



Department of Nursing

Bachelor of Science in Nursing

Program Handbook

Academic Year 2025-2026

To the Bachelor of Science in Nurse (BSN) Student:

The *BSN Program Handbook* is an important document to guide you through and promote your successful completion of the BSN program. Please read the document thoroughly and familiarize yourself with the policies, procedures, and regulations within the *BSN Program Handbook*. The faculty, professional staff, and administration are available to assist you with policies, procedures, or regulations in the *BSN Program Handbook*.

Each student is responsible to know the contents of the *College Catalog* as well as the *BSN Program Handbook*. Students are to respect and maintain the rules and standards of the College and the Department of Nursing.

The College and Department of Nursing reserve the right to change any provision or policy in the interest of the College, nursing program, or students. New policies and revisions will be posted on the College's electronic learning management system, Blackboard. In addition, students will be notified by email of policy changes.

The BSN Program Handbook can be accessed through the College's electronic learning management system.

We encourage you to interact with your class peers and faculty members to help enhance and diversify your learning opportunities. Together we can enrich the culture of nursing through caring, collaboration, integrity, and excellence!

Best wishes for success in your educational endeavors!

Faculty, Staff, and Administration

The Christ College of Nursing and Health Sciences

Department of Nursing



PLEASE NOTE

The Christ College of Nursing and Health Sciences is committed to a policy of non-discrimination on the basis of race, color, creed, national origin, citizenship, religion, ethnicity, age, gender, gender identity, genetics, marital status, sex, pregnancy, sexual orientation, military or veteran status, disability, or any other status protected by local, state or federal law (collectively, "protected statuses") in the administration of its educational, recruitment, and admissions policies; scholarship and loan programs; and athletic or other College-administered programs. All institutional processes and policies are in compliance with applicable federal and state laws and regulations related to discrimination. Updated 5.30.18

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INSTITUTIONAL OVERVIEW

History of the College

Founding of the Predecessor: The Christ Hospital School of Nursing



The Christ Hospital School of Nursing (TCHSN) was born in a tradition of caring. In 1888, a group of local citizens, led by soap maker James N. Gamble, invited Ms. Isabella Thoburn to come to Cincinnati. Their expectation was that she would start a program to train deaconesses and missionaries to carry on religious, educational and philanthropic work to alleviate the appalling poverty that existed in the city.

Conversion to The Christ College of Nursing and Health Sciences (TCCNHS)

Over time it became apparent that the health care industry and the nursing profession were going through major changes. The administration and faculty of The Christ Hospital School of Nursing determined that it was essential to address these trends. The Christ College of Nursing and Health Sciences conferred an Associate of Applied Sciences in Nursing to the first graduating class in 2009.

While offering the same commitment to teaching excellence and educating the best nurses possible, The Christ College of Nursing and Health Sciences is designed to broaden the educational scope of its students. The expanded degree options and intensive curriculum help prepare graduates for work in a broad array of health care settings.

Accreditation

TCCNHS is accredited through the Higher Learning Commission, North Central Association of Colleges and Schools

The BSN Nursing Program at The Christ College of Nursing and Health Sciences is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.

Institutional Learning Outcomes

As a result of their educational experiences at The Christ College, students will:

1. Apply an expanded knowledge base within one's chosen profession with the disposition to engage in life-long learning.
2. Demonstrate responsible engagement with social-political-cultural issues of local, regional, or global significance.
3. Demonstrate academic and professional competency in written and oral communication.

4. Demonstrate academic and professional competency within the sciences.
5. Engage in intellectual inquiry and critical thinking by identifying assumptions, making inferences, marshaling evidence, and giving a coherent account of reasoning.

THE DEPARTMENT OF NURSING

Purpose of Nursing Department

The purpose of the Department of Nursing is to support the mission, vision, and values of The Christ College of Nursing and Health Sciences by providing a course of study with a foundation in the arts and sciences. Graduates who earn a nursing degree from The Christ College of Nursing and Health Sciences will be caring, professional nurses engaging in critical thinking, intellectual inquiry, and collaboration. Leadership provided by the graduate will promote high quality care for a dynamic, diverse society in any setting. To assist in advocating for patients to achieve positive outcomes, graduates will possess a knowledge base of regulatory environments and healthcare informatics. The nursing graduate from The Christ College of Nursing and Health Sciences will be a life-long learner who models integrity and excellence in professional nursing practice.

Philosophy

The faculty within the nursing department at The Christ College of Nursing and Health Sciences believe that:

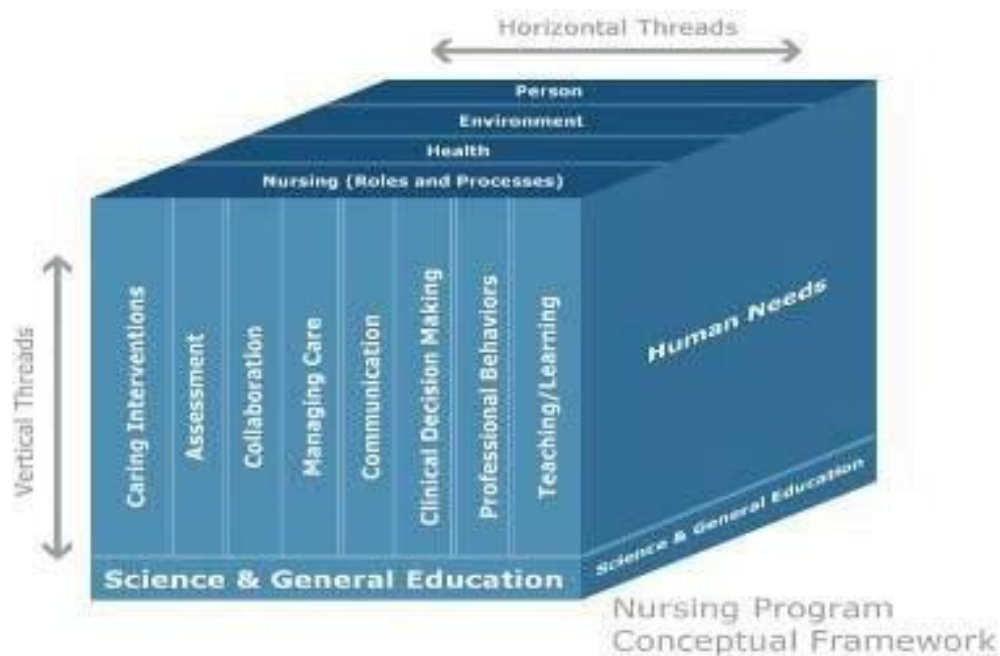
- A **person** is a unique individual having intrinsic value. Each individual has diverse physical, emotional, social, developmental, and spiritual needs in varying degrees of fulfillment and deserves caring interventions. The person and environment are constantly interacting.
- The **environment** includes all internal and external factors affecting and affected by the individual. A part of this dynamic environment is society, which consists of individuals, families, and communities. Any change in the environment may require varying degrees of adaptation. Ongoing assessment by the nurse identifies a person's adaptive efforts to promote, maintain, or restore health.
- **Health** is the dynamic process of balance and harmony within the person. A person's state of health may be influenced by personal, societal, and cultural variables and altered by primary, secondary, or tertiary prevention strategies. A person's position on the health continuum may require nursing intervention.
- **Nursing** is a caring profession concerned with the patient's responses to health and illness. Nursing is an integral component of the healthcare system. Nurses function collaboratively to address the diverse healthcare needs of patients. Nurses are providers and managers of care and members within the discipline of nursing.
- **Nursing practice** integrates knowledge from the biological, social, and behavioral sciences with nursing theories, research/evidence, and clinical experience. The application of knowledge, as well as the therapeutic use of self through effective communication and intervention is fundamental to nursing.
- The **nursing process** is a comprehensive clinical decision-making strategy. It serves as a

framework for providing and managing competent evidence-based care to promote,

maintain, or restore the patient's optimal level of health. This includes support of a dignified death.

- Accountability and responsibility are hallmarks of a wide range of **professional behaviors** requisite to the discipline of nursing. Nurses are accountable to patients, society, and the nursing profession for providing high standards of care and upholding legal and ethical principles. Nurses are responsible for continuing professional development.
- In Nursing, the collaborative processes of **teaching and learning** take place between the teacher and student. Learning is a goal-oriented, integrative process enhanced by individual inquiry, motivation, and self-direction. Learning is facilitated when faculty creates a cooperative, supportive learning environment, encourages knowledge and skill expansion, and guides students in developing competencies. The achievement of desired changes in knowledge, attitudes, skill, and behaviors determines the effectiveness of this collaborative effort.

Conceptual Framework



- A. **Horizontal Threads:** Integrated concepts presented at various stages in the curriculum, strengthened through repeated exposure and application and woven throughout the curriculum. For the Department of Nursing, person, environment, health, and nursing constitute the horizontal threads of the nursing curriculum and are defined in the Philosophy of the Nursing Programs.
- B. **Vertical Threads** (*with Curricular Concepts in Italics*): Sequential concepts spanning the nursing program, progressive in complexity and increasing in depth throughout the program. For the Department of Nursing, the following concepts and definitions constitute

the vertical threads of the nursing curriculum. The vertical threads are not intended to be

viewed as solitary concepts. Rather, the concepts are intended to reflect the progressive educational development of the student in acquiring the knowledge, skills, behaviors, and clinical reasoning requisite to the profession.

1. Caring Interventions: Caring interventions are those nursing behaviors and actions that assist patients in meeting their needs. Caring interventions are based on a knowledge and understanding of the natural sciences, behavioral sciences, nursing theory, nursing research, and past nursing experiences. Caring is the “being with” and “doing for” that assist patients to achieve the desired results. Caring behaviors are nurturing, protective, compassionate, and person-centered. Caring creates an environment of hope and trust, where patient choices related to cultural values, beliefs, and lifestyle are respected. Caring interventions imply implementation of prevention strategies. *(Caring, Quality)*
2. Assessment: Assessment is the collection, analysis, and synthesis of relevant data for the purpose of appraising the patient’s health status. Comprehensive assessment provides a holistic view of the patient which includes dimensions of physical, developmental, emotional, psychosocial, cultural, spiritual, and functional status. Assessment involves the orderly collection of information from multiple sources to establish a foundation for provision of nursing care and includes identification of available resources to meet patient needs. Initial assessment provides a baseline for future comparisons that can be made in order to individualize patient care. Ongoing assessment and reassessment are required to ensure quality and safety in patient care while meeting the patient’s changing needs. *(Nursing Process, Evidence-based Practice, Informatics, Communication, NCLEX Success)*
3. Clinical Decision Making: Clinical decision-making encompasses the performance of accurate assessments, the use of multiple methods to access information, and the analysis and integration of knowledge and information to formulate clinical judgments. Effective clinical decision-making results in finding solutions, individualizing care, and assuring the delivery of accurate, safe care that moves the patient and support person(s) toward positive outcomes. Evidence-based practice and the use of critical thinking/clinical reasoning provide the foundation for appropriate clinical decision making. *(Nursing Process, NCLEX Success, Clinical Judgment, Quality, Evidence-based Practice)*
4. Managing Care: Managing care is the efficient, effective use of human, physical, financial, and technological resources to meet patient needs and support organizational outcomes. Effective management is accomplished through the processes of planning, organizing, directing, and controlling. The nurse, in collaboration with the healthcare team, uses these processes to assist the patient to move toward positive outcomes in a cost-efficient manner, to transition within and across healthcare settings, and to access resources. *(Nursing Process, NCLEX Success, Quality, Evidence-based Practice, Informatics, Leadership, Collaboration, Healthcare Economics)*

5. Collaboration: Collaboration is the shared planning, decision making, problem solving, goal setting, and assumption of responsibilities by those who work together cooperatively, with open professional communication. Collaboration occurs with the patient, significant support person(s), peers, other members of the healthcare team, and community agencies. The nurse participates in the team approach to holistic, patient-centered care across healthcare settings. The nurse functions as advocate, liaison, coordinator, and colleague as participants work together to meet patient needs and move the patient toward positive outcomes. Collaboration requires consideration of patient needs, priorities and preferences, available resources and services, shared accountability, and mutual respect. *(Collaboration, Care Coordination, Nursing Process, Professionalism, Quality, Leadership, Healthcare Economics)*
6. Communication: Communication in nursing is an interactive process through which there is an exchange of information that may occur verbally, non-verbally, in writing, or through information technology. Those who may be included in this process are the nurse, patient, significant support person(s), other members of the healthcare team, and community agencies. Effective communication demonstrates caring, compassion, and cultural awareness, and is directed toward promoting positive outcomes and establishing a trusting relationship. Therapeutic communication is an interactive verbal and non-verbal process between the nurse and patient that assists the patient to cope with change, develop more satisfying interpersonal relationships, and integrate new knowledge and skills. *(Communication, Collaboration, Caring, Nursing Process, Professionalism, Evidence-based Practice, Informatics)*
7. Professional Behaviors: Professional behaviors within nursing practice are characterized by a commitment to the profession of nursing. The graduate of a nursing program adheres to standards of professional practice, is accountable for their own actions and behaviors, and practices nursing within legal, ethical, and regulatory frameworks. Professional behaviors also include a concern for others, as demonstrated by caring, valuing the profession of nursing, and participating in ongoing professional development. *(Ethics, Professionalism, Quality, Evidence-based Practice, Informatics, Healthcare Policy, Healthcare Law)*
8. Teaching and Learning: Teaching and learning processes are used to promote and maintain health and reduce risks, and are implemented in collaboration with the patient, significant support person(s) and other members of the healthcare team. Teaching encompasses the provision of health education to promote and facilitate informed decision making, achieve positive outcomes, and support self-care activities. Integral components of the teaching process include the transmission of information, evaluation of the response to teaching, and modification of teaching based on identified responses. Learning involves the assimilation of information to expand knowledge and change behavior. *(Patient Education, Health Promotion, Nursing Process, Professionalism, Quality, Evidence-based Practice, Informatics)*

C. Human Needs (*with Curricular Concepts in Italics*)

1. Biological

- Oxygenation: ability to transport air to the lungs and provide life-sustaining oxygen to cells (*Acid/Base Balance, Cellular Regulation, Gas Exchange, Perfusion*)
- Circulation: ability to transport oxygen and nutrients to cells (*Fluid and Electrolyte Balance, Immunity, Inflammation, Clotting, Homeostasis, Metabolism, Perfusion*)
- Nutrition: all the processes involved in taking in and utilization of nutrients (*Nutrition, Metabolism, Functional Ability, Sensory Perception, Glucose Regulation, Caregiving, Palliation, Aging*)
- Fluid and Electrolyte Balance: ability to maintain the volume and distribution of body fluids and solutes (*Fluid and Electrolyte Balance, Acid/Base Balance*)
- Elimination: ability to excrete waste products (*Elimination, Functional Ability, Aging*)
- Hygiene/Skin Integrity: practices that are conducive to preservation of health and maintenance of unbroken and healthy skin (*Mobility, Tissue Integrity, Sensory Perception, Glucose Regulation, Elimination*)
- Sensory/Comfort and Regulation: ability to perceive, integrate, control, and respond to internal and external cues (*Sensory Perception, Pain, Thermoregulation, Intracranial Regulation, Cellular Regulation, Stress, Infection, Safety, Functional Ability*)
- Cognition: mental processes needed for knowing, learning, and understanding (*Cognition, Motivation, Adherence*)
- Activity: ability to engage in body movement (*Functional Ability, Mobility, Aging*)
- Safety/Protection: ability to be protected from actual or potential harm (*Safety*)
- Biophysical Development: orderly and predictable process of growth and differentiation (*Development, Culture, Sexuality, Reproduction*)

2. Psychosocial/Spiritual

- Mental Health: ability to cope with or make the best of changing stresses or stimuli (*Anxiety, Coping, Mood & Affect, Addiction, Interpersonal Violence, Psychosis, Aging; Caregiving, Palliation*)
- Sexuality: the sum of physical, functional, and psychological attributes that are expressed by one's gender identity and sexual behavior (*Sexuality, Reproduction, Development, Aging*)
- Developmental Tasks: ability to achieve psychosocial or cognitive skills at certain periods in life (*Development, Cognition, Motivation, Adherence*)
- Social/Cultural Interaction: ability to engage in shared values, beliefs, and practices of a particular group of people (*Culture, Ethics, Caring, Family Dynamics*)
- Spirituality/Religion: essence of a person's being and beliefs about the meaning of life (*Spirituality; Palliation*)

BACHELOR OF SCIENCE IN NURSING DEGREE

Program Description

The Bachelor of Science in Nursing program provides a course of study that has its foundation in the liberal arts and sciences and is an innovative nursing curriculum emphasizing academic excellence and professional leadership through clinical immersion. A distinctive concept-based curriculum integrating service learning prepares students to address the healthcare needs of diverse global communities by promoting population health. Graduates of this program will utilize evidence to promote health and wellness through caring and collaborative strategies incorporating knowledge of regulatory environments, healthcare informatics, and quality improvement. A culture of robust intellectual inquiry will prepare graduates to take the NCLEX-RN licensing examination and to pursue life-long learning.

