University of Providence

Accelerated Bachelor of Science in Nursing Program

2025

Student Handbook

University of Providence

The Accelerated Bachelor of Science in Nursing (ABSN) program aligns curricular and learning activities with the Mission of the University of Providence (UP). The University continually and responsibly evaluates its operation and programs; the ABSN program participates in this evaluation process. The University offers students a foundation for actively implementing UP values and the teachings within the Catholic tradition; it serves students of all beliefs who wish to take advantage of its programs. The faculty and staff of the UP join with students in a cooperative and enthusiastic search for truth, so that students may develop:

- Character - have a positive impact on the world and to the communities in which they live and work, particularly by recognizing and accepting personal accountability to themselves, to society, and to God.
- Competence - further their ability to live full and rewarding lives by becoming competent working members of society who know the basics of their professional field and have access to future learning.
- Commitment - find meaning in life which enables them to participate effectively in society while transcending its limitations, by living according to their moral and religious convictions, as well as respecting the dignity and beliefs of other people.

The UP ABSN Student Handbook is an official communication, and as such, an extension of the policies and procedures of the University of Providence.

University of Providence Faith and Service
The University of Providence is a Roman Catholic institution sponsored by Providence Ministries. Founded by the Sisters of Providence, we continue the teaching ministry of Jesus Christ as an educational ministry of the Providence System. Our Providence Heritage inspires us to proclaim the love of God to all we serve and to instill in our students a special concern for the most poor and vulnerable of our society. Our Catholic Faith guides and informs all that we do at the University, as we minister to the educational and spiritual needs of a diverse student body representing many faith and cultural traditions.

Mission
As an expression of the teaching of Jesus Christ, the mission of the University of Providence is to provide students with the opportunity to obtain a liberal education for living and for making a living.

Service
At the Sister Providencia Center for Service Engagement, we firmly believe that every act of service is an exchange. The individuals we serve have many things to teach us. We help students seek out these learnings from their sacred encounters and apply them to their lives.

Campus Ministry
Campus Ministry at the University of Providence provides students with opportunities to experience the Provident love of God and to share this love with others through worship, retreats, faith sharing, and other opportunities for spiritual growth.

History and Tradition
The University of Providence continues the 165-year heritage of Catholic education in the tradition of the Sisters of Providence, who opened their first school in the Montana Territory in 1864.

Accreditation and Affiliation
UP is a private, Catholic University, incorporated under the laws of the State of Montana. The University has been empowered to grant diplomas and confer academic honors and collegiate degrees since 1932. The University is sponsored by the Sisters of Providence and operates within the jurisdiction of the Catholic bishop of Great Falls-Billings. UP is accredited by the Northwest Commission on Colleges and Universities, an institutional accrediting body recognized by the Council for Higher Education Accreditation and the United States Department of Education.

The ABSN program is accredited by the Commission on Collegiate Nursing Education (CCNE). Comments can be directed to the CCNE staff at the following address: Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750 Washington, DC, 20001.

UP has approval to offer a Bachelor of Science in Nursing (BSN) degree by the Montana Board of Nursing.

Accelerated Bachelor of Science in Nursing (ABSN) Program
The ABSN program is a Bachelor of Science in Nursing Degree pre-licensure program offered to second degree students seeking a Registered Nursing license to practice as a Registered Nurse.

The ABSN program is offered to individuals with a Bachelor's degree in any major, who are seeking preparation in professional nursing at the Baccalaureate level. Graduates of the ABSN program are eligible for licensure as a Registered Nurse in any state in the U.S. The ABSN program is for individuals with a Bachelor's degree in any major who also meets the pre-requisite course requirement.

UP School of Nursing Mission
The program's mission is "to prepare graduates for accountable and professional nursing practice that is relationship-based, vigilant, theory-guided, and grounded in the best possible evidence."

Conceptual Framework
The program's mission is supported by a conceptual framework consisting of the following constructs:

Relationship-Based Care
The ABSN program honors the patient and family as the center of the care delivery team. In relationship-based practice, excellent patient care outcomes are achieved through collaborative and sacred relationships among the patient, his or her family, and the healthcare team.

Vigilance
Nursing vigilance is reflected in unwavering attention to both the patient and the care delivery environment. This vigilance protects patients from harm and ensures their safe passage as they journey through the continuum of their care experience.

Professional Accountability
The professional nurse is accountable for nursing outcomes of care delivery by ensuring vigilant care processes, maintaining expertise in practice, and creating healing care environments. The professional nurse is answerable for practice that consistently meets established standards. This accountability includes the steadfast pursuit of opportunities to coach and mentor other members of the inter-professional healthcare team. Nurses are at all times responsible for their own self-care, professional development, and proactive career management.

Change
Constant, complex change is the expected norm and sets the context for contemporary life in healthcare delivery. Professional nurses thrive in and are prepared to lead and manage positive change in improving health, with patients, colleagues, and communities.

Program Goal
A graduate of the program will be a leader in healthcare. Graduates will be excellent communicators, clinicians, and leaders of change. A graduate is a lifelong learner and will enhance the nursing profession by providing nursing evidence-based practice that is population-centered, as well as grounded in spiritual, ethical, and compassionate care.

ABSN Program Themes

Compassion Ethics & Spirituality	Patient & Family Centered Care
Leadership & Effective Advocacy	Population & Community Health
Transforming Healthcare	Safety & Quality Outcomes
Professional Accountability	Evidence Based Practice
Reflective and Lifelong Development	

ABSN Program Outcomes

A graduate of the ABSN program will be a leader in healthcare. Graduates will be excellent communicators, clinicians, and leaders of change. A graduate is a life-long learner and will enhance the nursing profession by providing evidence-based nursing practice that is population centered, as well as grounded in spiritual, ethical, and compassionate care. UP's nursing curriculum is built to respond to the rapidly changing health care system, as well as to student's needs. The graduate of the UP ABSN program is prepared to:

1. Integrate a compassionate and ethical understanding of the human experience into nursing practice using the foundations of a liberal arts education.
2. Apply leadership concepts, skills, and decision-making to engage healthcare teams in creating, promoting, and managing safety and quality outcomes.
3. Apply nursing practices that are informed by research, evidence-based practice and innovation to optimize health.
4. Utilize information technology to communicate, mitigate errors, and make improved clinical decisions related to the care of diverse populations.
5. Advocate to influence change in legal, political, social, and economic factors that transform healthcare delivery.
6. Collaborate with the inter-professional team to improve patient/family outcomes and the work environment.
7. Provide compassionate, spiritual, ethical, and culturally appropriate care across the lifespan and the continuum of care.
8. Practice preventive care, health promotion, and disease intervention across care settings for self, individuals, families, the community, and populations.
9. Assume professional accountability to uphold the standards of nursing practice as defined by the Nurse Practice Act (in the state in which the nurse practices) and the ANA Code of Ethics.
10. Demonstrate reflective nursing practice.

UP Bachelor's Degree Core Requirements

The ABSN program requires students to complete a holistic admissions process as well as pre-requisites. Some students may be required to meet University core requirements. Core requirements are met by two University courses and content within the Nursing courses. Core requirements are waived for students with a Bachelor's degree in another field as per University policy. The Registrar reviews all transcripts and will make that determination. Core requirements for the Baccalaureate degree can be reviewed on the University website.

ABSN Nursing Courses
Students are required to have a Baccalaureate degree in another field prior to being admitted to the nursing program. Please refer to the application website for specific details about the pre-requisite courses and scholastic measurements required for the ABSN program. **Information on course progression can be found in Appendix A. ABSN nursing course descriptions can be found in Appendix H.**

After acceptance into the ABSN program, the student will progress, with a cohort, to graduation in three semesters. Each class must be completed successfully in order to progress in the curriculum. **Courses are offered in an 8-week format, with 3 classes in each 8 week block.**

Table 1. ABSN courses showing the Program of Study for Spring semester start.

Course	Course Title	Link to Program Outcomes	Didactic Credits	Clinical Credits
SEMESTER #1 1ST 8 weeks				
NRS-PL 313	Nursing Practice Fundamentals	1, 3, 5, 9, 10	2	2
NRS-PL 376	Pathophysiology and Pharmacology Concepts I	1, 2, 4, 6, 7, 8, 10	3	
NRS-PL 370	Introduction to Professional Nursing	4, 6, 9	1	
SEMESTER #1 2ND 8 weeks				
NRS-PL 372	Nursing Concepts I	3, 4, 10	2	2
NRS-PL 412	Nursing Ethics and Spirituality	1, 7, 10	3	
NRS-PL 378	Pathophysiology and Pharmacology Concepts II	1, 2, 4, 6, 7, 8, 10	3	
SEMESTER #2 1ST 8 weeks				
NRS-PL 430	Med-Surg II	1		3
NRS-PL 423	Introduction to Nursing Informatics	2, 3, 6	2	
NRS-PL 410	Evidence Based Nursing Practice	1, 3, 5, 6, 7, 8, 10	3	
SEMESTER #2 2ND 8 weeks				
NRS-PL 374	Specialty Concepts I	1, 3, 5, 6, 8, 9, 10	3	
NRS-PL 421	Nursing Leadership: Fostering Quality and Safety in Organiz.	1, 3, 5, 6, 7, 8, 10	3	1
NRS-PL 414	Population Health	1, 3, 4, 5, 7, 8	3	
SEMESTER #3 1ST 8 weeks				
NRS-PL 474	Nursing Concepts III	1, 2, 3, 4, 5, 6, 7, 8, 9	3	
NRS-PL 440	Clinical Concepts II	1, 3		3
NRS-PL 425	Health Promotion in Nursing	5, 6, 7, 8	3	
SEMESTER #3 2ND 8 weeks				
NRS-PL 417	Global Perspectives in Healthcare	3, 5, 7, 8	2	
NRS-PL 450	Transition to Nursing Practice	1, 2, 3, 4, 6, 7, 8, 9, 10		6
NRS-PL 495	Senior Seminar	1, 2, 3, 4, 5, 6, 7, 8, 9, 10		1

Admission and Enrollment

The ABSN program is designed to prepare students for work within the complex changing healthcare environment. Students in the ABSN program are expected to develop critical-thinking and communication skills, in addition to receiving clinical education in clinics, community settings, and hospitals. The foundation of the ABSN degree is a liberal arts education and includes classes in the humanities, social sciences, basic sciences, ethics, and nutrition.

Academic Advisors

Once students are formally accepted to the ABSN program, they are assigned a faculty advisor who will work with them until graduation. Communication between the advisor and student can occur face-to-face, via the telephone, virtually, and/or by email. Students are highly encouraged to confer with the nursing advisor if any academic problem, conflict, or concerns arise. The faculty advisor also works with the ABSN Program Director and/or Dean of the School of Health Professions when consultation is needed.

Bachelor's Degree Requirements

Completion of 120 semester (college level) credits is required to earn a Bachelor's degree. This includes nursing courses (54 semester credits) and pre-requisites (18 semester credits).

Tuition and Fees

Tuition and fees information are updated regularly and are available on the University Website.
In addition, students in the ABSN will need to purchase/obtain other educational items including:
- Computers
- Educational Software
- Course Textbooks
- Health Insurance
- Health Safety and Immunization Requirements
- Uniforms and Footwear
- Clinical Supplies (as defined by each course)
- Transportation to/from Clinical Sites

Tuition each semester is due no later than the first day of classes for that semester. Students must pay the balance on their accounts or have a payment plan set up to pay their tuition by the first day of classes. For additional information, contact the Student Accounts Office at (406) 791-5202.

Payment Plans

Payment plan information is provided within your invoice at the beginning of each semester. Payment plans have an enrollment fee of $45.00 per semester; it will need to be set up each semester you plan to utilize them. Information regarding payment plans can be found on our website under Financial Services.

Refunds

Tuition and Fees are nonrefundable after the first day of class.

Financial Aid
Students who are interested in applying for federal student aid will need to complete the Free Application for Federal Student Aid form (FAFSA), available at https://studentaid.gov/h/apply-for-aid/fafsa. The required school code for the University of Providence is 002527. Students must be enrolled in 6 or more credits (half time) to be eligible to use Federal Student Loans. For additional information about financial aid, contact the UP Financial Aid Office at (406) 791-5232.

Grants
The FAFSA application determines a student's eligibility for federal grant funding. Examples of grants include:
- Federal Pell Grant is a grant for undergraduate students who have not already earned a Bachelor's degree. Students enrolled in the ABSN program are not eligible for a Federal Pell Grant as the regulation requires that a student must be seeking a first Bachelor's degree for eligibility.
- Federal Supplemental Educational Opportunity Grant (SEOG) is a grant for exceptionally needy undergraduate students. This is a first-come, first-served fund. The University gets limited funding each year. The SEOG award is limited to students who have a 0 EFC and have completed the FAFSA early.

Financial Aid Warning and Suspension
Undergraduate students will be evaluated at the end of each semester to ensure they are making satisfactory academic progress toward their degrees. In order to make satisfactory academic progress and remain in good financial aid standing, students must maintain a cumulative GPA of at least 2.0 and must pass at least 67% of the credits attempted. 'W' grades will be counted in attempted credits and may affect your financial aid standing. Students who fail to meet either the GPA or completion requirement will be placed on Financial Aid Warning (1st offense). No appeal is necessary with a status of Warning. If a student falls below the standard in a consecutive semester, while on Warning, he/she will be placed on Financial Aid Suspension. A Financial Aid Suspension does not rectify itself with time away from the institution.

University Financial Aid Appeal Process
A Financial Aid Suspension may be appealed for extenuating circumstances only. Consideration will be given to extenuating circumstances beyond the student's control (e.g., serious personal illness, injury, the death of an immediate family member, or other extreme duress). To appeal a suspension, the student is required to prepare a clearly written statement describing the circumstances leading to suspension and the student's plan for success in future semesters. Documentation to support the appeal, such as a letter from a physician, obituary notice, etc. must accompany the written statement. The appeal will be reviewed by the appeal committee. The student will be notified in writing of the committee's decision. The decision of the committee is final.

