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Christian Brothers University  
RN to BSN Nursing Program

Registered Nurse to Bachelor of Science in Nursing (RN to BSN)

I. INTRODUCTION

The Christian Brothers  
French priest John Baptist DeLaSalle in Rheims, France founded the Congregation of the  
Brothers of the Christian Schools, commonly referred to in the United States as the Christian  
Brothers, in 1681. DeLaSalle revolutionized the entire educational system of his time and began  
the system that we use today. He instituted several contemporary policies: grading students  
according to ability and achievement, simultaneously teaching many students and teaching in the  
student’s native language, rather than the traditional Latin.

The Brothers are engaged in all phases of education throughout the world. They can be found in  
more than eighty countries conducting elementary and high schools, colleges and universities,  
teacher education schools, orphanages, reform schools, military institutes and institutions  
dedicated to the development of professional and technical services, especially for the poor. The  
Christian Brothers are the largest group of non-cleric, male religious in the Catholic Church today  
and number more than eight thousand worldwide. The Christian Brothers is a Roman Catholic  
religious congregation. They are laymen who do not aspire to become priests, but do take vows  
of poverty, chastity, obedience and service to the poor through education, and promise to live  
together in a community. F.S.C., the letters Brother places after his name, stands for Fratres  
Scholarum Christianarum which is Latin for the Order of the Brothers of Christian Schools,  
known as the De La Salle Christian Brothers.

The Brothers in Memphis  
The De La Salle Christian Brothers arrived in Memphis in 1871 from Chicago, and immediately  
opened a Catholic school that, within a few years, contained elementary and secondary grades,  
college classes and granted graduate degrees. Christian Brothers College, as it was then, became  
the first Catholic college in West Tennessee. The First World War brought an end to the college  
program as men went off to war. The elementary school declined and closed in 1926, while the  
high school prevailed. The college came into existence once more in 1940, and moved to its  
current location on East Parkway South. In 1965, the high school program moved to its present  
location on Walnut Grove Road, and the College, later to become a university, stood alone on  
East Parkway. In 2000, the Brothers agreed to the request of the Diocese of Memphis to  
administer one of the Jubilee Schools, De La Salle Blessed Sacrament. The circle was once more  
complete, with the Christian Brothers offering elementary, secondary and college programs with  
graduate degrees, continuing the tradition of committed Catholic education throughout the city of  
Memphis for more than 140 years.

Welcome to Christian Brothers University (CBU) and to the Lasallian spirit expressed by the  
Brothers of the Christian Schools. That spirit is at the heart of our educational ministries and co-  
curricular programs. We hope this spirit can be in evidence throughout CBU and the other  
communities it touches. The special Lasallian association encourages active participation in this  
community of faith. As a member of this unique community, you have many rights, duties and  
responsibilities. Our primary concern is that each student be afforded the best possible  
environment wherein true Christian growth might be nurtured and brought to full fruition.

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Our Identity
As stated above, Christian Brothers University is a Catholic University founded on the heritage of Lasallian education. While large enough to provide educational opportunities in the arts, business, education, engineering and sciences, the University is small enough to promote teaching as ministry and to provide challenging student-centered learning and personal growth. Students of diverse cultures and religious traditions are encouraged to grow in their own faith. The University welcomes students into an educational community of faith and service, one that is committed to academic excellence, the betterment of society and the care of God’s creation.

Mission Statement: Christian Brothers University:

**Educating minds.** CBU will provide resources and expertise required to nurture and sustain the intellectual and academic formation of its students. CBU will offer programs and resources to ensure that its students are prepared for a career.

**Touching hearts.** CBU will offer academic and enrichment experiences in support of students’ ethical formation. CBU will provide opportunities for students to engage with the wider community.

**Remembering the presence of God.** CBU will provide academic opportunities to investigate matters of faith and religious experience and will provide experiences in support of students’ spiritual formation. CBU will offer academic and enrichment experiences promoting its Catholic and Lasallian heritage.

Core Values
The University provides an inter-faith educational experience grounded in the highest ideals of private and personal virtue that form a foundation for ethical living.

- **Faith**: Our belief in God permeates every facet of the University’s life.
- **Service**: We reach out to serve one another and those beyond our campus.
- **Community**: We work to build better communities and a better society.

CBU was founded in the Lasallian tradition, which values individualized attention so that each student matures intellectually, morally, and spiritually. CBU upholds the Lasallian principles, which include:

- Respect for each individual as a unique person, including support for the needs, aspirations, and learning styles of a diverse student population;
- A Christian perspective;
- An excellent education that prepares graduates to excel in their careers or further studies;
- A spirit of community that extends beyond the student body;
- A life of service to society; and
- A quest for justice and peace.

CBU Expected Student Outcomes:
CBU’s expected student outcomes can be grouped into four major categories:
1. Critical thinking, quantitative reasoning, and effective communication
2. Knowledge of religion, culture, society, and self
3. Knowledge of the natural world, the scientific method, and its application

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4. Moral, ethical, and aesthetic principles

University Accreditation
Christian Brothers University is fully accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS). SACS accreditation permits faculty to compete for federally funded research grants and for students to have access to federally subsidize financial aid. It also means that other institutions recognize CBU courses.  http://sacscoc.org/

History of Nursing Program
The RN to BSN program, established in the fall of 2011 was a new program offering an option for registered nurses to complete a Bachelor of Science degree in Nursing in a hybrid teaching-learning format. The program is fully accredited by the Commission on Collegiate Nursing Education (CCNE) and has full approval of the Tennessee Board of Nursing, effective spring 2013.

RN to BSN Program Overview
The BSN degree for the Registered Nurse builds on the foundation of previous nursing education at the associate degree or diploma levels. Initial programs prepare graduates for RN licensure with courses in the biological and social sciences and nursing. The BSN degree for RNs expands knowledge in areas of research and evidence-based practice, nursing theory, leadership and management, global/community health concepts, healthcare policy, therapeutic interventions, patient-centered care, ethical decision making, quality and safety in the delivery of care and current trends in healthcare. Graduates are prepared to function in new roles as members of healthcare teams in numerous settings. Graduates are eligible for military, Public Health, and Veterans Administration (VA) appointments as well as roles in school health, community, occupational, and other non-acute care settings. BSN graduates are also prepared to enter Masters level and higher degree graduate programs. The format for the RN to BSN program is a blend of face-to-face and online instruction.

The Christian Brothers University RN to BSN program is developed according to The Essentials of Baccalaureate Education for Professional Nursing Practice from the American Association of Colleges of Nursing (2008) (Appendix A) and Quality and Safety Education for Nurses (QSEN) Core Competencies. (Appendix B). The focus is on a curriculum that reflects both the essential elements of nursing practice and the changing role of nurses in the future healthcare delivery system. http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf

The curriculum emphasizes the core values of nursing. Included in these values is the nurse’s relationship as a partner with individuals who are managing their healthcare journey, always respecting the diversity of beliefs and experience that shape the individual’s response to care. In acknowledgement of the rapidly advancing technology and science of healthcare, students will learn to access and critically synthesize knowledge rather than simply committing it to memory. In addition, the program incorporates competencies and standards from other specialty organizations.

Consistent with the mission of Christian Brothers University of faith, service and community, the RN to BSN program allows cohorts of students to work together in a learner-centered environment and be mentored in their new role as professional nurses. Each cohort enhances their nursing knowledge and skills through the process of critical assessment, analysis, synthesis, and evaluation.

This handbook has been developed to provide the student and faculty with information concerning the nursing program at Christian Brothers University. Your suggestions for improving

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this document are welcomed. However, the University reserves the right to modify, add to, delete from, or otherwise change this handbook at any time. Included in this handbook is an overview of:
1. Conceptual and theoretical content of the RN to BSN program
2. Program information
3. Procedures and policies regarding the RN to BSN program

CBU Nursing Program Mission Statement:
The mission of the Nursing Program at CBU is to prepare the student to meet the ever-changing needs of a global community.

This mission is congruent with that of the parent institution, as the nursing program relies on the concepts of teaching as ministry and providing challenging student-centered learning and personal growth. The nursing program welcomes students of diverse cultures and religious traditions into its educational community of faith and service. The program is committed to academic excellence that allows students the opportunity to perfect their skills for the betterment of society and the care of God’s creation.

The mission of the Nursing Program is consistent with the values that epitomize the caring, professional nurse, as identified in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008, p. 27) and the competencies of the Quality and Safety Education for Nurses (QSEN).

Philosophy of CBU RN to BSN program
The philosophy of the nursing program at Christian Brothers University is to provide pragmatic resources for advancing excellence in nursing, which honors the rich texture of diversity, fosters professionalism, and is grounded in the “essence of nursing’s metaparadigm and domains” as described in Benner’s Novice to Expert Theory. (Benner, 1984)

We believe that nurses guided by these values demonstrate ethical behavior in client care. Included in these values is the nurse’s relationship as a partner with individuals who are managing their healthcare journey, always respecting the diversity of beliefs and experience that shape the individual’s response to care. These professional values are listed in the Essentials document of the American Association of Colleges of Nursing (AACN).

- **Altruism** is a concern for the welfare and well being of others. In professional practice, altruism is reflected by the nurse’s concern and advocacy for the welfare of clients, other nurses, and other healthcare providers.
- **Autonomy** is the right to self-determination. Professional practice reflects autonomy when the nurse respects clients’ rights to make decisions about their health care.
- **Human Dignity** is respect for the inherent worth and uniqueness of individuals and populations. In professional practice, concern for human dignity is reflected when the nurse values and respects all clients and colleagues.
- **Integrity** is acting in accordance with an appropriate code of ethics and accepted standards of practice. Integrity is reflected in professional practice when the nurse is honest and provides care based on an ethical framework that is accepted within the profession.
- **Social Justice** is acting in accordance with fair treatment regardless of economic status, race, ethnicity, age, citizenship, disability, and/or sexual orientation.

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Nursing Program Aims:
- To provide quality, efficient and flexible nursing education that prepares graduates for professional nursing practice
- To provide graduates with an appropriate base for master’s or doctorate-level study in nursing practice, education, administration, or research
- To provide graduates with a professional practice base that is responsive to the changing needs of society.

The Nursing Program aims are consistent with *The Essentials of Baccalaureate Education for Professional Nursing Practice*, which require a high-quality liberal education that prepares students for professional practice or further study. Students in the CBU Nursing Program learn leadership and communication skills, evidence-based practice, and professional values. They will understand the potential impact of advances in information management, patient care technology, and preventive medicine, as well as changes in health care policies and regulations. Nursing students are expected to gain the same broad-based liberal education as other CBU undergraduates. They will be prepared to apply critical thinking, quantitative reasoning, and the scientific method in their nursing practice. Their knowledge of cultural, societal, moral, and ethical principles will guide their understanding and decision-making.

RN to BSN Program Outcomes:
The objectives of the Christian Brothers University RN to BSN program are to:
- Develop and implement a curriculum that meets the needs of both students and employers, as measured by their response to program evaluations.
- Graduate at least 75 percent of students in each cohort within three years of entry into the program.
- Have at least ten percent of graduates apply to graduate programs (masters or doctorate-level) within five years of graduation.
- Expand the program as a partner with healthcare facilities to meet the larger community of nurses.

RN to BSN Program Student Outcomes:
The Christian Brothers University Bachelor of Science in Nursing degree prepares the graduate to:
1. Incorporate a solid base in liberal education as the cornerstone of professional practice and education.
2. Integrate current evidence into one’s professional practice.
3. Synthesize healthcare policies as they influence the healthcare system and professional nursing practice.
4. Translate health promotion and disease prevention at the individual and population levels.
5. Apply professionalism, values of altruism, autonomy, human dignity, integrity and social justice to the discipline of nursing.
6. Perform as a nurse leader, who integrates the competencies of Quality and Safety Education for Nurses (QSEN) including informatics, quality, safety, and evidence-based practice in a patient-centered, and collaborative nursing practice (Cronenwett, et. al., 2007).