Program Outcomes (Student Learning Outcomes) * *All students who entered nursing courses prior to Fall 2023*

A graduate of Bachelor of Science in Nursing Degree program at The Christ College of Nursing and Health Sciences will be able to:

1. Apply appropriate evidence to improve healthcare outcomes.
2. Utilize healthcare informatics safely and accurately in the delivery of quality care.
3. Employ critical thinking and clinical reasoning to care for diverse populations.
4. Lead the healthcare team in solving contemporary issues to improve patient outcomes.
5. Collaborate with the interprofessional healthcare team to ensure quality and safety.
6. Demonstrate professionalism in the nursing role.
7. Apply an understanding of health policy and regulatory environments in patientcare.
8. Pursue life-long learning and service to meet the needs of a dynamic society.

Program Outcomes (with AACN Essential Domains) * *These outcomes are for students entering nursing courses Fall Semester 2023.*

1. Integrate Evidence-Based Practice in clinical judgment to address healthcare needs of diverse patients and populations. (Domains 1, 3, 4)
2. Incorporate informatics and healthcare communication technologies as a member of the interprofessional healthcare team. (Domains 8)
3. Use clinical decision making based on a broad foundation of knowledge to provide nursing care to diverse populations across the lifespan. (Domains 1, 2, 9)
4. Employ attributes and competencies of a professional nurse. (Domains 9, 10)
5. Collaborate with the interprofessional healthcare team to provide holistic person-centered care. (Domains 2, 6)
6. Integrate principles of leadership and management to promote a culture of safety and inclusion throughout healthcare systems. (Domains 5, 7, 9, 10)

Assessment and Correlation of Outcomes

- A. The BSN Program participates in the College's cycle of ongoing assessment through the use of a written systematic evaluation plan (SEP) as identified by the Office of Institutional Effectiveness.
- B. The correlation of the course and program outcomes is located in the syllabus for each course.

Code of Ethics

When engaged in nursing functions, the student must do so within legally prescribed bounds and is accountable for his/her own actions. The student has the obligation to adhere to the standards of ethical practice and conduct which are stated by the American Nurses Association.

American Nurses' Association Professional Code of Ethics (2025)

Provision 1

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

Provision 2

A nurse's primary commitment is to the recipient(s) of nursing care, whether an individual, family, group, community, or population

Provision 3

The nurse establishes a trusting relationship and advocates for the rights, health, and safety of recipient(s) of nursing care.

Provision 4

Nurses have authority over nursing practice and are responsible and accountable for their practice consistent with their obligations to promote health, prevent illness, and provide optimal care.

Provision 5

The nurse has moral duties to self as a person of inherent dignity and worth including an expectation of a safe place to work that fosters flourishing, authenticity of self at work, and self-respect through integrity and professional competence.

Provision 6

Nurses, through individual and collective effort, establish, maintain, and improve the ethical environment of the work setting that affects nursing care and the well-being of nurses.

Provision 7

Nurses advance the profession through multiple approaches to knowledge development, professional standards, and the generation of policies for nursing, health, and social concerns.

Provision 8

Nurses build collaborative relationships and networks with nurses, other healthcare and non-healthcare disciplines, and the public to achieve greater ends.

Provision 9

Nurses and their professional organizations work to enact and resource practices, policies, and legislation to promote social justice, eliminate health inequities, and facilitate human flourishing.

Provision 10

Nursing, through organizations and associations, participates in the global nursing and health community to promote human and environmental health, well-being, and flourishing.

American Nurses Association (2025). *Code of ethics for nurses*. Silver Spring, MD: American Nurses Association

The Nursing Pin

The first official school pin was awarded in 1903. The original pin was made from five-dollar gold pieces (Dumm, 1985). A nursing pin is awarded symbolizing the College crest for students who have successfully completed all requirements of the nursing curriculum and have fulfilled all other requirements for graduation from the College. The nursing pin is a miniature replica of the College's crest which states "Summo Commisso Missi" meaning "On Highest Mission Sent".



CURRICULUM

BSN CURRICULUM * *For students starting nursing course PRIOR to Fall 2023*

Curriculum Overview (Updated 10.26.17, 2.8.19, 7.31.19)

The curriculum consists of a concept-based, with senior- year clinical intensives and Clinical Integration Seminars. The curriculum is based on 121 semester credit hours and is designed to be completed within four (4) academic years. Students should work closely with their academic advisors to ensure timely completion of Arts and Sciences requirements. Please note that all college and program requirements should be discussed with your academic advisor. A semester equals fifteen (15) instructional weeks , including final exams.

One (1) credit hour equals one 50-minute hour of class; three 50-minute hours of clinical and clinical lab; or two 50-minute hours of lab per week in a fifteen (15) week semester. Eight (8) week class, clinical, and lab times are adjusted accordingly to meet credit allocations.

ENG101 English Composition (3 credit hours)

MAT105 College Algebra (3 credit hours)

*SOPS101 Introduction to Social Psychology (3 credit hours)

BIO111 Anatomy & Physiology I (4 credit hours)

FYE102 Learning Foundations (2 credit hours)

COM101 Speech & Oral Communication (3 credit hours)

PHI103 Introduction to Ethics (3 credit hours)

BIO112 Anatomy & Physiology II (4 credit hours)

*PSY110 Lifespan Development (3 credit hours)

*PSY210 Concepts of Behavior Change (3 credit hours) ENG315 Professional Writing (3 credit hours)

BIO121 Microbiology (4 credit hours)

BIO300 Pathophysiology (3 credit hours)

IS200 Service Learning in Our Community (1 credit hour) STAT201 Statistics (3 credit hours)

BIO180 Biology of Food (3 credit hours)

BIO215 Core Concepts in Pharmacology (3 credit hours) PHI 205 World Religions (3 credit hours)
*SOC 101 Introduction to Sociology 101 (3 credit hours)
* Any of these courses may satisfy one of the social behavioral course requirements.

Effective Fall 2019: Students entering the BSN program are required to meet these requirements:

CHEM 105 Chemistry (4 credit hours)
Nursing Elective (3 credit hours)

*PHI103

*PHI205

* Any of these courses may satisfy one of the arts and humanities course requirements.

BSN Curriculum	Credit Hours	Didactic credit hours	Didactic clock hours	Clinical credit hours	Clinical clock hours	Lab credit hours	Lab clock hours
1st semester							
NUR 220 Health Assessment	4	2	25	0	0	2	50(1:2 ratio)
NUR 297 Professional Development/Capstone	2	2	25	NA	NA	NA	NA
2nd semester							
NUR 221Nursing Skills: Concepts of Quality and Safety	4	2	25	1	37.5	1	37.5(1:3 ratio)
NUR 298 Professional Development/Capstone	1	1	12.5	NA	NA	NA	NA
3rd semester							
NUR 309 Professional Nursing Concepts	2	2	25	NA	NA	NA	NA
NUR 307 Concepts of Intellectual Inquiry	3	3	37.5	NA	NA	NA	NA
NUR 305 Health and Illness Concepts Across the Lifespan I	6	4	50	1.60	60	0.40	15 (1:3 ratio)
NUR 397 Professional Development/Capstone	1	1	12.5	NA	NA	NA	NA
4th semester							
NUR 311 Health and Illness Across the Lifespan II	6	4	50	1.6	60	0.40	15 (1:3 ratio)
NUR 313 Concepts in Population Health	2	2	25	NA	NA	NA	NA
NUR 312 Concepts in Leadership and Healthcare Delivery	4	4	50	NA	NA	NA	NA
NUR 398 Professional Development/Capstone	1	1	12.5	NA	NA	NA	NA
NUR Elective	3	3	37.5	NA	NA	NA	NA
5th semester							
NUR 412 Clinical Intensive II*	6	1	12.5	5	187.5	NA	NA
NUR 497 Professional Development/Capstone	2	2	25	NA	NA	NA	NA
NUR 410 Clinical Intensive I*	6	1	12.5	4	150	1	37.5 (1:3 ratio)
6th semester							
NUR 414 Clinical Intensive III*	6	1	12.5	5	187.5	NA	NA
NUR 416 Clinical Intensive IV*	6	1	12.5	4.5	168.75	0.5	18.75(1:3 ratio)
NUR 498 Professional Development/Capstone	2	2	25	NA	NA	NA	NA
TOTALS FOR PROGRAM		39	487.5	22.7	851.25	2+3.3 (5.3)	50+123.75 (173.75)

A 3-day Live NCLEX Review scheduled by the BSN Nursing Program, is a BSN requirement. For additional information on pre-requisite and co-requisites, please visit the Nursing Program's Core Courses and Course Descriptions and the Arts and Sciences' Courses, Course Descriptions, and Course Pre-Requisites in the College Catalog.

BSN CURRICULUM * *For students starting nursing course during or AFTER to Fall 2023*

Curriculum Overview

The curriculum is rooted in competency-based education (CBE) and is founded on the elements of the AACN framework *The Essentials: Core Competencies from Professional Nursing Education* (2021)

The curriculum includes a core set of competencies, clinical judgement, and content of the NCLEX-RN test plan. CBE facilitates student centered, individualized learning with clear expectations and real-world relevance to transition to professional practice and foster personal growth (AACN, 2021).

The curriculum is based on 120 semester credit hours and is designed to be completed within four (4) academic years. Students should work closely with their academic advisors to ensure timely completion of Arts and Sciences requirements. Please note that all college and program requirements should be discussed with your academic advisor. A semester equals fifteen (15) instructional weeks, including final exams.

One (1) credit hour equals one 50-minute hour of class; three 50-minute hours of clinical and clinical lab; or two 50-minute hours of lab per week in a fifteen (15) week semester. Eight (8) week class, clinical, and lab times are adjusted accordingly to meet credit allocations.

BSN Curriculum	Total Credit Hours	Didactic credit hours	Didactic clock hours	Clinical credit hours	Clinical clock hours	Lab credit hours	Lab clock hours
1st semester Fresh. 1st							
BIO 111: Anatomy & Physiology I w/Lab	4	3	37.5	0	0	1	25
MAT 105: College Algebra	3	3	37.5	0	0	0	0
SOC 101: Sociology	3	3	37.5	0	0	0	0
FS 102: Learning Foundations	2	2	25	0	0	0	0
ENG 101: English Composition	3	3	37.5	0	0	0	0
NUR Total Semester	0	0	0	0	0	0	0
Arts & Sci Credit Hrs.	15	14	175	0	0	1	25
Total Semester	15						
2nd semester Fresh. 2nd							
BIO 112: Anatomy & Physiology II w/Lab	4	3	37.5	0	0	1	25
COM 102: Essentials of Communication	3	3	37.5	0	0	0	0
STAT 201: Statistics	3	3	37.5	0	0	0	0
CHEM 105: Chemistry Gen/Org/Bio w/Lab	4	3	37.5	0	0	1	25
ENG 315: Adv Comp: Evidence-Based Writing	3	3	37.5	0	0	0	0
NUR Total Semester	0	0	0	0	0	0	0
Arts & Sci. Total Sem.	17	15	187.5	0	0	2	50
Total Semester	17						
3rd semester Soph. 1st							
BIO 121: Microbiology w/Lab	4	3	37.5	0	0	1	25
PSY 110: Life Span Development	3	3	37.5	0	0	0	0
NUR 225: Nursing Foundations and Principles 1	3	2	25	0	0	1	25
NUR 210: Health Assessment Across the Lifespan	3	2	25	0	0	1	25
NUR 201: Introduction to the Essentials of Professional Nursing Practice	3	3	37.5	0	0	0	0
NUR Total Semester	9	7	87.5	0	0	2	50
Arts & Sci. Total Sem.	7	6	75	0	0	1	25
Total Semester	16						
4th semester Soph. 2nd							
BIO 300: Pathophysiology	3	3	37.5	0	0	0	0
BIO 215: Core Concepts in Pharmacology	3	3	37.5	0	0	0	0

BIO 180 Biology of Food or BIO 280: Intro Nutrition through the Lifespan	3	3	37.5	0	0	0	0
NUR 226: Nursing Foundations and Principles II	4	3	37.5	0	0	1	25
NUR CL 226: Nursing Foundations and Principles II: Clinical	2	0	0	1.7	64	0.3	11
NUR Credit Hrs.	6	3	37.5	1.7	64	1.3	36
Arts & Sci. Total Sem.	9	9	112.5	0	0	0	0
Total Semester Credit Hrs.	15						
5th semester Jr. 1st							
PHI 103: Ethics	3	3	37.5	0	0	0	0
NUR 331 Medical-Surgical Nursing Across the Healthcare Continuum I	4	4	50	0	0	0	0
NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical	2	0	0	1.7	64	0.3	11
NUR 342: Mental Health Nursing Across Lifespan	2	2	25	0	0	0	0
NUR CL 342: Mental Health Nursing Across Lifespan Clinical	2	0	0	1.7	64	0.3	11
NUR 315: Pharmacological Principles for Nursing Practice	3	3	37.5	0	0	0	0
NUR Credit Hrs.	13	9	112.5	3.4	128	0.6	22
Arts & Sci. Total Sem.	3	3	37.5	0	0	0	0
Total Semester Credit Hrs.	16						
6th semester Jr. 2nd							
NUR 332: Medical-Surgical Nursing Across the Healthcare Continuum II	4	4	50	0	0	0	0
NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical	2	0	0	1.7	64	0.3	11
NUR 338 Family-Centered, Pediatric and Maternity Nursing	2	2	25	0	0	0	0
NUR CL 338: Family-Centered, Pediatric and Maternity Nursing Clinical	2	0	0	1.7	64	0.3	11
NUR 339: Evidence Based Practice and Research Principles in Nursing	3	3	37.5	0	0	0	0
NUR 340: Quality Improvement & Information Technologies in Nursing Practice	3	3	37.5	0	0	0	0
NUR Credit Hrs.	16	12	150	3.4	128	0.6	22
Arts & Sci. Total Sem.	0	0	0	0	0	0	0
Total Semester Credit Hrs.	16						
7th semester Sr. 1st							
NUR 421 Medical-Surgical Nursing Across the Healthcare Continuum III	3	3	37.5	0	0	0	0
NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical	3	0	0	2.77	104	0.23	8.5
NUR 422: Leadership & Management Development in Nursing Practice	3	3	37.5	0	0	0	0
NUR 423: Population Health in Nursing	2	2	25	0	0	0	0
NUR CL 423: Population Health in Nursing Clinical	2	0	0	1.7	64	0.3	11
NUR Credit Hrs.	13	8	100	4.47	168	0.53	19.5
Arts & Sci. Total Sem.	0	0	0	0	0	0	0
Total Semester Credit Hrs.	13						
8th semester Sr. 2nd							
NUR 441: Role Transition and Trends in Nursing Practice	3	3	37.5	0	0	0	0
NUR CL 441: Role Transition and Trends in Nursing Practice Clinical	6	0	0	6	225	0	0
NUR 443: Clinical Judgement for Nursing	3	3	37.5	0	0	0	0

Practice							
NUR Credit Hrs.	12	6	75	6	225	0	0
Arts & Sci. Total Sem.	0	0	0	0	0	0	0
Total Semester Credit Hrs.	12						
NUR Credit Hrs.	69	45	562.50	18.97	713	5.03	149.5
Arts & Sci Credit Hrs.	51	47	587.50	0	0	4	100
Total for BSN Degree	120	92	1150	18.97	713	9.03	249.5

A 3-day Live NCLEX Review scheduled by the BSN Nursing Program, is a BSN requirement.