ABSN Program Application Requirements
- Must have a Bachelor's degree in another field. All pre-requisites must be completed by June 15th of application cycle.
- Completion of the Application for Admission as an "ABSN student."
- Submission of official transcripts to the UP Registrar's office *for every college or University attended*
  - Failure to submit official transcripts from every college or University attended may result in the application not being processed for review.

Admission, Academic Progression, and Graduation

Any applicant or student who seeks accommodation prior to or immediately after enrolling in the nursing programs must also request an assessment of the types of reasonable accommodation needed.

Applicants who disclose a disability are considered for admission if they are otherwise qualified so long as such accommodation does not significantly alter the essential requirements of the curriculum.

Core Performance Standards for Admission, Academic Progression, and Graduation

The goal of the ABSN program is to prepare every student to think critically, and practice nursing competently and compassionately in rapidly changing practice environments. The program curriculum is designed to build nursing knowledge, enhance nursing practice and patient safety, foster professional integrity, and ultimately improve the health outcomes of patients, families, and communities across the continuum of care.

Certain functional abilities are essential for the delivery of safe, effective nursing care during classroom and clinical educational activities. Therefore, the faculty has determined that certain *Core Performance Standards* are requisite for admission, progression, and graduation from the nursing programs. **These standards can be found in Appendix B.**

Students with documented disabilities may request reasonable accommodations for performance of classroom or clinical activities. **Students seeking accommodations should contact the Director of Student Support within the UP Academic Success Center**. Requests should be made upon acceptance into the program. Every effort is made to provide accommodations to allow students to be successful. Not all requests for accommodations can be met due to required course outcomes and the needed nursing competencies for effective and safe patient care. All Core Performance Standards must be met, with or without accommodations.

If you have questions or concerns about your ability to meet the technical standards with or without accommodation, or if you would like to arrange reasonable accommodation, you should contact Disability Services.

Applicants who disclose a disability are considered for admission if they are otherwise qualified so long as such accommodation does not significantly alter the essential requirements of the curriculum and the educational program, or significantly affect the safety of patient care or others.

Not all accommodations can be met due to course outcomes and the necessary nursing competencies.

Registration for Courses

Once students are accepted to the ABSN program, they may register for their courses. Once registered for classes, tuition and fees are assessed and students will receive an invoice. Students are responsible for paying each semester's tuition and fees or making an approved payment arrangement by the due date. Students are also responsible for completing all required documents and actions to accept financial aid to apply toward each semester's charges. All outstanding amounts resulting from nonpayment of tuition and fees are the responsibility of the student. Withdrawal from school, officially or unofficially, will not cancel any financial obligation already incurred. Additionally, failure to pay all financial obligations may result in debts being turned over to a collection agency.

Collection costs, including attorney fees and other charges necessary for collection of any amount due, will be added to the student's account balance.

Students may request an incomplete in a course and will be bound by the University's policies about completing the course. Students who have an incomplete in a course and wish to register for a course that requires the incomplete course as a pre-requisite must finish and receive a final grade for the course before they will be allowed to register for sequential nursing courses.

Student Participation in Governance
Once accepted to the ABSN program, students have the opportunity to participate in governance through the Student Governance Committee. A faculty representative from each BSN track is available as a liaison between the students and faculty. Student representatives from each track represent their programs. Meetings occur each semester and on an as-needed basis. The faculty representatives will arrange for a Microsoft Team's meeting for the students on an agreed upon date/time. A standing agenda for each meeting includes these topics:
- Didactic and clinical experiences
- Program and curriculum changes
- Student recruitment and orientation
- Student retention and graduation
- Faculty update report
- Other

Academic Policies
Academic Polices of the University of Providence can be found in the University of Providence catalog.

ABSN Grading Requirements and Grading Scale
Final grades for each course can be obtained by students one week after the last day of the semester. Grading timelines for each course will follow the University's grading schedule. Please contact the UP Registrar's office for additional information. In order to pass a course with a clinical component, students must have a passing grade in both the clinical and the didactic portion of the course. Students who fail either element will not pass the course.

Nursing Program Grading Scale	University Grading Scale
A = 92-100%	A = 90-100%
B = 83-91%	B = 80-89%
C = 75-82%	C = 70-79%
D = 66-74% ***Course Failure	D = 60-69%
F = 65%-below ***Course Failure	F = 59%-below ***Course Failure

Minimum Grade for Progression in Nursing Courses
- A minimum grade of "C" is required in all *nursing* courses.

Minimum Grade for Progression in Non-Nursing Courses
- *Non-nursing* courses are subject to the grading scale of the University. Refer to the UP Student Handbook or your course syllabus for details.

Theory/Lecture (Didactic) Grading
The specific objective to be attained by the student and the method of calculating the final course grade is written in each course syllabus. Students are responsible for reading each course syllabus to apprise themselves of the particular objectives and grading system for each course.

While the overall course grade may consist of exam points combined with other course assignment points and/or extra credit points, the average of the designated course exam and quiz scores must be at least 75% before other scores are added to determine the final grade for the course. This 75% average will be calculated by averaging the scores for all course exams including standardized tests identified as exams. Failure to obtain an 75% average for course exams will result in course failure regardless of the number of points earned for other course activities.

Clinical Grading
A passing clinical grade of at least 75% is expected. Students are required to accomplish satisfactory completion of clinical component regardless of exam average for successful completion of the course.

Reviewing Exams with Students
Class Review:
- Benchmark exams such as ATI with proprietary trademarks will not be reviewed in class.
  The ATI Remediation Instructions can be found in Appendix I.
Individual review:
- The student may also review completed exams with the faculty during scheduled office hours or by appointment.

Exam Security
To ensure the security and integrity of the exam process, an in-person proctored experience will be required for various examinations. You will be informed ahead of time, primarily by the course syllabus about in-person proctored exams and the method of proctoring that will occur. For specific exams, you will be required to download Respondus on your personal computer. Instructions will be provided to you per your course syllabus.

Academic Dishonesty Disciplinary Action
Students should exhibit high standards of academic conduct. All acts of dishonesty in academic work constitute academic misconduct. Violations in the following will result in disciplinary action up to and including dismissal from the program.

Cheating
Use or attempted use of unauthorized material or the work of another student in any academic assignment, paper, or examination.

Plagiarism
Plagiarism is defined as the act of presenting someone else's work as one's own. This encompasses the unauthorized and unacknowledged utilization of phrases, sentences, paragraphs, ideas, illustrations, drawings, photographs, or computer programs belonging to another individual. Plagiarism can occur through the reproduction of exact or nearly exact words without proper quotation marks, or by omitting citations altogether.

In the digital age, it is essential to recognize that the use of ChatGPT or similar AI programs to generate content without appropriate attribution also falls within the purview of plagiarism. Any form of intellectual property, whether human-generated or produced by AI, requires due credit and citation to maintain academic and ethical standards.

Clinical Misconduct

Clinical misconduct in the UP ABSN program refers to any inappropriate or unprofessional behavior exhibited by students during their clinical placements. This misconduct jeopardizes the integrity of the learning environment and compromises patient safety. Examples of clinical misconduct may include, but are not limited to:

1. **Violations of Professional Conduct**:
   - Behaviors inconsistent with established nursing standards and ethical guidelines.
   - Failure to maintain patient confidentiality and privacy.
2. **Inadequate Communication:**
   - Poor communication with patients, families, or healthcare team members.
   - Ineffective collaboration and teamwork during clinical assignments.
3. **Negligence in Patient Care:**
   - Failure to perform assigned nursing tasks competently and safely.
   - Inattention to patient needs, resulting in compromised care quality.
4. **Lack of Accountability:**
   - Avoidance of responsibility for one's actions or mistakes.
   - Failure to report errors promptly and transparently.
5. **Unprofessional Attire and Demeanor**:
   - Non-compliance with professional dress code standards.
   - Inappropriate behavior or attitude towards patients, peers, or clinical faculty.
6. **Failure to Follow Policies and Procedures:**
   - Disregard for established clinical protocols and guidelines.
   - Violation of safety procedures, putting patients or oneself at risk.
7. **Substance Abuse:**
   - Presence of alcohol or drugs in the clinical setting.
   - Impaired performance due to substance use.
8. **Plagiarism and Academic Dishonesty:**
   - Presenting others' work as one's own in clinical documentation.
   - Falsifying patient records or clinical assignments.

Addressing clinical misconduct is crucial to maintain the standards of professionalism and ethical behavior expected in nursing practice. Consequences for clinical misconduct may range from counseling and remediation to more severe actions, such as dismissal from the nursing program, depending on the severity and recurrence of the behavior. It is essential for students to be aware of and adhere to the program's code of conduct, as well as to actively participate in ongoing professional development to ensure a safe and effective learning environment for all stakeholders.

Violations of the Code of Ethics (refer to the [American Nurses Association Code of Ethics](#))
Violations of the Code of Ethics in the UP ABSN program encompass behaviors that deviate from the established ethical standards and principles integral to the nursing profession. Such misconduct undermines the foundation of ethical nursing practice and jeopardizes the trust placed in healthcare providers. Examples of clinical misconduct related to violations of the Code of Ethics may include:

1. **Lack of Patient Advocacy:**
   - Failure to prioritize and advocate for the best interests and well-being of patients.
   - Neglecting to address and rectify situations that may compromise patient safety.
2. **Breach of Confidentiality:**
   - Unauthorized disclosure of patient information or confidential medical details.
   - Sharing patient data without proper consent, violating privacy norms.
3. **Disregard for Informed Consent:**
   - Failure to obtain informed consent before administering treatments or procedures.
   - Proceeding with interventions without ensuring patients fully comprehend the associated risks and benefits.
4. **Discrimination and Cultural Insensitivity:**
   - Engaging in discriminatory practices based on race, gender, religion, or other protected characteristics.
   - Demonstrating insensitivity to diverse cultural beliefs and practices.
5. **Conflict of Interest:**
   - Engaging in activities that compromise objectivity or professional judgment.
   - Accepting gifts or favors that may influence decision-making in patient care.
6. **Failure to Uphold Integrity:**
   - Engaging in dishonesty, falsification of records, or misrepresentation of credentials.
   - Violation of academic integrity and professional honesty.
7. **Inappropriate Relationships:**
   - Establishing unprofessional relationships with patients, colleagues, or faculty members.
   - Breaching boundaries that compromise the professional nature of nurse-patient interactions.
8. **Abuse of Power:**
   - Exerting authority in a manner that intimidates or exploits patients or colleagues.
   - Failure to address and report witnessed abuse or mistreatment.

Addressing violations of the Code of Ethics is imperative to uphold the integrity and professionalism of nursing practice. Consequences for such misconduct may range from educational interventions and remediation to more severe measures, including dismissal from the nursing program, depending on the gravity and recurrence of the ethical breaches. Students in the ABSN program are expected to adhere to the highest ethical standards, continuously reflecting on and refining their ethical decision-making in the pursuit of becoming competent and compassionate nursing professionals.

Criminal Misconduct
Criminal misconduct in the ABSN program pertains to any unlawful or criminal behavior exhibited by students that compromises the integrity of the learning environment and jeopardizes patient safety. Examples of criminal misconduct in the context of the ABSN program may include:

1. **Substance Abuse:**
   - Presence of illegal substances in the clinical setting.
   - Impaired performance due to the use of illicit drugs or alcohol.
2. **Assault or Battery**:
   - Physical harm or threat of harm to patients, colleagues, or faculty members.
   - Engaging in aggressive behavior that compromises a safe learning environment.
3. **Theft or Fraud:**
   - Stealing medications, supplies, or equipment from the clinical setting.
   - Engaging in fraudulent activities related to patient care or academic requirements.

4. **Sexual Misconduct:**
   - Engaging in any form of sexual harassment, assault, or inappropriate behavior.
   - Violating boundaries with patients, colleagues, or faculty members.
5. **Forgery or Falsification:**
   - Forgery of signatures on clinical documentation or academic records.
   - Falsifying patient records, prescriptions, or other legal documents.
6. **Trespassing or Unauthorized Access:**
   - Unauthorized entry into restricted areas within healthcare facilities.
   - Inappropriate access or use of confidential patient information.
7. **Criminal Charges:**
   - Being charged or convicted of a criminal offense that impacts one's fitness for nursing practice.
   - Failure to disclose criminal charges in accordance with program policies.
8. **Violation of Professional Boundaries:**
   - Establishing inappropriate relationships with patients or colleagues.
   - Engaging in behavior that compromises the professional nature of nurse-patient interactions.

University Academic Appeal Process
An Academic Suspension may be appealed for extenuating circumstances only. Consideration will be given to extenuating circumstances beyond the student's control (e.g., serious personal illness, injury, the death of an immediate family member, or other extreme duress). To appeal a suspension, the student is required to prepare a clearly written statement describing the circumstances leading to suspension and the student's plan for success in future semesters. Documentation to support the appeal, such as a letter from a physician, obituary notice, etc. must accompany the written statement. The appeal will be reviewed by the appeal committee. The student will be notified in writing of the committee's decision. The decision of the committee is final. The process for this appeal can be found in the UP-student handbook.

ABSN Reinstatement and Readmission Policy
The reinstatement and readmission policy for the UP ABSN program outlines the procedures and criteria for students seeking re-entry into the program following withdrawal, dismissal, or a leave of absence.

Eligibility for Reinstatement
Students seeking reinstatement must meet the following eligibility criteria:
1. Submission of a formal written request for reinstatement to the ABSN Program Director.
2. Demonstration of readiness and commitment to resume academic and clinical responsibilities.
3. Approval of the reinstatement request by the ABSN Admissions Committee.

Procedure for Reinstatement
1. Submit a written request for reinstatement to the ABSN Program Director outlining the reasons for withdrawal or dismissal, steps taken during the hiatus, and a comprehensive plan for academic success.
2. Provide evidence of addressing any issues that led to the withdrawal or dismissal, including personal or health concerns, as applicable.
3. Attend a mandatory meeting with the ABSN Program Director to discuss the reinstatement request and address any additional requirements.