Conceptual Framework

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The Theoretical Framework for the program is organized around the Novice to Expert Theory (Benner, 1984; 2001) and the competencies of the Quality and Safety Education for Nurses (QSEN). (Appendix B) The domains of Novice to Expert Theory includes the following:

**Helping Role:** Includes creating a climate for and establishing a commitment to healing; providing comfort measures, maintaining personhood in the face of pain and severe disability/illness; promoting client self-care and engagement in their own recovery; selecting appropriate management strategies, application of caring (i.e. through touch); providing physiological and psychological support to clients and families; and steering clients through change.

**Teaching-Coaching function:** Includes appropriate application of timing to capture the client and/or family’s willingness to learn; assisting clients to integrate the dimensions and consequences of illness and to optimize their potential for recovery; exploring and understanding the client’s meaning of illness; and use of problem solving and critically thinking to explore interventions toward recovery.

**Diagnostic and Patient Monitoring Function:** Includes detection and documentation of significant changes in a client’s health status; application of problem-solving and critical thinking in anticipating a client’s change in needs or health status; awareness of a client’s every changing need, and evaluating a client’s potential for wellness.

**Effective management of rapidly changing situation:** Includes assessment of the client’s life-threatening emergencies and acute changes in health status; appropriate management of identified emergencies through application of problem-solving and critical thinking; ongoing evaluation of nursing and medical interventions to optimize client wellness.

**Administering and monitoring therapeutic interventions and regimes:** Includes safe administration and monitoring of intravenous therapy, collaborative healthcare treatments and alternative therapies i.e. skin care and wound management, promoting client self-care measures through educational interventions.

**Monitoring and ensuring the quality of healthcare practices:** Includes provisions for evaluating and ensuring an environment that promotes a client’s physical safety and psychological well-being in all realms of nursing and medical care, as well as a collaborative-interdisciplinary care delivery system.

**Organizational and work role competencies:** Includes coordinating and facilitating the needs of multiple clients, i.e. prioritizing holistic needs; engaging in the creation and facilitation of a therapeutic client and co-hort milieu using management/leadership principles.

### Advisement & Transfer of Courses

**Advisement**

1. Each student admitted to the RN to BSN Program has an initial advising process completed by the RN to BSN department advisor; an advisory plan and form will be completed (Appendix D). Thereafter, a nursing faculty advisor will counsel the student throughout the time she or he is enrolled in the Nursing Program unless there is a request for a change from either the student or the assigned advisor. Advisement consists of professional counseling as well as planning the

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academic program of study for the student. It is the student’s responsibility to contact the advisor for an appointment before or during each registration period as needed and to be aware of university and program requirements. Prior to the appointment with the faculty advisor, the student should review the requirements for the program, general education, and graduation so that the appointment is most productive.

2. Transferability of Prior College Coursework
a) In order to fulfill residency requirements, 35 of the last 70 credit hours and at least 25% of total hours applied toward a degree must be earned at Christian Brothers University.
b) For optional minors, 50% of required courses must be taken at Christian Brothers University.
c) Only courses with grades of “C” or better will be accepted for transfer from other accredited institutions.
d) Only the hours of credit in accepted courses will be posted on the student’s permanent record with no grade point average transferring from other institutions.
e) Advising grants credits for Lower-division nursing coursework. The Department Chair on a case-by-case basis evaluates upper-division courses.
f) Waivers to any these requirements must be made through the Vice President for Academics.

Curriculum Organization - Liberal Arts and Nursing Courses

Timeframe:
The program offers a full-time option to be completed over eighteen months. New cohorts are admitted for start dates in August and January. Advising plan paradigms are in Appendix C. Special Topics Nursing courses are offered during all terms.

Required CBU Nursing Courses – 32 nursing credit hours
3 hr. Dimensions of Professional Practice
4 hr. Introduction to Professional Role Development
4 hr. (3-1) Health Assessment for RNs
3 hr. Professional Role Development II
6 hr. Global Community Health Nursing
2 hr. (0-2) Community Health Nursing Clinical *
3 hr. Evidence-Based Nursing
5 hr. Nursing Leadership
2 hr. (0-2) Professional Practice and Leadership Clinical *

General Education Requirements 31
Upper Division Nursing 32
Lower Division Nursing (transfer or Block Credit) 35
Electives 24
= 122 total

Note: Transfer students must also meet the residency requirements described under “Transfer of Credits from Other Institutions” in the Undergraduate Programs & Regulations section of the University Catalog.

Semester One of Nursing Courses only:
NURS 300 Dimensions of Professional Nursing – 3 (3-0)
NURS 302 Intro to Professional Role Development – 4 (4-0)
NURS 304 Health Assessment for RNs – 4 (3-1)
Credit hours = 11 Nursing credits

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Semester Two of Nursing Courses only:
NURS 402 Professional Role Development II – 3 (3-0)
NURS 405 Global Community Health Nursing – 6 (6-0)
NURS 406 Community Health Nursing Clinical – 2 (0-2)
Credit hours = 11 Nursing credits

Semester Three of Nursing Courses only:
NURS 412 Nursing Leadership – 5 (5-0)
NURS 413 Professional Practice and Leadership Clinical – 2 (0-2)
NURS 416 Evidence-Based Nursing – 3 (3-0)
Credit hours = 10 Nursing credits

Summer Semester for General Education courses/elective as needed.

**General Education Requirements (GER) Credits** (may be transferred) these courses can be arranged around the student’s schedule to be taken with nursing courses, in the summers, or even after the student finishes the Nursing core courses. The RN to BSN program advisor will offer a plan of study for the student to meet their general education and nursing requirements. The student will have the option to decide how to pursue the courses needed to meet the GER requirements.

**ENGLISH**
- ENG 111  
- ENG 112  
- ENG 211/or 212  

**NAT/PHY SCIENCE W/LAB**
- BIOL 103, 107, 109, 111; CHEM 113, 115; NSCI 111, 115, 118, 122, 126, 128; PHYS 150, 201

**SOCIAL SCIENCE/HISTORY** *
- * See GER section of the catalog

**MATH**
- 3 cr hrs

**PHILOSOPHY** *
- * See GER section of the catalog

**RELIGIOUS STUDIES**
- 6 cr hrs

**Math Requirement:** Math 162 (Health Science Applications of Algebra and Statistics) or equivalent (MATH 105 or higher plus one statistics class; see GER section of the catalog)

**Clinical Education**
The RN to BSN curriculum offers the student two immersion experiences to complete or complete the majority of clinical hours during a one-week period. A faculty member facilitates all immersion clinical opportunities, Community Health Nursing (NURS 406) and Leadership Clinical (NURS 416) via an International Service Learning experience (IIE) (the student self-
pays) or a Memphis Immersion experience (MIE). CBU offers a special focus on caring for vulnerable populations. However, the student may opt to customize his/her clinical experience. The program works with the student to arrange the clinical portion of the degree at a facility near the student’s home and/or present worksite. The requirements will be scheduled independently, meaning that the student works with the clinical preceptor and faculty to establish the clinical experiences and the student will keep an ongoing clinical log. Clinical rotations are similar to internships in that the clinical will take place outside of the one night per week evening nursing class hours and will be located in a healthcare agency/institution or other local agency.

CBU Nursing Program uses the ratio of 1:2.8 contact hours for clinical education. For each credit hour of a clinical course, 2.8 contact hours are required.

On occasion, as determined by the Director, there may be an option for students to complete a portion of their Community Health or Leadership Clinical out of sequence. A learning contract between the Director and the student will outline specific objectives, activities, and evaluation process.

COURSE DESCRIPTIONS:
Attendance is mandatory on the first day of all nursing courses. Any student who fails to attend the first day of class may forfeit his/her place in the program.

NURS 300. DIMENSIONS OF PROFESSIONAL NURSING
This course is the first course in the RN to BSN program introducing the student to professional nursing practice. An introductory discussion of the focus of the CBU Nursing program includes: an overview of the history of nursing, discussion of Lasallian traditions, Mindfulness, QSEN, AACN Baccalaureate Essentials, Benner’s Novice to Expert theory, and APA style of writing. Students will assess and develop their nursing informatics competencies, and review grammar and math skills. Roles and responsibilities of a nursing student at CBU are included. Co-requisite: NURS 302 and NURS 304. One semester; three credits.

NURS 302. INTRODUCTION TO PROFESSIONAL ROLE DEVELOPMENT
This course emphasizes the theoretical basis for nursing theory, professional development and socialization, scope of safe practice, the application of APA format in written assignments, and effective communication. An integration of transcultural awareness will be made through patterns of knowing in critical thinking, creativity, empathy, and personal expression. Students will have an opportunity to explore the complexities of healthcare and interdisciplinary team concepts while providing optimal care with specific application to the professional role of nursing. Co-requisite: NURS 300 and NURS 304. One semester; four credits.

NURS 304. HEALTH ASSESSMENT FOR RNs
This course uses didactic and simulated clinical experiences to develop skill levels of the Registered Nurse to conduct a comprehensive health assessment with adults in various settings. The course emphasizes the integration of observations, systematic data collection, and effective communication in performing patient-centered health assessments that include risk assessment and risk reduction. Prerequisite: Admission to the RN to BSN program. One semester; four credits.

NURS 402. PROFESSIONAL ROLE DEVELOPMENT II
This course explores issues and trends of the professional nursing role. The focus will be on global, legal and ethical principles that guide health care policies with specific application to nursing while developing a mindset that facilitates positive change and incorporates evidence based clinical
practices into current health care strategies. Prerequisite: NURS 302. Co-requisite NURS 404 or 405, NURS 406. One semester; three credits

NURS 405. GLOBAL HEALTH NURSING
This course emphasizes the concept of the global community. The concept of the global community will be discussed in preparation for the student to meet the needs of client and client-centered systems through applications of Health Promotion-Disease Prevention embedded in the community/public health nursing setting. The course will explore the needs of the clients across the life span; discuss communicable disease and methods to create healthy communities. Issues of health disparity and access to care will be explored. Students will have an opportunity to explore current health care delivery systems with particular emphasis on high-risk groups and the underserved community. The student will demonstrate synthesis of course topics in the clinical setting. Prerequisite: NURS 300, 302, 304. Co-requisite: NURS 402 and NURS 406. One semester; six credits

NURS 406. COMMUNITY HEALTH NURSING CLINICAL
This course includes application of the concepts of the global community and client centered care in multiple settings through service-based care delivery to underserved/vulnerable populations locally, regionally, and internationally. The clinical may include participation in public health, occupational health, school-health nursing, and simulation experiences Prerequisite: NURS 300, 302, 304 or equivalent. Co-requisite: NURS 404 or 405 and NURS 402. Pass/Fail grading. One semester; two clinical credits.

NURS 412. NURSING LEADERSHIP
This course emphasizes the principles of leadership and management to meet the needs of clients and client-centered systems/facilities for the delivery of cost-effective health care. An overview of leadership and management theories will enhance the student’s knowledge of the legal and ethical implications of the role of professional nurse including conflict management, group process, delegation, staffing, budgeting, quality improvement, effective communication, informatics, change process, healthcare policy, organizational structure and other issues. Concepts and skills are stressed to enhance student career development. Prerequisite: NURS 402 and 405 or 404. Co-requisite: NURS 413 and 416. One semester, five credits

NURS 413. PROFESSIONAL PRACTICE AND LEADERSHIP CLINICAL
This course includes application of the concepts and principles of nursing leadership and management in multiple settings to promote individual and group satisfaction within the work environment through a student/preceptor designed practicum. This course includes synthesis of didactic theory and content in the practicum project including application of current issues and trends in nursing leadership and management and the interdisciplinary and interprofessional role of the nurse in health-care delivery in the 21st century. Co-requisite: NURS 411 and NURS 415. Pass/Fail grading. One semester; two clinical credits

NURS 416. EVIDENCE-BASED NURSING
This course emphasizes the significance of integrating current evidence-based practice with clinical expertise, family and patient preferences and the delivery of optimal care. It introduces research methodology principles, analysis of research designs, ethical conduct in research, and research dissemination. Synthesis is monitored through a literature review and written assignments. Prerequisite: NURS 402, 405, 406. Co-requisite: NURS 412 and 413. One semester; three credits

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NURS 307. FAITH COMMUNITY NURSING (Special Topic)
This course is designed for registered nurses interested in exploring Faith Community Nursing. This course is based on the 2014 curriculum developed by the International Parish Nurse Resource Center (IPNRC). One semester; three credits.

