 9, 2007

Revised: 7/14; 8/2020

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**THIBODAUX REGIONAL
SCHOOL OF NURSING
at NICHOLLS STATE UNIVERSITY
DEPARTMENT OF NURSING**

GLOSSARY OF TERMS

Accountability: Means accepting the obligation to disclose and reckoning with the consequences of disclosure. To be accountable is to participate in decision-making and to accept consequences of those decisions. Accountability implies risk-taking which is characteristic of professionals.

Altruism: The quality of putting the needs of others before one's own.

Autonomy: The sense of being an individual and independent.

Consumer Rights: The Patient Bill of Rights

Creativity: The ability to approach a situation with novel, innovative, and original thought processes.

Critical Thinking: All or part of the process of questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application, and creativity (AACN, 1998). Critical thinking underlies independent and interdependent decision making.

Clinical Judgment: The outcomes of critical thinking in nursing practice. Clinical judgments begin with an end in mind. Judgments are about evidence, meaning and outcomes achieved (Pesut, 2001).

Clinical Reasoning: The process used to assimilate information, analyze data, and make decisions regarding patient care (Simmons, Lanuza, Fonteyn, & Hicks, 2003).

Clinical Prevention: Individually focused interventions such as immunizations, screenings, and counseling, aimed at preventing escalation of diseases and conditions.

Cultural Humility: Incorporates a lifelong commitment to self-evaluation and self-critique, to redressing the power imbalances in the patient-clinician dynamic, and to developing mutually beneficial and advocacy partnerships with communities on behalf of individuals and defined populations. Cultural humility is proposed as a more suitable goal than cultural competence in healthcare education (Tervalon & Murray-Garcia, 1998).

Cultural Sensitivity: Cultural sensitivity is experienced when neutral language, both verbal and not verbal, is used in a way that reflects sensitivity and appreciation for the diversity of another. Cultural sensitivity may be conveyed through words, phrases, and categorizations that are

intentionally avoided, especially when referring to any individual who may be interpreted as impolite or offensive (American Academy of Nursing Expert Panel on Cultural Competence, 2007)

Decision Making: A deliberate cognitive process by which an individual chooses an alternative in an effort to achieve a desired outcome and/or goal.

Decision-Support System (Clinical): Interactive computer programs designed to assist clinicians with decision-making tasks. Clinical decision-support systems link health observations with health knowledge to influence choices by clinicians for improved health care.

Directed Care: The provision of patient health care supervised by an experienced health care provider.

Disease Prevention: Nursing activity designed to eliminate factors functionally or casually related to the etiology of a tangible pathological state.

Diversity: The range of human variation, including, age, race, gender, disability ethnicity, nationality, religious and spiritual beliefs, sexual orientation, political beliefs, economic status, native language, and geographical background.

Environment: Composed of internal and external stressors. The internal environment includes such factors as genetics, intelligence, personality, development, crises, and instincts, while the external environment includes such factors as stressors within the family, work setting, air, and living conditions.

Evidence-based Practice: Care that integrates the best research with clinical expertise and patient values for optimum care (IOM, 2003b).

Goals: Students of intent or outcomes derived from purposes and needs.

Health Care Policy: Shapes the nature, quality, and safety of the practice environment through responses to organizational, local, national, and global issues of equity, access, affordability and social justice in health care.

Health Continuum: A range between optimal health and health alterations.

Health Determinants: Complex interrelationships of factors, such as the social and economic environment, the physical environment, individual characteristics, and behaviors that influence health.

Health Literacy: The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions (U.S. Department of Health and Human Services, 2000b).

Healthcare Team: The patient plus all of the healthcare professionals who care for the patient. The patient is an integral member of the healthcare team.

Holistic: The interrelationship of all components of the individual.

Holistic Care: Health care delivered to meet the needs of the “whole” client/patient.

Human Dignity: The inherent merit of a person, making each person automatically worthy of basic respect.

Immersion Experience: Clinical experiences with a substantive number of hours in a consistent clinical setting over a concentrated period of time.

Individual: is viewed as a being whose human needs and development pattern are sequential, orderly, and predictable in nature and responsible to an internal and external environment.

Integrity: The uprightness of character or action with active regard for the standards of one’s profession, calling, position, responsibility, or pledge.

Information Technology: The study, design, development implementation, support, or management of computer-based information systems, particularly software applications and computer hardware.

Integrative Strategies for Learning: Coherent organization of educational practices that integrate general education concepts throughout the major, through the widespread use of powerful, active, and collaborative instructional methods (Association of American Colleges and Universities, 2004).

Interprofessional: Working across healthcare professions to cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable. The team consists of the patient, the nurse, and other healthcare providers as appropriate (IOM, 2003b).

Intraprofessional: Working with healthcare team members within the profession to ensure that care is continuous and reliable.

Learning: An interactive process that produces a change in behavior resulting from integration of affective, psychomotor, and cognitive experiences.