Faculty Evaluation and Decision

The ABSN Admissions Committee is comprised of ABSN nursing faculty, the ABSN Program Director, and the School of Health Professions Dean, who will evaluate each reinstatement request based on the following criteria:

1. **Academic Readiness:** The student must demonstrate the academic readiness to successfully resume the program, including a review of previous coursework, grades, and overall academic performance.
2. **Clinical Competence:** Evaluation of the student's clinical skills and readiness to re-enter the clinical setting safely and effectively.
3. **Professionalism:** Assessment of the student's commitment to professional conduct and adherence to ethical and legal standards within the nursing profession.
4. **Remediation Plan:** The student must present a well-defined plan for addressing any academic deficiencies, including participation in additional coursework or clinical experiences as determined by the academic affairs committee.
5. **Availability of Space:** Reinstatement is contingent upon the availability of space within the program cohort.

Notification of Decision

The ABSN Program Director will communicate the decision of the ABSN Admissions Committee to the student in writing within a reasonable timeframe. If approved, the student will receive instructions for the next steps, including any additional requirements or conditions for reinstatement.

Appeals Process

Students dissatisfied with the reinstatement decision may appeal to the University's Appeals Committee. The appeals process will be outlined in the written notification of the decision.

Withdrawal from the ABSN Program and Scholarship Funds

A student who withdraws (for any reason) from a nursing semester must follow University policy. Because the ABSN program courses are sequential, the student wishing to re-enter the program will be required to apply for placement in the next cohort. Although every effort will be made to accommodate students re-entering the program, placement in the next cohort may not be possible due to limited clinical capacity.

Withdrawing from a semester also has potential implications related to scholarship awards. Students who withdraw must also pay close attention to the University catalog for dates related to the tuition refund schedule. If a student withdraws after the date in which tuition is nonrefundable, the student will be responsible for paying for the semester in which they return to the program.

Graduation

Information related to graduation, including graduating with honors, can be found on the University website on the UP Registrar's Office webpage. If students need further information, they may contact the UP Registrar's Office directly.

Use of the UP Logo for Professional Nursing Posters and/or other Publications

All nursing students must submit a written request to the School of Health Professions Dean for approval prior to using the UP logo on any materials.

Student Concerns Process

Students at UP who have a concern regarding the University's online courses or programs can submit a comment or follow the appeals process located in the UP Student Handbook. Concerns must follow the University's customary resolution procedure prior to being referred to the Montana University System and NC-SARA procedures. Grade appeals and student conduct appeals are not allowed under SARA guidelines.

STUDENT RESPONSIBILITIES

Contact Information

It is the student's responsibility to keep his/her email, phone and street address current and available in the School of Nursing. The student should notify the program manager at their campus and should also update ArgoExpress whenever there are changes in his/her status and name.

Email

All students will be assigned a University email account with the expectation that students will check their email at least every 48 hours. Faculty will primarily communicate with students via email and Moodle, the e-learning environment used by the University for online courses.

Respond promptly, preferably within 48 hours. Recognize that faculty may not be available within this timeframe if engaged in clinical activities off-campus.

Refer to your course syllabus for faculty working hours (which do not include weekends).

Employment

Enrolling in the 12-month ABSN program is an intensive and demanding commitment that requires students to dedicate a significant amount of time and energy to their academic and clinical responsibilities. While the idea of working concurrently may seem feasible for some, it is generally not conducive to success in the ABSN program due to several reasons:

1. **Time Constraints:**
   - The ABSN program is a 12-month RN program compared to the typical 2-year RN programs. The accelerated nature of the program compresses traditional coursework into a condensed timeframe Students face a rigorous schedule with demanding classroom lectures, extensive reading assignments, and intensive clinical rotations, leaving little room for additional commitments.
2. **Clinical Requirements:**
   - Nursing programs often include extensive clinical hours, and these requirements can be physically and mentally taxing. Balancing work commitments alongside clinical responsibilities may compromise the quality of patient care and jeopardize the educational experience. Clinical experiences at the end of the program, during the precepted courses, may require you to work nightshift with a preceptor.
3. **Complex Curriculum:**
   - The ABSN program covers a vast and intricate curriculum in a short period. Students need to dedicate substantial time outside of the classroom for studying, reviewing materials, and preparing for exams to successfully grasp the essential concepts.
4. **High Academic Expectations:**
   - Nursing programs maintain high academic standards, requiring students to consistently perform at a high level. The need for academic excellence necessitates undivided attention and focus, which may be compromised when juggling work responsibilities.
5. **Stress and Burnout:**
   - The combination of academic demands and work commitments can contribute to heightened stress levels and an increased risk of burnout. Nursing education requires a high level of commitment and resilience, and adding the pressure of employment can exacerbate stressors.

6. **Clinical Scheduling Challenges:**
   - Clinical rotations often occur during daytime hours, making it challenging for students to maintain a regular work schedule. Flexibility and availability are crucial for success in clinical placements, and conflicting work commitments can impede participation.
7. **Professional Accountability:**
   - Nursing is a profession that demands a high degree of responsibility and accountability. Juggling employment while in an accelerated program may compromise the ability to meet professional expectations, including attendance, punctuality, and ethical conduct.

While individual circumstances may vary, the intensity and structure of ABSN programs generally make it challenging for students to balance concurrent employment successfully. It is advisable for students to carefully consider these challenges and prioritize their commitment to the program for a more successful educational experience and a solid foundation for their nursing career.

Software
Students will be required to have access to a computer and internet for all online courses. Students will be required to use Microsoft Office software to complete assignments (this includes Word, PowerPoint, and Excel). Other software may be required for some courses.

Textbooks
Each course syllabus includes the list of required and recommended textbooks for each course. Students may order textbooks from the UP online bookstore, or a student may choose to purchase the textbooks locally or online through a different vendor.

Moodle
Moodle® is the learning management system which supports the interactive video class meetings via Collaborate Ultra®. Nursing students are automatically enrolled in Moodle when they are registered for classes at the University. Students will receive a Moodle account upon registration. Students are expected to log into Moodle at least 2-3 times per week or more to obtain course information, materials, and assignments. Students will be required to submit assignments in a timely manner according to the course syllabus and faculty instructions. Late penalties will be applied when assignments are passed due.

Late or Past Due Assignments
Penalty for late work will include a 10% deduction per day the assignment is late. Extensions for late work are allowed with prior permission from the course faculty. Zero will be given for non-prior notification.

Class Attendance
The nursing program is offered in an interactive, synchronized video distance learning format using Collaborate Ultra®. Students are required to follow the University of Providence Attendance Policy as well as the BSN course attendance policies described in this student handbook and in course syllabi.

In order to meet course student learning outcomes, students are expected to be present and engaged in all scheduled video conferencing class times. Engagement may be exhibited by verbally participating or by messaging with pertinent, substantive comments during face-to-face time.

- Video cameras should be on at all times
- Microphones should be muted except when speaking

Attendance and participation are taken into consideration when determining the final grade for the course. If circumstances prohibit a student from attending a class session, they must contact the course faculty prior to the class. In the event that technical issues interfere with the delivery of live class time, a backup video of the session may be available.

Professional Behavior Expectations

Refer to the University of Providence student handbook for the University code of conduct. The follow professional behavior expectations are your guiding principles to transition you from the ADN direct entry nursing role to the BSN role. Professional guidelines are leveraged in accordance with the American Association of Colleges of Nursing (AACN) Baccalaureate Essentials (2008) and the American Nurses Association (ANA)Nursing: Scope and Standards of Practice and the Code of Ethics for Nurses, University of Providence BSN Program students will:

1) Accept responsibility for one's own actions and attitudes.
2) Demonstrate the ability to develop and maintain therapeutic relationships and appropriate personal boundaries.
3) Demonstrate a respectful, sensitive, and non-judgmental manner when communicating with others. In this policy, 'others' refers to peers, faculty, clients, families and facility and school staff.
4) Provide prior notification to appropriate faculty when he/she is unable to meet commitments or requirements, detailing how and when he/she will make up requirements.
5) Participate in course activities as scheduled throughout the nursing program.
6) Report on scheduled activities on time and well-rested.
7) Complete assignments and tests as required and scheduled.
8) Demonstrate professional appearance, conduct, and professional presentation in course meetings.
9) Demonstrate personal and professional ethics, honesty and integrity.
10) Demonstrate the ability to use good judgment in decision making.
11) Demonstrate accountability in preparation course activities, such as presentations.
12) Respect others during course activities (i.e., no talking while others are talking, cell phones are silenced, and no inappropriate use of electronic devices).
13) Demonstrate respect to all individuals regardless of culture, ethnicity, religion, work experience, gender, age and sexual orientation.
14) Communicate with others with respect, sensitivity and care in all forms (including verbal, nonverbal, written, and electronic).
15) Maintain Standards of confidentiality, for example regarding a fellow student's presentation.

Nursing Program Health, Safety, and Communicable Disease Requirements

It is a privilege for nursing students to work with our clinical partners to complete their clinical learning. To ensure the safety and wellbeing of all patients, staff, students, and the community, criminal background checks, urine drug screening, and immunizations to prevent communicable diseases, have become standard requirements for employment in health care. The program uses CastleBranch® for Montana, an accredited member of the National Association of Professional Background Screeners (NAPBS), and My Clinical Exchange for Alaska. A link to CastleBranch®, for the following requirements can be found in the BSN program application. Alaska students will be sent information about My Clinical Exchange after acceptance to the nursing program. Students in Alaska are required to complete a 2-day background check to get credentialed to use Epic (electronic health record).

Applicants must complete a urine drug screen and background check by the application due dates. The remaining clinical compliance items must be completed by December 15th, including:
- Immunizations (see Appendix C)
- CPR American Heart Association BLS for HealthCare Providers
- Health Insurance
- HIPAA and OSHA training

All clinical compliance must remain current while the student is in the program. Students may be required to complete additional, state specific information, depending on their clinical placements.

The results of the urine drug screen and background check are tracked on CastleBranch® by the ABSN Program Director and the School of Health Professions Dean. The student will be contacted directly if further information or clarification is needed. Due to the confidential nature of the background check findings, the results of the background check and urine drug screens are not placed in the student's permanent file.

Criminal charges include but are not limited to misdemeanors, felonies and convictions, such as shoplifting, drug charges, driving under the influence (DUI), Minor in Possession (MIP), reckless driving and suspended license. These activities do not include legal matters regarding divorce, custody issues or parking tickets.

Technical Standards for Admission, Academic Progression, and Graduation

The goal of the UP BSN program is to prepare every student to think critically, and practice nursing competently and compassionately in rapidly changing practice environments. The curriculum is designed to build nursing knowledge, enhance nursing practice and patient safety, foster professional integrity, and ultimately improve the health outcomes of patients, families, and communities across the continuum of care.

Certain functional abilities are essential for the delivery of safe, effective nursing care during clinical training activities. Therefore, the faculty has determined that certain technical standards are requisite for admission, progression, and graduation from the nursing programs. These standards, and the attestation form, can be found in Appendix B.

In addition to classroom learning, clinical learning occurs throughout the program and involves considerations (such as patient safety and clinical facilities) that are not present for classroom accommodations. For this reason, any applicant or student who seeks accommodations prior to or immediately after enrolling in the nursing programs must also request an assessment of the types of reasonable accommodations needed for the clinical training component of the program.

If you have questions or concerns about your ability to meet the technical standards with or without accommodations, or if you would like to arrange reasonable accommodations, please contact UP Disability Services.

Applicants who disclose a disability are considered for admission if they are otherwise qualified so long as such accommodation does not significantly alter the essential requirements of the curriculum and the educational program, or significantly affect the safety of patient care or others.

Application for Licensure as a Registered Nurse
The School of Nursing is approved by the Montana State Board of Nursing. The Montana State Board of Nursing regulates licensure within their state and can deny RN licensure for a number of reasons; for example, conviction of a misdemeanor or a felony. Prior to beginning the Nursing Program, students are advised to visit the Montana State Board of Nursing Website or call the Montana Board of Nursing for questions regarding eligibility for licensure:
- Phone: (406) 444-5711
- Email: UnitB@mt.gov

Criteria for licensure as a Registered Nurse varies by state, as each state nursing regulatory body (Board of Nursing) establishes their individual requirements. Requirements may include submission of fingerprints, a criminal background check, health assessment, or specific educational content. Students are advised to check requirements for states in which they intend to seek licensure.

Clinical Conduct
Nursing students may be removed from the program for clinical conduct reasons, including but not limited to:
- Stealing from the facility such things as band aids, alcohol wipes, injectable saline, Narcan nasal spray, medical supplies & equipment, linens, portable medical devices, hospital scrubs and etc.
- Patient safety concerns such as failure to report abuse of a patient, failure to rescue a patient, failure to provide fall protection, failure to effectively communicate the risks of workplace hazards, and failure to place sufficient protective equipment between workers and dangerous machinery and etc.
- Abuse of patient such as actions or inactions of an individual's caregiver or parent inflicting physical, sexual, or emotional harm on the individual (assault & battery, failure to toilet, failure to provide nourishment, etc.
- False documentation in the medical record
- Medication errors
- Intoxication
- Suspicious behaviors

- Unsafe personal interactions
- Violation of confidentiality (HIPAA); failure to comply with program requirements related to health and immunization status, background checks and infractions of the law, and substance abuse. Removal from the clinical portion of the course may result in failure of the course and would therefore require removal (withdrawal) from the program of study.

Illegal Substances

Nursing students are expected to refrain from the use of all illegal substances including THC+ CBD oil in any formulation. Concerns about a student being under the influence of alcohol or any other substance which could endanger patient safety will result in student removal from the clinical area and immediate drug and alcohol testing. When requested by officials at the clinical site or a faculty member, students must comply with drug/alcohol screening according to the specific standards that the clinical agency or University. A student referred for a drug/alcohol screen will be temporarily suspended from clinical work until the results of the screen are reported and evaluated. Nursing faculty and/or a program administrator will direct the student where and when to have screening completed to ensure compliance. Failure to comply with testing will result in removal from the nursing program. The student is responsible for costs associated with the screening. If a student is suspected of illegal substance use on UP campus, University policy will be followed.