NURS 417. SPECIAL TOPICS IN NURSING
This course is designed to permit intensive study into topics of special interest and timeliness in the area of nursing with approval of the director. Prerequisite: Permission of the Director. One semester; one to four credits.

II. POLICIES AND PROCEDURES

A. Admission, Progression, Withdrawal, Graduation, Readmission

1. RN to BSN Admission Requirements:
For admission to the BSN completion program, the applicant must have:

- A minimum of 2.0 GPA.
- An active/unrestricted multistate license as a Registered Nurse (RN) allowing practice in the state of Tennessee OR successful completion of the NCLEX before the start of the semester. Prospective students may apply in the last semester of the associate degree program.
- Conditional acceptance is available.
- Official transcripts of previous technical school and academic credits from ALL of the colleges, technical schools or universities previously attended must be sent from the institution to CBU via Script Safe OR addressed as follows:

  CHRISTIAN BROTHERS UNIVERSITY  
  NURSING PROGRAM  
  650 EAST PARKWAY SOUTH, BOX 89  
  MEMPHIS, TN 38104

- Two letters of recommendation from former college faculty or immediate supervisors qualified to attest to the applicant.
- A completed application form with application fee.
- An electronically submitted personal statement indicating interest in the program, academic and job-related experience, and career goals.
- A successful interview with the Program Director/Assistant Director.
- Proof of immunizations from vaccine preventable diseases.
- Proof of current TB surveillance and annual Influenza Vaccine.
- Current certification in cardio-pulmonary resuscitation (CPR).
- A $300.00 deposit will be applied to the student’s registration of courses.
- Be subject to any other requirements as set by the Director, Dean and/or Academic Vice President.

* It is strongly recommended the student have a personal computer and high-speed Internet access, and have a high-level working knowledge of word.
2. Satisfactory Academic Progresses and Continuous Enrollment

Academic Continuation - A student must:

a) Maintain a 2.0 grade point average overall.
b) Successfully complete and evaluate clinical experiences and other assessments.
c) Earn a grade of C or better in all nursing courses.
d) Complete all requirements for the RN to BSN degree within five years.

*A total of two nursing courses may be repeated prior to being dropped from the program. A second grade of D or lower would be an automatic dismissal from the program. RN to BSN students must maintain a 2.0 grade point average overall and earn a grade of C or better in all nursing courses. *NOTE: A single course may be repeated only once.

3. Graduation

For Graduation with the BSN the student must:

a). Complete a minimum of 122 credit hours as required for graduation at CBU including General Education requirements.
b). For those students who graduated from a non-regionally accredited nursing program, a block credit of 35 upper-level nursing credit hours for proficiency validated by licensure will be awarded by the last semester of nursing courses. (Fee may be required)

4. Withdrawals

a) A student who withdraws from the Nursing Program prior to the beginning of the semester shall communicate in writing with Director or Assistant Director. If a student fails to provide notification, reinstatement may be adversely affected.
b) A student who has already registered and withdraws must go to the Registrar office and procure the proper form from the Registrar or obtain online and formally withdraw from the course(s) by the campus withdrawal deadline.
c) The student must meet with the Director or Asst. Director for a formal exit interview. A withdrawal form (either the Registrar form or the Nursing Program internal form) must be signed by Director or Assistant Director.

5. Readmission

a) The applicant who withdrew in good standing must reapply online.
b) The applicant must complete a new Personal Statement.
c) If courses have been taken elsewhere after withdrawal from CBU, transcripts must be submitted and reviewed by the academic advisor.
d) The applicant must complete and update all initial application requirements including the TB skin test, CPR, influenza immunization, and RN License. Any other pertinent documents must be submitted and on file prior to consideration for reinstatement.
e) The applicant must complete a current/new Background Check and drug screen.
f) The applicant must complete an interview with the Director or Assistant Director.
g) As space in the cohort of interest is available, the completed application will be reviewed; a student in good standing will be reinstated.

B. Academic Integrity and Plagiarism, as it appears in the CBU Faculty and Student Handbooks, respectively.

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Academic Integrity
CHEATING
Cheating is serious and will not be tolerated. Any type of unauthorized help on any assignment, examination, or quiz constitutes cheating. There are various forms of cheating. They include but are not limited to: plagiarism (see below); enlisting the assistance of another person, including a paid service; modifying academic records and documents; obtaining exam or quiz questions or any other academic material without the permission of the instructor and before such questions are officially revealed; sharing such questions and academic material with other students; and attaining help, without the instructor’s permission, while taking an exam or quiz.

A faculty member will take disciplinary action when cheating is discerned. Disciplinary action may take the form of a warning or the assigning of a failing grade for the assignment, examination or entire course. The faculty member may recommend to the Vice President for Academics that the student be expelled from class.

The following procedures will apply in cases of cheating:

1. After cheating is discerned, the faculty member should immediately inform the student of the alleged charge. Cheating must be discerned, not merely suspected. If at all possible, evidence should be available.

2. The faculty member must, prior to the next class meeting, inform in writing the student, the student’s advisor, the faculty member’s department chair, the Dean of the School and the Vice President for Academics of the charges against the student and any disciplinary action taken against him or her.

3. If the student, who has been accused of cheating, wishes to appeal his or her final grade for the semester, that person shall follow the grade appeal process set forth in Section 3.10 of this Handbook.

4. Multiple infractions may result in permanent expulsion from the University by the Vice President for Academics. Any appeal of expulsion shall be made to the President of the University, but the review is limited to ensuring that fundamental fairness guidelines have been met. If fundamental fairness guidelines have not been met, the President can refer the case back to the Vice President for Academics to ensure that the guidelines are met.

PLAGIARISM
Plagiarism is serious and will not be tolerated. Plagiarism is using the work of others and offering it as one’s own. This includes the use of another’s ideas or writings without proper acknowledgment, submitting a paper written by another, or submitting an examination or assignment containing work copied from someone else.

A faculty member will take disciplinary action when plagiarism is discerned. Disciplinary action may take the form of a warning or the assigning of a failing grade for the assignment, examination or entire course. The faculty member may recommend to the Vice President for Academics that the student be expelled from class.

The following procedures will be followed in cases of plagiarism:

1. After plagiarism is discerned, the faculty member should immediately inform the student of the alleged charge. Plagiarism must be discerned, not merely suspected. If at all possible, evidence should be available.

2. The faculty member must, prior to the next class meeting, inform in writing the student, the student’s advisor, the faculty member’s department chair, the Dean of the School and the Vice President for Academics of the charges against the student and any disciplinary action taken against him or her.

3. If the student who has been accused of plagiarism wishes to appeal his or her final grade for the semester, that person shall follow the grade appeal process set forth in Section 3.10 of this

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4. Multiple infractions may result in permanent expulsion from the University by the Vice President for Academics. Any appeal of expulsion shall be made to the President of the University, but the review is limited to ensuring that fundamental fairness guidelines have been met. If fundamental fairness guidelines have not been met, the President can refer the case back to the Vice President for Academics to ensure that the guidelines are met.

C. American with Disabilities Act (ADA)
Because the RN to BSN program seeks to provide, in as much as possible, a safe environment for its nursing students and their patients, a student may be required, during the course of the program, to demonstrate physical and/or emotional fitness to meet the essential requirements of the program. Such essential requirements may include freedom from communicable diseases, the ability to perform certain physical tasks, and suitable emotional fitness. (Appendix G) Any appraisal measures used to determine such physical and/or emotional fitness will be in compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, so as not to discriminate against any individual on the basis of handicap.

Section 504 of the Americans with Disabilities Act (1990) states, "No qualified individuals with a disability shall, because of that disability, be excluded from services, programs, or activities of a public entity, or be subject to discrimination providing the individual is otherwise qualified."
In addition, nursing students must be, with reasonable accommodation, physically and mentally capable of performing the essential functions of the program. The Core Performance Standards of Admission and Progression developed by the Southern Council on Collegiate Education for Nursing and adopted by all nursing programs in the Tennessee Board of Regents system and other programs in the state of TN include:
1. Critical thinking ability sufficient for clinical judgment.
2. Interpersonal abilities sufficient to interact with individuals, families and groups.
3. Communication abilities sufficient for interaction with others in verbal and written form.
4. Physical abilities sufficient to move from room to room and maneuver in small spaces.
5. Gross and fine motor abilities sufficient to provide safe and effective nursing care.
6. Auditory abilities sufficient to monitor and assess health needs.
7. Visual abilities sufficient to monitor and assess health needs.
8. Tactile abilities sufficient for physical examination.

Students who have educational, psychological and/or physical disabilities may be eligible for accommodations that provide equal access to educational programs and activities in the college setting. The student should contact Disabilities Support Services office in order to discuss individual needs. The student must provide documentation of the disability to the nursing program director so that reasonable accommodations can be requested in a timely manner. All students are expected to fulfill essential course requirements in order to receive a passing grade in a nursing course, with or without reasonable accommodation.

It is the policy of Christian Brothers University to provide reasonable accommodations to qualified students with disabilities. Please see your instructor for proper procedures and arrangements. If you need course adaptations or accommodations because of a disability, if you have emergency medical information to share with the instructor, or if you need special arrangements in case the building must be evaluated, please make an appointment with the instructor as soon as possible. Student Disability Services is under the auspices of the Vice President of Academics and Student Life. The telephone number is (901) 321-3536. For more information on available services, go to http://www2.cbu.edu/cbu/StudentLife/DisabilityServices/

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D. APA Format – APA Format is the writing style used by the CBU Nursing program in the Publication Manual of the American Psychological Association 6th Ed. (APA) style of writing. Information on tutorials and tools that is available for the students. The student is strongly encouraged to make use of the following tutorial available at: http://www.apastyle.org/learn/tutorials/basics-tutorial.aspx

E. Block Credit
For students graduating from a non-regionally accredited nursing program, a Block Credit will be required for transfer of lower division nursing of 35 hours. Before graduation, the Block Nursing Credit of 35 hours will be posted to the student’s record for proficiency as validated by licensure.

F. Code of Ethics
Student Code of Ethics – As reflected in our philosophy, the faculty and students of Christian Brothers University Nursing program ascribe to the “ANA Nursing Code of Ethics.” Developed by the American Nurses Association, the code consists of nine provisions, each with an interpretive statement. Every nurse has an obligation to be familiar with and to practice in accordance with the code and its provisions.

Provision I. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by consideration of social or economic status, personal attributes or the nature of health problems.

Provision II. The nurse’s primary commitment is to the patient, whether an individual, family, group or community.

Provision III. The nurse promotes, advocates for and strives to protect the health, safety and rights of the patient.

Provision IV. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse’s obligation to provide optimum patient care.

Provision V. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

Provision VI. The nurse participates in establishing, maintaining and improving healthcare environments and conditions of employment conducive to the provision of quality healthcare and consistent with the values of the profession through individual and collective action.

Provision VII. The nurse participates in the advancement of the profession through contributions to practice, education, administration and knowledge development.

Provision VIII. The nurse collaborates with other health professionals and the public in promoting community, national and international efforts to meet health needs.

Provision IX. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.


G. Contact Information
Address, phone, email - At the time of registration and throughout a student’s enrollment at CBU, it is the student’s responsibility to keep the Registrar and the Nursing office informed of current contact information, in addition to filing a change of address form with local address, telephone numbers, home address, email address, emergency contact information. This is essential in order

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that schedules, official correspondence, financial aid and emergency messages will not be delayed or lost. Students are held responsible for all communication from the school offices sent to them using the contact information provided by the student.

CBU emails **will be used exclusively** by faculty and administration to communicate pertinent information. Students will be held responsible for information distributed through emails—Please check your CBU email daily. Your CBU address converts to a GMAIL account following graduation. For more information on this, ask IT at help@cbu.edu.

