AVILA UNIVERSITY

SCHOOL OF NURSING

STUDENT HANDBOOK

2023-2024

August 2023

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MISSION STATEMENT

The mission of the School of Nursing, guided by our Catholic identity, is to prepare nursing graduates for generalist practice in a complex and ever-changing health care environment. Graduates will:

1. Discover, understand, and appreciate the human responses and varied perceptions of life experiences.
2. Understand the nursing role in socially and globally responsible health care.
3. Participate with others in achieving health and optimal responses to life experiences through safe and quality, patient-centered care, evidence-based practice, and effective communication.
4. Assume professional nursing roles of provider of care, designer/manager/coordinator of care and member of the interprofessional team who advocates for the patient and the nursing profession.

PHILOSOPHY

The School of Nursing at Avila University supports and is consistent with the values of the larger Avila Community including excellence in teaching and learning; the worth, dignity, and potential of each human being; diversity and its expression; the development of the whole person; right relationships, with God, self, others, and creation; service with the dear neighbor. In addition, the School of Nursing (SON) is responsive to changing demographic, academic, technological, and practice environments including the ongoing incorporation of professional guidelines and evidence-based findings into the academic program.

The professional nurse is educated through a baccalaureate of science in nursing (BSN) degree. The BSN program includes preparation in the liberal arts, behavioral, biological, and natural sciences, communication, and technology, as pre-requisites for nursing courses. The nursing courses prepares the graduate for entry into generalist practice and facilitates professional role competency as provider of care, designer/manager/coordinator of care, and member of the interprofessional team who advocates for the patient and the nursing profession. To best meet these role expectations, the professional nurse must embrace the values of caring and continuous professional development and recognize varied perceptions of and responses to life experiences that people encounter. The professional nurse respectfully acknowledges individual differences and the importance of these differences in achieving health and optimal responses to life experiences.

Health is viewed holistically and globally, encompassing individual, families, communities, and populations with varying degrees of health- or illness-related needs and perceptions. Health is determined by the perceptions of the individual. Health includes promotion of wellness as well as the treatment and prevention of illness and the impact of social determinants of health on individuals and populations. The nurse's role in promotion of wellness is becoming increasingly important to our society.

Person is defined broadly as individuals, families, communities, and populations. Health and illness-related needs are encountered in broad and diverse environments including home, school, hospital, clinic, neighborhood, and faith-based settings. The curriculum is based on the belief that all individuals have the ability to self-determine and to impact their health and environment.

Teaching strategies, both in person and online, facilitate students' learning to make connections between the liberal arts, sciences, and nursing practice. Effective teaching occurs in a supportive environment. Evidence-based educational strategies facilitate active learning and are collaborative. Clinical experiences, in a variety of environments, including simulation, are designed to facilitate application of learned material to the care environment. Learning is assessed in the students' increasing knowledge base, ability to apply such knowledge to practice, and personal, social, spiritual, and professional development. Program outcomes assessment and constituency satisfaction guide curriculum decisions.

With an ever-increasing body of knowledge, new evidence for best practices, and shifts in the type of patients and settings in which nurses provide care, the curricula and courses provide opportunities for students to search, retrieve, critique, and synthesize information for making situated clinical judgments. In other words, the faculty believe students are best prepared to practice if they think conceptually.[1]

Responsibility for learning resides in the student. Lifetime learning requires self-direction, self-motivation, continuous acquisition of new knowledge and skills, use of effective and facilitative communication, clinical reasoning, and evidence-based decision-making. Throughout their baccalaureate education, students make connections between their liberal arts and science courses to nursing practice. Evaluation of learning focuses on achievement of effective communication skills, higher-level thinking skills, and role development in a changing practice environment.

The School of Nursing gratefully acknowledges the sponsorship, contribution, and far-reaching vision of the Sisters of St. Joseph who established this program over 75 years ago. The education provided reflects the Sisters' charism to recognize and care for the dear neighbor and to promote right relationships and social justice.

[1] Giddens, J.F. (2021). Concepts for Nursing Practice (3rd ed.). Elsevier: St. Louis.

ANA CODE OF ETHICS FOR NURSES PROVISIONS[2]

The Code of Ethics for Nurses is a guiding reference for student and registered nurses. Adherence to this code is expected professional behavior. Students are expected to know, understand, apply this code in the clinical and academic setting.