[*Please note this Live Review typically occurs the week after finals of senior year.](#)

Participation in the Nursing Student Success Program outlined in the Program Handbook is a program completion requirement. For additional information on pre-requisite and co-requisites, please visit the Nursing Program's Core Courses and Course Descriptions and the Arts and Sciences' Courses, Course

Descriptions, and Course Pre-Requisites in the College Catalog.

EXPECTED STUDENT ENGAGEMENT

Communication

The nursing faculty highly value open communication with each student nurse. Full-time nursing faculty maintain scheduled office hours each week during the academic semester. Part-time and adjunct nursing faculty are available by appointment. Students may contact nursing faculty via voice mail and/or electronic mail.

Please refer to the acceptable use policy and the college catalog for further information related to professional communication. [The Christ Hospital Health Network Public Portal](#); [College Catalog](#)

- A. Faculty is expected to respond to student communications only during scheduled workdays and times.
 - Please be aware faculty working part-time or as adjunct do not work every day.
 - Every effort will be made to respond to students within 48 hours during business days.
 - It is the student's responsibility to clarify faculty availability.
- B. Individual faculty may choose to communicate outside of scheduled work time and on weekends which students should understand is not an expectation of the College or Administration.
- C. At the faculty's discretion, individual phone numbers may be given to students by listing phone numbers on the course syllabus.
- D. Frequently, the nursing faculty or professional staff needs to communicate with students. It is the student's responsibility to immediately inform the College Registrar of any changes in name, address, or phone numbers in order to facilitate communication.

Department Organizational Chart and Communication Pathway for Academic Course Concerns

(updated 8.17;8.25)

BSN Program



At times, students may have academic concerns that warrant conversation with appropriate faculty. The following sequence outlines the student's pathway for routing such concerns.

1. The student discusses concerns with appropriate course faculty involved for classroom concerns or the clinical faculty for clinical concerns.
2. Course or clinical coordinator or lead
3. BSN Program Chair – Alicia Cole-Harmon (513-585-1381)
4. Vice President of Academics: Dr. Connie McFadden-Chase (513-585-0941)

Joint sessions with the student, course faculty, course coordinator/lead, Program Chair, or Vice President of Academics may be scheduled.

For more information on pathways for non-academic complaints, please [click here to visit the Compliance Bridge Policy Portal](#) and search for Grievance and Fair Treatment and/or Complaint Policy.

Engagement in Learning

In Higher Education, it is customary that students are engaged in weekly learning activities according to the number of credit hours allotted to a course. This number is guided by regional accrediting bodies.

The amount of time that a student should be engaged, per week, in learning activities (i.e. reading assignments, class assignments, tickets to class, clinical preparation, remediation, and other learning activities) is as follows:

- 3 Credit Hour Course: at least 9 hours/week
- 4 credit Hour Course: at least 12 hours/week
- 5 Credit Hour Course: at least 15 hours/week
- 6 Credit Hour Course: at least 18 hours/week

*These hours do not account for in class or clinical time.

INSTITUTIONAL POLICIES AND PROCEDURES

Policies published in the BSN Program Handbook will be introduced and reviewed by course faculty at the beginning of each academic year.

All policies are reviewed on an annual basis and revised, updated as indicated.

Institutional Policies

The Department of Nursing reserves the right to implement changes in curriculum, schedule, and policies at any time to preserve the high standards essential for approval by accrediting bodies and to protect the safety of patients. Students will be notified of all policy changes in the BSN Nursing Program Handbook via the College's email system. The revised handbook will be posted on Blackboard and MyTCC.

Note: *The institutional policies referenced in this document represent only a selection of key policies. They do not encompass all policies and procedures governing student conduct, academic expectations, or institutional operations. Students are responsible for reviewing and adhering to all applicable policies, which can be found in full in the [College Catalog](#).*

[Academic Integrity](#) (including plagiarism and AI use)

[Accommodations](#)

[Bullying](#)

[Student Code of Conduct](#)

[Complaint Policy](#)

[Grievance Policy](#)

[Family Educational Rights and Privacy Act \(FERPA\)](#)

[Inclement Weather](#)

Behaviors of Accountability and Code of Conduct

All students are responsible for being knowledgeable of and acting in accordance with the Behaviors of Accountability and Code of Conduct located in the College Catalog. To view these documents, [click here](#) to access Compliance Bridge and search Behaviors of Accountability and/or Student Code of Conduct..

The Behaviors of Accountability and Code of Conduct apply to classroom and all College related situations, as well as direct and indirect patient care. Students sign a document acknowledging their awareness of the Behaviors of Accountability and Code of Conduct during orientation week.

In addition to behaviors listed in the College Catalog, the following also applies: Students are expected to demonstrate the following behaviors related to accountability:

1. Follow all College, Nursing Program, and Agency policies and procedures.
2. Complete all clinical preparation according to course guidelines.
3. Maintain patient confidentiality, advocate for patients, family and significant other.
4. Admit errors as soon as discovered.

Incidences violating the Code of Conduct which result in the student being suspended or terminated include but are not limited to:

- Chemical abuse
- Unauthorized possession of property
- Falsification of records
- Breach of confidentiality

Time to Degree for Matriculated Students

The time to complete the Bachelor of Science in Nursing Degree for matriculated students is five (5) years from the date the student begins the first nursing course.

Matriculated students who have commenced nursing courses but are on an approved Leave of Absence are excluded from the timeline. The individual student's time to degree will be reassessed by the BSN Program Chair and/or appropriate designee upon the student's return.

Under extenuating circumstances, students may petition the BSN Program Chair for extension of the time limit for attaining their degree. To apply for an extension, the student must submit a letter and include the following information:

- a description of progress towards degree
- plan for degree completion
- signatures of the student's advisor

The student's request will be reviewed, and the final decision communicated to the student via College e-mail.

DEPARTMENT OF NURSING POLICIES AND PROCEDURES

Technical Standards and Functional Abilities

The TCCNHS nursing program provides the following description/examples of technical standards and functional abilities necessary to successfully complete the requirements of the nursing program. Key areas for technical standards and functional abilities in nursing include the possession, or acquisition, of abilities and skills in the areas of: (1) exhibiting sensory and motor coordination and function; (2) acquiring fundamental knowledge; (3) developing communication skills; (4) interpreting data; (5) integrating knowledge to establish clinical judgment; and, (6) incorporating appropriate professional attitudes and behaviors into nursing practice capabilities.

If you believe you require accommodations to perform these technical standards and/or functional abilities, please contact our College Support Services, Student Success Department regarding services and resources.

The TCCNHS nursing program provides reasonable accommodations, in conjunction with clinical agencies and community partners, to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990, and the ADA Amendments Act of 2008. A reasonable accommodation is a modification or adjustment to an instructional activity, equipment, facility, program, or service that enables a qualified student with a disability to have an equal opportunity to fulfill the requirements necessary for graduation from the nursing program.

Adapted from: Marks, B & Ailey, S. A. (2014). White Paper on Inclusion of Students with Disabilities in Nursing Educational Programs. Sacramento, CA: California Committee on Employment of People with Disabilities (CCEPD).

Functional Abilities	Examples
Exhibit Sensory, Motor Coordination, and Function	
1. Execute the use of exteroceptive sense (touch, pain, temperature), proprioceptive sense (position, pressure, movement, stereognosis, vibration), physical strength, and motor function to provide general patient care and use associated patient care equipment. 2. Respond promptly to emergencies as to not hinder the ability of coworkers to provide prompt treatment and care.	• Perform a physical examination using palpation, auscultation, percussion, and other diagnostic maneuvers. • Demonstrate the administration of patient care equipment, such as intravenous monitors, sterile equipment, catheters, etc. • Respond quickly when contacted, initiate appropriate therapeutic procedures, administer intravenous medication, apply pressure to stop bleeding, and perform cardiopulmonary resuscitation.
Acquire Fundamental Knowledge	
3. Ability to learn in classroom, clinical, simulation, community educational settings. 4. Ability to find sources of knowledge and acquire the knowledge. 5. Apply an expanded knowledge base within one's chosen profession with the disposition to engage in life-long learning. 6. Display adaptive thinking.	• 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, physical demonstrations, and service learning in the community. • Develop health care solutions and responses beyond that which is rote or rule-based.

Develop Communication Skills	
Functional Abilities	Examples
1. Communicate quickly and effectively in oral and written English. 2. Exhibit abilities for sensitive and effective interactions with patients (persons, families and/or communities). 3. Display abilities for effective interaction with the health care team (patients, their supports, other professional and non-professional team members). 4. Exhibit sense-making of information gathered from communication, oral and written. 5. Display social intelligence.	• Read and record in patient records in English accurately and efficiently. • Accurately elicit or interpret information such as medical history and other info to adequately and effectively evaluate a client or patient's condition. • Accurately convey information and interpretation of information to patients and the health care team. • Effectively communicate in teams. • Connect with others to sense and stimulate reactions and desired interactions: • Employ empathy, perceive verbal and nonverbal cues, recognize and appropriately respond to emotions such as sadness, worry, fear, and anger in patients. • Elicit pain levels from patients, provide patient teaching, and report changes in patient status to other members of the health care team.
Interpret Data	
1. Observe patient conditions and responses to health and illness. 2. Assess and monitor health needs. 3. Observe and interpret verbal and nonverbal cues. 4. Implement computational thinking. 5. Implement cognitive load management.	• Obtain and interpret information from assessment maneuvers such as assessing respiratory and cardiac function, blood pressure, blood sugar, neurological status, etc. • Obtain and interpret information from diagnostic representations of physiologic phenomena during a comprehensive assessment of patients. • Obtain and interpret information from assessment of patient's environment and responses to health across the continuum. • Translate data into abstract concepts and demonstrate data-based reasoning.

Integrate Knowledge to Establish Clinical Judgment

Functional Abilities	Examples
1. Implement critical thinking, problem-solving, and decision-making abilities needed to care for persons, families, and/or communities across the health continuum within the associated environments of care. 2. Display intellectual and conceptual abilities to accomplish the essential of the nursing program: a) Calculating b) Reasoning c) Analyzing d) Judging	• Accomplish, direct, or interpret assessment of persons, families, and/or communities and develop, implement, and evaluate plans of care or direct the development, implementation and evaluation of care. • Literacy in, and ability to, understand concepts across disciplines. • Represent and develop tasks and work processes for desired outcomes.

Incorporate Appropriate Professional Attitudes and Behaviors into Nursing Practice

Functional Abilities	Examples
1. Demonstrate concern for others, empathy, composure, integrity, ethical conduct, accountability, interest, and motivation. 2. Employ interpersonal skills for professional interactions with a diverse population of individuals, families and communities. 3. Employ interpersonal skills for professional interactions with members of the health care team including patients, their supports, other health care professionals and team members. 4. Display skills necessary for promoting change for quality health care needs. 5. Maintain the emotional health required to: sustain full capacity of intellectual abilities; exercise good judgment; complete responsibilities related to patient care in a timely manner; development and maintain professional, culturally sensitive, and effective relationships with patients.	• Maintain effective, professional, and sensitive relationships with clients/patients, students, faculty, staff, and other professionals under all circumstances while protecting patient confidentiality. • Make proper judgments regarding safe and quality care. • Function effectively under stress. • Demonstrate professional role in interactions with patients, intra and inter-professional teams. • Operate in different cultural settings. • Work productively, drive engagement, and demonstrate presence as a member of a health care team. • Demonstrate the ability to be aware of, and appropriately react to, one's own immediate emotional responses and biases. • Adapt to changing environments, display flexibility, and learn to function under conditions of uncertainty inherent in clinical practice. • Accept appropriate suggestions and criticisms, and respond by modifying behavior when necessary.

Nursing Program Progression Policy

(updated 8.3.15, 8.16, 8.17,12.24)

Cohorts

- Students are admitted to the nursing program with a defined expected graduation date.
- Students are required to meet a defined curriculum plan as outlined in the BSN Program Handbook for the expected graduation date.
- If a student's expected graduation date changes due to a student falling behind in the curriculum plan for any reason, the student will then be responsible for completing the defined curriculum plan under the new expected graduation date. Students with altered progression are responsible for any updated textbooks or resources required for the new expected graduation cohort.
 - Example: Students who begin nursing courses in August 2023 with the expected graduation date of May 2026 are to follow the curriculum plan located in the 2023 – 2024 BSN Program

Handbook. If a student's graduation year changes to May 2027 for any reason (i.e. failure of a course, withdrawing from a course) the student is then responsible for completing the Class 2027 curriculum plan.

- For continuation or progression through the nursing program, students are responsible for meeting ALL the following requirements. Failure to meet requirements will prevent participation in or result in suspension from all nursing courses until requirements are met. In the event that the student remains suspended for 2 consecutive semesters (FA, SP; SP, SU; SU, FA for 3-year students, or FA, SP; SP, FA for 4-year students) for not meeting requirements, the student will be removed from the nursing program unless a non-continuous enrollment or other type of leave is indicated for said student.

Clinical Requirements

All requirements outlined in the [clinical requirement policy](#) must be completed prior to beginning a clinical rotation. The student will not be permitted to attend clinical until those requirements are met.