**H. Course Requirements**
CBU requires a minimum of the last 35 semester hours must be completed at this institution. Additional courses may be taken prior to or during the completion of course work for the BSN degree. *NOTE: Once a student has been admitted to CBU, he/she is prohibited from taking general education courses outside of CBU, unless the student receives approval from faculty advisor and program director.

**I. Precautions/Standards for Blood Borne Pathogen Exposure**
The guidelines from the Centers for Disease Control and Prevention (CDC) focus on transmission mechanisms and the precautions needed to prevent the spread of infection. Students receive instruction on the use of these precautions and are expected to adhere to these Standard Precautions in the care of all patients. Students are required to follow the policies of each clinical facility regarding preventing transmission of infectious diseases. Any student who has an exposure of blood or body fluids to mucous membranes or broken skin shall follow the guidelines of the facility in which the incident occurs. It is the student’s responsibility to report the occurrence to the appropriate clinical instructor and complete the Post Occurrence/Exposure Report Form (Appendix E). [http://www.cdc.gov/hicpac/2007IP/2007ip_part3.html](http://www.cdc.gov/hicpac/2007IP/2007ip_part3.html)

**J. Physical Requirements**
Essential Performance Standards are in Appendix G. This form must be reviewed and signed by the student. The form will be kept in the Nursing Program office in the student’s file. The student must update any alterations in physical capabilities.

**K. Uniform Policy**
Personal appearance is valued as a part of the professional development for students in the RN to BSN program. The dress code is a guide for the student to use in meeting the required professional standards. The dress code is to be followed when the student is in a clinical setting including the simulation lab. An exception would be for the Leadership Clinical component, where depending on the clinical assignment and facility, the appropriate dress may be professional attire or approved clothing with a CBU laboratory coat and insignia. The student should appear as an excellent example of personal cleanliness and immaculate grooming when in uniform and/or when representing CBU. The official student uniform is applicable to male and female students.

Uniforms for the Clinical Setting: For a student in an acute, long-term care, rehabilitation or community/home health setting, the approved scrub wear is black trousers and CBU RN to BSN shirt. In a community setting the student may wear a CBU RN to BSN polo style shirt. A white t-shirt without a collar is inappropriate. Criteria for the International Immersion Experience may differ; shorts are prohibited.

Laboratory Coat: As required of the setting, the student is to wear a white lab coat with the CBU insignia on the RIGHT shoulder at clinical settings. It is acceptable for a student to have their

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name, (Mary, RN) embroidered above the pocket. An exception to the standard dress code may be necessary or permitted for some clinical experiences with prior approval of the CBU faculty and clinical agency.

The CBU emblem is required and can be purchased at Landau Uniforms. Landau will sew on the emblem for a nominal fee; alteration of sleeve length is also available.

In clinical, the student is to wear/have:
1. CBU name badge above the waist at the collar on the left side of the uniform at all times in the clinical setting.
2. CBU RN to BSN polo shirt
3. Black poplin scrub pants or trousers or skirt
4. Appropriate fitting undergarments that are not visible
5. White nursing stockings/hose if wearing a skirt
6. Black socks or stockings with black trousers
7. White or black “nursing style shoes” or leather tennis style shoes without additional color or insignia. Shoes are to be clean and polished and closed toe.
8. A clean and wrinkle-free uniform
9. CBU insignia/emblem on the right shoulder of white lab coats
10. Neatly fashioned, clean, and off the face hair
11. Neat, clean, and well-groomed beards and mustaches (for male students)
12. Unscented deodorant
13. No more than one small (1/2”) hoop style or stud-style earring on each ear lobe
14. White ¾ length lab coat. Sleeves come to the wrist bone and are not to be rolled.
15. Stethoscope, black pen and pen light

The student is not to wear or have on their person:
1. Shorts, crop, or ankle Capri style pants
2. No jean or jean type trouser of any color
3. Sleeveless shirts/blouses or tank-style tops, or crew neck t-shirt
4. Excessive jewelry of any type on the fingers, wrist, ankle (one ring on each hand is appropriate) and/or around the neck
5. Piercing of the face or tongue
6. Chandelier or dangling earrings
7. Artificial nails. Artificial nails are defined as substances or devices applied to augment or enhance the nails. This includes but is not limited to: bonding, tips, wrapping, or acrylic or polish overlay.
8. Cell phones, I pad, or PDAs while in the clinical, simulation lab, or classroom, and during exams.
9. “Keds”, open toe shoes, flip-flops or crots of any style
10. Visible tattoos
11. Scented body lotions, perfumes or colognes or after shave during the clinical or lab sessions

For CBU emblem and any other uniform purchases/questions:
Contact: Mr. Wayne Holzemer
Landau Uniforms
901-523-9655
1004 Madison Avenue Memphis, TN 38104

L. CBU SCHOOL CLOSING POLICY:
TELEVISION/RADIO CHANNELS AND SOCIAL MEDIA

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The Vice President for Academics and Student Life will make the decision concerning day classes and offices no later than 5:45 a.m. on the day of the closing. The Office of Communications and Marketing will notify television channels WREG-TV 3, WMC 5-TV (includes WMC790 AM and 99.7 FM), EYEWITNESS NEWS ABC24/CW30, and WHBQ 13 so as to report the closing as soon as possible. When a decision to close day classes has been made, the Vice President for Academics will contact the President to determine if the offices will be closed; if so, such information will be included in the announcement. On days of questionable weather, a call to the stations to say that we are open should be made. The announcement should specify day and/or evening classes.

a) In the absence of the Vice President for Academics, the Vice President for Administration and Finance will make the appropriate decisions.

b) If day classes are cancelled, the following areas should be (if at all possible) opened to serve students:

* Plough Library
* Beringer Center for Computer Studies
* De LaSalle Gymnasium
* Alfonso Dining Hall

2. The decision to cancel evening classes (undergraduate and graduate) is made by the Dean of the Adult Professional Studies no later than 3:00 p.m. on the day of the closing. The Office of Communications and Marketing will notify the stations listed above to report the closing.

3. The Vice President for Academics will make the cancellation decision regarding weekend classes, following the procedure presented in #1.

4. In notifying stations about CBU, the name Christian Brothers UNIVERSITY should be emphasized, so as to distinguish the University from the High School. Notices should also specify either day or evening classes.

5. Whenever classes are cancelled, the campus community will be notified by announcements in the following media:

* The television and radio stations mentioned above
* The CBU website
* CBU’s primary emergency mass notification system
* CBU social media sites

The mass notification system under Campus Police and Safety allows students, faculty and staff to receive emergency messages on multiple devices. Individuals may identify as many as three telephone numbers and one CBU email address (automatically) for receiving emergency notifications. Both voice and text messages can be sent to cell phones. To register or update your information, a valid CBU email account is required. Registration or updating your information is simple and straightforward. Simply go to the Registration Page and follow the instructions.

M. International Students

Students who have English as a second language bring a unique and valuable insight into the class, specifically in the thread of cultural competence. Although students may have English as a second language, it is an expectation that the student is proficient in English to successfully complete written assignments in English only.

N. Copyright

Just because something is on the Internet does not mean it is free of copyright. An image found on the Internet can be an especially dicey proposition. One may be able to look at it. One may be able to make a copy for personal use. One may be able to use it in teaching. One may even be able to use the image in other instances with proper attribution.

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How one intends to use the image is the determining factor in whether one should seek copyright permission. Here are some initial factors to consider:

- Are we an educational institution?
- Are we a non-profit organization?
- Is this work going to be used in the classroom?

“In the classroom” is the operative phrase when it comes to non-profit, educational institutions and copyright. Teachers and students are allowed the use of copyrighted material in the conduct of a class under conditions specified by the Copyright Act of 1976.

However, if one is going to post material to a public website, use it in a publication, or reproduce and distribute it in any way (including email), the individual must seek written permission to use the very same work one may have shown in class last week. One may have to pay for this permission. If an individual is employed in an academic support area, then they must seek permission. Any use outside of the classroom requires permission. On a related note, material (like a film) used for an event, or a club meeting, or anything on-campus outside of an official class meeting attended only by enrolled class members, also requires--not only permission--but the payment of public performance fees as well.

The library maintains a list of Images and Image Galleries (http://www.cbu.edu/subject/images.html), resources that may be used for individual research or educational purposes. You will also find links to the resources’ legal permissions and copyright information pages where you can investigate requirements for other uses of their visual material.

O. University Academic Policies & Procedures

Academic Policies from CBU Student Handbook “The Compass” http://www.cbu.edu/cbu/StudentLife/TheCompass/index.htm Significant information is located in the CBU Student Handbook. The student is advised to download a PDF copy of the handbook for review of the following sections of information.

CBU ACADEMIC POLICIES AND PROCEDURES
A. ACADEMIC MISCONDUCT
B. CHEATING
C. PLAGIARISM
D. GRADE APPEAL POLICY
E. SATISFACTORY ACADEMIC PROGRESS FOR TITLE IV AID

STUDENT LIFE RESOURCES
A. CAMPUS POLICE/SAFETY AND EMERGENCY RESPONSE
B. COUNSELING AND SUICIDE INTERVENTION
C. MEDICAL WITHDRAWAL
D. COMMUTER STUDENT LIFE
E. INTERNATIONAL STUDENT LIFE
F. RESIDENCE LIFE
G. STUDENT DISABILITY SERVICES
H. STUDENT RIGHT TO KNOW (CLERY ACT)
STUDENT CODE OF CONDUCT
A. THE CODE
B. PROHIBITED CONDUCT
C. JUDICIAL AUTHORITY
D. DISCIPLINARY PROCEDURES
E. FORMAL DISCIPLINARY HEARINGS
F. DISCIPLINARY APPEALS PROCEDURES
G. DISCIPLINARY SANCTIONS
H. ALCOHOL AND DRUG POLICY
I. ANTI-DISCRIMINATION/HARASSMENT POLICY
J. SEXUAL ASSAULT POLICY
K. GRIEVANCE POLICY AND PROCEDURE

INSTITUTIONAL POLICIES
A. CLASS WITHDRAWAL AND TUITION ADJUSTMENT POLICY
B. CODE OF COMPUTER PRACTICES
C. COMMUNICABLE DISEASES POLICY
D. INFORMATION DISPLAY
E. PARKING AND TRAFFIC REGULATIONS
F. SCHOOL CLOSING POLICY
G. SMOKING POLICY
H. SPORTSMANSHIP AT ATHLETIC EVENTS
I. STUDENT FREEDOMS
J. USE AND CONTROL OF FACILITIES
K. PATENT AND COPYRIGHT

P. Disputes, Grievances, And Appeals
1. Initial Action Procedure- Students should make every attempt to resolve any disputes regarding academic matters with the faculty involved. Students should follow the order of contact when disputes are not resolved at the level of the individual teacher:
   * Make an appointment with the lead teacher. If not resolved;
   * Make an appointment with the Course Director. If not resolved;
   * Make an appointment with the Director.

Reasons for filing a grievance - In grievances relating to grades, it is important to remember that the Instructor has the responsibility for assignment of grades. Appeal of grades will not be considered at levels above the course instructor unless the student offers evidence of:
   * Discrimination
   * Differential treatment
   * Procedural irregularities

A disagreement with the judgment made by the instructor is not a valid basis for an appeal. Appeals must be made through appropriate channels as described in the The Compass, Section 8.