Students who are removed for professional conduct issues may appeal to the School of Health Professions Dean. Appeals should be submitted in writing within 72 hours and a response from the School of Health Professions Dean will be provided within 72 hours or a reasonable time frame following receipt of the appeal.

Faculty Communication

Effective communication between faculty and students is essential for success in the program. Faculty members are committed to delivering clear and concise information regarding course requirements, assignments, and expectations. They are readily available to answer questions and provide guidance throughout the program.

To ensure that our nursing students receive the most relevant education, updates to the curriculum will be made to reflect current best practices, advancements in the field, and accreditation standards, as determined by program leadership. Clinical rotations and experiences may evolve as new partnerships with healthcare facilities are established. Additionally, adjustments to the curriculum may occur in response to changes in healthcare policy, technology, and vendor proprietary services. Faculty members stay abreast of the latest research on patient safety, infection control, and evidence-based practice, incorporating these updates to reflect current practice trends.

Any changes to courses will be communicated in a timely and transparent manner, allowing students to adjust their schedules and expectations accordingly. Faculty members actively seek feedback through student governance, end-of-course evaluations, exit program surveys, and Alumni surveys, as student input is valuable for enhancing the program and meeting the evolving needs of nursing students.

Faculty is dedicated to providing support and resources to help nursing students succeed in the program. This support may include access to tutoring services, academic advising, and career counseling.
Establishing a positive and professional relationship with faculty is crucial. This can be achieved

through active participation in classes and clinicals, demonstrating preparedness for lessons, asking questions, and seeking opportunities for mentorship and guidance. Students are encouraged to reach out to faculty to schedule meetings outside of class time.

Faculty members commit to being approachable and providing support and assistance to students facing academic or personal challenges. They are aware of available resources and, as students progress through the program, offer guidance and support as they prepare for licensure exams and transition to nursing practice.

Faculty may recommend additional study materials, vendor resources, and practice exams to aid in preparation for the NCLEX-RN exam.

Contact Information

Maintaining current contact information is the responsibility of each student within the nursing division. Students are required to inform the Program Manager promptly of any changes to their name or status and update ArgoExpress accordingly.

Computer Proficiency and Software Requirements

To meet course requirements, students must have access to a personal laptop computer and the internet. Regular communication with faculty and the use of online course materials are essential. Proficiency in Microsoft Office products (Word, PowerPoint, and Excel) is a requirement during the program, and additional software may be necessary for specific courses.

Email/Voicemail Etiquette

All students will be provided with a UP email account, and it is expected that they check their email at least every 48 hours. Communication from faculty will primarily be through email and Moodle, the University's e-learning platform for online courses. When utilizing email or voice mail, adhere to the following etiquette guidelines:

- Begin emails with proper greetings and salutations, using the faculty's professional credentials.
- Maintain a friendly and approachable tone while remaining professional in both voice mail and email messages. Avoid conveying anger or making demands.
- Respond promptly, preferably within 48 hours. Recognize that faculty may not be available within this timeframe if engaged in clinical activities off-campus. If a timely response is not received, consider resending the message.
- Always reference the sender's original message in your reply, either with a simple acknowledgment or by utilizing the features of the email program.
- Demonstrate a strong vocabulary and proficient grammar skills. Review emails before sending to ensure clarity, proper grammar, and spelling while conveying the intended message.
- Provide concise yet detailed information. While people seek information, it is essential to present it in a manner that is clear and does not overwhelm with excessive text.

Cell Phones

- To avoid potential disruptions to others, please ensure that cell phones are either turned off or set to silent mode during class or lab sessions. Additionally, cell phones are strictly prohibited in patient care areas. In the event of a special circumstance requiring cell phone use, students are advised to contact the faculty for prior arrangements.

- Due to the advanced capabilities of modern cell phones, their use is not permitted in the testing environment. Any violation of this policy will lead to immediate dismissal from the class, lab, or clinical setting, with subsequent disciplinary actions being determined based on the severity of the situation. Repeat violations will result in a progressive disciplinary process, potentially culminating in dismissal from the program.

CLINICAL PRACTICE EXPECTATIONS

Professional Behavior Expectations in Class and Clinical

In accordance with the American Association of Colleges of Nursing (AACN) Baccalaureate Essentials (2008) and the American Nurses Association (ANA) Scope and Standards of Practice and Code of Ethics, **BSN Program students will:**

1. Accept responsibility for one's own actions and attitudes.
2. Demonstrate the ability to develop and maintain therapeutic relationships and appropriate personal boundaries.
3. Demonstrate a respectful, sensitive, and non-judgmental manner when communicating with others. In this policy, 'others' refers to peers, faculty, clients, families and facility and school staff.
4. Provide prior notification to appropriate faculty when he/she is unable to meet commitments or requirements, detailing how and when he/she will make up requirements.
5. Participate in classroom, lab, and clinical activities as scheduled throughout the program.
6. Report for scheduled activities on time and well-rested.
7. Complete assignments and tests as required and scheduled.
8. Demonstrate professional appearance, conduct, and professional presentation in classroom and lab settings and any activities directly related to the UP ABSN program. This also pertains to conduct while on overnight stays which are directly related to clinical or other UP- organized activities.
9. Expectations for timeliness, professional appearance, and conduct extends to the virtual spaces of the learning community, including online classrooms, virtual platforms, and proctored testing activities.
10. Demonstrate personal and professional ethics, honesty and integrity.
11. Demonstrate the ability to use good judgment in decision making.
12. Demonstrate accountability in preparation for classroom, lab, and clinical activities.
13. Respect others during classroom, lab, and clinical activities (i.e., no talking while others are talking, cell phones are silenced, and no inappropriate use of electronic devices).
14. Demonstrate respect and care to all individuals regardless of culture, ethnicity, religion, work experience, gender, age and sexual orientation.
15. Communicate with others with respect, sensitivity, and care in all forms (including verbal, nonverbal, written, and electronic).
16. Maintain standards of confidentiality.
17. Actively participate as a team member in clinical, lab and class.
18. In regard to nursing lab/clinical courses, the student will:
    a. Notify course faculty prior to an absence, tardiness, or early departure from the course. Exception may be made in cases of illness and emergency.
    b. Demonstrate preparedness for the courses to ensure that safe and quality client care is provided.
    c. Demonstrate professional appearance and presentation per the dress code described in each clinical course.
    d. Report unethical, harmful, or unprofessional behavior(s) of others.

Clinical Practice Experiences

Selected courses use a combination of clinical practice experiences which include direct or indirect care, laboratory, and simulation activities to ensure students achieve the program outcomes.

Direct Care
Includes direct contact with patients, families, communities and other healthcare providers.

Indirect Care
Includes global actions and/or interventions that impact a population of patients.

Laboratory and Simulation Activities
Held in specially designed simulation labs with equipment, task trainers, low-fidelity, and high-fidelity equipment.

In any clinical practice experiences, students are required to wear their UP name badge, and they must identify themselves to patients, staff, and administration, as a student. Students should refer to the course/clinical syllabus for further details on dress code requirement for each clinical course.

Due to the accelerated nature of the program, make-up clinical is at the discretion of the faculty and is dependent upon resources, including clinical site and faculty.

Unusual Incidents in the Clinical Setting
Clinical faculty have two primary obligations in the clinical settings: supervision of students and patient safety. Unusual incidents may include student injury or illness; medication administration errors; near misses; and incidents concerning patient safety. A near miss is an unplanned event that did not result in injury, illness, or damage – but had the potential to do so.

All incidents, events, irregular occurrences, and variances must be identified and reported according to the healthcare facility's policies and procedures. The purpose of this reporting is to give the healthcare facility and the healthcare professionals the opportunity to address the issue and prevent the occurrence of future incidents, events, irregular occurrences, and variances.

If a student becomes ill or injured, the student shall be directed to treatment as necessary. The faculty will ensure that supervision of the other students is ongoing. The policy and procedures of the agency will be followed regarding reporting of the incident and treatment. Treatment may include sending the student to the healthcare facility Emergency Department, sending the student to the employee health clinic, calling a cab so that a student can get to a care provider of choice, calling a code, or calling 911.

Effective Communication in Clinical Settings
Effective communication is the ability to exchange information between individuals with the use of verbal, non-verbal, written and electronic communication strategies. Use of effective communication strategies enable students to facilitate professional and therapeutic relationships with peers, faculty, staff, clients, families, communities, and other health care professionals.
Confirmation of effective communication involves demonstration of understanding through verbal, non-verbal, written, and electronic responses by the recipient(s).

The key concepts essential for the development of effective communication include advocacy, client, education, collaboration, information literacy, human interface, and health literacy.
In addition to being element VI of the Baccalaureate Essentials, effective communication is also key in delivering safe patient care. Patients must be able to understand information and directions provided by the nursing student through verbal, non-verbal and written communication methods.

Demonstration of communication skills that are ineffective, inappropriate, or that recipients (faculty, staff, clients, families, and other health care professionals) consistently cannot understand through either verbal, non-verbal and/or written communication methods will be addressed by faculty who observe and/or receive reports of these concerning skills.

The student will collaborate with faculty to develop an improvement plan that will include specific goals for improvement, access to resources that will assist the student to improve communication skills and consequences if goals are not met by deadlines. If the student cannot demonstrate improvement in communication skills as presented in improvement plan, he/she may either fail a course or be dismissed from the nursing program due to patient safety concerns.

Standards of Confidentiality
Due to the personal nature of nursing and nursing education, students are bound to strict confidentiality expectations under clinical circumstances. Confidentiality is defined as private or secret; information confined to particular persons or groups or providing privacy. Violation of the standards of confidentiality can put the School of Health Professions and the at a significant legal risk; therefore, consequences for breaching confidentiality can include dismissal from the nursing program.

- Students are required to sign a confidentiality Agreement Acceptance of Responsibility for Access to Protected Information prior to beginning the nursing program. This is part of the nursing program health, safety, and communicable disease requirements (clinical compliance) tracking at CastleBranch® and/or My Clinical Exchange.
- The confidentiality agreement, which students sign on CastleBranch® and/or My Clinical Exchange, encompasses confidentiality in clinical, simulation, post conference, and lab learning.
- All information relating to a client's health and/or personal status per the Health Information Privacy and Accountability Act (HIPAA) is confidential.
- All nursing students will complete HIPAA training at application on CastleBranch® or My Clinical Exchange which is therefore prior to clinical contact with client or clinical agencies.
- Students may be required to participate in orientation to clinical sites, which may include additional HIPAA training specific to that clinical site.
- Inclusive in the standards of confidentiality regarding HIPAA is the understanding of students not to use electronic or online communication systems to share any information relating to a client's health and/or personal status.
- All observations made during the performance of other participants in simulation, learning and testing environments is confidential. All events, procedures, and information are confidential at all times during the simulation, learning, and testing and after it has ended, including patient history information obtained prior to the actual simulation experience, as well as information obtained and used in the pre- briefing sessions. Information about a simulation, content, learning, or testing process will not be shared with others.

The consequences of violating the confidentiality agreement are dependent on the circumstances and severity of the violation.

Affiliating Agencies
In all agencies where students have learning opportunities, has an affiliation agreement which allows students and faculty to participate in appropriate aspects of care to the clients.

Students may not participate in learning experiences in facilities in which there is no affiliation agreement. Students must comply with facility-specific safety and education requirements at all times. The facility requirements will be addressed in each class by the course faculty.

Students are responsible for their own transportation to and from clinical agencies throughout the region. Students should expect to travel anywhere within a 200-mile radius of the UP School of Health Professions site. Overnight stays away from home may be necessary for some clinical experiences.

Students are responsible for their own lodging. When traveling as a representative of the UP School of Health Professions, students are held to expectations of professionalism as outlined in student code of conduct and this handbook.

Varied Schedules
Students are expected to participate in clinical experiences in a variety of community agencies and at variously scheduled times. Therefore, students must arrange to accommodate an irregular academic schedule that may include evening and weekend hours.

Mandatory Health Insurance University
All nursing students are required to have health insurance during the program. Evidence of health insurance must be uploaded annually in CastleBranch®.

Dress Code
Appearance can impact the level of confidence that our clinical partners and clients have in us. A neat appearance and appropriate attire convey a professional attitude of excellence that has become synonymous with School of Health Professions.

The dress code is required to ensure the safety and control of infection for both students and clients. UP School of Health Professions nursing students will adhere to an appropriately modest and professional dress code in all clinical settings. Examples of inappropriate attire includes, but is not limited to, exposed midriffs, visible cleavage, and visible undergarments.

Clinical faculty will make the final judgment on the appropriateness of student attire and of the corrective action for dress code infractions. Corrective action may include dismissal from the clinical unit and/or clinical failure for the date of that clinical.

The UP student uniform may not be worn to your personal place of employment. This poses a conflict of interest when you wear the UP uniform with logo while clocked in on duty for your job. If you are reported to the UP faculty or seen by UP faculty wearing the student uniform on your job, disciplinary action will follow.

School of Health Professions Nursing Student Lab/Clinical Dress Code
1. Appropriate identification (name/picture badges) will be worn at all times.
2. Clinical uniforms are appropriate for most clinical settings.
3. Undergarments will not be visible while wearing the student uniform.
4. A white lab coat may be required for clinical preparation – students should check with clinical faculty if needed.
5. Only clean, closed-toe shoes, either leather or athletic, will be worn.
6. Denim jeans, sweatshirts/pants, shorts and t-shirts are not acceptable attire in any setting where students are representing the University of Providence
7. Hair will be of natural color, clean, neat, and worn off the collar in a contained manner so it will not fall forward into one's face during lab and clinical. If hair is longer than shoulder length it must be pulled back off the face
8. Beards and moustaches must be neatly trimmed and/or cleanly shaven.
9. Fingernails will be short and clean, cut or filed so that the nail does not extend beyond the fingertip.
10. No nail polish and no artificial nails or tips are allowed.
11. No jewelry will be worn that could potentially injure a client or the student or compromise safety.
    - Only two small non-dangling, post earrings are acceptable.
    - Only one earring in each ear
    - No other piercings on the face will be displayed.
    - No visible body piercings will be displayed.
12. All visible tattoos must be covered.
13. Chewing gum is not permitted in Nursing Lab/Clinical settings.
14. No perfumes, colognes, or after shaves worn due to allergies.
    - Since tobacco can trigger asthma and allergic reactions, students shall not use tobacco, including e-cigarettes, while in a clinical/lab assignment
    - Students who smell of tobacco will be asked to leave the clinical assignment; this may result in a clinical failure for the day
    - Students must be hygienically clean; without offensive body odors
    - Students with body odor issues will be advised and required to address the concern.
15. Students with specific religious or cultural concerns which would impact the dress code requirements must address their concerns to their clinical faculty, in writing, prior to client contact.
16. White socks (mid or calf length) and solid shoe with a heel. No open toes, no open backs, no sandals, no flip-flips, no fuzzy ankle boots, non-flashy or fluorescent-colored shoes, non-mesh athletic shoes may be worn. Shoes must be clean and free from mud and dirt and odors, and fecal material. Shoes must be not appeared ragged and torn. Nursing shoe color must compliment the nursing student uniform.