Mandatory Health Insurance

- Facilities used by The Christ College of Nursing and Health Sciences to provide clinical learning experiences require that students have personal health insurance.
- All students are expected to provide verification of such coverage prior to beginning nursing courses each academic year by submitting proof of insurance to the Department of Nursing in the format designated.
- It is the student's responsibility to obtain and maintain insurance coverage.

Nursing Student Success Plan (NSSP)

What is the Nursing Student Success Plan?

The Nursing Student Success Plan (NSSP) is a phased strategy to assist the nursing student to proactively prepare for success in nursing course work and on the NCLEX Exam. To facilitate success, the student practices NCLEX style questions in specific content areas based on the courses they are currently enrolled in as defined by the Nursing Student Success Plan. The Nursing Student Success Plan will launch from the start of NUR course work and demonstrates the minimum requirements necessary for the Nursing Success Plan requirements.

THE NSSP IS CURRENTLY BEING REVISED BUT IT CONTINUES TO BE A GRADUATION REQUIREMENT. ONCE REVISIONS ARE COMPLETED, THE HANDBOOK WILL BE UPDATED.

Altered Progression:

Altered progression is defined as any student taking courses in a sequence that differs from their original education plan. Students with altered progression will have a different expected graduation date than when they were admitted to the program. Scenarios for which progression may be altered are outlined below:

1. Course Failure:

A student failing a course will repeat the course during the next time the course is offered and has a seat available. Students will not be permitted to take subsequent courses for which the course the student is repeating is a pre-requisite. Students that opt for a 3-year BSN track may be moved into a 4- year track following a course failure of any course.

- A didactic course failure occurs when:
 - the grade earned is below a **C+** in any didactic nursing course.
 - The student is unsuccessful on a competency-based examination assigned to the
- A clinical course failure occurs when the student:
 - Does *not* pass the dosage calculation within the maximum number of attempts allowed in that course
 - Does not attend clinical experiences as required by the clinical course and the clinical attendance policy
 - Does not meet the required competencies for the clinical course
 - The student commits or participates in an action or activity that falls under the unsafe practice policy

2. Incompletes related to excused clinical absences and assignment extensions:

If a student is granted an incomplete due to excused clinical absences or assignment extensions, and additional time is needed beyond the standard incomplete deadline, the student will be temporarily unenrolled from any courses that require the course as a prerequisite.

If the student completes the required clinical hours or course assignments by the final add/drop date of the semester, they will be re-enrolled in the appropriate courses. However, if the clinical hours or course assignments are not completed by that date, the student will take the affected course during the next semester it is offered.

3. Program Dismissals:

1. A student will be dismissed from the nursing program as the result of a second nursing course failure of the same nursing course, two nursing course failures in the same semester, or three nursing course failures.
2. Students may be dismissed from the nursing program if their actions result in, or have the potential to result in, harm to a patient. Maintaining patient safety is a fundamental responsibility, and any behavior that compromises this standard will be taken seriously.
3. Students may be dismissed from the nursing program for violation of the student code of conduct.

Any student who does not successfully complete a nursing course should contact their academic advisor.

Returning from Leave of Absence or Non-Continuous Enrollment

Students may find it necessary to take some time off from their enrollment at the Christ College of Nursing and Health Sciences for an extended period of time as defined by the Leave of Absence Policy or Non-Continuous Enrollment Policy as stated in the College Catalog. To view the full policies, [click here](#) to access Compliance Bridge and search Leave of Absence and/or Non-Continuous Enrollment.

If the student is not enrolled in nursing courses for one (1) semester, the student will return to the curriculum plan stated in the current Program Handbook contingent on space availability.

If the student is not enrolled in nursing courses for two (2) semesters, the student will

1. Follow policy as stated in the College Catalog
2. Notify Program Chair eight (8) weeks prior to request to return to program
3. Return to the curriculum plan stated in the current Program Handbook contingent on space availability

For Pre-licensure students:

BSN students will need to arrange with the Program Chair, and complete the following requirements:

1. Demonstrate proficiency in essential skills at the level which student rejoins the program
2. Demonstrate a head-to-toe assessment
3. Discuss written action plan and steps for success

Failure to demonstrate competence in these requirements may necessitate that the student repeat courses taken prior to leaving. Upon successful completion of all of the requirements, the student may return to the curriculum plan stated in the current Program Handbook and may register for nursing courses contingent on space availability.

If a student has not taken a nursing course for three (3) semesters or greater, the student will repeat all nursing courses in the curriculum plan stated in the current Handbook and may register for nursing courses contingent on space availability.

Completion Policy

See the College Catalog under “Graduation Requirements” for completion of the BSN Program.

Nursing Program Behavioral Learning Contract

A Nursing Program Behavioral Learning Contract can result following a consistent pattern of outcome-based deficiencies and/or pattern of performance and/or critical behaviors.

- A. In collaboration with the BSN Program Chair, the course faculty will outline both expectations of performance and consequences for failing to abide by established conditions of the Nursing Program Behavioral Learning Contract as well as policies of the program, the College, and any affiliated clinical agency.
- B. This Nursing Program Behavioral Learning Contract remains in effect until the student’s successful conclusion of the nursing program.
- C. Failure to adhere to the Nursing Program Behavioral Learning Contract may result in further consequences. This may include program suspension, course failure, and/or dismissal from the nursing program and college as determined by the Program Chair or designee.

Letters of Recommendation and Scholarship Application Completion

The Department of Nursing may provide appropriate letters of recommendation and documents for scholarship applications and/or employment for students and graduates of the nursing programs. In

order to complete documents in a timely manner, the following guidelines must be followed:

- All requests must be submitted in writing at least 15 working days before the document is due to the requesting agency. Students must complete and submit a FERPA Release form available by [clicking here](#).
- For the full FERPA Policy, [click here](#) to access Compliance Bridge and Search FERPA. Complete a FERPA Release Student Recommendation Request prior to submitting a request to faculty
- Submit full details regarding the agency receiving the document including:
 - Name and title of the person receiving the document
 - Name and address of the agency including city, state, and zip code
 - Agency phone number

No requests will be fulfilled until complete information is provided.

NURSING COURSE: CLASSROOM POLICIES AND PROCEDURES

No-Show(s)

Any student who does not participate in at least one academic activity by the first Friday of the course by 11:59pm will be reported as a 'no-show' to the Office of the Registrar. The student will be dropped from the course. Academic activities in a hybrid nursing course include face-to-face class meetings, posting in a graded discussion board or blog. Emails to course faculty to ask questions are not considered academic activities for attendance purposes.

For more information about dropping a course or being dropped as a "no show", please [click here to visit the Compliance Bridge Policy Portal](#) and search Withdraw, Drop Refund Policy.

Grading Policies

- A. Students must achieve a 'C+' or higher in all nursing courses. Refer to the syllabus for course grading scale.
 - ***Percentages are NOT rounded up before conversion to a letter grade.***
- B. The student must achieve a Satisfactory clinical rating on the Final Clinical Evaluation form and achieve a Satisfactory rating in clinical nursing courses.
- C. Students may request a conference with course faculty to discuss grades.
- D. No special assignments or extra credit is provided to compensate for undesired or unsatisfactory grades.
- E. Final letter grades are posted in J1.
 - Grades are final unless an error in grade assignment is discovered.
- F. The nursing department utilizes weighted grading, refer to the course syllabus for category weights.

NURSING COURSE: CLASSROOM POLICIES AND PROCEDURES

Attendance

A primary learning outcome of both the College and the Department of Nursing is the demonstration of student accountability through responsible self-directed behaviors consistent with the ethics and standards of nursing. Active participation in class, lab, and clinical work is essential. Consistent attendance offers the most effective opportunity for students to gain a command of nursing concepts and materials. Daily attendance, prompt arrival, a positive attitude, respect, and active participation are expected. A. 100% attendance and prompt arrival are expected.

Class Attendance

It is expected that students will attend 100% of their class time. At course faculty's discretion, students may be asked to sign an attendance sheet daily to document their presence in class. It is the student's responsibility to make sure s/he signs the attendance record.

Class Absence

There may be justifiable reasons for missing a class. If a student knows in advance that a class will be missed, or there is a last-minute emergency, faculty should be notified as soon as possible. Students are responsible for any information and/or material missed due to absence and will forfeit points for any in-class activities or assignments completed during the meeting time.

Impact of Absence

The consequences of missed activities, assignments, assessments, quizzes, and course exams will be addressed by course faculty and within course syllabi. For absence or tardiness during an exam, see the Standardized Testing (HESI) Policy and the Testing and Remediation Policy.

Lab Attendance

It is expected that students will attend 100% of their lab time. Students may be asked to sign an attendance sheet daily to record their presence in the lab at the discretion of the faculty. It is the student's responsibility to make sure s/he signs the attendance record.

Lab Absence

If a student knows in advance that a lab will be missed, or a last-minute emergency occurs, faculty should be notified as soon as possible. Students are responsible for any information and/or material missed due to absence and will not be awarded points for any lab activities or assignments completed during the meeting time.

Impact of Absence

The consequences of missed activities, assignments, assessments, quizzes, and course exams will be addressed by course faculty and within course syllabi.

Exams, Quizzes, and Assignments

A. The course syllabus lists the number of exams, assignments, and quizzes to be administered during the course as well as the weighted value assigned for grading. Based on student learning needs, faculty may make changes to the number of assignments, quizzes, and/or exams administered.

B. Course faculty reserves the right to assign penalties for late coursework which will be stated in the course syllabus.

C. Writing Assignments

1. The Christ College of Nursing and Health Sciences values writing as a means of learning as well as a way of evaluating and assessing student learning. Writing fosters idea development and critical thinking, and effective written communication is considered by educators and employers as an essential competency for all graduates. The assignments consistently integrate evidence-based teaching/learning principles.
2. Selected student assignments, as examples of excellent or poor writing, may be shared anonymously with students in current or in future classes, or with faculty for across-the-curriculum alignment in assessing writing. Refer to the most current edition of the *Publication Manual of the American Psychological Association (APA)* for paper format requirements, and read the Plagiarism Overview to understand the ethics of source use and documentation. The Plagiarism Overview and APA Tutorial are available on the College website under Student Success, Writing Center Consulting link as well as sample APA documents.
3. Academic written assignments should be of high quality according to the associated grading rubric.
4. For assistance with writing assignments, the Writing Tutor is available to assist students to discuss writing projects, ideas for papers, and drafts of papers (focus, organization, content, flow, etc.). To make an appointment, please [click here](#).

Testing and Remediation Policy

In preparation for success on NCLEX-RN, the Christ College of Nursing and Health Sciences, Department of Nursing implements a Testing Program which consists of three parts: course exams, satisfactory clinical performance, and external exam testing and remediation. Throughout the program, students are evaluated in these areas.

All students enrolled in a designated nursing program will take assigned nationally normed standardized tests. These tests are given during specific nursing courses to help students identify areas of weakness or “knowledge gaps;” and to provide a series of remediation activities to elevate student outcomes. During the final semester, a standardized exit predictor exam(s) will be administered. Costs for these exams are included in the student fees.

Exams and Standardized Testing

To ensure that all student testing results are earned under comparable conditions and represent fair accurate measurement, it is necessary to maintain a standardized testing environment. The following regulations are designed to help ensure such an environment.

The course syllabus lists the number of exams (including the standardized exam) to be administered during the course as well as the weighted value assigned for grading. Based on student learning needs, faculty may make changes to the number of exams administered. Students with a documented disability may be eligible for [Academic Accommodations](#) (link).

Below you will find the Student Examination Rules. Please note that if you do not follow the rules or the instructions of the test proctor your examination will be stopped and considered complete:

A. Student Examination Rules

1. Personal Items

- At the beginning of class or the examination period, you are required to store your electronic devices (cell/mobile/smart phones, smart watches, or other electronic devices turned off or in airplane mode) as directed by faculty.
- Remaining personal items must be placed in the designated area
- The college is not responsible for lost, stolen or misplaced items

2. The following items may not be accessed at all during your exam:

- Any educational, test preparation or study materials
- Cell/mobile/smart phones, smart watches, MP3 players, fitness bands, jump drives, cameras or other electronic devices

3. The course exams are defined by course faculty within the course syllabus and include the following:

- Student must know Evolve student ID/Password, and Exam Soft login. The student's name and Student ID number (or a number specified by the faculty) are to be placed on all paper exams.
- Additional items needed for testing (i.e. scrap paper and pencil, exam access codes) will be provided by the test proctor and retrieved from students at the conclusion of the exam.
- A four (4) function calculator, student provided, is required for non-computer administered exams only.
- A dropdown calculator is available on Exam Soft and HESI exams. Personal calculators are not permitted on these exams.
- Students arriving after an exam has begun will not be permitted to enter the testing location.
- Late arrivals on exam day will be scheduled as a make-up exam. No more than 2 make up exams or as noted on the syllabus, may be taken. See points below.
- The student is responsible for notifying faculty if unable to attend the scheduled testing period.
- Students will not be allowed to exit and re-enter the room while the exam is in progress unless the student has accommodations to do so, or during an exam that is expected to take longer than 3 hours.

4. Nationally normed standardized tests are computerized tests designed to familiarize the student with the testing situation of licensing examinations and the format of the NCLEX-RN® exam.

- Students are to arrive 15 minutes prior to beginning of actual exam to check functionality of electronic device and headphones. The exam will begin when this is completed or as designated by the exam proctor.
- Students are provided an access code for testing
- Testing will be closed after the time limit has been reached.

- **Students have 30 minutes for rationale review.**

- Students will be directed to leave the testing area at the end of the review period.
- Students must turn in scrap paper and access code documentation prior to leaving the testing area.
- Students must show the proctor that the exam is closed.
- Students are not to discuss standardized exam questions with anyone.

**** Nationally normed standardized tests scores are calculated based on the rubric available in your course syllabus. Students should review the rubric and corresponding grades prior to taking each Nationally normed standardized tests.***

B. Missed Exam

1. Taking an exam outside the scheduled testing date and time constitutes a missed exam.
2. To take a missed exam, the student must contact the course faculty to schedule the date, time, and location.
3. A missed exam must be completed within three (3) business days of returning to class or as arranged with faculty to receive credit. Failure to do so will result in a grade of zero (0%).
4. If an exam is not taken during the originally scheduled time frame, the makeup exam may have 5 percentage points deducted.
5. A makeup exam may be in a different format from the original.
6. Course syllabi will reflect additional guidelines and may impose more restrictive guidelines and consequences that supersede this policy.

C. Exam Review

1. The purpose of review is to provide students with the opportunity to learn from the testing experience, as well as to promote critical thinking. This purpose is achieved through a mutually respectful exchange of information among students and faculty.
2. The manner, time, and location in which a review is conducted is at the discretion of the faculty.
3. Nationally normed standardized tests will not have exam review.
4. To individually review an exam, students must schedule an appointment with course faculty.
5. Individual questions will not be shown to the student to maintain academic integrity.

D. Item Analysis

1. After each exam is complete, faculty will conduct a statistical analysis of the exam as a whole and for each exam question.
2. Decisions about exam questions will be based on statistical data for the exam.

E. Nationally normed standardized tests do not have item analysis.

F. Grade Posting

1. Exam grades will be posted within five (5) business days of administration.
2. Faculty will post grades in the course Blackboard grade book.