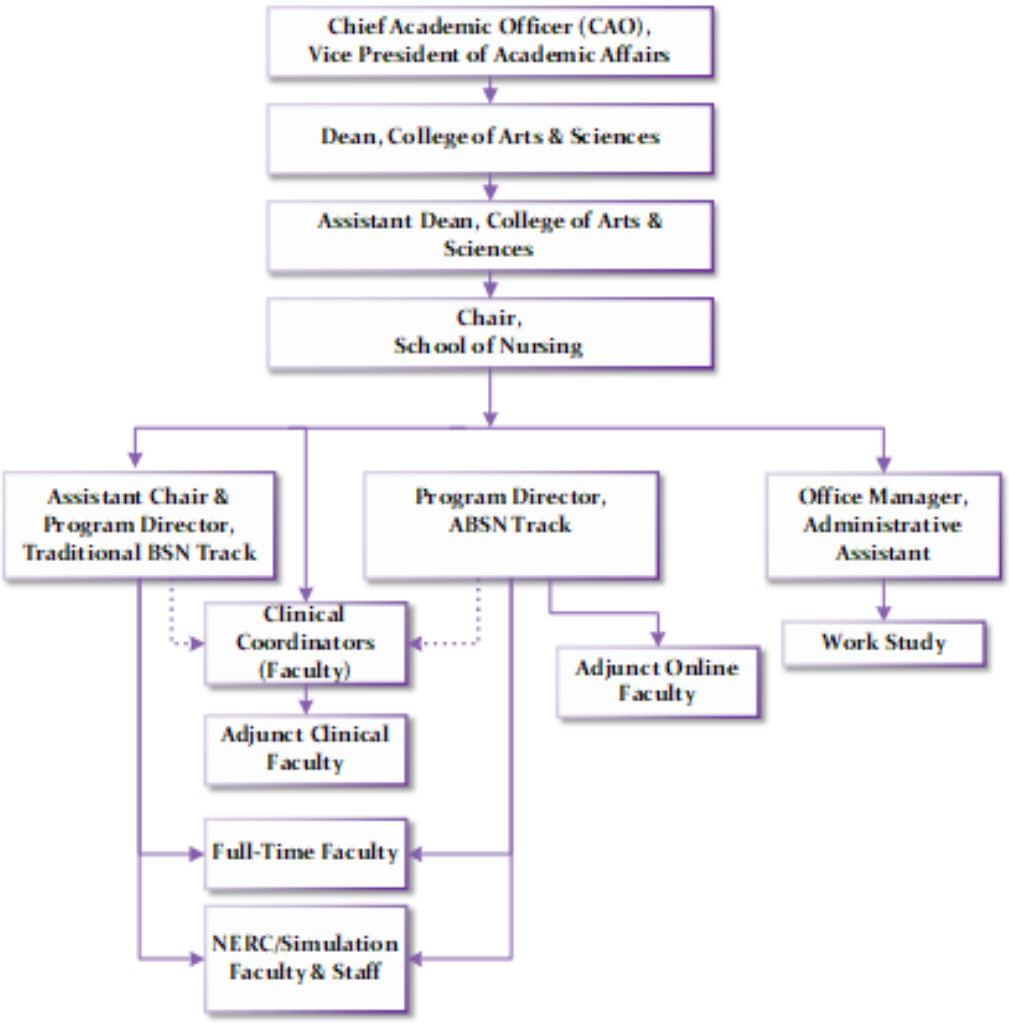
1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person
2. The nurse's primary commitment is to the patient, whether, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions' and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

View the Nursing Code of Ethics for Free

[2] American Nurses Association. (2015). *ANA Code of Ethics with Interpretive Statements.* Silver Spring, MD: The Association.

SCHOOL OF NURSING ORGANIZATIONAL CHART

(Effective Fall 2023)



SCHOOL OF NURSING FULL TIME FACULTY ROSTER 23-24

FACULTY	EDUCATIONAL CREDENTIALS	RANK	OFFICE #	OFFICE PHONE
Caryl Goodyear	PhD NEA-BC, CCRN-K, FAAN	Chair-Assistant Professor	301C	816-501-3682
Megan Ashcraft	MSN. CNE	Assistant Professor	412	816-501-3686
Lonna Boen	MSN	Assistant Professor	301B	816-501-3688
Rhonda Brown	MSN, CCRN-K	Assistant Professor	304	816-501-2917
Santina Brown	MSN, FNP	Assistant Professor	410	816-501-2416
Cheryl Carlin	MSN, CNE	Assistant Professor	413	816-501-2409
Tracy Koehler	MSN	Assistant Professor	408	816-501-3701
Madelyn Marshall	BSN	Instructor	Village	816-501-3687
Kellie Quesada	MSN	Assistant Professor	425	816-501-3220
Bruce Voegele	BSN, MA	Instructor	301A	816-501-3638
Angel Yanez	DNP	Assistant Professor	422	816-507-0162