Current Compliance with Health, Safety, and Immunizations
Students are required to utilize CastleBranch® and/or My Clinical Exchange at application and while in the program for health and safety documentation.

Any changes in status must be updated while in the ABSN program including:
- Criminal charges which have occurred since application
- Lapse in any required immunization or health verification
- TB testing

- Hepatitis B series continuation
- CPR certification
- Health insurance

Failure to maintain currency in health, safety and immunization status may result in dismissal from the ABSN program.

APPENDIX A
Accelerated BSN Course Layout

Semester 1: First 8-Weeks

- NRS PL 313 Nursing Practice Fundamentals (4 credits)
- NRS PL 376 Pathophysiology and Pharmacology Concepts I (3 credits)
- NRS PL 370 Introduction to Professional Nursing (1 credit)

Semester 1: Second 8-Weeks
- NRS PL 372 Nursing Concepts I (4 credits)
- NSR PL 412 Nursing Ethics and Spirituality (3 credits)
- NRS PL 378 Pathophysiology and Pharmacology Concepts II (3 credits)

Semester 2: First 8-Weeks
- NRS PL 430 Med-Surg Nursing II (3 credits)
- NRS PL 410 Evidence-Based Nursing Practice (3 credits)
- NRS PL 423 Introduction to Nursing Informatics (2 credits)

Semester 2: Second 8-Weeks
- NRS PL 374 Nursing Concepts II (3 credits)
- NRS PL 414 Population Health (3 credits)
- NRS PL 421 Nursing Leadership: Fostering Quality and Safety in Organizations (4 credits)

Semester 3: First 8-Weeks
- NRS PL 440 Clinical Concepts II (4 credits)
- NRS PL 474 Nursing Concepts III (3 credits)
- NRS PL 425 Health Promotion in Nursing (2 credits)

Semester 3: Second 8-Weeks
- NRS PL 417 Global Perspectives in Healthcare (2 credits)
- NRS PL 450 Transition to Nursing Practice (6 credits)
- NRS PL 495 Senior Seminar (1 credit)

APPENDIX B
Core Performance Standards for Admission, Academic Progression, and Graduation

In compliance with the 1990 Americans with Disabilities Act (ADA) and the ADA Amendments Act (2008), the University of Providence School of Nursing does not discriminate against qualified individuals with disabilities.

Disability is defined in the Act as a (1) physical or mental impairment that substantially limits at least one major life activity of an individual; (2) a record of such impairment; or (3) being regarded as having such an impairment.

For the purposes of Nursing Program compliance, a "qualified individual with a disability" is one who, with or without reasonable accommodation or modification, meets the Core Performance Standards for participation in the Nursing Program.

Not all accommodations can be met due to course outcomes and the needed nursing competencies.

Students with questions or concerns about their ability to meet the technical standards with or without accommodation, or wishing to arrange reasonable accommodation, you should contact Student Support Services.

To successfully complete the Nursing Program, students must demonstrate their competency to carry out cognitive and physical tasks necessary for safe and effective practice in the field, including:

Observation/Sensory-Motor
1. Accurately assess heart, breath, abdominal, and other sounds of the human body.
2. Accurately assess normal and abnormal color changes in the skin and observe pupil changes.
3. Accurately differentiate colors sufficiently to identify wound drainage, alarms, and markings on clinical equipment including but not limited to gradations of chemical test strips.
4. Detect and respond appropriately to activation/warning signals on equipment) including auditory and visual signals).
5. Detect significant environmental odors.
6. Distinguish small print, including but not limited to that on medication labels and gradations on syringes.
7. Observe and assess conditions of a patient accurately, at a distance and close at hand, including non-verbal communication.
8. Observe and participate in demonstrations and experiments in the basic sciences including computer assisted instruction and simulation experiences.
9. Observe and evaluate digital or waveform readings.
10. Identify signs of disease as manifested through physical examination including visual images of the body surfaces, palpable changes in various organs and tissues, and auditory information.

Communication
1. Communicate accurately, effectively and in a timely manner with other students, faculty, staff, patients, families, and other professionals whether in person or through technology.
2. Communicate clearly and understandably through both written and verbal English language.
3. Demonstrate communication skills sensitive to cultural variation and with respect for diversity of patients, families, faculty, staff, and colleagues.

4. Process and accurately convey information regarding patient status including changes in mood, activity, and non-verbal communications.

5. Accurately obtain, record, and maintain patient records including assessments, care plans, treatments, physician orders and other elements of the health record.

6. Manage conflict appropriately, respectfully and at the correct level of intervention.

Behavioral and Social Attributes

1. Demonstrate compassion, sensitivity, and concern for others.

2. Demonstrate understanding and adherence to professional standards of nursing practice.

3. Function effectively under physically & mentally taxing workloads including in times of stress.

4. Adapt to an environment that may change rapidly without warning and/or in unpredictable ways.

5. Maintain appropriate professional decorum when exposed to stressful situations including unusual sights and smells.

6. Maintain confidentiality with regard to all phases of work.

Psychomotor

1. Execute physical movements required to provide general care and treatment to all patients in all health care settings, including static and dynamic movements.

2. Perform inspection, palpation, auscultation, percussion, and other diagnostic maneuvers.

3. Move and position heavy and/or large equipment commonly used in clinical settings.

4. Lift, move and transfer patients with or without assistance or assistive devices as commonly practiced within clinical settings.

5. Operate diagnostic or therapeutic devices including but not limited to IV pumps, cardiac monitors, and other devices by manipulating knobs, dials, buttons, and keyboards.

6. Perform basic life support, including CPR and AED, and other BLS functions.

7. Provide holistic nursing care and perform or assist with procedures, treatments, and medication administration.

8. Respond to emergencies precisely, consistently, accurately, and quickly.

Intellectual-Conceptual and Integrative

1. Accurately perform mathematical calculations and calculate medication dosages & IV rates from instructions given.

2. Analyze, collect, and synthesize data to reach diagnostic and therapeutic judgments and to develop an appropriate plan of care.

3. Effectively perform ongoing assessments based on the patient's status.

4. Demonstrate cognitive capacity to provide patient care including but not limited to medication administration and treatments in accordance with standard practice.

5. Implement universal precautions and appropriate levels of patient isolation protection.

6. Effectively prioritize multiple tasks.

7. Manage the demands of time constraints and frequent interruptions.

8. Synthesize information including content from didactic courses, apply knowledge and problem solve as appropriate for the current level of progression within the Nursing Program.

I understand that I will be expected to demonstrate competency in the technical standards stated above in order to successfully complete the Nursing Program.

Student Signature: _____

Date: _____

APPENDIX C
Immunizations and Health Verifications Check List

It is recommended applicants to the ABSN program prepare for the clinical compliance requirements for immunizations by visiting their provider in advance of applying. The following documentation will be required by CastleBranch®. Applicants may scan these items for upload to their account once they are ready to apply. Because requirements for immunizations vary, applicants should bring this list to their provider to avoid any misunderstanding of what the UP ABSN program requires.

A. COVID 19 Vaccine and Boosters
☐ <u>May</u> be required by some healthcare facilities.

B. Tuberculosis Skin Test
☐ Evidence of an initial negative two-step TB skin test upon submitting your application for placement.
☐ Students with a positive skin test are required to provide written clearance from their health care provider to provide patient care and may be required to provide evidence of a chest X-ray or medical treatment before the University will release a registration hold.

C. Measles, Mumps, Rubella (MMR)
- Measles -Two doses of measles-containing vaccine (Measles; Measles-Rubella; or Measles Mumps-Rubella) OR -a positive IgG antibody titer, regardless of birthdate

- Mumps- Two doses of mumps-containing vaccine (regardless of birthdate) OR - a positive IgG titer

- Rubella (GERMAN MEASLES): One dose of rubella-containing vaccine OR a positive IgG titer

☐ Two doses of MMR or a combination of vaccines as described above: All doses must be after one year of age and at least a month apart; Measles or M/R dates must be 1968 or later; MMR must be 1971 or later; Mumps alone must be 1980 or later; Vaccines must be live virus given without immune globulin.
OR
☐ Lab reports showing positive IgG antibody titer results for measles, mumps, and rubella (NOTE: IgM titers are NOT acceptable)

D. Hepatitis B
Three appropriately-spaced vaccine doses and a positive quantitative Hepatitis B surface antibody titer meets the requirement. The lab report must include reference ranges for quantitative results; the standard for a positive titer is 10 mIU/mL or higher.

☐ Three or more documented doses of vaccine and a positive HBSAB-QN/CONC/Index titer
OR
☐ Hep B series in process: documentation of each dose submitted as received, titer 4-6 weeks after last dose.

TIPS: Meeting the Hepatitis B Requirement
• If more than 2 years have elapsed since vaccine was given, we recommend a dose to boost antibodies to a detectable level • Then, draw the QN HBsAb 4-6 weeks later • If negative, antigen (HBsAg) testing (for prior exposure or "carrier" status) may be indicated • If the HBsAg is negative, complete the 2nd series • Then, recheck the HBsAb titer 4-6 weeks later • CDC recommendations/rationale for boost and re-titer of health professionals is at: http://www.immunize.org/catg.d/p2109.pdf

☐ For past/resolved hepatitis B infection: Submit lab reports for QN HBsAb, HBcAb, and HBsAg.

☐ For Hepatitis B carriers: Submit lab report of positive HBsAg; download letter from CB website and submit after provider completes.

☐ For Hepatitis B non-responders: Submit documentation of two 3-dose vaccine series; lab report(s) showing negative HBsAg and appropriately timed negative HBsAb.

E. Varicella

Students are required to provide documentation of adequate immunity through a positive varicella titer upon submission of their placement application. History of disease is not accepted. Only vaccine or titer.

☐ Two doses of varicella vaccine, no earlier than 1995. Dates prior to 3/95 will be rejected OR

☐ Positive varicella IgG antibody titer lab report

F. Tetanus-Diphtheria-Pertussis

One dose of Tdap. If given more than 10 years ago, a current dose of Td-containing vaccine. Titers are not accepted in lieu of Td/Tdap vaccine.

☐ Documentation of Tdap vaccine since 2005 (when vaccine became available) AND

☐ Td OR Tdap in past 10 years, not expiring during school year. (May be same as above.)

G. Influenza Vaccine

Seasonal influenza vaccine documentation is submitted between August and October each year. The vaccine is required.

Waivers: Waivers are permitted only for medical contraindication. The waiver must include the health provider's name. This waiver should be uploaded to CastleBranch® Egg allergy is no longer a contraindication; egg-free vaccine is available.

APPENDIX D
Waiver for Immunization Forms

AFFIDAVIT OF EXEMPTION ON RELIGIOUS GROUNDS FROM MONTANA SCHOOL IMMUNIZATION LAW AND RULES

Student's Full Name: Birth Date   Age   Sex

School:

If student is under 18, name of parent, guardian, or other person responsible for student's care and custody: Street address and city:

Telephone:

I, the undersigned, swear or affirm that immunization against

☐☐ Diphtheria, Pertussis, Tetanus (DTaP, DT, Tdap)   Polio

☐☐☐ Measles, Mumps and Rubella (MMR)   Varicella (chickenpox)

Haemophilus Influenzae Type b (Hib)

is contrary to my religious tenets and practices.

I also understand that:

1.   I am subject to the penalty for false swearing if I falsely claim a religious exemption for the above-named student [i.e. a fine of up to $500, up to 6 months in jail, or both (Sec. 45-7-202, MCA)];

2.   In the event of an outbreak of one of the diseases listed above, the above-exempted student may be excluded from school by the local health officer or the Department of Public Health and Human Services until the student is no longer at risk for contracting or transmitting that disease; and

3.   A new affidavit of exemption for the above student must be signed, sworn to, and notarized yearly, before the start of the school year and kept together with the State of Montana Certificate of Immunization (HES-101) in the school's records.

Signature of parent, guardian, or other person
Date responsible for the above student's care and custody; or of the student, if 18 or older.

Subscribed and sworn to before me this   day of ,   .
Signature: Notary Public for the State of Montana
Print Name: Notary Public for the State of_____

HES-113
revised 06/2015

MONTANA
DPHHS

Medical Exemption Statement

Form HES 101A
Montana Schools

For questions, contact the Montana Department of Immunizations at (406) 444-5580

A prospective student seeking to enroll in a Montana school is not required to receive any immunizations for which they are medically contraindicated. The Medical Exemption Statement may be completed by a qualifying healthcare provider and utilized as an exemption. In lieu of this form, a written and signed statement from a qualifying healthcare provider will also be accepted under the conditions outlined in ARM 37.114.715.

Pursuant to HB 334 (Ch. 294, L. 2021), a qualifying healthcare provider means a person who: (1) is licensed, certified, or authorized in any U.S. State or Canada to provide health care; (2) is authorized within the person's scope of practice to administer the immunization(s) to which the exemption applies; and (3) has previously provided health care to the student *or* has administered a vaccine to which the student has had an adverse reaction. Once completed, this form should be filed at the student's school along with their most current immunization record.