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2. Grievance Procedure for Appeals
GRADE APPEAL POLICY
Student Grievances other than Grade Appeals must go through the Dean of Students following the guidelines under the Student Code of Conduct in Section 8 of The Compass. Guidelines are also listed in The CBU Catalog.
A student who has evidence that he or she has been assigned a final grade in an arbitrary and capricious *, or prejudicial manner may appeal the assigned grade by following the procedures listed below. These procedures must be initiated within two weeks after the beginning of the subsequent academic semester (or term). Before appealing to the Grade Appeals Committee and within four weeks from the beginning of that semester (or term), the student must complete a form obtained from the Academic Affairs Office with the signatures of all persons mentioned in Steps 1-4 of the Grade Appeals Policy to show that he or she followed these steps.
1. The student should first discuss the grade in question with the instructor involved. Although this first step is highly encouraged, if the student feels uncomfortable discussing the grade with their instructor, the student can initiate the grade appeal process with their advisor.
2. If not satisfied, the undergraduate student should discuss the situation with his or her advisor, the graduate student with his or her graduate director. If the advisor/graduate director deems the appeal appropriate, he or she may discuss the matter with the instructor.
3. If consulting the advisor or graduate director does not resolve the situation, the student should discuss the matter with the Department Chair, who, in turn, should discuss the matter with the instructor. (This step is not required for MEM students)
4. If still not satisfied, the student should refer the matter to the Dean of the appropriate school, who may request a meeting of the student, instructor, Department Chair, and, at the discretion of the student, the student’s advisor or graduate director.
5. If the matter remains unresolved, the student may then appeal the case to the Grade Appeals Committee by written request to the Vice President for Academics. The committee includes five elected faculty members and the Dean of Academic Services who acts as a non-voting chairperson of the committee. Department chairs and school deans are not to serve on the committee. The faculty member and the student in question each may be represented by a nonvoting faculty member of their choosing.
6. The prescribed procedures of the Grade Appeals Committee are on file in the Office of the Vice President for Academics. Before any hearing is undertaken, the Committee’s chairperson will verify that the procedures described in 1-4 have been followed and that all parties involved understand the procedures that will be used during the hearing.
7. The findings and judgments of the Grade Appeals Committee will be communicated to the instructor and the student involved. The Committee will inform the Vice President for Academics of the nature of the findings and judgments. The Vice President for Academics will, in turn, instruct the Office of the Registrar to make any necessary changes. Since the purpose of the Committee is to review charges of arbitrary and capricious *, or prejudicial grading, and since such review is not an infringement on an instructor’s academic freedom, the judgment of the Committee is final.
8. The Chairperson of the Grade Appeals Committee will complete a form as a record of the following from the hearing: verification that proper procedures were followed, summary of committee findings, and vote count. The completed form is kept on file in the Office of the Vice President for Academics.
* A willful and unreasonable action without consideration or in disregard of facts or without determining principle. – Black’s Law Dictionary
3.10.1 Grade Changes
Revised 06/27/16
Grade changes for prior semesters submitted after the midpoint of the following regular semester will require the faculty members’ signature as well as the signature of the Department Chair or Dean of the school before the grade change can be processed by the Registrar’s Office.

III. Clinical and Classroom Expectations

A. Attendance, Absenteeism, Tardiness

a) Student ID – The CBU picture ID is to be worn in clear view when in uniform/lab coat. Students are expected to attend class and be on time. Roll may be taken.

b) A tardy is defined as arriving at the clinical facility or campus classroom ANY time after the scheduled start time. If a student is more than 15 minutes late to a clinical area or campus classroom, the clinical supervisor/faculty has the right to inform the student to leave and the absence may be counted as an unexcused absence.

c) Clinical and campus laboratory attendance (including clinical orientation) is required. The student who is going to be late or absent from a clinical experience (clinical or campus laboratory) must notify the clinical supervisor/campus lab faculty at least one hour before the start of the assignment. The student must also notify the assigned clinical unit at least one hour before the start of a clinical experience if the student is going to be late or absent.

d) Any student who misses a clinical day due to illness will need to bring a provider’s statement of release before the student can return to clinical. Students should not attend clinical experiences if they are febrile or carrying any possibility of communicable disease. Students must contact their clinical faculty or lead teacher if they have any questions about whether they should attend clinical.

e) Any student late for a clinical/campus lab (late, excused and/or unexcused) in one semester will have double the time to the next hour deducted from their required clinical hours and a verbal warning.

f) Any student late for two (2) clinical/campus lab (late, excused and/or unexcused) in one semester will have double the time to the next hour deducted from their required clinical hours and a written warning.

g) Any student late for three (3) clinical/campus lab (late, excused and/or unexcused) in one semester, will fail the clinical/campus lab course.

g) Under unusual conditions or circumstances, any make-up for a missed clinical or campus lab experience is at the discretion of the faculty. A make-up day and a written assignment may be required. Faculty in the course may assign either an evidenced-based paper and/or a case study supported by evidenced-based practice. Assignments are required to have documented references and follow APA format 6th ed., and include nursing care. Faculty will assign the due date. If the student does not turn in the assignment by the due date, the student will fail the clinical rotation.

B. Late Paper Policy:

A formal paper will be accepted for 48 hours past the specified due date. However, the paper grade will include a 5% deduction for each day late. For example, if the paper is submitted one day late, the paper grade will be reduced by 5%. Faculty will assign the due date. If the student does not turn in the assignment by the due date, the student will fail the clinical rotation.

Revised 06/27/16
with a grade of 95 – 5% = a grade of 90.25, two days late 95 – 10% = 85.5. A paper submitted more than 48 hours past due (late) will not be accepted. The student will receive a grade of zero (0) for the paper. Weekly assignments are not included in this policy. Late assignments will not be graded and result in a ZERO.

C. Requesting a paper due date extension: At the discretion of course faculty, a student may request an extension of a paper or assignment no later than 72 hours (3 days) prior to the due date. The resubmission will be no more than seven days after the original due date or in extreme documented situations as evaluated by the faculty. The student may request an extension one time for one paper during the semester.

*Please note that a student may request an Incomplete for emergency medical/family issues only, not for extended time on incomplete assignments.

D. Cell Phones/ Electronic Devices
The University strives to provide a positive learning environment for all students. Cell phones, text messages, emails, telephone calls and related activities disrupt classes and quiet places of study. Use of these items is rude and disruptive to the faculty and class.

a) Cell phones and electronic devices should be turned off in the classroom and clinical area.

b) Remove phone conversations from quiet places (e.g. library, nursing and computer labs)

c) NO TEXTING or use of electronic devices (game playing) while in class, lab or clinical.

E. Policy on Children in Class, Lab or Clinical
It is not possible to provide an environment conducive to learning with children present in the classroom. Students are expected to make child care arrangements in advance.

F. Permission to Tape/Record Lectures
Taping of lectures is a privilege, which may be granted by the individual faculty member, but it is up to students who wishes to tape lectures to ask permission and not simply assume permission. Students should ask for permission at the beginning of the semester with each individual faculty member.

G. Class Activity
At times, there may be a class activity, such as a group case study. The student who is late to class will not be offered the class activity once it has begun. An in-class activity may not be made up due to tardiness or absence. Any in class activity may not be announced.

H. Problems Negatively Influencing Progress In the Program
Students exhibiting inappropriate behaviors that impede the performance of other students in the program or interfere with the functioning of the student will be removed from that setting by faculty or the preceptor. The Program Director may require the student to present documentation from a mutually agreed upon licensed healthcare provider as to the person’s fitness for continuation in the CBU Nursing Program. Refer to Provision VI of the ANA Code of Ethics

I. Professional Behaviors in Nursing Education Students
A key component to any health science program is the expectation of acceptable professional behaviors. The evaluation of these behaviors may have implications beyond institutional consequences, including penalties associated with violations of federal or state law. Nursing students are expected to adhere to Tennessee Board of Nursing (TBN) and CBU institution policies, program policies, federal and state laws, the Nurse Practice Act, and the Nurses Code of Ethics.

Revised 06/27/16
J. Social Media
Resources are available to help guide nurses and students navigate through social media issues as they relate to health care, including the online Social Networking Principles Toolkit through the American Nurses Association at https://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit.aspx.

The White Paper: A Nurse’s Guide to the Use of Social Media from the National Council of State Boards of Nursing should be referred to as well. (https://www.ncsbn.org/Social_Media.pdf). Online social media is a venue in which students may communicate professionally or personally. Content that is contributed to such platforms is immediately searchable, may be immediately shared, and may be accessed and connected back to the individual after long periods of time. Examples include, but are not limited to:

- Facebook
- Twitter
- YouTube
- LinkedIn
- Blogs
- Instagram
- ITunes
- Other available online platforms with user-generated content

Guidelines/policies should reference any standing institutional policy regarding social media or internet usage or expectations. They should also include the expectation that the student follow institutional student conduct policies, HIPAA, conflict of interest policies, privacy or general civil behavior guidelines, and copyright regulations. Students are encouraged to:

- Be thoughtful regarding content that is posted;
- Make it clear in any online discussion or forum in which they may be identified with the school that their personal views and opinions are not necessarily the views or opinions of the school;
- Respect those associated with the school as well as the audience the online information may reach. There should be no insults, ethnic slurs, obscenity, pornographic images, or other objectionable material.
- Be aware of their presentation in online format. Students are representatives of the schools and nursing programs they attend and their words/actions may reflect on the school as well as faculty, other students, staff, donors, or other affiliates.

Educators and future employers may access online information; student presentation should be consistent with professional goals.

If any individual or group offers compensation to a student for participating in an online forum in the student role, this could constitute a conflict of interest and school policies/guidelines should apply. If someone from the media or press contacts a student about posts made in online forums that relates to the school, the student should immediately alert the program director and the school public relations/communications department before responding.

The student must be careful not to violate any laws or regulatory statutes such as HIPAA. Students should not:

- Post private or confidential information
- Post any information, including pictures, of patients or clinical experiences

Revised 06/27/16
K. HIPAA (Health Insurance Portability and Accountability Act)

All information regarding clients at any health care setting is confidential. The Health Insurance Portability and Accountability Act (HIPAA) of 1996 defines those who must comply with HIPAA law as all persons involved with access to client information and medical records. This includes nursing students and instructors. Each clinical agency will have policy and procedure regarding HIPAA regulations. Students may not, under any circumstances:

- photocopy and remove a client’s records from the clinical facility;
- take pictures in the clinical environment with a personal phone, camera, or other recording device;
- divulge information about clients or their treatment modalities outside of HIPAA parameters; or
- destroy any portion of a client’s medical record, which is a legal document.

These are ethical and legal violations and may be the cause for college disciplinary action.

HIPAA violations will result in disciplinary action according to the program’s academic misconduct policy, up to and including dismissal from the program. In addition, because these breaches in confidentiality are violations of federal law, they may result in prosecution.

L. Disruptive behaviors and inappropriate student conduct that could result in disciplinary action include, but are not limited to:

- Disruptive classroom behavior (for example: repeated outbursts, offensive language or gestures, harassments of students or faculty/staff)
- Leaving the clinical facility without permission/abandonment of assigned clients
- HIPAA violations
- Unprofessional or unethical behaviors
- Being under the influence or in possession of alcohol or controlled substances on campus or in a clinical setting
- Threatening, bullying behaviors, and/or incivility
- Practicing outside of their scope; incompetence
- Irresponsible, inappropriate, or dangerous behaviors within the clinical setting
- Theft
- Interference with/obstruction of college or course activities
- Malicious damage of college or clinical facility property

While the faculty will maintain responsibility for classroom/clinical control and may order a student’s temporary removal or exclusion from the activity/experience, permanent removal from the course or program will occur as outlined in the procedures of the school and nursing program. Documentation of a student conduct violation should be placed in the student’s file. The student should be aware of the right to due process through institution and program policies, including steps related to an appeal. Refer to Provision VI of the ANA Code of Ethics.

M. Impaired Functioning/Suspicious Behaviors

The impairment of nurses as a result of alcohol and substance abuse has been recently recognized as a growing nationwide problem. Substance abuse is a disease process and treatment options are available. Of primary importance to the college is that a large percentage of impaired nurses are identified within the first five years of licensing.