STAFF ROSTER

NAME	CREDENTIALS	TITLE	OFFICE #	PHONE NUMBER
Anita Arnold	BSN	Simulation Operations Specialist	Village	816-501-3687
Debra Bortniker	NA	Office Manager	Nursing Suite	816-501-3671 or 3672
Kristin Gaughan	NA	Administrative Assistant	Nursing Suite	816-501-3672

ADJUNCT THEORY AND CLINICAL FACULTY ROSTER

See syllabi for faculty information.

CURRICULUM OUTCOMES ASSESSMENT

Outcome assessment is used throughout the educational process at Avila to evaluate program effectiveness. The nursing program curriculum is built around the university-wide outcomes of Personal, Social and Spiritual Development, Communication Skills, Higher Level Thinking Skills and Knowledge as well as professional guidelines. The program of nursing, university and/or accrediting agencies, determines assessed outcomes.

Assessment activities occur throughout the program, at the end of the nursing curriculum and post-graduation. Assessment early in the nursing program can provide the faculty a baseline from which to evaluate curricular impact on outcomes. Assessment activities may include course assignments or surveys. Post-graduation outcome assessments help to evaluate such things as graduate and employer satisfaction and success on the nursing licensure examination. The nursing program curriculum outcomes are:

1. Select and use effective and facilitative communication techniques to deliver evidence-based patient-centered care with emphasis on patient safety and positive professional working relationships.
2. Perform professional role competencies with an emphasis on the roles of provider of care, designer/manager/coordinator of care and member of the interprofessional team.
3. Integrate clinical reasoning and evidence-based decision making to deliver patient-centered care in a changing practice environment.
4. Demonstrate personal knowing, spirituality and cultural humility in socially and globally responsible health care.

PRE-LICENSURE BSN PROGRAM COURSE SEQUENCE

Semester	Courses designated with a ** are ABSN courses. These courses are prereqs in the Traditional program sequence.
1	NU 325 Pathophysiology ** NU 425 Foundations of Health & Illness Concepts NU 450 Development of the Professional Nurse I NU 452 Pharmacology NU 453 Health Assessment
2	NU 111 Nutrition ** NU 471 Women & Children Health Concepts NU 473 Psychosocial Nursing Concepts NU 459 Health & Illness Concepts II NU 458 Practicum I
3	NU 466 Gerontologic Nursing NU 470 Development of the Professional Nurse II NU 481 Practicum II NU 482 Health & Illness Concepts III NU 476 Foundations of Evidence-Based Nursing
4	NU 484 Population Based Health Concepts NU 485 High Acuity Nursing Concepts NU 488 Practicum III NU 489 Capstone Practicum

ACADEMIC PLANNING

NCLEX – Pre-licensure students

Upon completion of graduation requirements, the pre-licensure graduate applies to take the National Council Licensure Examination (NCLEX) for professional nurses. Licensure applicants must have completed the basic professional curriculum in an accredited school of nursing.

Completion of the BSN program does not guarantee eligibility to sit for the licensure examination. Please review the State of Missouri Nurse Practice Act which provides the requirements for exam application.

Certain criminal activity, functional abilities and other applicant information may render a graduate ineligible for licensure. The State Board of Nursing in the state in which licensure is sought will make the decision whether to allow an individual to take the licensure examination. Refer to Section 335.066 and 335.046 of the State of Missouri Nurse Practice Act

Avila University School of Nursing curriculum meets the requirements for initial licensure for the states of Missouri and Kansas. Graduates who intend to apply for initial licensure in another state should check the state's website for additional information and make an appointment to meet with the SON Chair if additional information is needed.