Student Name: **Parent/Guardian Name:**

Student Address: **Student Date of Birth:**

Select the vaccine(s) needing medical exemption, then provide a brief description of the contraindication or precaution for each vaccine:

- ☐ DTaP (Diphtheria, Tetanus, and Pertussis)
- ☐ Tdap (Diphtheria, Tetanus, and Pertussis)
- ☐ Varicella (Chickenpox)
- ☐ Hib (*Haemophilus influenzae* type b)
- ☐ MMR (Measles, Mumps, and Rubella)
- ☐ IPV (Polio)
- ☐ Other:

Contraindication/Precaution:

A complete list of medical contraindications and precautions can be found on the Centers for Disease Control and Prevention's website:
https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html.

Duration of exemption: _____
Address: _____
Providers Name (print): _____ **Title:** _____
Providers Signature: _____ **Date:** _____
Provider Phone Number: _____ -
Montana Code Annotated administrative Rules of Montana
20-5-403: MT School Immunization Requirements, Immunization Records
20-5-405: MT School Immunization Requirements, Immunization Records
37.114.701-721: Immunization of K-12, Preschool Post Secondary Schools
(revised 07/21)

REQUEST FOR A RELIGIOUS EXCEPTION TO THE COVID-19 VACCINATION REQUIREMENT

Government-wide policy requires all Federal employees as defined in 5 U.S.C. § 2105 to be vaccinated against COVID-19, with exceptions only as required by law. In certain circumstances, Federal law may entitle a Federal employee who has a religious objection to the COVID-19 vaccination requirement to an exception from that requirement, in which case the employee would instead comply with alternative health and safety protocols. The Federal Government is committed to respecting the important legal protections for religious liberty. The purpose of this form is to determine whether you may be eligible for an exception.

To be eligible for a possible exception, you must first establish that your refusal to be vaccinated is based upon a sincere belief that is religious in nature. A refusal to be vaccinated does not qualify for an exception if it is based upon personal preference, concerns about the possible effects of the vaccine, or political opinions. In order to request a religious exception, please fill out this form. The agency may ask for other information as needed to determine if you are legally entitled to an exception.

Signing this form constitutes a declaration that the information you provide is, to the best of your knowledge and ability, true and correct. Any intentional misrepresentation to the Federal Government may result in legal consequences, including termination or removal from Federal Service.

QUESTIONS:
Please describe the nature of your objection to the COVID-19 vaccination requirement.

Would complying with the COVID-19 vaccination requirement substantially burden your religious exercise? If so, please explain how.

How long have you held the religious belief underlying your objection?

Please describe whether, as an adult, you have received any vaccines against any other diseases (such as a flu vaccine or a tetanus vaccine) and, if so, what vaccine you most recently received and when, to the best of your recollection.

If you do not have a religious objection to the use of all vaccines, please explain why your objection is limited to particular vaccines.

If there are any other medicines or products that you do not use because of the religious belief underlying your objection, please identify them.

Please provide any additional information that you think may be helpful in reviewing your request.

I declare to the best of my knowledge and ability that the foregoing is true and correct.

Print Name_____Signature_____Date _____

STATE OF ALASKA
MEDICAL EXEMPTION / IMMUNITY FORM V.07.21

Alaska Immunization Regulations 7 AAC 57.550 and 4 AAC 06.055 require that all children in Alaska public/private schools and child care facilities be immunized unless he/she is exempted or immune.

This form is required to be on file at school and/or child care when a child is not immunized due to a medical contraindication or immunity.

Name of Child   Date of Birth

MEDICAL EXEMPTION

In my professional opinion, the following immunizations would be injurious to the health of the above named child or members of the child's family or household.

Note: During a vaccine-preventable disease outbreak, an exempted child may need to be excluded from routine school or child care until he/she is determined to no longer be at risk of developing the disease.

Check appropriate antigen(s)

□ **Diphtheria**	□ **Tetanus**	□ **Pertussis**
□ **Measles**	□ **Mumps**	□ **Rubella**
□ **Polio**	□ **Hepatitis A**	□ **Hepatitis B**
□ **Varicella**	□ **Hib**	

IMMUNITY

Check appropriate antigen(s)

□ **Diphtheria**	□ **Tetanus**	□ **Pertussis**
□ **Measles**	□ **Mumps**	□ **Rubella**
□ **Polio**	□ **Hepatitis A**	□ **Hepatitis B**
□ **Varicella**	□ **Hib**	

For Pertussis & Hib – History of disease does not infer immunity. Vaccination is recommended.

Check one: □MD □DO □ANP □PA

Name [Please Print] of MD, DO, ANP or PA

Signature of MD, DO, ANP or PA Date

_____

Clinic Name   Phone Number

ALASKA
IMMUNIZATION
PROGRAM

State of Alaska Religious Exemption Form

Alaska Immunization Regulations 7 AAC 57.550 and 4 AAC 06.055 require that all children in Alaska public/private schools and child care facilities be immunized unless he/she is exempted or immune.

This form is required to be on file at the school, preschool, or child care facility if religious exemption is applicable. (Note: Personal or philosophical exemptions are not allowed per state law.) Notarization and annual renewal are required.

Name of Child_____
Birth date _____

I/We affirm that immunization conflicts with the tenets and practices of the church or religious denomination of which the applicant/parent/guardian is a member. I/We understand that if there is an outbreak of a vaccine- preventable disease that my child has not been fully immunized against, my child may be at risk for disease and may be excluded from routine school or child care until he/she is determined to no longer be at risk of developing the disease.

Signature of Parent(s) or Guardian(s)

Telephone_____
Date _____

(Form valid from July 1 through June 30)

State of

Judicial District _____SS.

The Foregoing Instrument was acknowledged before me by

on this _____day of

, 20   .

Witness my hand and seal.

Notary Public (Signature)

Notary's printed
name Notary's
city

My commission expires

APPENDIX E
Student Success Plan

STUDENT SUCCESS PLAN				
Student:	Reporting Faculty:	Incident Date(s):	Related Course(s):	Clinical Lab Theory

IDENTIFIED PROBLEM *Faculty and Student each describe incident*	DESIRED OUTCOME(s) *Faculty and Student collaborate on outcomes*	ACTION PLAN *Faculty and Student collaborate on action plan*
Faculty's description (written by faculty):		- Assignment/Reflection - Skills lab Remediation - Meet with the School of Health Professions Dean - ATI Remediation - Other
Student's description (written by student):		List of specific interventions for success:

Is further follow-up needed? ☐ YES ☐ NO

If yes, please arrange and fill out Evaluation of Outcome box below after student improvement action plan is completed.

I understand that I am expected to develop and carry out this improvement plan to enhance my academic success.

_____

        Student Signature/Date   **Faculty Signature/Date**

EVALUATION of OUTCOME (Only fill out box if "Follow-up required" checked above)
Satisfactory Performance of Action Plan item(s) Needs further follow up. If further follow up is required, initiate new Student Improvement   **Student Signature/Date**   **Faculty Signature/Date**

APPENDIX F
Needlestick Exposure

Policy Name	Needlestick Exposure
Approved by:	Dr. Andrea Houser, Associate Dean of Nursing
Approval Date:	10/14/2022

Policy Statement:
This policy provides coverage for University of Providence nursing students (undergraduate and graduate).
Purpose of Policy:
To provide guidelines to UP nursing students. To prevent transmission of blood-borne pathogens after an exposure. To expedite early reporting and execute immediate intervention after needlestick exposure. To avoid spreading bloodborne infections to others.
Applicable Persons
This policy applies to nursing students (undergraduate and graduate).

University of Providence Student Needlestick Policy
Student Percutaneous Injury/Bloodborne Pathogen Exposure Procedure
In case of needlestick or body fluid exposure* immediately:
- Wash exposed area thoroughly with soap & water or appropriate tissue cleanser.
- Notify preceptor and assigned fac program lead
- Follow facility specific Percutaneous Injury/Bloodborne Pathogen Exposure Procedure
- Seek care within 2 hours of exposure.
- If possible, call first to expedite treatment
- Complete all of the facility specific documentation for Percutaneous Injury/Bloodborne Pathogen Exposure Procedure.
- Follow facility protocols to obtain patient consent for blood draw and consent forms.
- Complete the University of Providence Percutaneous Injury/Bloodborne Pathogen Exposure documentation.

Submit documentation to Program Lead. Program Lead will submit completed documentation to the Associate Dean of Nursing. Submit the following:
- UP Incident Report for Critical Incident
- Incident report from facility where exposure occurred
- Identification of person whose body fluid was exposure source
- Contact person for follow up
- Relevant medical records

If exposure occurs outside local area (more than 30-45 minutes away from the nearest hospital, go to the nearest ER or health care facility.

    a. Students may consult with their onsite preceptor and or call the 24-hour national HIV Post-Exposure Prophylaxis Hotline for Clinicians at 1-888-HIV-4911

    b. If exposure occurs on a weekend, night shift / alternative shifts or holiday, students may call their Program Lead for follow up on the next non-holiday, or workday.

Blood Sampling
Obtain consent of patient (source of exposure) for blood tests per facility protocol
    a. Hepatitis B Surface Antigen (HBsAg)
    b. Hepatitis C Antibody (Anti-HCV)
    c. Antibody to Human Immunodeficiency virus (Anti-HIV)

Student blood to be drawn as soon as possible for
   a. HBsAg**
   b. Antibody to Hepatitis B Surface Antigen (Anti-HBs) **
   c. Hepatitis C Antibody
   d. Anti-HIV
   e. Omit HBsAg & Anti-HBs if the student has a documented seroconversion following a Hepatitis B vaccination series
f. Order CBC and Liver Function Test if placing student on HIV prophylaxis drugs

* Injury must be related to those currently registered as UP student's clinical duties: percutaneous needlestick, puncture wound, laceration, human/animal bite; body fluid exposure to open wound or mucous membrane by splash, aerosol; other blood/unfixed tissue exposure

Treatment Guidelines
   1. Hepatitis B
      a. Patient HBsAg positive and student HBsAg negative and Anti-HBs negative:
         - give one dose of Hepatitis B Immune Globulin (.06 ml/kg intramuscularly) as soon as possible within 72 hours after exposure and begin a Hepatitis B vaccination series within seven days.
         - a student with prior Hepatitis B vaccination with a negative Anti-HBs should receive HBIG and one dose of Hepatitis B vaccine.

      b. No further Hepatitis B testing or therapy is needed if
         - the patient (exposure source) is HBsAg negative
         - the student is HBsAg positive or Anti-HBs positive due to prior disease
         or vaccination, even though the patient is HBsAg positive
   2. Hepatitis C
      a. Patient source is positive for Hepatitis C:
         - test student for HCV-PCR 2-3 weeks after exposure
         - test student for Hepatitis C serology at 6 weeks, 3 months, 6 months, & 1 year.
   3. HIV
      - Risk of HIV transmission following percutaneous exposure to HIV-infected blood is approximately 0.3% (CDC, 2020).
      - Anti-HIV seroconversion in a needlestick recipient has been documented despite use of prophylaxis.
      - Drugs used for HIV prophylaxis have multiple potential side effects. Please contact UP Nursing Program Lead prior to discontinuing prophylaxis medications to ensure it is indeed the medication responsible for the symptoms.
      - Students are responsible for costs of elective evaluation outside of University of Providence.

 Miscellaneous

Students at all sites receive, at no cost, testing, medication and follow up care per 2005 CDC guidelines:
   a. HIV
   b. Hepatitis B
   c. Hepatitis C

The University controller coordinates disbursement of payments for the testing and treatment of exposed students in accordance with the UP-Liability Insurance Policy.

Resources and References

- https://www.cdc.gov/niosh/topics/bbp/guidelines.html
- https://www.cdc.gov/hai/pdfs/HIV/HIVPEPinfographicFINAL.pdf
- https://www.cdc.gov/niosh/topics/bbp/emergnedl.html
- https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030

APPENDIX G: Medication Error

Policy Name	Medication Error
Approved by:	Dr. Andrea Houser, Associate Dean of Nursing
Approval Date:	11/8/2022

Policy Statement:
This policy provides a guidelines and procedure for University of Providence nursing students (undergraduate and graduate) during the occurrence of a medication error during clinical.

Purpose of Policy:
This policy guides students when they have committed a medication error. It can be devastating to the self-esteem and self-concept when one commits a medication error. Some hesitate to report medication errors when they occur. This policy and procedure provide a mechanism for nursing students to report medication errors. We acknowledge that humans are prone to error, but risks should be mitigated so that if an error occurs, the UP Nursing Program Faculty commits to a teaching-learning approach to process improvement. This policy and procedure will be used for education and continuous quality improvement to teach nursing students that medication errors are preventable.

Applicable Persons
This policy applies to nursing students (undergraduate and graduate).

University of Providence Student Medication Error Policy & Procedure
Definitions

Medication Errors: A medication error occurs when any of the "five rights of medication administration" has been violated. Medication Errors include but are not limited to:
- Wrong dosage
- Calculation error
- Exceeding maximum dose
- Wrong route
- Wrong medication
- Medication omitted
- Incorrect time
- Wrong person
- Known Medication Allergy
- Wrong Reason

Reporting: If a medication error is made whether or not it resulted in an adverse patient outcome, it is an Unusual Occurrence and must be reported as such per Local Facility Policy and at the University of Providence Nursing Department.

Medication Errors are Preventable
- Data indicates that the number of reportable medication errors is increasing over time.
- Both low- and high-tech strategies have been designed to ensure safe medication administration and align with the nine rights of medication administration.
- Many low-tech strategies support all nine rights, including the use of standardized communication strategies and independent double check workflows.