G. Printing is not permitted during the exam.

NURSING COURSE: CLINICAL POLICIES AND PROCEDURES

NURSING COURSE: CLINICAL POLICIES AND PROCEDURES

Attendance Policy:

A primary learning outcome of both the College and the Department of Nursing is the demonstration of student accountability through responsible self-directed behaviors consistent with the ethics and standards of nursing. Active participation in class and clinical is essential. Consistent attendance offers the most effective opportunity for students to gain command of nursing concepts. Daily attendance, prompt arrival, a positive attitude, respect, and active participation are expected.

- A. Clinical attendance is **mandatory**. All experiences are designed to facilitate the transfer of theoretical knowledge to clinical practice. Missed hours can prevent adequate development and assessment of the required knowledge, skills, attitudes, behaviors and clinical judgment. Absence from clinical jeopardizes the student's ability to successfully meet the required clinical nursing course outcomes and competencies.
- B. Time management is a necessary professional skill, and punctuality is expected in professional workplaces. Important information affecting patient care is communicated to students at the start of clinical experiences. Tardiness for clinical experiences jeopardizes the student's ability to provide safe nursing care. Students are required to arrive on time for the clinical and stay for the entire time allotted for that clinical experience.
- C. The clinical faculty has the responsibility to ensure patient safety is not compromised. Therefore, any student unable to participate fully to provide safe and effective care to patients will be dismissed from the clinical experience and incur a clinical absence.
- D. Definition of Terms:
 - a. Clinical experience: A clinical experience is defined as any activity that aligns with the clinical course. A clinical experience includes, but is not limited to, simulated experiences, experiences on a unit or in an acute care setting, a clinical experience in the community setting, lab experiences, etc.
 - b. Tardy: A tardy is defined as the arrival to or departure from a clinical unit or experience 1-59 minutes after the scheduled start time, or before the scheduled end time.
 - c. Absence: A clinical absence is defined as follows:
 - i. arrival to the unit or experience more than 59 minutes after the start of the clinical, leaving more than 59 minutes prior to the end of a clinical experience
 - ii. not attending the clinical experience.
 - iii. two or more tardies in a clinical course
 - d. No call/no show: Not attending a clinical experience and not informing the clinical faculty, preceptor, simulation or lab facilitator, or the clinical unit via the appropriate channels outlined by those above (text, e-mail, phone call, etc.) within 60 minutes of the start of the clinical day.
 - e. Approved absence: An approved absence is an absence that occurs for the reasons listed below. For an absence to be an approved absence, documentation may be required.
 - i. Death of a family member
 - ii. Military duty
 - iii. Attendance at a local or national conference or College-sponsored events (requires advanced approval from the program chair of the program in which the student is enrolled)
 - iv. Required appearance at a court hearing
 - v. Jury duty
 - vi. Illness or injury with a provider's note, or evidence of a positive influenza or COVID test.
 - vii. Other extenuating circumstances may be considered by the clinical instructor. For a second extenuating circumstance, the student must meet with the program chair of the program in

which they are enrolled to discuss the circumstance. An absence for an extenuating circumstance may or may not require documentation.

- f. Unapproved absence: any absence outside of the approved reasons listed above.

E. Impact of Clinical Absences:

Clinical absences severely impact the ability of a student to meet and demonstrate the competencies required in the course. Clinical hours are considered mandatory, however, The Christ College of Nursing and Health Sciences faculty, staff, and administration understand that circumstances may occur beyond the student's control. Absences, tardies, and no-shows will be managed in the manner listed below:

a. Tardies:

- i. One tardy (as defined above) will be documented and the student asked to sign the document for record-keeping purposes.
- ii. Two tardies will constitute one unapproved clinical absence and will be documented as such. The student will be placed on a performance improvement plan for tardiness at this time. Additional tardies may result in a program contract or course failure.

b. Approved clinical absences:

- i. One approved clinical absence will result in the student's clinical paperwork being exempt for that clinical experience. The clinical absence will be documented by the faculty; the student will be asked to sign the documentation for record-keeping purposes.
- ii. Two or more **approved** clinical absences will result in the student and clinical faculty working together to determine a plan to ensure the student meets the clinical outcomes and competencies set forth in the course. The make-up of any approved absence hours will be at the faculty discretion and may include:
 1. A clinical experience on a day outside of classes and other scheduled clinical/lab time
 2. A clinical experience on a scheduled make-up day (*This scheduled make-up day may be with another clinical group, on a different clinical unit, or with a different clinical faculty*)

***A student missing significant clinical time for approved absences such that it has affected their ability to meet the outcomes of the course, may be awarded an incomplete for the course, however, this may impact the student's ability to progress to the next semester's courses. See progression policy for further details.*

***Documentation may need to be provided for an absence to be an approved absence. Absences for which documentation is not submitted may be documented as an unapproved absence. Documentation must be submitted within 24 hours of faculty request for documentation unless faculty provides a different timeframe for submission. Acceptable documentation is listed in the program handbook Appendix B.*

c. Unapproved absences:

- i. All unapproved clinical absences will not be offered a make-up opportunity and will receive a zero for their paperwork for that clinical day. The clinical absence will be documented by the faculty; the student will be asked to sign the documentation for record-keeping purposes.
- ii. If a student misses greater than one hour of a clinical day but attends over 50 % of the clinical day (ex: overslept, car problems, etc...) this is considered an unapproved absence. However, the student is encouraged to attend as much of the day as they are able and complete clinical paperwork which **will be graded**. The clinical absence will be documented by the faculty; the student will be asked to sign the documentation for record-keeping purposes. This can only occur once in a clinical course, subsequent partial days would be given a zero on clinical paperwork.
- iii. Two or more unapproved absences place the student at risk of course failure. The student will be placed on a performance improvement plan and program contract at this time.
- iv. Three or more unapproved clinical absences will result in course failure.

d. No call/no show:

- i. One no call/no show will result in a zero for the clinical paperwork for the missed clinical day. The clinical faculty will place the student on a performance improvement plan. No call/no show absences will not be made up unless the clinical faculty and/or program chair makes the determination that the absence should be an approved absence.
- ii. Two no call/no show absences will result in course failure. The student will not be allowed to attend any additional clinical experiences, simulated experiences, or lab experiences associated with the clinical course for the remainder of the semester and will be required to repeat the clinical course. The student may reach out to their advisor for the appropriate next steps.

- F. **Cancellation of a clinical experience by the clinical faculty** will result in a make-up of the clinical experience. The clinical experience may be made up using simulated experiences, may occur on a day outside of the scheduled clinical day (including weekend days as determined by the faculty member), with a different clinical faculty member, or on scheduled clinical make-up days outlined on the calendar for the course. Students are expected to attend the clinical make-up day(s). Faculty will communicate to students via the method agreed upon by the clinical faculty and the students in any given clinical group (e-mail, text, phone tree, etc.) Clinical paperwork for the faculty-canceled clinical experience will be awarded a grade at the time of the clinical make-up. The above clinical attendance policy will be in effect for the clinical make-up days should a student not attend.

Trajecsyz

Purpose: Trajecsyz is a platform used to track clinical hours for students and to maintain clinical and lab evaluations. The purpose of this policy is to ensure that Trajecsyz is used for its intended purpose. Students must register for a Trajecsyz account upon beginning nursing courses at The Christ College of Nursing and Health Sciences (TCCNHS).

Use:

- **For non-clinical courses that have lab:** Weekly evaluations are completed by the lab faculty. Students must have an account in order for the faculty to be able to complete the evaluations.
- **For clinical courses:** Students must clock in upon arriving to the facility and clock out upon leaving. If students use their mobile phones to clock in or out, students must share their location while using the application. Trajecsyz does not continue to track when the app is not open. Trajecsyz clock in/out is used to generate reports for the facilities related to the number of hours per day the facility hosts nursing students. During role transition, failure to clock in or out in a manner that identifies the student location will result in the hours for that shift not counting towards the total number of hours required to complete the role transition experience.

Dress Code Policies

It is the position of the Department of Nursing that professional appearance and demeanor are a demonstration of self-respect, respect for the patient, and respect for the profession of nursing. As representatives of the profession of nursing and of the College, students are expected to follow the dress code as outlined.

A clinical dress code is necessary for the purposes of infection control and safety for patients and students in clinical settings.

The BSN Program clinical uniform must be purchased through the College's designated vendor.

Clinical Dress Code

1. For **ALL** students:
 - a. Student picture ID badge designated for The Christ College of Nursing and Health Sciences, and agency provided when applicable, with name facing outward.
 - b. A Christ College/Christ Hospital Health Network fleece or lab coat or royal blue scrub jacket may be worn for pre-conference, lunch breaks, and post-conference, but may not be worn while providing care
 - c. Hair
 - a. Hair color must fall within natural occurring shades and be neat.
 - b. All hair lengths should be professional in style
 - c. Hair longer than shoulder-length must be secured away from the face, off the collar
 - d. Hair accessories, if required, should be professional in style, not excessive in size, and of a neutral color (white, navy, or Christ College logo). Christ College of Nursing headbands may be purchased through Joseph Beth.
 - e. Headwear may be worn if it is clean, and of neutral color (white, black, brown, or beige) and does not hang freely below the shoulders (i.e. turban). All headwear must fit under procedural head covering materials
 - f. No hair ornaments (i.e. feathers) are permitted
 - g. Facial hair must be neatly trimmed. Students without facial hair are expected to be cleanly shaven.
 - d. Natural fingernails must be clean, neatly manicured and support the functional use of hands and fingers.
 - a. Fingernails must be no longer than 1/4 inch from fingertip in length.
 - b. Artificial nails include, but are not limited to acrylic nails, overlays, tips, bonding, extensions, tapes, inlays, gels, shellac and wraps. Artificial nails are not permitted.
 - c. Nail jewelry is not permitted
 - d. Nail polish, if worn, must be clear and well maintained without chips.
 - e. Jewelry must be simple and professional and must not interfere with patient care or present a hazard to the student.
 1. One ring or one wedding set may be worn.
 2. Medic-Alert bracelet (if required) may be worn.
 3. Two (2) pair of small post earrings or small hoop earrings in contact with the ear may be worn per ear. No space is permitted between the ear and hoop.
 4. Facial piercing, Monroe or nose piercing must be a spacer of clear or natural skin tone color. Eyebrow, tongue, or lip piercing is prohibited
 5. No necklaces are permitted
 - f. Makeup must be professional and worn in moderation

- g. No perfume, cologne, or scented lotions. Uniforms may not smell of smoke
 - h. Visible body art is permitted, if the clinical agency allows. Any body art that could be considered offensive must be covered at all times. Please note that some agencies may require all body art to be covered.
 - i. Chewing gum during the clinical experience is prohibited
 - j. Shoes
 - 1. Fully enclosed, clean, non-permeable black shoes with soft soles and heels, in good repair
 - 2. Shoelaces must be clean and black (no colored laces)
 - 3. Athletic shoes must be completely black without colored logos
 - 4. No high-top athletic shoes, canvas, cloth fabrics, clogs with no backs, sling-backs, or crocs with holes are permitted.
 - e. Uniforms must not restrict movement. Skin must not be exposed while bending or moving
 - f. Scrub top and pants or skirt designated by the nursing program of the same fabric, clean, freshly laundered, free of wrinkles, stains, and odors which is of the appropriate size and fit and in good repair
 - g. Skirt must be knee length (to knee or top of knee)
 - h. A plain, collarless, round-neck, freshly laundered, white t-shirt may be worn under the scrub top. No design, pattern, or thermal/waffle weave material may be worn. Short sleeves may not hang below the sleeve of the uniform top.
 - i. Plain black socks extending above the ankle (no exposed skin may show between sock and pants leg when the student is seated) when wearing uniform pants.
 - j. Full-length, plain white pantyhose (no patterns) when wearing uniform skirt. Socks may not be worn with hose.
2. SPECIALTY areas
- 1. Individual dress code as dictated by the specialty area
 - 2. Occupational, Safety and Health Administration (OSHA) standards prohibit hospital-provided scrubs to be worn outside of the hospital (i.e. home) to prevent cross contamination of patients and the public. Violation can lead to a fine for the hospital and student and result in failure of student learning outcomes related to functioning within the framework and policies of the College, BSN Nursing Program, and Agency
3. Required equipment:
- a. Conservative, well-fitting wristwatch that displays hours, minutes, and seconds.
 - b. Stethoscope. Cloth covers, or decorative items attached to stethoscope are prohibited.
 - c. Pens worn around the neck are prohibited.

No smoking: There is no smoking on the campuses of clinical agencies. This includes electronic cigarettes. The uniform may not smell of smoke.

Student Conduct While Providing Nursing Care Policy

While providing nursing care to patients in a clinical setting, a student shall essentially adhere to the practice standards for the registered nurse: *Adapted from Ohio Administrative Code 4723-5-12; Effective 02/01/2014*. So doing includes, but is not limited to, compliance with the following requirements:

- A. A student shall, in a complete, accurate and timely manner, report and document nursing assessments or observations, the care provided by the student for the patient, and the patient's

response to that care.

- B. A student shall, in an accurate and timely manner, report to the appropriate practitioner errors in or deviations from the current valid order.
- C. A student shall not falsify any patient record or any other document prepared or utilized in the course of, or in conjunction with, nursing practice. This includes, but is not limited to, case management documents or reports, or time records, or reports, and other documents related to billing for nursing services.
- D. A student shall implement measures to promote a safe environment for each patient.
- E. A student shall delineate, establish, and maintain professional boundaries with each patient.
- F. At all times when a student is providing direct nursing care to a patient, the student shall:
 - 1. Provide privacy during examination or treatment and in the care of personal or bodily need.
 - 2. Treat each patient with courtesy, respect, and with full recognition of dignity and individuality.
- G. A student shall practice within the appropriate scope of practice as set forth in division (B) of Section 4723.01 and division (B) (20) of Section 4723.28 of the Revised Code for a registered nurse.
- H. A student shall use standard blood and body fluid precautions established by 4723-20 of the Administrative Code.
- I. A student nurse shall not:
 - 1. Engage in behavior that causes or may cause physical, verbal, mental, or emotional abuse to a patient;
 - 2. Engage in behavior toward a patient that may reasonably be interpreted as physical, verbal, mental, or emotional abuse;
 - 3. Misappropriate a patient's property or engage in behavior to seek or obtain personal gain at the patient's expense;
 - 4. Engage in behavior that may reasonably be interpreted as behavior to seek or obtain personal gain at the patient's expense;
 - 5. Engage in behavior that constitutes inappropriate involvement in the patient's personal relationships; or
 - 6. Engage in behavior that may reasonably be interpreted as inappropriate involvement in the patient's personal relationships.
- J. The patient is always presumed incapable of giving free, full, or informed consent to sexual activity with the student nurse and as such, the student nurse shall not:
 - 1. Engage in sexual conduct with a client;
 - 2. Engage in conduct in the course of practice that may reasonably be interpreted as sexual;
 - 3. Engage in any verbal behavior that is seductive or sexually demeaning to a patient;
 - 4. Engage in verbal behavior that may reasonably be interpreted as seductive or sexually demeaning to a patient;
 - 5. Engage with a patient in sexual contact, as defined in Section 2907.01 of the Ohio Revised Code;
or
 - 6. Engage in verbal behavior that is sexually demeaning or may be reasonably interpreted by the patient as sexually demeaning, regardless of whether contact or verbal behavior is consensual, unless the patient is a student's spouse.
- K. A student shall not self-administer or otherwise take into the body any dangerous drug (Section 4729-

01, ORC) in any way not in accordance with a legal, valid prescription issued for the student, or self-administer any drug that is a schedule I controlled substance.