Student Success Services

Avila University views disability as an important aspect of diversity, and is committed to providing equitable access to learning opportunities to students with documented disabilities (e.g. mental health, attentional, learning, chronic health, sensory, physical, etc.). If you are a student who has (or may have) a disability, please contact the Student Access Office located in the Center for Student Excellence in Hodes (lower level of Carondelet, building 8) to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom setting. Students are encouraged to register with the Student Access Office as soon as they begin their coursework but may register at any point during their studies. Accommodations, however, are not provided retroactively. Students may contact the Student Access Office by email (DSO@Avila.edu), telephone (816-501-3666), or by stopping by their office. Students may also visit the website to learn more about the Student Access Office

Professional Liability

All School of Nursing faculty and students in the nursing major are covered with professional liability insurance by Avila University. Coverage is in effect for the academic year, for program required clinical activity. Please note that this is NOT health insurance. Students are **required** to maintain their own personal health insurance throughout the program.

Syllabi and Textbooks

It is **STRONGLY RECOMMENDED** to keep your syllabi and nursing textbooks until you have passed the licensure exam. Learning retention is essential to success on the licensure exam.

Contact Information

Students must maintain current contact information with the Registrar's Office as well as in the School of Nursing. Changes to address, phone number, or emergency contact should be reported as soon as possible. All students are provided with an Avila email account and are expected to check it **daily** for communication from the university faculty and staff.

Hooley Bundschu Library and Learning Commons

Please visit the library and learning commons (building #3) to learn more about their resources. You may also visit the library website for more information.

CINAHL Plus with Full Text may be accessed through the EBSCO Host portal through the library's Databases page.

Student Services

Please visit the the Avila University student quick links page for campus information and student services including a campus map.

PRE-LICENSURE BSN PROGRAM EXPENSES

TUITION AND FEES:

Refer to current Avila University Catalog and/or course schedule for tuition, fees and reimbursement information.

Additional costs are incurred by students coming into the major for the Junior and Senior years. Where amounts are noted, please note these are approximations and subject to change.

JUNIOR YEAR:

1. Program Fees ($600/semester)
2. Stethoscope ($50 approximate)
3. Colored scrubs (ordered through nursing program vendor, approx. $30/set, two sets recommended)
4. Watch with second hand (varies)
5. Shoes for clinical – refer to dress code (varies by student preference)
6. Books- Faculty provides a list of textbooks, required resources and approximate costs. Students may choose to select ebooks, purchase traditional texts or rentals. Some books are required to be purchased and used throughout the program.
7. Other clinical agency/site requirements- Background check, drug screen etc (varies)
8. Fees for immunizations/titers/screening/certifications (varies by your provider)

SENIOR YEAR:

1. Program Fees ($600/semester)
2. Graduation Fee: This fee includes rental of hood, cap and gown at approximately $175. This fee is due with final semester bill.
3. Class Ring: Class rings are available for purchase during the spring semester of the senior year. Purchase from the university bookstore. ($50+)
4. Nursing Composite Photograph: All students are requested to have a photographic sitting for a composite. A sitting fee of approximately $30 is required. You may purchase pictures for personal use.
5. State Board Application and National Council Licensure Examination: Licensure fees vary by state, submitted with the licensure application. A testing service fee of $200 is submitted with the NCLEX application.
6. Final transcript fee of approximately $10.00.
7. Books – Faculty provides a list of text books, required resources and approximate costs. Students may choose to select ebooks, purchase traditional texts or rentals. Some books are required to be purchased and used throughout the program.
8. Other clinical agency/site requirements
9. Fees for immunizations/titers/screening/certifications (varies by your provider)

AVILA STUDENT NURSE ORGANIZATION (ASNO)

A student nurse organization is available for those students who have declared an interest or a major in nursing.

PURPOSE:
To cohesively contribute to nursing education, to represent professional interests and concerns and to aid in the development of the whole person, and his/her responsibility for the health care of others.

AIMS:
To involve freshman and sophomore nursing students and foster added interest of junior and senior student through:

1. Community volunteer services
2. Lectures and demonstrations to supplement academic and clinical experiences
3. Providing a medium through which information and assistance can be obtained through peers and faculty
4. Unifying, activating, and developing relationships between nursing students so as to strengthen their professional and personal endeavors
5. Providing an organization through which members can keep well informed as to trends in nursing, government legislation, and the community.

OBJECTIVES:
Peerhood, communication, involvement, education, and applied skills.

PROGRAM ADMISSION

STANDARDS OF ADMISSION TO PRE-LICENSURE BSN PROGRAM

Criterion: Any applicant to the School of Nursing.
Purpose: To facilitate fair and consistent acceptance into the nursing program
Policy Statement:
1. The Avila University School of Nursing is committed to non-discrimination and equal opportunity in its admission process.
2. Students are accepted into the nursing major by decision of the nursing faculty to fill the designated number of positions.
3. Written notification of acceptance of admission to the nursing major from the School of Nursing is required.