Microsystem: The structural unit responsible for delivering care to specific patient populations or the frontline place where patients, families, and care teams meet (Nelson, Batalden, Godfrey, 2007).

Moral Agency: A person's capacity for making ethical judgments. Most philosophers suggest that only rational beings, people who can reason and form self-interested judgments, are capable of being moral agents.

Multidimensional Care: Relating to our having several dimensions; it speaks to the fullness of the patient-clinician experience, but also to people's lives in general. Spirituality is one of those many dimensions.

Needs: Those requirements essential to sustaining life.

Nursing: A helping professional relationship between the client and nurse where both actively pursue the goal of optimal health. Nursing is both an art and a science combining knowledge and principles from various disciplines and has its own sense of purpose and direction.

Nursing Process: The nursing process provides a systematic approach to the rendering of quality nursing care. Components of the process are assessing, diagnosing, planning, implementing, and evaluating.

- Assessment is based on objective and subjective data which are obtained and validated by observation, interview, and examination.
- The nursing diagnosis, which is a statement of a present or potential health alteration, is derived from organized and validated data.
- Planning involves the client when determining priorities, goals, and nursing interventions. Short-term and long-term goals reflect desired client outcomes in measurable terms which are facilitated through nursing intervention.
- Implementation consists of instituting the plan of continuing data collection. This component involves management and prioritization.
- Evaluation is a continuous process which measures goal attainment. Reassessment involves each component of the process to determine needed modification.

Nurse Sensitive Indicators: Measures of processes and outcomes – and structural proxies for these processes and outcomes (e.g., skill mix, nurse staffing hours) – that are affected, provided, and influenced by nursing personnel, but for which nursing is not exclusively responsible (National Quality Forum, 2003).

Optimal Health: A state of functioning that indicates the achievement of maximal capabilities.

Outcome: Broad performance indicator, related to the knowledge, skills, and attitudes, needed by a baccalaureate graduate.

Patient: The recipient of nursing care or services. This term was selected for consistency and in recognition and support of the historically established tradition of the nurse/patient relationship. Patients may be individuals, families, groups, communities, or populations. Further, patients may function in independent, interdependent, or dependent roles, and may

seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of life-care. Depending on the context or setting, patients may, at times, more appropriately be termed clients, consumers, or customers of nursing services (AACN, 1998, p.2).

Patient-centered Care: Includes actions to identify, respect and care about patients' differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (IOM, 2003b).

Population Health Interventions: Actions intended to improve the health of a collection of individuals having personal or environmental characteristics in common. Population health interventions are based on population-focused assessments.

Preceptor: An experienced practitioner who facilitates and guides students' clinical learning experiences in the preceptor's area of practice expertise.

Previous Life Experiences: Actual learning events that occurred secondary to interaction with other person and/or the environment.

Professional Nurse: An individual prepared with a minimum of a baccalaureate degree in nursing but is also inclusive of one who enters professional practice with a master's degree in nursing or a nursing doctorate (AACN, 1998).

Professionalism: Practicing within established legal and ethical codes and standards of performance.

Program Improvement: The process of utilizing results of assessments and analyses of actual student and faculty outcomes in relation to expected outcomes to validate and revise policies, practices, and curricula as appropriate.

Rehabilitation: The restoration of an individual to optimal health after disabling health alterations.

Self-Actualization: (in humanistic psychology), the fundamental tendency toward the maximum realization and fulfillment of one's human potential.

Self-Awareness: The basic realization of one's human identity, potential, and dignity.

Service Learning: A method of teaching, learning, and reflecting that combines academic classroom curriculum with meaningful service throughout the community. The goal is to enrich the learning experience, teach civic responsibility, encourage lifelong civic engagement, and strengthen communities.

Simulation: An activity that mimics the reality of a clinical environment and is designed to demonstrate procedures, decision making, and critical thinking through techniques such as roleplaying and the use of devices (e.g., interactive videos, mannequins) (National Council of State Boards of Nursing 2005).

Social Justice: Treatment of all individuals fairly and equitable without regard to race, ethnicity, creed, age, citizenship, disability, economic status, or sexual orientation.

Spiritual Care: “Interventions, individual or communal, that facilitate the ability to experience the integration of the body, mind, and spirit to achieve wholeness, health, and a sense of connection to self, others, and a higher power” (American Nurses Association and Health Ministries Association, 2005, p. 38).

Teaching-Learning Process: A continuous and dynamic process which assists the individual in developing goals, self-direction through critical thinking and problem-solving.

Vulnerable Populations: Refers to social groups with increased relative risk (i.e., exposure to risk factors) or susceptibility to health-related problems. The vulnerability is evidenced in higher comparative mortality rates, lower life expectancy, reduced access to care, and diminished quality of life (Center for Vulnerable Populations Research, UCLA School of Nursing, 2008).