- L. A student shall not habitually indulge in the use of controlled substances, other habit-forming drugs, or alcohol or other chemical substances to an extent that impairs ability to practice.
- M. A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of habitual or excessive use of drugs, alcohol, or other chemical substances that impair the ability to practice.
- N. A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of a physical or mental disability.
- O. A student shall not assault or cause harm to a patient or deprive a patient of the means to summon assistance.
- P. A student shall not misappropriate or attempt to misappropriate money or anything of value by intentional misrepresentation or material deception in the course of practice.
- Q. A student shall not have been adjudicated by a probate court of being mentally ill or mentally incompetent, unless restored to competency by the court.
- R. A student shall not aid and abet a person in that person's practice of nursing without a license, practice as a dialysis technician without a certificate issued by the Board, or administration of medications as a medication aide without certificate issued by the State Nursing Board.
- S. A student shall not prescribe any drug or device to perform or induce an abortion, or otherwise perform or induce an abortion.
- T. A student shall not assist suicide as defined in Section 3795.01 of the Revised Code.
- U. A student shall not submit or cause to be submitted any false, misleading or deceptive statements, information, or document to the nursing program, the faculty or preceptors, or to the Board.
- V. A student shall maintain the confidentiality of patient information. The student shall communicate patient information with other members of the health care team for health care purposes only, shall access patient information only for purposes of patient care or for otherwise fulfilling the student's assigned clinical responsibilities, and shall not disseminate patient information for purposes other than patient care or for otherwise fulfilling the student's assigned clinical responsibilities through social media, texting, emailing or any other form of communication.
- W. To the maximum extent feasible, identifiable patient health care information shall not be disclosed by a student unless the patient has consented to the disclosure of identifiable patient health care information. A student shall report individually identifiable patient information without written consent in limited circumstances only and in accordance with an authorized law, rule, or other recognized legal authority.
- X. A student shall not use social media, texting, emailing, or other forms of communication with, or about a patient, for non-health care purposes or for purposes other than fulfilling the student's assigned clinical responsibilities.

Student Nurse Performance of Specified Procedures

Certain procedures may be performed by student nurses as part of their clinical experience and education. Each student must be instructed in and have demonstrated competence in the procedure. Instruction may be in the form of theory presentation, clinical conference, skills laboratory, and/or

individual instruction.

After student competence has been demonstrated, the student may perform independently those procedures not identified as needing direct supervision. In selected segments of second year nursing courses, faculty-identified individual instruction and evaluation of student competence can be done by a preceptor. All procedures require that the student request guidance and supervision as needed and that ultimately the faculty/preceptors make the final determinations as to the individual student's degree of independence.

- A. Student performance of any procedure is determined by organizational and unit policies and the judgment and discretion of the faculty member and/or preceptor.
- B. Students must be aware of the agency policies regarding student nurse practices at all clinical locations. If the agency policy differs from the policy of The College, the stricter policy must be followed.
- C. Direct Supervision procedures require that a competent person be present with the student during the performance of the entire procedure. A competent person is defined as the faculty member or preceptor who has met agency/unit instructional and competency requirements for the procedure.
- The following comprises a current listing of procedures which have been identified as requiring direct supervision. Although every effort has been made to be comprehensive in listing procedures, this list is not intended to be all inclusive. Procedures not specifically listed, as well as those listed, will be determined based on level of student education, appropriate instruction, individual student competence, individual unit or agency policy, and faculty/preceptor discretion and judgment.
 - 1. Draw blood from central lines.
 - 2. Change dressings on central lines.
 - 3. Assist a properly trained registered nurse in accessing implantable central venous access devices.
 - 4. Access Port-a-Cath.
 - 5. Administer of IV push medications: The specific medications students can administer are based on level of education, appropriate instruction, individual student competence, unit/agency policy, and faculty/preceptor discretion and judgment.
 - 6. Monitor vital signs during auto-transfusions.
 - 7. Administer Blood Transfusions/Blood Product
 - a. Students may perform the following once competency is demonstrated:
 - i. Take vital signs per organization/agency policy.
 - ii. Pre-medicate per physician's order.
 - iii. Monitor established drip rate and report rate to preceptor or designee
 - 1. The RN must make any changes in drip rate.
 - iv. Monitor patient for any reactions and report findings to the registered nurse.
- D. In all areas, including specialty areas, for all procedures that require specialized education/training of the registered nurse performing the procedures, students may be assigned to the RN doing the procedure for an observational learning experience.

E. In all areas students **MAY NOT**

1. Draw arterial blood gases.
2. Confirm patient identification for initiation of blood transfusion.
3. Witness consent or procedure verification forms.
4. Acknowledge physician orders (on paper or electronically).
5. Accept verbal orders from a physician.
6. Remove any of the following:
 - ET Tubes
 - Swan-Ganz Catheters
 - Temporary Pacing Wires
 - Arterial Lines
 - Central Lines
 - Chest Tubes

Unsafe Practice Policy

A. Purpose

To establish clear expectations regarding student performance in the clinical setting and to explain the consequences of unsatisfactory, unsafe, or unethical student clinical practice.

B. Accountability

Under the direction of the Vice President of Academics and the Program Chair(s), all nursing faculty will be responsible for implementing this policy.

C. Applicability

This policy shall apply to every student enrolled in a clinical nursing course.

D. Definitions

- Unsatisfactory clinical practice is defined as a failure to perform up to the minimum standards established for the specific clinical experience.
- Unsafe or unethical clinical practice is defined as an occurrence, event or pattern of repeated behavior that places the patient, family or other in jeopardy and/or at an unacceptable level of risk for physical, psychosocial, or emotional harm (Scanlan, Care, & Gessler, 2001).

Every student in the program is expected to act in a safe and ethical manner consistent with the ANA Code of Ethics for Nurses.

Examples of unsafe or unethical practice include, but are not limited to:

- Negligence in patient care.
- Unprofessional behavior either in the lab/simulation setting, or at the clinical agency.
- Substantiated act(s) of patient abuse, either physical or verbal.
- Ongoing unsatisfactory performance documented by the clinical instructors.
- Neglect of duty with actual cause or potential to cause patient harm.
- Fraudulent or egregious acts.
- Demonstrated and /or documented incompetence.
- Personal conduct that adversely effects the learning environment and /or the instructor's ability

to perform his/her responsibilities.

- Exhibiting aggressive or intimidating behavior (eg. Profanities, threats, loud talking, rudeness, verbal coercion) toward or in the presence of faculty, staff, peers, patients/clients or agency personnel.
- Falsifying a client's record.
- Violation of HIPAA regulations (i.e. breach of clients' confidentiality).
- Failure to adhere to principles of safe nursing practice (i.e. safe medication administration).
- Inadequate preparation for clinical responsibilities.
- Inability to recognize limitations and/or failure to seek appropriate help in time-sensitive situations.
- Dishonest communication with clients, families, faculty and/or agency staff.
- Denying responsibility for one's actions.

Continuum of Unsafe Practice

Unsafe practice occurrences, behavior, or patterns of behavior can pose differing levels or degrees of risk and/or harm to the client that can be presented along a continuum from minimal risk (Level 1) to unacceptable risk (Level 2) to high risk or actual harm (Level 3).

Level 1

A demonstration of, or potential for, unsafe practice where an occurrence, event, attitude, or student behavior presents minimal risk for client harm. The clinical instructor would initiate a focused assessment process to further determine whether student practice is safe.

It is recognized that safety of student clinical practice is a dynamic situation and a potential for unsafe practice, Level 1, may escalate at any time to Level 2 or 3 and, at that time, require the clinical instructor to initiate a clinical contract or student dismissal from the college.

Examples of Level 1 unsafe practices are: a comment that appears to reflect unprofessional attitude, a 'near miss', and incomplete preparation for clinical.

Level 1: Focused Assessment Process (Potential for Unsafe Practice)

The clinical instructor:

1. Identifies and discusses with the student an occurrence, behavior, or characteristic that reflects a potential for unsafe student practice.
2. Initiates and describes the focused assessment process with the student.
3. Collaboratively discusses strategies for the student to demonstrate positive progress. Some potential strategies could include but are not limited to: focused questioning corrective feedback, role modeling, coaching, problem solving, additional readings or learning activities, and/or other teaching strategies.
4. Records anecdotal clinical notes.
5. Continues to assess and promote student progress.
6. Initiates either Level 2 or 3 process if unsafe practice is determined.

The student:

1. Listens and acknowledges that s/he heard the clinical instructor's description of an occurrence or behavior that reflects a potential for unsafe student practice.
2. Collaboratively discusses strategies for positive progress.
3. Implements the suggested strategies.
4. Demonstrates positive progress.

Level 2

Unsafe practice is an occurrence, event, attitude, student behavior, or pattern of behavior that places the patient or others at an unacceptable risk for harm (physical, emotional, psychosocial).

With Level 2 unsafe practice, the clinical instructor initiates a clinical contract with the student.

Examples of Level 2 unsafe practice include, but aren't limited to, repeated medication errors, inadequate knowledge about medications, and lack of preparation for patient care.

Unsafe student practice is identified or assessed and described by the clinical instructor using the clinical contract form.

Level 2 Clinical Learning Contract

When the clinical instructor observes Level 2 unsafe practice, a clinical learning contract is initiated.

The clinical Instructor:

1. Informs and consults with the course lead and Program Chair throughout the clinical learning contract.
2. Describes the Level 2 process for the student and discusses the potential to proceed to Level 3 if Level 3 unsafe nursing practice occurs.
3. Initiates the clinical learning contract:
4. Discusses the situation and collaboratively develops a clinical learning contract that specifies:
5. Action plan for improvement
 - a. Evidence that demonstrates achievement of safe practice
 - b. A date to determine whether safe practice has been achieved
6. Regularly assess documents, and discusses student progress
7. Meets with student on the date specified to inform the student whether conditions/goals for safe practice have been achieved.

The student:

1. Within 48 hours, the student meets with the clinical instructor, discusses the situation, and collaboratively develops a clinical learning contract that specifies:
 - a. Action plan for improvement
 - b. Evidence that demonstrates achievement of safe practice
 - c. A date to determine whether safe practice has been achieved
 - d. Meets with the clinical instructor on the date specified on the clinical learning contract.
 - e. Discusses degree of progress on the action plan for improvement.
2. Potential outcomes of Level 2 supplemental process are possible:
 - a. Successful achievement of action plan with continued assessment of clinical course outcomes by the clinical instructor.
 - b. Failure to achieve the action plan. As soon as possible the clinical instructor:
 - i. Reports the student failure to the course lead and Program Chair
 - ii. Informs the student verbally and in writing that a grade of F is the final assigned clinical course grade.

Level 3

Unsafe practice is an occurrence, student behavior, or pattern of behavior that compromises patient safety and results in high risk for harm, or actually harms the patient or others.

Level 3 unsafe practice requires initiation of the immediate suspension process (policy in College Catalog) whereby a student is not permitted to attend clinical. Level 3 unsafe practice is inconsistent with safe, competent client care, and results in high risk for harm, or actual harm.

Examples of Level 3 unsafe practice occurrences include, but are not limited to student:

- Breach of patient confidentiality or privacy;
- Display of violent behavior, angry emotional outbursts;

- Display of anxiety, stress, or behaviors that raise the risk for patient harm;
- Practice error or adverse event (i.e. medication, procedure, or treatment)
- Consistent display of inappropriate level of nursing knowledge, skill and/or ability to plan and deliver safe nursing care.

Level 3: Suspension Process

It is recognized that Level 3 unsafe practice can occur at any point during the clinical rotation and requires the clinical instructor to initiate the immediate suspension process. Level 3 unsafe practice is an occurrence, student behavior or characteristic that compromises patient safety and results in high risk for harm, or actually harms the patient or others.

Level 3 unsafe practice is inconsistent with the ANA Code of Ethics and places the client at unacceptable risk for harm or actually causes harm.

When level 3 unsafe nursing practice is observed, or reported by another:

The clinical instructor:

1. Documents in detail a written report of the unsafe practice case and circumstances, setting out the name of the student, the alleged facts, a description of the unsafe nature of the practice, and grounds warranting suspension, including names and evidence from witnesses, if applicable.
2. Advises the student that the suspension process has been initiated.
3. Discusses with the student the incident that lead to the suspension process.
4. Meets to discuss the situation with the course lead, Program Chair
5. Provides student and Program Chair with written documentation of information about the incident(s).

The student

- Discusses the situation with the clinical instructor.
- Leaves the clinical setting.
- Does not return to clinical practice.
- Waits to hear from the Program Chair who will contact the student within 48 hours to explain the process.

Records: All documentation of unsafe practice policy will be kept in the student's file found in Registrar's office.

Clinical Skills and Simulation Standards of Practice

The Skills and Simulation Lab is provided to all students in clinical nursing courses under the supervision of faculty, adjunct faculty, or Skills Lab Coordinator. The labs are designed to provide opportunities for students to learn and practice all of the clinical skills necessary for providing safe patient care. There is some formal teaching and more informal, practice hours. Students learn in a safe environment in groups or small practice sessions.

The labs are equipped with disposable supplies as well as electronic equipment utilized in patient care. Labs 213, 215 and 244 are equipped with flat screen TV's for videos and utilization of electronic

resources.

The lab is also utilized for Simulations that occur throughout all of the nursing courses.

The lab is also used for all physical assessment courses.

Many of the nursing courses provide simulation as a prerequisite for actual clinical time spent in the hospital. At The Christ College of Nursing and Health Sciences we consider the Skills labs to be a replica of the “patient environment.” As such,

- **There is NO eating drinking or sitting and reclining in the beds.**
- All cell phones should be turned to silent mode.
- All students are required to wear their name badges.
- During physical assessment lab hours students are paired up with another student for assessment practice.
- There is no specific dress code for the lab. Wear clothing appropriate for bending, stretching and moving about.

Lab Locations

- 213 Simulation room
- 215 Front
- 215 Back
- 243
- 244
- Various other locations are utilized at different points in the semester

The following guidelines are important for helping the student transition to a professional nursing role.

Physical and Emotional Requirements

Students are expected to participate in physical assessments of fellow students. Privacy curtains are provided and discretion is used in all courses. Students may experience emotions during simulation activities with manikins or standardized patients.

The following skills are required:

- Mobility Physical ability, flexibility, strength
- Motor Skills - Coordination and dexterity
- Comprehension- Ability process information and perform calculations
- Tactile - Use of touch
- Hearing - Use of auditory sensations
- Vision - Use of sight
- Critical Thinking - Ability to problem solve
- Communication - Speak, read and write and use English language effectively.
- Behavioral - Emotional and mental stability

Safety

Personal safety of the student is essential. It is the student’s responsibility to familiarize themselves with the operation and function of the beds and over the bed tables.