Reporting Procedure

Student Procedure

- Upon discovering a medication error, assure patient stabilization:
    o Vital Signs
    o Mental Status Exam / Head To Toe Assessment
    o Oxygen Saturation
    o Monitor For Allergic Reactions
    o Shortness Of Breath
    o Chest Pain,
    o Dizziness
    o Confusion
    o Weakness
    o Shock
    o Cardiopulmonary arrest
- In the event of arrest, start BLS procedure
    o 1. Check responsiveness
    o 2. Check for breathing and pulse
    o 3. Call for help, activate emergency response, call for AED
    o 4. Start CPR per American Heart Association BLS Guidelines (per AHA BLS 2020 guidelines)
- Immediately notify preceptor and treating physician
- Notify UP Clinical faculty
- Discovering party will complete required facility Medication Error (unusual occurrence report) reporting forms and follow facility submission procedures.
    o Follow up may be required for root cause analysis
    o Provide personal contact information

    o Provide UP Nursing Department contact information. Including the Associate Dean of Nursing.
    o Elaborate on the details of the event.
    o Facility Risk Management will conduct and complete the and shall submit a report and action plan. If follow up is necessary such as deposition, litigation, or reparations, the facility Risk Managers will contact UP nursing and the student involved.

Remediation Requirements

- This is a critical event and may be grounds for dismissal. This will be handled on a case-by-case basis.
- A student success plan will be individualized depending on the severity of the medication error.
- No precepted clinical until the stipulations of the SSP and the process improvement plan are met.
- Mandatory supervised practice in the lab.
- Complete IHI Modules for quality and safety:
    o Go to the website https://my.ihi.org/Portal/rise/Contacts/ihi-create-account/create-account-complete.aspx
    o Create an account and login (using your student email)
    o Click "Take a Course"
    o Click "IHI Open School"

- o Select the following:
  - PS 101: Introduction to Patient Safety
  - PS 102: From Error to Harm
  - PS 103: Human Factors and Safety
  - PS 105: Responding to Adverse Events
- May not return to precepted clinical until satisfactory completion of a medication math & calculations exam.
- Formal med -pass check off with the 5-10 medication rights.
- Meet with Associate Dean of Nursing and associated faculty to De-Brief.
- Write a 1-page process paper: Discuss potential implications for medication errors Use following criteria:

  Role, Responsibilities and Scope of Practice:
  - Describe facility policy and procedure on med orders, RN notification, med errors
  - Risk Management and Leadership
  - Distractions to concentration: noise, lighting, conversation, phone, call lights, personal issues, fatigue, being too busy
  - Organization and Prioritization
  - Health Assessments
  - o Procedure:
    - Explain 5-10 rights of medication administration include reason/indication and response. Include the following
    - Where meds are prepared is critical.
    - What is the medication scanning procedure.
    - Describe the environment to prepare meds.
  - o Quality and Process Improvement
    - What is the RN's role in the incident reporting & investigation process?
  - o Financial:
    - Burden of Medical Errors on Healthcare costs
    - Healthcare Reimbursement (reimbursement stops and the hospital/ facility has to pay for all the care associated with the error and sometimes that means forever)
    - Patient Complications associated with the error (what could have happened to the patient).
  - o Patient Safety:
    - Include the local facility's process for the process of medication error management and patient safety.

Faculty Follow-up:
- Faculty will ensure all requirements of Student Success Plan and process outlined above are met. Faculty will notify student, program director, and Associate Dean when remediation requirements are met.
- Faculty will communicate with preceptor and facility regarding circumstances of the incident.
- Student is responsible for communication with preceptor and faculty regarding return to clinical site, after faculty approval.

References

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APPENDIX I

Instructions on Remediation for Content Mastery
Practice and Proctored Exams
(if the benchmark is not met)

Why Remediation?

It is designed to help students receive more individualized attention to build their skills as well as their confidence, so they can live up to their academic potential (FHI Global Education, 2020).

Here are the requirements for remediation
(1) students are placed on a Student Success Plan
(2 The student will need to complete three (3) active learning templates*** *For ractice and proctored exams*
(3) Take the post-quiz after <u>focused review</u> *(for remediation from <u>Practice Test</u>l*
(4) *Take the Practice B exam for remediation from Practice test only*l
(5) The student will need to do 50 practice questions focused on the concept areas that the student scored low in*** *(this is for remediation for to the proctored exam)*

***The faculty member will assign the student which categories must be remediated. This will be based on the student's individual report generated from the student's practice and/or proctored ATI exam.

Part 1 (Student Success Plan - SSP)

If you do not meet the Level II benchmark *(determined by ATI: which states that you demonstrate a proficiency in the knowledge and skills related to the assessed concepts and exemplars required to deliver safe, effective nursing care at the entry-level for the profession. You are also prepared for successful performance in subsequent curricular material.)* on the practice and/or proctored exam, your ATI Coordinator, faculty member and faculty advisor will work with you on setting up a student success plan.

This will require evidence of the remediation. The student success plan will be re-initiated if you do not meet the benchmark.

- The ATI coordinator/faculty member will place you on a Student Success Plan outlining what the student needs to do for remediation.
- A copy of the SSP will be sent to your advisor.
- A copy of the SSP will be sent to Student Success Department so they can provide further guidance on how you can be successful in learning.
- You will remain on the SSP until remediation for that specific test has been successfully completed.

Part 2 (Completing the three active learning templates)

- A focused review will be generated based on your practice or proctored exam results. Its content is based on your performance, linking to Review Modules for targeted study. After a practice assessment or proctored exam, Focused Review directs you to the material you need to study. You may receive multiple pieces of content to review and a post-study quiz.

- On your individual report from the exam, the faculty member will identify the lowest percentages with the most questions and inform you on which concept you will do. In the example below, the faculty member may tell you to do active learning templates on: Elimination, Gas Exchange, and Infection.

Concept	# Points	Individual Score
Acid-Base Balance	6	33.3%
Critical Thinking/Clinical Reasoning/Clinical Judgment	5	0.0%
Elimination	10	10.0%
Fluid & Electrolyte Balance	6	50.0%
Gas Exchange/Oxygenation	10	20.0%
Grief	5	20.0%
Infection	10	20.0%
Inflammation	8	37.5%
Metabolism	6	0.0%
Mobility	8	25.0%
Nutrition	5	40.0%
Perfusion	9	0.0%
Sensory/Perception	6	50.0%
Stress and Coping	6	16.7%
Teaching and Learning/Patient Education	5	20.0%
Thermoregulation	5	20.0%

- Steps for your focused review:
  - Go to your individual report (found once you have finished your test or in your myATI > Results for the exam you just took > Download Report (top right corner)
  - Find the category that you were assigned by the faculty member
  - Once identified, you will choose one of the sub-topics to do your focused review.
    - For example, since your instructor assigned you Elimination, Gas Exchange, and Infection, you will *look at your individual report* and find the Infection section:
      - There are 7 items in this section (Antibiotic Resistant Infections- 2 items, Cellulitis – 1 item, Communicable Diseases – 2 items, and Parasitic – 2 items).
      - You will choose one of those 7 sub-topics

Infection *fl* Items)

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- For example, since infection was the topic, the student chose from their individual report: *Antibiotic Resistant Infections, and then chose Bacterial, Viral, Fungal, and Parasitic Infections: Preventing the Spread of Methicillin-resistant Staphylococcus Aureus Management* for the one active learning template he/she was going to do.

Infection (7 items)
Antibiotic Resistant Infections

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- Next to your topic, you will find out what active learning template you will do and where to find it. In this example, you are going to be doing a System Disorder Active Learning Template. You will find the information to learn about this topic in your ebook - Fundamentals, Chapter 56.

Infection *(7* Items}

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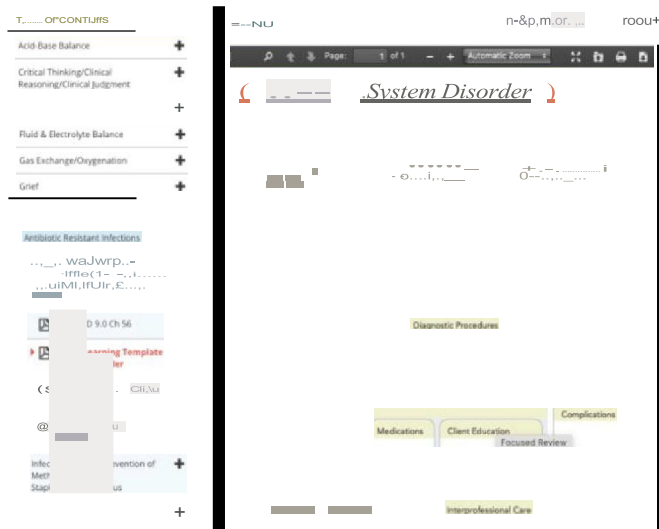
- Next, to find your focused review go to: **MY ATI >ASSESSMENTS> FIND YOUR TEST**
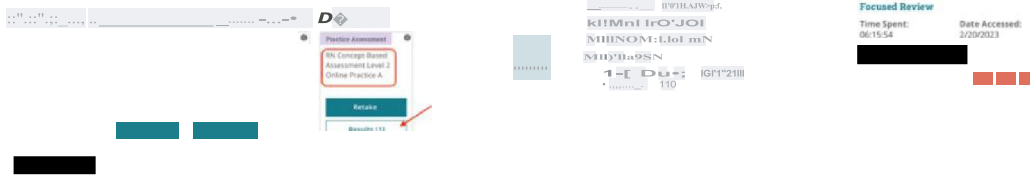
- Once you are in your focused review, find the category. In this case, Infection. Follow these steps:
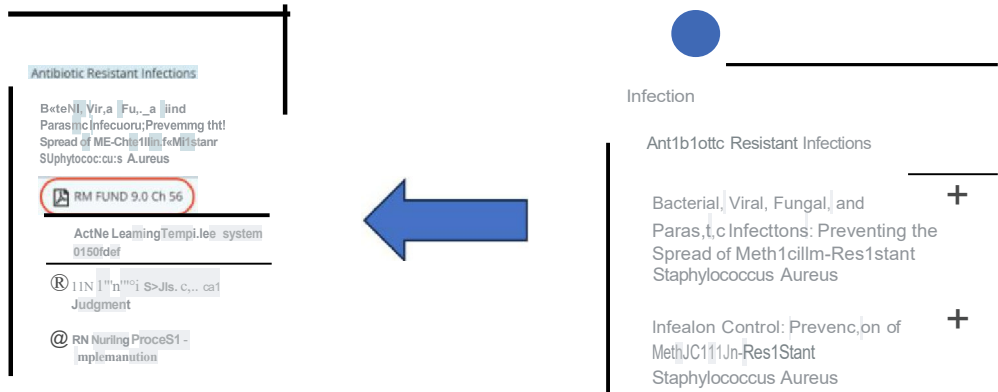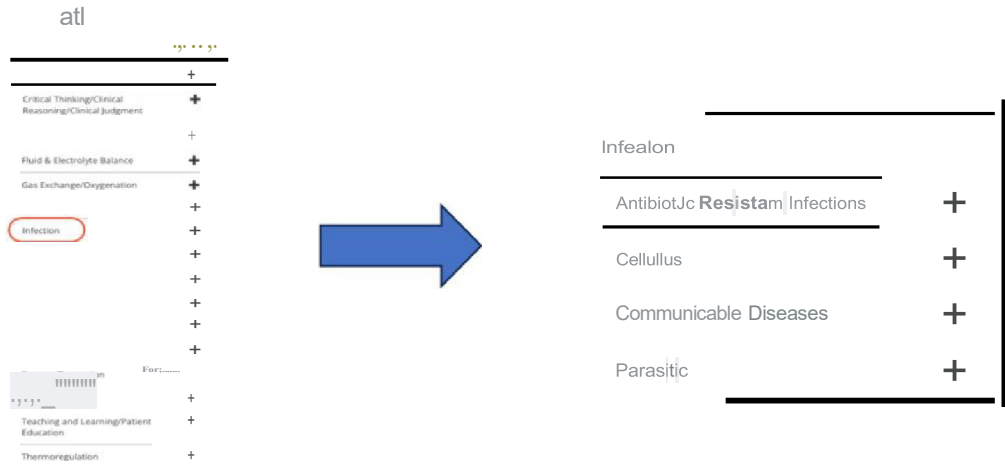
Are they all System Disorder Templates?

No. You will need to look at the individual rel'.!ort which will tell you what active learning template needs to be completed. Sometimes there will be Medication, Skills, Concept-Based, etc. Active Learning Template.

Pharmacological end Parenteral Thereplea (19 Iteme)

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How do I fill out the Active Leaming Template?

1. Make sure you fill out the top portion (name), Disease process, medication, etc. (this depends on what type of active learning template you are filling out). You MUST include the cate ᴼʳʸʲ that it is found in your individual report (for example, in the example below, you would write Adverse Effects/Contraindications/Side Effects/Interactions)

ACTIVELEAIININGTEMPIATE, *Medication*

$TUC>£ NAME Your name

MUIICATION Theophylllne (Adverse Effecis/ContralndlcaUons/SE   IIEVIEW MOIX/LECHAII"ER 17

CATEGOR"rCLASS Airflow Disorders

2. **Each box needs to be handwritten.**

What happens if I only have a few concepts related to a category? Can I do three active learning templates for the categories?
- Yes, you can however you instructor will guide you as to how many active learning templates you need to do per category. For example, if you <u>only</u> scored low in pharmacology, you would have 3 active learning templates to do in that category.

Can I do more than 3 active learning templates?
- Of course! We encourage it as it will help you learn the topics that you didn't do well in. However, for remediation, you are only required to do 3 active learning templates.

Part 3 Post-Study Quiz for Remediation after Practice Exam

After you have finished your focused review for the practice exam, you will need to do the Post-Study Quiz. Please make sure you pay attention to the rationales, so you know why you got the answer right/wrong. Upon completion, make sure you take a screen shot showing it has been completed and upload into Moodle (see second example below).

Part 4 - Practice Test **B (applicable for only Practice Test Remediation}**

<u>Practice Test Bis a requirement</u> if you need to do remediation after taking Practice Test A. You will need to upload your Practice B Individual Report upon completion. Focused review from Practice Bis not required but highly recommended so you can best prepare for the proctored exam.

If you do <u>not</u> need to remediate following Practice Test A, taking Practice test Bis highly recommended so you can best prepare for the proctored exam.