Criteria for Admissions Consideration
Students seeking consideration for admission to the nursing program must:

1. Have a minimum cumulative GPA of 2.80.
2. Achieve a level of "proficient" or above on the TEAS test. TEAS can be repeated one time and it is recommended that a student remediate and wait at least 30 days prior to retaking the assessment. The assessment must be taken within 24 months of the time of application to the SON. If the TEAs is failed twice in a row, the student must wait 1 full year in order to attempt it again
3. Obtain a "C" or above in all prerequisite courses prior to beginning nursing courses. These courses may be repeated only once.
4. Courses in science may not be more than 10 years old.
5. Complete the application process to the School of Nursing by the application deadline of January 10 for fall entrance and August 10 for spring entrance the year you plan to start nursing major coursework for Traditional applicants. ABSN applications are due June 10 for Fall enrollment and Oct 1 for Spring enrollment. Applications received after the deadline will be considered using the admission criteria on a space-available basis after the first round of admissions has been completed.

Students Seeking Enrollment in the ABSN Program are subject to the same admission criteria and policies as students applying for the traditional BSN program with the following exceptions: Students must have completed 59 transferable credits (to meet the Avila core requirements) including the Nursing prerequisites.

Nutrition and Pathophysiology are prerequisites for the traditional BSN program but are included in the ABSN program curriculum.

Enrollment in Nursing Courses

1. Meet and maintain agency requirements on background disclosure. Students will not be admitted to the program or continue in the program, if any screening finds convictions such as crimes against persons, (murder, sexual misconduct offenses,

domestic violence, stalking, etc.,) kidnapping, burglary, sale (or possession) of illegal drugs, arson, weapons violations, wire fraud, drug trafficking, tax law violations, crimes on federal property, and/or drug and/or alcohol abuse.

2. The School of Nursing and/or clinical agencies require documentation to maintain the safety of healthcare workers, students, and patients. Such documentation may include but is not limited to TB screening, immunizations (e.g., rubella, rubeola, mumps, varicella, hepatitis B, Tdap, influenza, Covid-19), current basic lifesaving certification (AHA health care provider), confidentiality statement, color blindness test, Clinical Orientation Manual Exam, drug screen, criminal/mental health background check, proof of health insurance. Such documentation is required by the published due date for each requirement. Failure to provide such information will result in withdrawal of admission status or dismissal from the program, whichever is appropriate for the due date.

Direct-Entry Admission (Only applies to TBSN)

High school seniors admitted to Avila may secure a place in the traditional nursing program by meeting, at a minimum, the following criteria:

1. 24 ACT Composite
2. 24 ACT Science sub-score
3. A cumulative high school GPA of 3.0 (on a 4.0 scale) or its equivalent
4. A cumulative GPA of 3.25 or higher when beginning the nursing program
5. Achieve a level of "proficient" or above on the TEAS test (TEAS can be repeated one time and must be taken within 24 months of the time of application to the SON).
6. All other criteria for School of Nursing admission

Guaranteed Admission (Only applies to TBSN)

Students who complete their first and second year coursework at Avila with a cumulative GPA of 3.25 or above at the time of application to the nursing major and achieve a level of "proficient" or above on the TEAS test (TEAS can be repeated one time and must be taken within 24 months of the time of application to the SON) will have admission granted provided that all other criteria for admission are met and all other additional considerations are satisfactory.

Additional considerations for admission to the program are given to the following:

1. Overall GPA
2. Number of credit hours taken at Avila (does not apply for the ABSN admissions).
3. Academic history with patterns and trends indicating potential for academic success (e.g., successful completion of a full-time semester, limited number of repeated courses or grades of C in sciences).
4. Eligibility for licensure. As noted earlier, refer to the Nurse Practice Act in the state in which you anticipate licensure. Graduation does not ensure licensure eligibility.

Post Baccalaureate

Cumulative GPAs of applicants who have already earned an undergraduate degree will be calculated on completed coursework that is required for the nursing major.

Previous Nursing Enrollment

A student seeking admission who has prior enrollment in a nursing program will be considered for admission if the student has a minimum cumulative GPA of 2.80 in nursing courses. Students will not be considered for admission if they have received grades of D, F or W/F (withdraw/failing) in any previous nursing program or have been dismissed for nonacademic reasons from a nursing program.