All students will be responsible for compliance with:

Revised 06/27/16
• Drug-Free Campus/Workplace Policy Statement

• Rules of the Tennessee Board of Nursing, Chapter 1000-1-.13 Unprofessional Conduct and Negligence (http://www.state.tn.us/sos/rules/1000/1000-01.pdf)

1. The presence or use of substances, lawful or otherwise, which interfere with the judgment or motor coordination of nursing students in this setting, poses an unacceptable risk for patients, colleagues, the institution, and the clinical affiliate. Therefore, the unlawful use, possession, distribution, sale or manufacture, of alcoholic beverages, any drug or controlled substance (including any stimulant, depressant, narcotic, or hallucinogenic, drug or substance, or marijuana), being under the influence of any drug or controlled substance, or the misuse of legally prescribed or “over the counter” drugs or public intoxication on property owned or controlled by the institution; at an institution-sponsored event; on property owned or controlled by an affiliated clinical site; or in violation of any term of the TN State School Drug-Free Campus/Workplace while engaged in any academic or clinical experience poses an unacceptable risk for patients, colleagues, the institution, and the clinical affiliate and is strictly prohibited. If a student in the nursing program appears to be under the influence of alcohol or drugs, functioning in any impaired manner, exhibiting inappropriate behavior in the classroom or clinical, or demonstrating any unprofessional conduct or negligence, the faculty or clinical affiliate representative responsible for that student, using professional judgment, will remove the student, document the circumstances and report the alleged violation. Decisions regarding screening will be made after all documentation has been reviewed. Should a student be dismissed from the program for violation of this policy, a plan will be devised by an identified entity to assist the student which may include mandatory counseling, periodic drug/alcohol screenings, and periodic reporting before a student would be considered for readmission into the program. The student must assume the responsibility for compliance with this plan before a request for readmission into the program is considered.

2. Suspicious Behaviors:
If a faculty member or member of staff at a clinical facility observes a student exhibiting suspicious behaviors indicative of drug or alcohol consumption which might impair his or her ability to perform in a safe manner in the classroom, lab, or clinical setting the following will occur: The faculty or staff member, using professional judgment, will immediately remove the student from current environment and contact the Director or designee of Nursing. The professional(s) observing the student’s behavior must provide documentation including the following: Alleged observations or behaviors identifying impaired function, interaction with clients and or facility staff, conveying the specific nature of alleged involvement with drugs or controlled substances by the student, supportive facts: time, places, circumstances, witnesses or other persons who possess knowledge of the alleged student involvement. If the professional observing the student is not a School faculty member, the statement should also include information about the person’s position at the facility. (In this situation, the signed statement will be given to the supervising faculty member.) The Director or designee of Nursing must talk to the student, immediately after the occurrence, and make the student aware of the specific violation. The professional who determined reasonable suspicion must be present as well. The student will sign that he/she has read the documentation regarding his/her behavior. The documentation will become part of the student’s record.

Revised 06/27/16
3. Procedure for Drug Testing
The Director or designee of Nursing will report the situation to the Vice President or his/her designee. If it is the Vice President or his/her designee’s believes the student is in violation, the student will be required to submit to a drug test. The student will incur all costs of testing.

The student may be directed to contact a family member for transportation to a clinical site if drug testing is not available in the facility where the alleged violation has been observed. If necessary, the faculty member or clinical facility staff member may call the police to transport the student. The procedures of the hospital/agency, where the testing is conducted, will be implemented.

Refusal to submit to Drug and Alcohol Testing and/or a positive test will result in the student receiving an “F” in the clinical course in which the student is enrolled. The student will meet with the Director or designee of Nursing for an exit interview.

The student may be summarily suspended until the results of the drug or alcohol testing are received. The time required of the student to be away from the academic environment in order to undergo required drug/alcohol testing will be considered and evaluated on an individual basis.

The hospital/agency will submit the results to the Director or designee of nursing and to the student.

4. Post Drug Test Procedure
The Director or designee of nursing will forward result to the Vice President or his/her designee. The Director or designee of nursing, the Vice President or his/her designee, and the student will meet to discuss review of test results.

If the results are negative, a meeting between the students, the faculty member, and if applicable, the hospital/agency staff member will be scheduled. The student will also return to class, lab, or clinical.

As students who hold an active RN license and who are found to be in violation of the Drug-Free Campus/Workplace Policy, you will be reported to the Tennessee Board of Nursing and TNPAP. Action taken against a license may prevent the student from completing the nursing program. Students who are licensed nurses through the Nurse Licensure Compact with privileges to practice in Tennessee will be reported to the professional/peer assistance program in their state of residence. Full reinstatement to the college and eligibility for readmission into the nursing program will be considered upon completion of a TNPAP approved rehabilitation program or the recommendation of the TNPAP, completion of a program approved by the professional/peer assistance program in the state of residence for students licensed through the Nurse Licensure Compact or the recommendation of that program, the recommendation of the Vice President and the recommendations of the Director or designee of Nursing.

V. MOODLE
1. MOODLE is considered an extension of the classroom, thus respect of peers and faculty is expected.
2. No use of profanity is allowed on MOODLE and will result in disciplinary action.
3. Political Messaging – No political messages of any kind can be posted on MOODLE.
4. Exam Administration - MOODLE or In Class Exam
   a) All students are expected to take exams as scheduled. Students are required to notify the faculty by phone or email prior to the scheduled exam time if a student is not going to be present in class or available to take an exam online. Students are given faculty contact information in each nursing course syllabus and are expected to have it available at all times. If for any reason a

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student is unable to leave a message for the faculty member via the contact information provided, it is the student’s responsibility to contact the Nursing Office on campus (901-321-3339) and speak with someone. Please remember to state that you are unable to take the exam and be specific as to the course, the faculty’s name and the site you attend. Any student who does not notify the appropriate faculty will receive a grade of F for the examination.

b) The faculty will determine the date and time of any alternate make-up exam in accordance with the syllabus. If the student does not make up the exam on the scheduled date and time, the student will get a grade of F on the exam.

c) Nursing faculty will review and score examinations during the week they are given. Individual student grades will be available and posted one week after the exam has been given. Faculty will post exam grades on MOODLE.

d) Faculty reserves the right to correct any clerical error. This includes both increases and decreases to adjusted exam grades.

e) Student Review of Tests
Post-exam reviews may be scheduled during class time or outside of class time. If scheduled outside of class time, attendance at these reviews is strongly recommended. A student may review his/her test on an individual basis and by appointment with faculty. Previous tests must be reviewed one week before the final course examination; only one exam may be reviewed at a time.

f) Quizzes: MOODLE Quiz Format
The time for a MOODLE quiz will be posted in the course syllabus. If scheduled outside of class time, attendance at these reviews is strongly recommended. A student may review his/her test on an individual basis and by appointment with faculty. Previous tests must be reviewed one week before the final course examination; only one exam reviewed at a time.
APPENDIX A: Executive Summary

The Essentials of Baccalaureate Education for Professional Nursing Practice (2008)

This Essentials document serves to transform baccalaureate-nursing education by providing the curricular elements and framework for building the baccalaureate-nursing curriculum for the 21st century. These Essentials address the key stakeholders’ recommendations and landmark documents such as the IOM’s recommendations for the core knowledge required of all healthcare professionals. This document emphasizes such concepts as patient centered care, interprofessional teams, evidence based practice, quality improvement, patient safety, informatics, clinical reasoning/critical thinking, genetics and genomics, cultural sensitivity, professionalism, and practice across the lifespan in an ever changing and complex healthcare environment.

Essentials I-IX delineates the outcomes expected of graduates of baccalaureate nursing programs. Achievement of these outcomes will enable graduates to practice within complex healthcare systems and assume the roles: provider of care; designer/manager/coordinator of care; and member of a profession. Essential IX describes generalist-nursing practice at the completion of baccalaureate nursing education. This Essential includes practice-focused outcomes that integrate the knowledge, skills, and attitudes delineated in Essentials I – VIII. The time needed to accomplish each Essential will vary, and each Essential does not require a separate course for achievement of the outcomes.

The nine Essentials are:

**Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice**
- A solid base in liberal education provides the cornerstone for practice and education of nurses.

**Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety**
- Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

**Essential III: Scholarship for Evidence Based Practice**
- Professional nursing practice is grounded in the translation of current evidence into one’s practice.

**Essential IV: Information Management and Application of Patient Care Technology**
- Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

**Essential V: Health Care Policy, Finance, and Regulatory Environments**
- Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

**Essentials VI: Interpersonal Communication and Collaboration for Improving Patient Health Outcomes**
- Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

**Essential VII: Clinical Prevention and Population Health**
- Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.

**Essential VIII: Professionalism and Professional Values**
- Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.
Essential IX: Baccalaureate Generalist Nursing Practice

- The baccalaureate-graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments.

- The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf

Appendix B: QSEN Competencies

Competency KSAs (Pre-Licensure)

Overview

The overall goal for the Quality and Safety Education for Nurses (QSEN) project is to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work.

Using the Institute of Medicine competencies, QSEN faculty and a National Advisory Board have defined quality and safety competencies for nursing and proposed targets for the knowledge, skills, and attitudes to be developed in nursing pre-licensure programs for each competency. These definitions are shared in the six tables below as a resource to serve as guides to curricular development for formal academic programs, transition to practice and continuing education programs.

For information on applying the competencies at a graduate level, see the Graduate KSAs page.

Note: This content is reprinted with permission from the "Quality and Safety Education for Nurses" article originally printed in Nursing Outlook Special Issue: Quality and Safety Education.

Definitions and Pre-licensure KSAs

- Patient-centered Care
- Teamwork and Collaboration
- Evidence-based Practice (EBP)
- Quality Improvement (QI)
- Safety
- Informatics
Patient-centered Care

**Definition:** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
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<tbody>
<tr>
<td>Integrate understanding of multiple dimensions of patient centered care:</td>
<td>Elicit patient values, preferences and expressed needs as part of clinical interview, implementation of care plan and evaluation of care</td>
<td>Value seeing health care situations &quot;through patients' eyes&quot;</td>
</tr>
<tr>
<td>- patient/family/community preferences, values</td>
<td>Communicate patient values, preferences and expressed needs to other members of health care team</td>
<td>Respect and encourage individual expression of patient values, preferences and expressed needs</td>
</tr>
<tr>
<td>- coordination and integration of care</td>
<td>Provide patient-centered care with sensitivity and respect for the diversity of human experience</td>
<td>Value the patient's expertise with own health and symptoms</td>
</tr>
<tr>
<td>- information, communication, and education</td>
<td></td>
<td>Seek learning opportunities with patients who represent all aspects of human diversity</td>
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<tr>
<td>- physical comfort and emotional support</td>
<td></td>
<td>Recognize personally held attitudes about working with patients from different ethnic, cultural and social backgrounds</td>
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<tr>
<td>- involvement of family and friends</td>
<td></td>
<td>Willingly support patient-centered care for individuals and groups whose values differ from own</td>
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<tr>
<td>- transition and continuity</td>
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</table>

Describe how diverse cultural, ethnic and social backgrounds function as sources of patient, family, and community values

Revised 06/27/16
Demonstrate comprehensive understanding of the concepts of pain and suffering, including physiologic models of pain and comfort.