- Do not lean on tables
- Do not sit on backs of chairs or beds
- Report broken or unsafe equipment to Simulation and Skills Academic Lab Coordinator
- Take precautions to prevent injuries when uses sharps and needles.
- Report all injuries to Skills Lab coordinator
- Injured or ill students will be transported to the Emergency Department.
- Students are NOT PERMITTED to practice sticking each other with needles or IV syringes. Nor are they permitted to check blood sugar via the Accucheck machines.
- Students may use their personal laptops or electronic pads in the lab.

Personal Items

There are no storage facilities in the labs. Students may leave their backpacks on chairs or on the floor. The lab is not responsible for lost or stolen items. Items left behind will be turned into the front desk. Students are advised to write their names on phones, laptops, bookbags and stethoscopes.

Infection Control

- Students with fevers or infections should not come to the lab.
- Students are expected to perform handwashing prior to interacting with the manikins. Hand sanitizers are available in the lab.
- All equipment in the lab, including the beds and bedside tables is wiped down on a regular basis with disinfectant wipes.

House Keeping

- Prior to leaving the lab students are asked to throw used disposable items in the trash and to place all manikins back in the beds in good alignment. Look at the lab as your patient's room, leave it looking neat, orderly with beds in low position and two side rails up.
- Scheduling practice hours

Scheduling

- Skills labs are open for practice during certain hours each day of the week.
- Multiple courses utilize the labs for a great deal of the time during the week.

STUDENT HEALTH POLICIES

Pre-entrance medical records and completion of medical requirements are mandatory.

The Department of Nursing works in collaboration with the Employee Health Department of The Christ Hospital Health Network. Through this partnership, students are able to obtain a physical examination, drug screening, immunizations, yearly flu vaccines, yearly TB testing, and health screening requirements. Students pay a onetime fee for this service. This fee is included in tuition costs.

Students must bring all vaccination and health records to Employee Health of The Christ Hospital Health Network for entry into the system.

For more information about what is required, [click here](#) to access Compliance Bridge and search **Clinical Requirements**. Additional testing or immunizations may be required per clinical agency policy. It is the

student's responsibility to schedule and pay for the immunizations and provide proof of having met the immunization requirements. Additional testing at the student's expense may also be required if there is suspicion of drug or alcohol use. IF one or more of the health requirements are not complete by the due date, the student will be suspended from class and clinical.

Illness in the Classroom, Lab and Clinical Settings

(Reviewed 8.3.15, 8.16, 6.25)

See [College Catalog](#) for guidance.

Medical Situations

- A. Any condition that impairs functioning and/or for which the student is currently being treated is to be individually evaluated by the faculty member, BSN Program Chair, or designee in regard to the student's ability to give patient care.
1. Infectious Conditions: If a student has symptoms of an acute communicable disease, arrangements are to be made for the student to be taken home or, if necessary, admitted to the hospital.
 2. Surgery: If elective surgery is performed, upon return the student must be able to assume his or her full responsibility the first day of the return to class or clinical. A medical release submitted to the BSN Program Chair or designee, permitting a return to the College is required.
 3. Hospitalization: Students who have been assigned to clinical areas and who have been hospitalized must provide a medical release to the BSN Program Chair or designee, upon return to class or clinical.
 4. Illness and Convalescence: Any student under the care of a physician for an illness or condition that prevents attendance and/or full participation in the clinical experience is required to have a medical release signed by a physician stating that the student is capable of performing clinical activities with or without limitations. The medical release provides data for a final decision on a student's return to clinical by the faculty and BSN Program Chair or designee.

Medical Releases

- A. Medical Release **Without** Limitations: A release stating that the student may return to clinical duty without limitations implies that, in the physician's opinion, the student's performance and function will not be a safety risk to patients, healthcare members or other students.
1. The release, signed by the student's physician should state: "(Student name) may return to clinical without limitations on (date)."
 2. A medical release without limitations is required for a student to return to full participation in clinical activities.
- B. Medical Release **With** Limitations: A medical release that includes limitations should have a detailed listing of the limitations and the timeframe for the limitations.
1. The student's return to full participation in clinical activities may be denied.
 2. It will be up to the discretion of the clinical faculty and the BSN Program Chair or designee, to decide if the restrictions will interfere with patient safety and student safety and performance.

Blood Borne Pathogen Exposure Procedure

Assessment and treatment for needle stick occurrences at The Christ Hospital will be provided by The Christ Hospital Disability Management Department and follow The Christ Hospital Health Network Blood and Body Fluid Exposure Protocols.

Assessment and treatment for needle stick occurrences at an outside agency should be in accordance with agency policy.

Student Injury

In the event a student sustains an injury during the clinical experience:

1. The student should report injury to clinical faculty.
2. The policy at the clinical agency for reporting such injuries should be followed.

Financial Responsibility

The College does not assume financial responsibility for illnesses and injuries experienced by students in conjunction with their clinical experience.

- A. Visits to the emergency room for illness or injury occurring while in the role of student will not be covered by the hospital or the College. The student will be billed for services and Workers' Compensation will not be applied.
- B. Assessment and treatment for needle stick occurrences at an offsite clinical facility will be provided according to the protocols of that specific facility.
- C. Costs for expensive or prolonged treatment or laboratory diagnostic work will not be assumed by the College.
- D. The student shall assume the cost of routine laboratory work taken for any condition existing prior to or at the time of entrance to the College.
- E. Any dental work incurred is at the student's expense.

OHIO BOARD of NURSING LICENSURE PROCEDURES

Licensure Requirements

- A. Prospective students are advised that, when applying for the state licensure examination, there is a requirement to indicate whether or not they have ever been convicted of a misdemeanor, felony or diagnosed with and/or treated for bipolar disorder, schizophrenia, paranoia, or any other psychotic disorders.
- B. A positive response to this question may disqualify the candidate for licensure.
- C. The Ohio Board of Nursing (OBN) makes all eligibility decisions.

Application Process

(updated 12.12.15, 8.16, 8.17)

- A. Completion of the Application - Use **College Code: US20510000** - THE CHRIST COLLEGE OF NURSING AND HEALTH SCIENCES - BSN
 1. The application for Nurse Licensure by Examination in Ohio is available on the OBN website at Licensure and Renewal.
 2. All license and certificate applications must be submitted online.

3. You will be required to register with a new user account profile the first time you apply for a license or certificate in Ohio.
https://elicense.ohio.gov/OH_CommunitiesLogin
4. No paper applications or payment will be accepted.
5. Submit the completed application electronically to the Ohio Board of Nursing (OBN) as required by the Board with the applicable licensure fee, as set forth in Section 4723.08 of the Revised Code
 - a. Costs associated with the application are subject to change and are the responsibility of the student.

B. Completion of Background Check

1. Submit to FBI (federal) and BCI (civilian) background checks that result in findings that the applicant has not been convicted of, pled guilty to, or had a judicial finding of guilt for any violation set forth in Section 4723.09 of the Revised Code;
2. The Ohio Revised Code requires those applying for a license or certificate issued by the Ohio Board of Nursing (Board) to submit fingerprints for an FBI (federal) and BCI (civilian) criminal records check completed by the Bureau of Criminal Identification and Investigation (BCI). Locate information regarding the Background Check at
<http://www.ohioattorneygeneral.gov/Services/Business/WebCheck/Webcheck-Community-Listing>.
3. The Board cannot, by law, complete the processing of your application until the Board receives **BOTH** background check reports.
4. The applicant must request that **BOTH** reports be sent to the Board **DIRECTLY** from BCI, or they will not be accepted by the Board.

C. Completion of Pearson Vue Registration

1. Complete the registration process for examination required by Pearson VUE, the testing service that administers the NCLEX Exam. Visit <http://www.pearsonvue.com/nclex/> to review the most up to date candidate bulletin.
2. The NCLEX examination fee is approximately \$200. Costs associated with the NCLEX-RN® are subject to change and are the responsibility of the student.

D. Completion of Program Requirements

1. After the completion of all program requirements have been verified, the Department of Nursing will submit the Certification of Program Completion Letter. The Department of Nursing will submit this Letter of Completion within four weeks of graduation.

The name on the program completion letter must match the name on your application for licensure. The name on your diploma is the name that we use on the completion letters. Make sure that you use the same name on your application.

E. Authorization to Test (ATT)

1. After all applications and fees have been received, the student will receive an Authorization to Test (ATT) number.

2. This number is used to register for a test date with Pearson VUE.

F. Accommodations for the NCLEX-RN® Exam

1. In accordance with requirements of the [National Council of State Boards of Nursing \(http://www.ncsbn.org/\)](http://www.ncsbn.org/), the OBN has developed a procedure for maintaining the psychometric integrity of the examination while responding to the special needs of applicants with disabilities who are eligible for admission to the NCLEX-RN® exam.
2. Disabilities should be brought to the Board's attention as early as possible (6 months preferred) before the time the applicant wishes to test.
3. All correspondence and inquiries should be addressed to the Operations Manager at the Ohio Board of Nursing, 77 South High Street, Columbus, OH 43266-0316, 614-466-9800.

- G. If you plan to become licensed in a state other than Ohio, you will need to follow that state's guidelines for licensure but the NCLEX registration/examination is the same for all states.

Appendix A: Definition of Terms

(updated 8.15, 8.17, 8.18)

The following glossary outlines definitions for terms not previously addressed in either the Philosophy and/or Conceptual Framework of the Nursing Program. As a constantly evolving document, additions, clarifications, and revisions are to be expected.

1. **Accountability:** The state of being answerable for one's actions. Professional nurses and students answer to themselves, the patient, the profession, the employing institution, and society for the effectiveness of nursing care performed.
2. **Advanced Standing:** (updated 6.17) Academic credit granted for prior nursing courses or transfer credit awarded by a program for a student's prior clinical experience and coursework.
3. **Capstone:** Active learning project that is ongoing throughout a course of study that requires significant effort in planning and implementation, and culminates in a final paper and presentation (Duke Law, 2013)
4. **Clock Hour:** Allotted time for the presentation of and activities used to address theoretical content. A clock hour is a 50-minute period.
5. **Clinical Course:** A nursing course that includes clinical, lab, and/or observation experiences designed to meet course outcomes.
6. **Clinical Evaluation Categories:** (updated 8.3.15)
 - a. Satisfactory: Student requires minimal cueing or guidance to demonstrate achievement of student learning outcome.
 - b. Needs Improvement: Student needs consistent cueing or guidance to demonstrate achievement of student learning outcomes
 - c. Unable to Evaluate: No opportunity to demonstrate achievement of student learning outcomes.
 - d. Unsatisfactory: Student has not met minimum requirements to meet the student learning outcomes.
4. **Clinical Hours (Total):** Time within a clinical nursing course which incorporates the following experiences as defined by the Ohio Board of Nursing (OBN): (updated 8.3.15) OAC 4723-5-01, effective 02/01/2012
 - a. Clinical Experience (Direct Care): an activity planned to meet course objectives or outcomes and to provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the supervised delivery of nursing care to an individual or group of individuals who require nursing care.
 - b. Laboratory Experience (Indirect Care): an activity planned to meet course objectives or outcomes and to provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the performance of nursing activities or tasks in a simulated clinical environment, which may include the opportunity to practice nursing skills through the reproduction of life-like health care experiences using computerized models and simulator programs.
 - c. Observational Experience: faculty assigned learning experiences during which a student observes the delivery of care to patients but does not participate in providing nursing care.
7. **Clinical Immersion:** A curricular model in which a student gains increasing competency and

accountability throughout a nursing program of study, culminating in immersion in the clinical arena

during senior year (Diefenbeck, Plowfield, & Herrman, 2006).

8. **Clinical Instruction:** Faculty planned learning opportunities for students during direct and indirect care experiences.
9. **Clinical Integration Seminar:** Didactic seminars that accompany clinical immersion experiences. These seminars help students to synthesize concepts from the perspective of their clinical immersion experiences.
10. **Clinical Intensive:** Senior year clinical experiences in which the student is immersed in the clinical setting for up to four days per week. The Clinical Intensive experience is accompanied each semester by the Clinical Integration Seminar.
11. **Clinical Judgment:** Interpretations and inferences that influence actions in clinical practice, impacting safety and quality of care. (Nielsen & Lasater, 2013)
12. **Clinical Agency/Facility/Site:** The entire location where the assigned direct or indirect care takes place.
13. **Communication Skills:** Consists of effective self-expression and exchange of information for meeting one's needs in the classroom and clinical setting.
14. **Community:** A segment of the external environment composed of individuals, families, and local and/or global groups.
15. **Competency:** The demonstration of the requisite knowledge, skills, attitudes and behaviors in the performance of a nursing activity.
16. **Competency Skills Testing:** Testing incorporated into a nursing course as a means of assessing a level of competency for identified skills as required by the course.
17. **Concept-based Curriculum:** A curriculum built around nursing concepts that provides the learner with an understanding of essential components of nursing practice without becoming saturated with content about specific disease processes and facts specific to each clinical specialty area. Links are created as concepts are applied to various practice arenas and situations. (Giddens, 2013)
18. **Conceptual Framework:** Key concepts and basic themes drawn from the philosophy of the nursing program, which form the basis for the curriculum.
19. **Continuity of Care:** Coordination of services to provide an uninterrupted provision of care to a patient through all phases of care.
20. **Course:** A group of related learning experiences which are directed toward achievement of specific student learning outcomes.
21. **Critical Thinking:** Active, purposeful, organized, cognitive process used to carefully examine one's thinking for critical analysis and synthesis of available information utilized in making appropriate clinical judgments based on evidence.

22. **Curriculum:** All theory components (classroom), clinical components (direct care), and laboratory

experiences (indirect care) that must be successfully completed for admission to licensure examinations.