What needs <u>to be uploaded</u> into the respective assignment section in Moodie following a f» actice Exa ?
   a. Signed Student Success Plan
   b. Three active learning templates
   c. Screen shot showing that you have completed the Post-Study Quiz
   d. Individualized Report from Practice B test (this is only applicable for remediation from Practice **A** exam)

Grading
- Students who meet the Level II benchmark, will receive 5/5 points
- Students who need to remediate and will receive 5/5 points upon completion of all requirements above.
   a. If the faculty member finds that the remediation is not done correctly, the student will be given an opportunity to redo and resubmit.
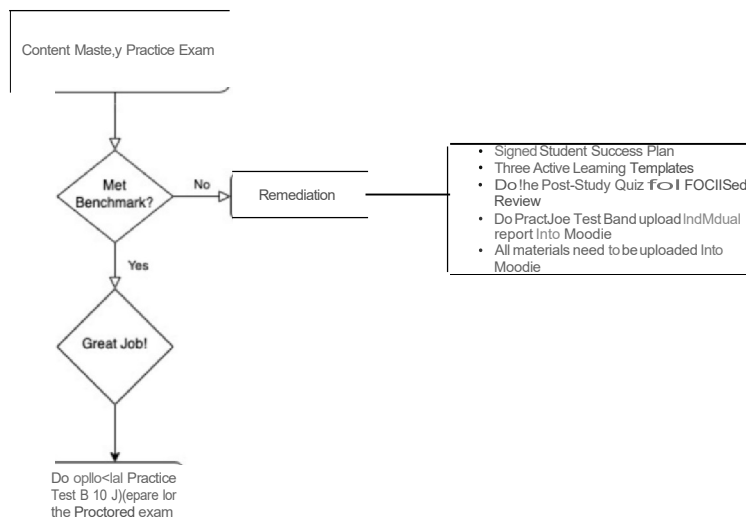
Part 5 (50 practice quiz questions for Proctored Exam Remediation)

**What needs to be uploaded into the respective assignment section in Moodle following a <mark>Proctored Exam</mark>?**
- b. Signed Student Success Plan
- c. Three active learning templates (see instructions above)
- d. Screen shot of the Dashboard view from your Dynamic Quizzing covering the 50 questions

For the active learning templates – see information above. For the 50 quiz questions, the faculty member will assign concepts to you. These concepts are based on test questions where you scored low (60-65% or lower) on the proctored exam. You will need to generate 50 quiz questions from the applicable section within ATI.

Go into MyATI – Assessments– Learning System RN 3.0/Dynamic Quizzing – Dynamic Quiz - Quizzes and Assignments – New Custom Quiz – <mark>Choose Study Mode</mark>. Please make sure you read the rationales after each test question, regardless of if you got it correct or incorrect. In the study mode, if you get it wrong, it will prompt you to pick until you guess the right answer. I do NOT want you to do that – just go straight to Show Explanation. *Stick with your wrong answer and make sure you read the rationale as to why you got it wrong. I don't want to see all 100% for your test questions.* When you want to prepare for exams, I would recommend doing either <mark>Test</mark> (Answers and explanations available after the quiz and you have performance metrics) or <mark>Adaptive CAT</mark> (adapts in real-time based on your ability).
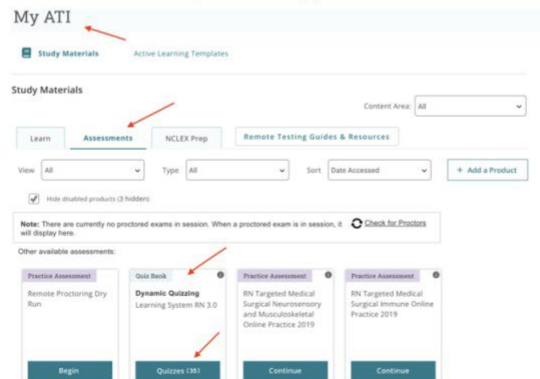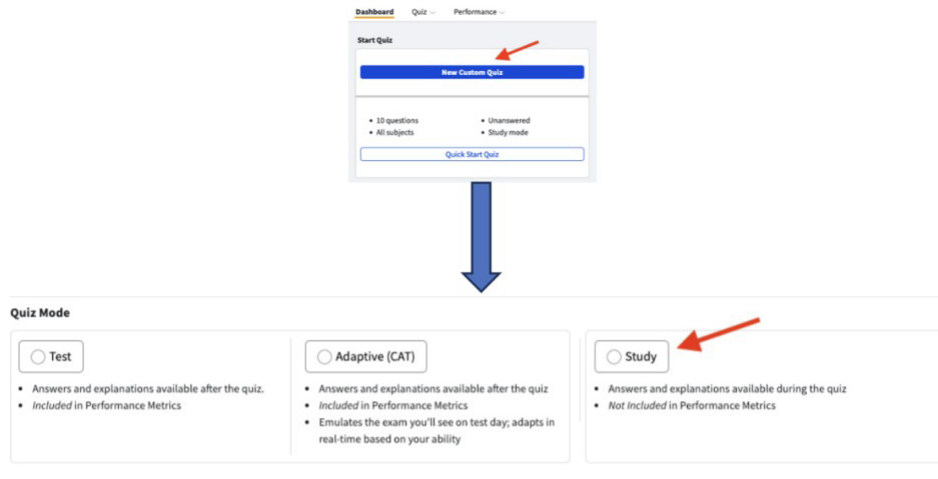
Make sure all the subjects are checked, Difficulty Level is checked for "All," "Untimed" and choose "Unanswered." You can adjust the number of questions available at the bottom. In the search bar, type in the topics under the category that you did not reach above 60-65%. You will get a number of questions related to that topic. Then put in your word in the search box. In the example below it was Advance Directives. It came up with five questions. Make sure you change the name of the quiz to your topic and category. If this is not done, you won't get credit. Then you can "Start Quiz." Every time you need to do a new search make sure you clear all subjects.

You should do the search on the topics of the questions that you missed. For example, in the picture below, you would search for questions on the following topics:

- Advance Directives
- Time management
- Refusing treatment
- Pain quality
- Veracity
- Oxygen therapy
- Tracheostomy Suctioning
- Isolation Precautions
- Etc.

Topics To Review

Management of Care (8 items)

Advance Directives/Self-Determination/Life Planning (1 item)
Providing Information About Advance Directives (Active Learning Template - Basic Concept)

Assignment, Delegation and Supervision (1 item)
Applying Principles of Time Management (Active Learning Template - Nursing Skill)

Client Rights (1 item)
Priority Action to Take for a Client Who Refuses Treatment (Active Learning Template - Basic Concept)

Continuity of Care (2 items)
Change-of-Shift Report (Active Learning Template - System Disorder)
Initial Assessment of Pain Quality (Active Learning Template - Basic Concept)

Ethical Practice (1 item)
Identifying the Principle of Veracity (Active Learning Template - Basic Concept)

Information Technology (2 items)
Best Practice for Oxygen Therapy (Active Learning Template - Nursing Skill)
Tracheostomy Suctioning (Active Learning Template - Nursing Skill)

Safety and Infection Control (7 items)

Topics To Review

Accident/Error/Injury Prevention (3 items)
Assessing Safety Risks (Active Learning Template - Basic Concept)
Minimizing the Risk of Injury for a Client Who Has Dementia (Active Learning Template - Basic Concept)
Preventing Plantar Flexion Contractures (Active Learning Template - Basic Concept)

Home Safety (1 item)
Preventing Falls (Active Learning Template - Basic Concept)

Reporting of Incident/Event/Irregular Occurrence/Variance (1 item)
Priority Action Following a Client Fall (Active Learning Template - Basic Concept)

Standard Precautions/Transmission-Based Precautions/Surgical Asepsis (1 item)
Evaluating the Preparation of a Sterile Field (Active Learning Template - Nursing Skill)

Safe Use of Equipment (1 item)
Use of Home Oxygen (Active Learning Template - Therapeutic Procedure)

Health Promotion and Maintenance (5 items)

Developmental Stages and Transitions (2 items)
Psychomotor Learning (Active Learning Template - Basic Concept)
Teaching About Protective Isolation Precautions (Active Learning Template - System Disorder)

Health Promotion/Disease Prevention (3 items)
Priority Action When Planning Teaching for a Client (Active Learning Template - Basic Concept)
Screening for Colorectal Cancer (Active Learning Template - Basic Concept)
Strategies for Preventing Bone Loss (Active Learning Template - System Disorder)

Here is another example for Time Management.

When you are done with all of your quizzes (equaling 50 questions), you should select "Quiz" and then the dropdown "My Quizzes." This will open up which quizzes you have done (see instructions below).

Since you have labeled each sub-category you are doing test questions on, you will see them named - if you leave the title of your quiz blank or general like "test", you will not get credit for the quiz questions.

You should review your answers by selecting "Review" (written in blue), as that will help you understand what you missed b/c it gives you rationales.

When is remediation due?
Your individual report needs to be uploaded immediately after the exam. Remediation requirements are due the following Sunday after the exam, unless otherwise indicated.

Grading
- Students who meet the Level II benchmark, will receive 5/5 points
- Students who need to remediate and will receive 5/5 points upon completion.
  a. If the faculty member finds that the remediation is not done correctly, the student will be given an opportunity to redo and resubmit.

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           ╱   Met   ╲   No     │             │      │ • Signed Student Success Plan  │
          ⟨ Benchmark?⟩────────▶│ Remediation │─────▶│ • Three Active Learning        │
           ╲         ╱          │             │      │   Templates                    │
            ╲───────╱           └─────────────┘      │ • Do 50 quiz questions from    │
                │                                     │   ATI Dynamic Quizzing         │
               Yes                                    │ • All materials need to be     │
                │                                     │   uploaded into Moodle         │
                ▼                                     └────────────────────────────────┘
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          ⟨ Great Job!⟩
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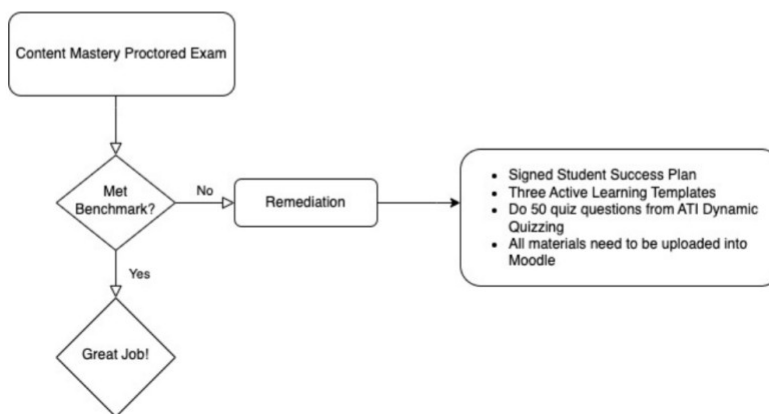
Comprehensive Predictor

During NRS 495, students will take the Comprehensive Predictor. This exam predicts the student's chance of passing the NCLEX on the student's first attempt.

If you do not meet the benchmark, the following will occur:

1. A meeting between you, the Associate Dean of Nursing, the Program Director, the advisor, and the NRS 495 faculty member may be conducted based on faculty discretion.

2. Instead of doing the traditional remediation, you will be expected to study the areas that received a low score.

3. A repeat proctored comprehensive predictor exam will be given again at a set date.

- If you still do not meet the benchmark after the second attempt:

   You will be given an Incomplete in NRS 495. By receiving an Incomplete, your degree will not be conferred until the following requirements have been met:

   o You have completed 100% of the VATI modules and take the VATI Comprehensive Predictor. The recommended benchmark does not need to be met however highly recommended that you try and reach it. The Comprehensive Predictor can be taken up to three times but only one time needs to be submitted to meet the requirement. Confirmation from the VATI Nurse Coach indicating completion of all of the modules and the Comprehensive needs to be submitted to the faculty member by the student.
   a After the student has submitted the proof to the faculty member, the faculty member will update the grade in NSG 495 for the Comprehensive Predictor Assignment (worth 10 points) and submit the change to the University Registrar. Once completed by the University Registrar, the student's grade change will be released.
   a If the requirements above are NOT met by the designated date provided by the faculty member, the student will not receive credit (i.e. zero points) for the Comprehensive Proctored Predictor Assignment within NRS 495 (worth 10 points). The incomplete will be changed to a grade for NRS 495. The grade change will be submitted to the University Registrar. Once completed by the University Registrar, the student's grade change will be released.

- Date for satisfying an Incomplete:
  - The above requirements need to be completed within <mark>21 calendar days</mark> from the end of the term.

* You are still eligible to participate in the celebration event at the end of the program.

**Access to the Virtual-ATI Educator and NCLEX review expires approximately one month after the end of the term. At the end of the month, a post-review study guide is available for download. It provides the graduate with approximately 40 hours of NCLEX review resources to be used independently until the NCLEX date. If a graduate is interested in accessing Virtual-ATI for an additional 12-week period, their account can be reactivated for a discounted rate. Repurchasing ATI is a student expense.

Comprehensive Predictor Practice A → Comprehensive Predictor Proctored

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Degree Conferred if Pass Classes

Didn't meet benchmark

Didn't meet benchmark; ◊et with faculty @faculty discretion

Remediation

Comprehensive Predictor Retake → Passed → Degree Conferred if Pass Classes

Didn't meet benchmark

RECEIVE AN INCOMPLETE IN NRS 495

Comptete 100% of VATI modules Complete VATI Comprehensive Predictor (does not need to meet benchmark)

Student did not complete 100% of VATI modules and did not complete VATI Comprehensive Predictor by the designated date (within the 21 calendar days from the end of the term)

J1

Confirmation from VATI Nurse Coach needs to be submitted to the student (stating completion of 100% of **VATI** modules and Comprehensive Predictor

J1

Faculty will change grade for NRSG 495 for the Comprehensive Predictor Assignment to a zero and grade change submitted to University Registrar

Student submits to 495 faculty member confirmation from VATI Nurse Coach by the designated date (within the 21 calendar days from the end of the term)

J1

Faculty will change grade for NRSG 495 for the Comprehensive Predictor Assignment and grade change submitted to University Registrar

Registar Releases Grade Change and Confers Degree