Assess presence and extent of pain and suffering
Assess levels of physical and emotional comfort
Elicit expectations of patient & family for relief of pain, discomfort, or suffering
Initiate effective treatments to relieve pain and suffering in light of patient values, preferences and expressed needs

Recognize personally held values and beliefs about the management of pain or suffering
Appreciate the role of the nurse in relief of all types and sources of pain or suffering
Recognize that patient expectations influence outcomes in management of pain or suffering

Examine how the safety, quality and cost effectiveness of health care can be improved through the active involvement of patients and families
Examine common barriers to active involvement of patients in their own health care processes
Describe strategies to empower patients or families in all aspects of the health care process

Remove barriers to presence of families and other designated surrogates based on patient preferences
Assess level of patient's decisional conflict and provide access to resources
Engage patients or designated surrogates in active partnerships that promote health, safety and well-being and self-care management

Value active partnership with patients or designated surrogates in planning, implementation, and evaluation of care
Respect patient preferences for degree of active engagement in care process
Respect patient's right to access to personal health records

Explore ethical and legal implications of patient-centered care
Describe the limits and boundaries of therapeutic patient-centered care

Recognize the boundaries of therapeutic relationships
Facilitate informed patient consent for care

Acknowledge the tension that may exist between patient rights and the organizational responsibility for professional, ethical care
Appreciate shared decision-making with empowered patients and families, even when conflicts occur
Discuss principles of effective communication
Describe basic principles of consensus building and conflict resolution
Examine nursing roles in assuring coordination, integration, and continuity of care

Assess own level of communication skill in encounters with patients and families
Participate in building consensus or resolving conflict in the context of patient care
Communicate care provided and needed at each transition in care

Value continuous improvement of own communication and conflict resolution skills

Teamwork and Collaboration

**Definition:** Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe own strengths, limitations, and values in functioning as a member of a team</td>
<td>Demonstrate awareness of own strengths and limitations as a team member</td>
<td>Acknowledge own potential to contribute to effective team functioning</td>
</tr>
<tr>
<td>Describe scopes of practice and roles of health care team members</td>
<td>Function competently within own scope of practice as a member of the health care team</td>
<td>Value the perspectives and expertise of all health care team members</td>
</tr>
<tr>
<td>Describe strategies for identifying and managing overlaps in team member roles and accountabilities</td>
<td>Assume role of team member or leader based on the situation</td>
<td>Respect the centrality of the patient/family as core members of any health care team</td>
</tr>
<tr>
<td>Recognize contributions of other individuals and groups in helping patient/family achieve health goals</td>
<td>Initiate requests for help when appropriate to situation</td>
<td>Respect the unique attributes that members bring to a team, including variations in professional orientations and accountabilities</td>
</tr>
<tr>
<td></td>
<td>Clarify roles and accountabilities under conditions of potential overlap in team member functioning</td>
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<tr>
<td></td>
<td>Integrate the contributions of others who play a role in helping patient/family achieve health goals</td>
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</tbody>
</table>

Revised 06/27/16
Analyze differences in communication style preferences among patients and families, nurses and other members of the health team

Describe impact of own communication style on others

Discuss effective strategies for communicating and resolving conflict

Communicate with team members, adapting own style of communicating to needs of the team and situation

Demonstrate commitment to team goals

Solicit input from other team members to improve individual, as well as team, performance

Initiate actions to resolve conflict

Describe examples of the impact of team functioning on safety and quality of care

Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care

Assert own position/perspective in discussions about patient care

Choose communication styles that diminish the risks associated with authority gradients among team members

Identify system barriers and facilitators of effective team functioning

Participate in designing systems that support effective teamwork

Value the influence of system solutions in achieving effective team functioning

Examine strategies for improving systems to support team functioning

Evidence-based Practice (EBP)

**Definition:** Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrate knowledge of basic scientific methods and processes</td>
<td>Participate effectively in appropriate data collection and other research activities</td>
<td>Appreciate strengths and weaknesses of scientific bases for practice</td>
</tr>
<tr>
<td>Describe EBP to include the components of research evidence, clinical expertise and patient/family values.</td>
<td>Adhere to Institutional Review Board (IRB) guidelines</td>
<td>Value the need for ethical conduct of research and quality improvement</td>
</tr>
<tr>
<td></td>
<td>Base individualized care plan on patient values, clinical expertise and evidence</td>
<td>Value the concept of EBP as integral to determining best clinical practice</td>
</tr>
</tbody>
</table>
Differentiate clinical opinion from research and evidence summaries

Describe reliable sources for locating evidence reports and clinical practice guidelines

Explain the role of evidence in determining best clinical practice

Describe how the strength and relevance of available evidence influences the choice of interventions in provision of patient-centered care

Discriminate between valid and invalid reasons for modifying evidence-based clinical practice based on clinical expertise or patient/family preferences

Read original research and evidence reports related to area of practice

Locate evidence reports related to clinical practice topics and guidelines

Participate in structuring the work environment to facilitate integration of new evidence into standards of practice

Question rationale for routine approaches to care that result in less-than-desired outcomes or adverse events

Consult with clinical experts before deciding to deviate from evidence-based protocols

Consult with clinical experts before deciding to deviate from evidence-based protocols

Value the need for continuous improvement in clinical practice based on new knowledge

Acknowledge own limitations in knowledge and clinical expertise before determining when to deviate from evidence-based best practices

**Quality Improvement (QI)**

**Definition:** Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice</td>
<td>Seek information about outcomes of care for populations served in care setting</td>
<td>Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals</td>
</tr>
<tr>
<td>Recognize that nursing and other health professions students are parts of systems of care and care processes that affect outcomes for patients and families</td>
<td>Seek information about quality improvement projects in the care setting</td>
<td>Value own and others' contributions to outcomes of care in local care settings</td>
</tr>
<tr>
<td>Give examples of the tension between professional autonomy and system functioning</td>
<td>Use tools (such as flow charts, Value own and others' cause-effect diagrams) to make processes of care explicit</td>
<td>Participate in a root cause analysis of a sentinel event</td>
</tr>
</tbody>
</table>

Revised 06/27/16
Explain the importance of variation and measurement in assessing quality of care

Use quality measures to understand performance
Use tools (such as control charts and run charts) that are helpful for understanding variation
Identify gaps between local and best practice

Describe approaches for changing processes of care

Design a small test of change in daily work (using an experiential learning method such as Plan-Do-Study-Act)
Practice aligning the aims, measures and changes involved in improving care
Use measures to evaluate the effect of change

Value local change (in individual practice or team practice on a unit) and its role in creating joy in work
Appreciate the value of what individuals and teams can do to improve care

Safety

Definition: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examine human factors and other basic safety design principles as well as commonly used unsafe practices (such as, work-around and dangerous abbreviations)</td>
<td>Demonstrate effective use of technology and standardized practices that support safety and quality</td>
<td>Value the contributions of standardization/reliability to safety</td>
</tr>
<tr>
<td>Describe the benefits and limitations of selected safety-enhancing technologies (such as, barcodes, Computer Provider Order Entry, medication pumps, and automatic alerts/alarms)</td>
<td>Demonstrate effective use of strategies to reduce risk of harm to self or others</td>
<td>Appreciate the cognitive and physical limits of human performance</td>
</tr>
<tr>
<td>Discuss effective strategies to reduce reliance on memory</td>
<td>Use appropriate strategies to reduce reliance on memory (such as, forcing functions, checklists)</td>
<td></td>
</tr>
</tbody>
</table>

Revised 06/27/16
Delineate general categories of errors and hazards in care
Describe factors that create a culture of safety (such as, open communication strategies and organizational error reporting systems)

Communicate observations or concerns related to hazards and errors to patients, families and the health care team
Use organizational error reporting systems for near miss and error reporting

Value own role in preventing errors

Describe processes used in understanding causes of error and allocation of responsibility and accountability (such as, root cause analysis and failure mode effects analysis)

Participate appropriately in analyzing errors and designing system improvements
Engage in root cause analysis rather than blaming when errors or near misses occur

Value vigilance and monitoring (even of own performance of care activities) by patients, families, and other members of the health care team

Discuss potential and actual impact of national patient safety resources, initiatives and regulations

Use national patient safety resources for own professional development and to focus attention on safety in care settings

Value relationship between national safety campaigns and implementation in local practices and practice settings

Informatics

**Definition:** Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explain why information and technology skills are essential for safe patient care</td>
<td>Seek education about how information is managed in care settings before providing care</td>
<td>Appreciate the necessity for all health professionals to seek lifelong, continuous learning of information technology skills</td>
</tr>
<tr>
<td></td>
<td>Apply technology and information management tools to support safe processes of care</td>
<td></td>
</tr>
</tbody>
</table>

Revised 06/27/16
Identify essential information that must be available in a common database to support patient care

Contrast benefits and limitations of different communication technologies and their impact on safety and quality

Describe examples of how technology and information management are related to the quality and safety of patient care

Recognize the time, effort, and skill required for computers, databases and other technologies to become reliable and effective tools for patient care

Navigate the electronic health record

Document and plan patient care in an electronic health record

Employ communication technologies to coordinate care for patients

Respond appropriately to clinical decision-making supports and alerts

Use information management tools to monitor outcomes of care processes

Use high quality electronic sources of healthcare information

Value technologies that support clinical decision-making, error prevention, and care coordination

Protect confidentiality of protected health information in electronic health records

Value nurses' involvement in design, selection, implementation, and evaluation of information technologies to support patient care

References


### APPENDIX C – RN TO BSN PARADIGM

**COURSE REQUIREMENTS FOR RN TO BACHELOR OF SCIENCE DEGREE IN NURSING (BSN)**

*This paradigm applies only to students who hold a license as a Registered Nurse seeking to complete a Bachelor of Science in Nursing degree. This degree program is offered in an evening cohort format.*

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Requirements</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>NURS 300 Dimensions of Professional Nursing</td>
<td>3</td>
</tr>
<tr>
<td>I</td>
<td>NURS 302 Intro to Professional Role Development</td>
<td>4</td>
</tr>
<tr>
<td>I</td>
<td>NURS 304 Health Assessment for RNs</td>
<td>4</td>
</tr>
<tr>
<td>I</td>
<td>Total Nursing Credits</td>
<td>11</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Requirements</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>II</td>
<td>NURS 402 Professional Role Development II</td>
<td>3</td>
</tr>
<tr>
<td>II</td>
<td>NURS 405 Global Community Health – Nursing</td>
<td>6</td>
</tr>
<tr>
<td>II</td>
<td>NURS 406 Community Health – Clinical</td>
<td>2</td>
</tr>
<tr>
<td>II</td>
<td>Total Nursing Credits</td>
<td>11</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Requirements</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>III</td>
<td>NURS 412 Nursing Leadership</td>
<td>5</td>
</tr>
<tr>
<td>III</td>
<td>NURS 413 Prof Practice &amp; Leadership – Clinical</td>
<td>2</td>
</tr>
<tr>
<td>III</td>
<td>NURS 416 Evidence-Based Nursing</td>
<td>3</td>
</tr>
<tr>
<td>III</td>
<td>Total Nursing Credits</td>
<td>10</td>
</tr>
</tbody>
</table>

**Total Nursing Credits at CBU**

32

**Transfer of Lower Division Nursing Credits**

<table>
<thead>
<tr>
<th>Or Block Credit</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td></td>
</tr>
</tbody>
</table>

**Free Electives**

24

**General Education Requirements**

- ENG 111 English Composition I 3
- ENG 112 English Composition II 3
- ENG Literature GER 3
- Natural/Physics Science w/Lab GER 4
- MATH 162 Health Science Applications of Algebra and Statistics or MATH104...3
- Social Science/History GER 6
- Moral Values GER 3
- Religious Studies GER 6
- GER Sub Total 31

**Total credits required for the degree 122.** Transfer of equivalent courses will be noted on advisement and the plan of study will be adjusted.

---

1. Attendance for NURS 300 Dimensions of Professional Nursing is mandatory.
2. Clinical rotations are similar to internships in that the clinical will take place outside of the evening class hours and will be located in a health care agency/institution.
3. Students requiring block credit will receive 35 credit hours; which will be posted to their records before graduation.
4. Students must choose approved GER courses listed under General Education Requirements section of the catalog.

Revised 06/27/16
APPENDIX D - RN TO BSN ADVISING CHECKLIST

CHRISTIAN BROTHERS UNIVERSITY

NAME: ___________________________________________  SID: __________________________

UNIVERSITY GENERAL EDUCATION REQUIREMENTS (31 Semester Hours) – Minimum GPA of 2.00 Required

<table>
<thead>
<tr>
<th>ORIENTATION</th>
<th>CBU 101</th>
<th>Minimum GPA of 2.00 Required</th>
</tr>
</thead>
</table>

ENGLISH
CBU 101

ENG 111 COMP
ENG 112 COMP
ENG 211/212 LIT

NAT/PHY SCIENCE W/LAB

SOCIAL SCIENCE/HISTORY *

MATH
MATH 162 or equivalent**

MORAL VALUES*

RELIGIOUS STUDIES*

* See GER section of the catalog
**MATH 105 or higher plus any class that satisfies the statistics General Education Requirement (see GER section, Catalog)

Elective Credit (To Make a Minimum of 122 Credit Hours)

SCHOOL OF SCIENCES CORE (32 Semester Hours) – Minimum Grade Point Average of 2.00 Required

| NURS 300 Dimensions of Professional Nursing | (3) | NURS 406-Community Health Clinical | (2) |
| NURS 302 Intro to Professional Role Development | (4) | NURS 412-Nursing Leadership | (5) |
| NURS 304 Health Assessment for RNs | (4) | NURS 413-Professional Practice Lead Clinical | (2) |
| NURS 402 Professional Role Development II | (3) | NURS 416-Evidence-Based Nursing | (3) |
| NURS 405-Global Community Health | (6) | |

Optional Nursing Courses:

<table>
<thead>
<tr>
<th>BLOCK NURSING CREDIT (35 Semester Hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CREDIT POST DATE: ________________________</td>
</tr>
</tbody>
</table>

If the student has graduated from a non-regionally accredited program, thirty-five credit hours will be posted to student’s record after successful completion of first semester of Nursing and before graduation. Total credits required for graduation: 122 Minimum GPA Required for Graduation 2.0.
APPENDIX E - POST OCCURRENCE/EXPOSURE REPORT FORM

(Complete and forward to the Program Director and Clinical Faculty within 24 hours)

Date of Report ___________________ Time of Report ___________________

Name ___________________ SS# ___________________ Phone ___________________

Date of Occurrence _______________ Time of Occurrence ___________________

Facility ___________________ Location of Occurrence ___________________

Date of last tetanus _______________ Hepatitis B Vaccination Record ___________________

Type of Occurrence: (please check or complete)

Possible Injury _____ No injury ____ Property Damage ____ Complaint _____
Confidentiality Breach ______ Missing Article ____ Medication Error ______
Potential Hazard ________ Other ____________________________
Exposure to blood born communicable diseases ___________________

Description of occurrence or exposure: (Use separate page if necessary and include the following information if applicable: Part of body affected, possible causes, both immediate and long term measures to prevent re-occurrence, witness(es) name and phone number).