23. **Evidence:** Information that supports or disputes a variety of scenarios in healthcare, for example the efficacy of treatment or the use of a diagnostic tool (Giddens, 2013)
24. **Evaluation Methods:** Evaluation of learning across courses may include but is not limited to use of the following methods: analysis of written work, comprehensive final examinations, direct observation of students in a variety of clinical areas, mid-semester and final evaluation conferences, return demonstrations, skill competency testing, standardized testing, student self-evaluation, and unit examinations.
25. **Guidance:** The act or process of assisting a student to achieve competent performance and/or successfully meet student learning (course)/program outcomes.
26. **Health Policy:** A form of public policy, decided upon by governments or other authorized entities, that is the result of choices and resource allocations made to support health-related goals and priorities (Giddens, 2013)
27. **Healthcare Informatics:** The science that encompasses information science and computer science, and supports the storage, analysis, and dissemination of healthcare information (Giddens, 2013)
28. **Interprofessional Healthcare Team:** The interdisciplinary healthcare team.
29. **Lifelong Learning:** The type of learning that is facilitated by active learning strategies such as problem-based or team-based learning (Rowles & Russo, 2009)
30. **Nurse Generalist:** A professional nurse capable of beginning practice in a variety of health care delivery settings.
31. **Outcome Assessment:** An ongoing and evolving system of processes and activities that assesses student learning through the curriculum and results in continuous improvement of student learning.
32. **Patient/Client:** The recipient of nursing care or services. May be individuals, families, groups or communities.
33. **Philosophy:** Beliefs about the nature of the individual, society or community, nursing, health, teaching, and learning.
34. **Preceptor:** A licensed nurse who meets Ohio Board of Nursing requirements, who provides supervision of a student's clinical experience at the clinical agency in which the preceptor is employed. A preceptor implements the clinical education plan to no more than two students at any one time and at the direction of an assigned faculty member.
35. **Program Goals:** Statements that identify the ends toward which the efforts of the program are directed.
36. **Quality Improvement:** Systematic and continuous actions which lead to measurable improvement in healthcare services and health status of targeted patient groups (United States Department of Health

and Human Services, 2013)

37. **Regulatory Environments:** The definition of the obligations and boundaries of nursing and healthcare practice, and the regulation and enforcement of these obligations and boundaries (AACN, 2008).
38. **Service Learning:** A hands-on experience in which the student provides service to assist a community or population while engaging in a reflective learning experience that meets student learning outcomes (National Service Learning Clearinghouse, 2013)
39. **Simulation:** (updated 8.17. OAC 4723-5-01, effective 04.01/2017): "Patient simulation" means the replication of a real-world patient in situ through accurate representations of patient cues and stimuli that a student is to observe, analyze, interact, and respond to with right nursing judgments and actions. The replication may be provided through the use or combination of low fidelity, mid- or moderate fidelity, or high-fidelity experiences.
- a. High fidelity means experiences using full scale computerized patient simulators, virtual reality or standardized patients that are extremely realistic and provide a high level of interactivity and realism for the learner.
 - b. Mid or moderate fidelity means experiences that are more technologically sophisticated, such as computer-based self-directed learning systems simulations in which the participant relies on a two-dimensional focused experience to problem solve, perform a skill, and make decisions, or which use mannequins that are more realistic than static low- fidelity ones and have breath sounds, heart sounds and/or pulses.
 - c. Low fidelity means experiences such as case studies, role-playing, using partial task trainers or static mannequins to immerse students in a clinical situation or practice of a specific skill.
40. **Skills/Simulation Lab:** An area provided for the enhancement of student learning through demonstration, practice, remediation, simulation, and evaluation of skills and assessment techniques.
41. **Student Learning Outcomes (Course Outcomes):** The cognitive, psychomotor, and/or affective knowledge, attitudes, skills and behaviors to be learned by a student upon completion of a course. They are also the culmination of all learning experiences for a particular course.
42. **Student Learning Outcomes (Program Outcomes):** The cognitive, psychomotor and affective knowledge, attitudes, skills and behaviors to be learned by a student upon completion of the program.
43. **Teaching Strategies:** A system of instructional processes designed to assist students to meet student learning outcomes towards the achievement of program outcomes.
44. **Unit:** A subdivision of a course.
45. **Virtual Reality:** the computer-generated simulation of a three-dimensional image or environment that can be interacted with in a seemingly real or physical way by a person using special electronic equipment (Oxford Dictionary, 2018).

Appendix B: BSN Program and Nursing Course Outcome Mapping *For students starting nursing course BEFORE Fall 2023*

(updated 8-2016)

4723-5-13 Curriculum for a Professional Nursing Program – summary reflecting internal consistency between program outcomes and course outcomes

Program Outcomes	Sophomore	Junior	Senior
1. Apply appropriate evidence to improve healthcare outcomes.	- NUR220: Health Assessment - NUR221: Nursing Skills: Concepts of Quality/Safety - NUR297: Professional Development Concepts - NUR298: Professional Development Concepts	- NUR305: Health & Illness Concepts across Lifespan I - NUR307: Concepts of Intellectual Inquiry - NUR309: Professional Nursing Concepts - NUR397: Professional Development Concepts - NUR311: Health & Illness Concepts across Lifespan II - NUR313: Concepts in Population Health - NUR398: Professional Development Concepts	- NUR410: Clinical Intensive I - NUR412: Clinical Intensive II - NUR497: Professional Development Concepts - NUR414: Clinical Intensive III - NUR416: Clinical Intensive IV - NUR498: Professional Development Concepts
2. Utilize healthcare informatics safely and accurately in the delivery of quality care	NA	- NUR305: Health & Illness Concepts across Lifespan I - NUR307: Concepts of Intellectual Inquiry - NUR311: Health & Illness Concepts across Lifespan II - NUR313: Concepts in Population Health - NUR398: Professional Development Concepts	- NUR410: Clinical Intensive I - NUR412: Clinical Intensive II - NUR497: Professional Development Concepts - NUR414: Clinical Intensive III - NUR416: Clinical Intensive IV - NUR498: Professional Development Concepts

3. Employ critical thinking and clinical reasoning to care for diverse populations	• NUR220: Health Assessment • NUR221: Nursing Skills: Concepts of Quality/Safety • NUR298: Professional Development Concepts	• NUR305: Health & Illness Concepts across Lifespan I • NUR307: Concepts of Intellectual Inquiry • NUR309: Professional Nursing Concepts • NUR397: Professional Development Concepts • NUR311: Health & Illness Concepts across Lifespan II • NUR312: Concepts in Leadership and Health Care Delivery • NUR313: Concepts in Population Health • NUR398: Professional Development Concepts	• NUR410: Clinical Intensive I • NUR412: Clinical Intensive II • NUR497: Professional Development Concepts • NUR414: Clinical Intensive III • NUR416: Clinical Intensive IV • NUR498: Professional Development Concepts

Program Outcomes	Sophomore	Junior	Senior
4. Lead the healthcare team in solving contemporary issues to improve patient outcomes	- NUR220: Health Assessment - NUR221: Nursing Skills: Concepts of Quality/Safety	- NUR305: Health & Illness Concepts across Lifespan I - NUR307: Concepts of Intellectual Inquiry - NUR311: Health & Illness Concepts across Lifespan II - NUR312: Concepts in Leadership and Health Care Delivery - NUR398: Professional Development Concepts	- NUR410: Clinical Intensive I - NUR412: Clinical Intensive II - NUR497: Professional Development Concepts - NUR414: Clinical Intensive III - NUR416: Clinical Intensive IV - NUR498: Professional Development Concepts
5. Collaborate with the interprofessional healthcare team to ensure quality and safety.	NUR298: Professional Development Concepts	- NUR305: Health & Illness Concepts across Lifespan I - NUR307: Concepts of Intellectual Inquiry - NUR309: Professional Nursing Concepts - NUR311: Health & Illness Concepts across Lifespan II - NUR312: Concepts in Leadership and Health Care Delivery - NUR313: Concepts in Population Health - NUR398: Professional Development Concepts	- NUR410: Clinical Intensive I - NUR412: Clinical Intensive II - NUR497: Professional Development Concepts - NUR414: Clinical Intensive III - NUR416: Clinical Intensive IV - NUR498: Professional Development Concepts

6. Demonstrate professionalism in the nursing role	• NUR220: Health Assessment • NUR221: Nursing Skills: Concepts of Quality/Safety • NUR297: Professional Development Concepts • NUR298: Professional Development Concepts	• NUR305 : Health & Illness Concepts across Lifespan I • NUR307: Concepts of Intellectual Inquiry • NUR309: Professional Nursing Concepts • NUR397: Professional Development Concepts • NUR311: Health & Illness Concepts across Lifespan II • NUR312: Concepts in Leadership and Health Care Delivery • NUR313: Concepts in Population Health • NUR398: Professional Development Concepts	• NUR410: Clinical Intensive I • NUR412: Clinical Intensive II • NUR497: Professional Development Concepts • NUR414: Clinical Intensive III • NUR416: Clinical Intensive IV • NUR498: Professional Development Concepts
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Program Outcomes	Sophomore	Junior	Senior
7. Apply an understanding of health policy and regulatory environments in patient care.	• NA	• NUR307: Concepts of Intellectual Inquiry • NUR312: Concepts in Leadership and Health Care Delivery • NUR398: Professional Development Concepts	• NUR410: Clinical Intensive I • NUR412: Clinical Intensive II • NUR497: Professional Development Concepts • NUR414: Clinical Intensive III • NUR416: Clinical Intensive IV • NUR498: Professional Development Concepts

8. Pursue life-long learning and service to meet the needs of a dynamic society	• NUR220: Health Assessment • NUR221: Nursing Skills: Concepts of Quality/Safety • NUR297: Professional Development Concepts • NUR298: Professional Development Concepts	• NUR305: Health & Illness Concepts across Lifespan I • NUR307: Concepts of Intellectual Inquiry • NUR397: Professional Development Concepts • NUR311: Health & Illness Concepts across Lifespan II • NUR312: Concepts in Leadership and Health Care Delivery • NUR313: Concepts in Population Health • NUR398: Professional Development Concepts	• NUR410: Clinical Intensive I • NUR412: Clinical Intensive II • NUR497: Professional Development Concepts • NUR414: Clinical Intensive III • NUR416: Clinical Intensive IV • NUR498: Professional Development Concepts
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BSN Program and Nursing Course Outcome Mapping *For students starting nursing course during or AFTER to Fall 2023*

BSN Program Outcome	Sophomore	Junior	Senior
Integrate Evidence-Based Practice in clinical judgment to address healthcare needs of diverse patients and populations.	NUR 201: Introduction to the Essentials of Professional Nursing NUR 225: Nursing Foundation and Principles 1 NUR 226: Nursing Foundations and Principles II NUR CL 226: Nursing Foundations and Principles II Clinical	NUR 331: Medical-Surgical Nursing Across the Healthcare Continuum I NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical NUR 332: Medical-Surgical Nursing Across the Healthcare Continuum II NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR 339: Evidenced-Based Practice and Research Principles in Nursing NUR 340: Quality Improvement & Information Technologies in Nursing Practice NUR 315: Pharmacological Principles for Nursing Practice NUR 342: Mental Health Nursing Across the Lifespan NUR CL 342: Mental Health Nursing Across the Lifespan Clinical	NUR 421: Medical-Surgical Nursing Across the Healthcare Continuum III NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical NUR 422: Leadership & Management Development in Nursing Practice NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice NUR CL 447: Medical Surgical Nursing Across the Healthcare Continuum III Clinical NUR 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing NUR CL 463: Family-Centered, Pediatric, Maternity Nursing

BSN Program Outcome	Sophomore	Junior	Senior
		NUR 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical NUR 363: Medical-Surgical Nursing Across the Healthcare Continuum II NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical	and Population Health Nursing Clinical
Incorporate informatics and healthcare communication technologies as a member of the interprofessional healthcare team.	NUR 201: Introduction to the Essentials of Professional Nursing NUR 225: Nursing Foundation and Principles I NUR CL 226: Nursing Foundations and Principles II Clinical	NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR 339: Evidenced-Based Practice and Research Principles in Nursing NUR 340: Quality Improvement & Information Technologies in Nursing Practice NUR 315: Pharmacological Principles for Nursing Practice	NUR 421: Medical-Surgical Nursing Across the Healthcare Continuum III NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical NUR 422: Leadership & Management Development in Nursing Practice NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice

BSN Program Outcome	Sophomore	Junior	Senior
		NUR 342: Mental Health Nursing Across the Lifespan NUR CL 342: Mental Health Nursing Across the Lifespan Clinical NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical	NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice NUR CL 447: Medical Surgical Nursing Across the Healthcare Continuum III Clinical NUR 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing NUR CL 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing Clinical
Use clinical decision making based on a broad foundation of knowledge to provide nursing care to diverse populations across the lifespan.	NUR 225: Nursing Foundation and Principles 1 NUR 226: Nursing Foundations and Principles II NUR CL 226: Nursing Foundations and Principles II Clinical	NUR 331: Medical-Surgical Nursing Across the Healthcare Continuum I NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical NUR 332: Medical-Surgical Nursing Across the Healthcare Continuum II	NUR 421: Medical-Surgical Nursing Across the Healthcare Continuum III NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical NUR 422: Leadership & Management Development in Nursing Practice

BSN Program Outcome	Sophomore	Junior	Senior
		NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR 339: Evidenced-Based Practice and Research Principles in Nursing NUR 340: Quality Improvement & Information Technologies in Nursing Practice NUR 315: Pharmacological Principles for Nursing Practice NUR 342: Mental Health Nursing Across the Lifespan NUR CL 342: Mental Health Nursing Across the Lifespan Clinical NUR 351: Nursing Foundations and Principles & Introduction to Medical Surgical 1 NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical NUR 363: Medical-Surgical Nursing Across the Healthcare Continuum II	NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice NUR CL 447: Medical Surgical Nursing Across the Healthcare Continuum III Clinical NUR 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing NUR CL 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing Clinical

BSN Program Outcome	Sophomore	Junior	Senior
		NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical	
Integrate principles of leadership and management to promote a culture of safety and inclusion throughout healthcare systems.	NUR 201: Introduction to the Essentials of Professional Nursing NUR 225: Nursing Foundation and Principles 1	NUR 315: Pharmacological Principles for Nursing Practice NUR CL 342: Mental Health Nursing Across the Lifespan Clinical NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical	NUR 422: Leadership & Management Development in Nursing Practice NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice NUR CL 447: Medical Surgical Nursing Across the Healthcare Continuum III Clinical NUR 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing NUR CL 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing Clinical

BSN Program Outcome	Sophomore	Junior	Senior
Collaborate with the interprofessional healthcare team to provide holistic person-centered care.	NUR 201: Introduction to the Essentials of Professional Nursing NUR 225: Nursing Foundation and Principles 1	NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR 315: Pharmacological Principles for Nursing Practice NUR CL 342: Mental Health Nursing Across the Lifespan Clinical NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical	NUR 421: Medical-Surgical Nursing Across the Healthcare Continuum III NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical NUR 422: Leadership & Management Development in Nursing Practice NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice
Employ attributes and competencies of a professional nurse.	NUR 201: Introduction to the Essentials of Professional Nursing	NUR CL 331: Medical-Surgical Nursing Across the Healthcare Continuum I Clinical	NUR 421: Medical-Surgical Nursing Across the Healthcare Continuum III

BSN Program Outcome	Sophomore	Junior	Senior
	NUR 225: Nursing Foundation and Principles I NUR CL 226: Nursing Foundations and Principles II Clinical	NUR CL 332: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR CL 251: Nursing Foundations and Principles & Introduction to Medical Surgical 1 Clinical NUR CL 342: Mental Health Nursing Across the Lifespan Clinical NUR CL 363: Medical-Surgical Nursing Across the Healthcare Continuum II Clinical NUR 315: Pharmacological Principles for Nursing Practice	NUR CL 421: Medical-Surgical Nursing Across the Healthcare Continuum III Clinical NUR 422: Leadership & Management Development in Nursing Practice NUR 423: Population Health in Nursing NUR CL 423: Population Health in Nursing Clinical NUR 441: Role Transitions and Trends in Nursing Practice NUR CL 441: Role Transitions and Trends in Nursing Practice Clinical NUR 443: Clinical Judgement for Nursing Practice NUR CL 447: Medical Surgical Nursing Across the Healthcare Continuum III Clinical NUR 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing NUR CL 463: Family-Centered, Pediatric, Maternity Nursing and Population Health Nursing Clinical

BSN Program Outcome	Sophomore	Junior	Senior

Appendix C : Nursing Student Success Plan

Nursing Student Success Program and Remediation * *For students entering nursing courses in or after fall 2023* (7.23)

Nursing Student Success Plan

UNDER CONSTRUCTION – WILL BE UPDATED AFTER REVISIONS ARE COMPLETED.