____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Student responsibilities:

1. Notified supervising faculty: Date: _______ Time: ______
   Name of supervising faculty: ____________________________

2. Completed incident report as required by facility: Date: _______ Time: ______

3. Reported for testing/treatment: Date: _______ Time: ______
   Physician on site ______
   Facility ER _____
   Student’s PCP ______

4. Name/Signature of attending physician/healthcare provider:

   ___________________________ ____________________________
   (Print Name) (Signature)

5. Student refused examination and/or treatment Yes _____ No _____

   Student Signature: ____________________________________________

   Faculty Signature: ____________________________________________

   Director Signature: ____________________________________________
APPENDIX F – PROGRAM CONSENT FORM

(TO BE REMOVED AND SIGNED BY EACH NURSING STUDENT AND RETURNED TO THE
NURSING OFFICE)

I HAVE READ AND AGREE TO ABIDE BY THE FOLLOWING
Christian Brothers University (CBU) Nursing Policies:

Student Name: ______________________________________________________
(Print please)

I. Code of Ethics
I have read and agree to abide by the CBU Nursing Code of Ethics while I am a student within this program.  __________ (Initial here)

II. Academic Integrity
I have read the CBU Nursing policies regarding cheating and plagiarism and agree to follow these policies while enrolled in this program.  __________ (Initial here)

III. Failure to Abide by Code of Ethics and/or Academic Integrity Policies
I understand the failure to abide by the Nursing Code of Ethics and/or the policy on Academic Integrity may subject me to immediate dismissal from the nursing program.  _______ (Initial here)

IV. Policy Regarding Alcohol and Drugs on Campus
In order to encourage chemical-free activities and support people who choose not to use alcohol and other drugs, and to enforce university, local and state codes, ordinances, and statutes which govern alcohol and other drug use, CBU prohibits Nursing students from possessing, consuming, or using alcoholic beverages and non-medically prescribed drugs and narcotics while on campus or while participating in University-sponsored events on or off campus. Enforcement and penalties regarding this policy are outlined in the current RN to BSN Student Handbook.  ________ (Initial here)

V. Permission to Release Medical Information
I hereby give permission for the CBU Nursing to release medical information according to the policies of clinical agencies.  _____ (Initial here)

VI. Christian Brothers University RN to BSN Nursing Student Handbook
I have viewed the online copy of the BSN Student Handbook for the CBU/RN to BSN Nursing Program. I agree by my signature to abide by the contents within. Failure to abide with the requirements stated herein will result in appropriate action by nursing faculty.  ______ (Initial here)

VII. Student Essential Functions
I have read the Student Essential Functions for the CBU RN to BSN Nursing Program. I can meet the Student Essential Functions as stated. If I can no longer meet the Student Essential Functions, I agree to notify the RN to BSN Program Director immediately.  ______________ (Initial here)

VIII. Permission to Photocopy
I hereby give my permission for photocopying of my written work. I understand that this material is to be utilized by the faculty for curriculum evaluation and development. Further, I understand that my name will not appear on the copy.  __________ (Initial here)
IX. Permission to Release Name and Address
I hereby give permission for the CBU RN to BSN Nursing to release my name and address for professional purposes, i.e., employment. ______________ (Initial here)

X. Acknowledgement of receipt of drug/alcohol use/abuse policy
I hereby acknowledge receipt of Christian Brothers University, RN to BSN Nursing Program’s policy governing the use and/or abuse of drugs and alcohol, its intention to test for such substances, and the possible penalties for violation of that policy. I understand the purpose of the policy is to provide a safe working environment for persons (patients, students, hospital staff, and school staff) and property. Accordingly, I understand that prior to participation in a clinical experience; I will be required by the Christian Brothers University RN to BSN Nursing Program and may be required by the clinical agency to undergo drug screening of my blood and/or urine. I further understand that I am subject to subsequent testing based on reasonable suspicion that I am using or under the influence of drugs or alcohol such that it impairs my ability to perform competently the tasks required of me.

I agree to be bound by this policy and understand that refusal to submit to testing or a positive result from testing under this policy will affect my ability to participate in a clinical experience and may also result in dismissal from the program.

I hereby release Christian Brothers University RN to BSN Nursing Program from any claim or liability arising from such tests, including, but not limited to the testing procedure, the analysis, and the accuracy of the analysis or the disclosure of the results. ______________ (Initial here)

XI. Confidential Information
Information obtained by students through their activities and experiences in nursing classrooms, laboratory and clinical situations, related to clients, personnel and facilities shall be considered confidential. This policy reinforces the ethical and legal responsibility of registered nurses in working with clients and families. Each student is required to sign and practice according to the Clinical Confidentiality Contract shown below.

Christian Brothers University (CBU) - RN to BSN Nursing Program

CLINICAL CONFIDENTIALITY CONTRACT

I, _________________________, hereby state that I will not divulge information, WRITTEN OR VERBAL, about any clients and/or families I or my classmates will encounter in classroom discussion, clinical practice, and agency visits this semester except to my agency preceptor, or clinical instructor. I will omit client/agency-identifying data in any written form. I understand that any breach of this confidentiality will result in a grade of "0" for the clinical week, and that a second offense will result in a final course grade of "0" which would result in failure to progress in the curriculum.

______________________________ Name _________________________ Date
APPENDIX G – STUDENT ESSENTIAL FUNCTIONS

Christian Brothers University RN to BSN Nursing Program

Student Name: (please print)

TEAR OUT AND SIGN AND RETURN TO THE NURSING PROGRAM OFFICE

With job duties that can change by the minute, nurses must be ready to perform a variety of tasks. Below are the essential functional abilities necessary for success (in addition to academic requirements) in the Christian Brothers University RN to BSN Nursing Program. All students are required to meet these essential functions, which include the ability to perform a variety of interventions impacting patient care and safety, as well as interactions necessary in the clinical and classroom setting. The RN to BSN Nursing Program will work with students with documented disabilities to explore whether a reasonable accommodation exists which will allow them to perform essential functions without undue burden. Contact the Program Director for more information. Also see the “Students with Disabilities” policy in the CBU Student Handbook, The Compass.

Physical and Psychomotor - The student must be able to:

1. accurately and reliably visually inspect and observe the skin, facial expression, anatomical structures, posture and movement of others, and color differentiation of fluids;
2. detect and distinguish odors from patients and environment;
3. examine and evaluate/assess blood pressure, and lung and heart sounds;
4. accurately and reliably read and/or manipulate equipment dials and monitors;
5. exhibit sufficient manual dexterity to manipulate small equipment such as syringes for intravenous injections, common tools for screening tests of sensation, etc.; provide support and resistances as needed through complex exercise movements; perform CPR; and treat acutely ill patients without disturbing sensitive monitoring instruments and lines;
6. feel pulses, skin condition, muscle and tendon activity, and joint and limb movement;
7. negotiate level surfaces, ramps and stairs to assist patients/classmates appropriately;
8. lead patients through a variety of examinations and treatments, typically requiring sitting, standing, squatting and kneeling on the floor or treatment table;
9. react effectively and respond quickly to sudden or unexpected movements of patients/classmates;
10. transport self/patients from one room to another, from one floor to another;
11. manipulate another person’s body in transfers, gait, positioning, exercise and other treatment or diagnostic techniques;
12. lift at least 30 pounds on a regular basis and, on occasion, move real/simulated patients generating lifting forces of up to 75 pounds.
13. maintain patient care activities, and other essential functions, throughout an eight (8) hour work day.
Communication, Reading and Writing-The student must be able to:

1. attend selectively and in a controlled and respectful manner to various types of communication, including the spoken and written word and non-verbal communication;
2. relay information in oral and written form effectively, accurately, reliably, thoroughly and intelligibly to individuals and groups, using the English language; and
3. read English (typed and hand-written in a minimum of 12 point size) and read graphs and digital printouts.

Cognitive/Psychological/Affective Functions-The student must be able to:

1. recall, interpret, extrapolate and apply information from a variety of sources (i.e. reading material, lecture, discussion, patient observation, examination and evaluation/assessment);
2. collect, analyze and evaluate relevant data from a variety of sources (i.e. reading material, lecture, discussion, and patient evaluation/assessment);
3. demonstrate emotional maturity, stability, and flexibility needed to perform nursing care functions, engage in therapeutic communications, provide patient education, and function effectively in stressful clinical situations;
4. adapt to changing situations;
5. exercise critical thinking skills to solve problems;
6. organize, prioritize, and assume responsibility for one's work;
7. always maintain a level of consciousness and alertness that ensures patient safety: refrain from the use of illegal drugs at any time while enrolled as a student; refrain from performing clinical duties while impaired by alcohol, legally prescribed medications, or excessive fatigue which affect the ability to safely perform these functions;
8. accept persons whose appearance, behaviors and values may be in conflict with his/her own. Nursing care must be provided regardless of the patient’s race, ethnicity, age, gender, religious preference or sexual orientation;
9. (with the understanding that no student will be required to participate in a medical procedure in conflict with his or her personal beliefs and values) learn the underlying medical principles for all procedures and, without regard to one’s personal beliefs regarding them, to provide competent and compassionate nursing care to patients before and after such procedures;
10. establish professional, trusting, empathetic relationships with individuals, families and communities;
11. effectively engage in teamwork;
12. meet externally established deadlines.

Professional Behaviors-The student must:

1. refrain from the use of illegal drugs at any time while enrolled as a student or the performance of clinical duties while under the influence of alcohol or while impaired by legally prescribed medications which affect an individual’s ability to safely perform nursing functions;
2. communicate in a professional, positive, tactful manner with patients, physicians, nurses, other staff, faculty, clinical supervisors, and fellow students;
3. demonstrate ethical behavior in the performance of nursing responsibilities including: maintaining patient confidentiality, exercising ethical judgment, and exhibiting integrity, honesty, dependability, and accountability in the performance of one’s responsibilities and in connection with one’s behavior and attitude at all times;
4. project a well groomed, neat appearance at all times to include cleanliness, modesty, and neatness in appearance;
5. exhibit a teachable attitude, a willingness to learn, acceptance of instruction and openness to constructive feedback with appropriate respect for those in authority;
6. not use profane language or gestures at any time; and
7. treat all persons with respect and dignity.

I acknowledge receipt of Student Essential Functions and understand its contents. I acknowledge that I must meet these essential requirements to be admitted or readmitted to Christian Brothers University RN to BSN Nursing Program, and to remain a student in the Nursing Program. I understand that the requirements contained in this policy are in addition to any obligations set forth in the Student Handbook.

http://www.cbu.edu/idc/groups/studentlife/documents/web_assets/cbucompass_

Signature____________________________________________ Date _____________