If a dismissal or earned grade was determined to be a result of an exam average that is higher than the exam average currently required by the Avila School of Nursing, the Admissions Committee will review the information and determine if a letter of petition is required to continue with the application process.

If students are transferring from another nursing program or have taken an extended leave from Avila's Nursing program, any nursing courses more than 2 years old must be repeated. Contact the Nursing Admission Coordinator for additional information.

Procedure for Traditional (TBSN) Admission:

1. Student must complete the Avila University admission process, including submission of official transcripts from all higher learning institutions attended.
   a. Current Avila students including Direct-Entry and Guaranteed Admit students, must complete and return the SON Intent Form by the specified application deadline of January 10 or August 10 the year you plan to start nursing major coursework.
   b. Students not currently enrolled at Avila must complete the application process for Avila University and Nursing CAS by the specified application deadline of January 10 or August 10 the year you plan to start nursing major coursework.
2. Student must complete the TEAs test with a passing score of proficient or above by the deadlines stated above.
3. Student seeking any exception to the admission criteria must submit a letter of petition to the coordinator of the School of Nursing Admissions Committee.
4. The coordinator of the School of Nursing Admissions Committee will send the student a letter documenting the admission decision.
5. Student will complete documentation requirements and all required pre-requisite courses by the published deadline to maintain admission status.

Procedure for Accelerated BSN (ABSN) Admission:

1. Student must complete the Avila University ABSN admission process, including submission of official transcripts from all higher learning institutions attended by the deadline of June 10 or October 1 the year you plan to start nursing major coursework.
2. Student must complete the TEAs test with a passing score of proficient or above prior to being enrolled in any nursing classes.
3. Student seeking any exception to the admission criteria must submit a letter of petition to the ABSN Admissions Advisor.
4. The ABSN Admissions Advisor will send the student a letter documenting the admission decision.
5. Student will complete documentation requirements and all required pre-requisite courses by the published deadline to maintain admission status.

ACCEPTANCE OF REQUIRED PREREQUISITE COURSEWORK

Criterion: All pre-licensure School of Nursing applicants.

Purpose: To maintain currency of knowledge pertinent to success in the nursing program.

Policy Statement:

1. Official transcripts noting completion of required pre-requisite coursework must be submitted to the Registrar's Office and advisor prior to the first day of classes in the semester for which it is required.
2. Science courses over ten years old will not be accepted.

Procedure:

1. Student must complete an application to the university
2. Student must request official transcripts of all undergraduate work be submitted to the Avila University Office of the Registrar.

TRANSFER OF NURSING CREDITS

Criterion: All School of Nursing pre-licensure applicants with credits in nursing courses completed at another nursing program.

Purpose: To consistently consider transfer of nursing coursework. This takes into consideration currency and appropriateness of content for course equivalency.

Policy Statement:

1. Student must have a minimum GPA of 2.80 in nursing courses.
2. Student must have grades of C or better in nursing courses.
3. Students will not be considered for admission if they have received a grade of D, F or W/F (withdraw/failing) in the nursing program.
4. Student must have evidence of full-time enrollment in a nursing program within one year of anticipated enrollment in nursing at Avila University.
5. Upper division coursework must have been taken at accredited (regional and professional) four-year universities.
6. Student must be accepted to Avila University.
7. Transfer of courses does not guarantee admission to the program.
8. Student may submit a request for consideration of exception to the policy; School of Nursing decisions regarding the exception are final.

Procedure:

1. Student must complete Avila University admission process.
2. Student must complete School of Nursing admission process. Reasons for transfer must be addressed within the admission report.
3. Submission of substantiating information for courses that students are requesting to transfer (e.g. course description, course outlines, and learning objectives) must accompany admission form.
4. Transfer of courses does not guarantee admission to the program.

PROGRESSION POLICY

Criterion: All students enrolled in the School of Nursing.

Purpose: To promote high standards of nursing education and practice enforcing faculty expectations for students through academic, clinical, and professional performance.

Policy Statement:

1. Each semester, students must achieve the following:
    a. Minimum grade of "C" or "CR" (credit) in all nursing courses
    b. Each student must complete required assessments and remediation, as indicated
    c. Each student must maintain currency of clinical requirements: Examples include but are not limited to: COVID 19, TB, CPR, influenza, and health insurance.
    d. Each student is responsible for maintaining professional conduct (see Professional Conduct guidelines).
    e. Students are responsible to provide current information to the nursing office and/or advisor by the deadline requested.
    f. Student grades are available for every course through the Canvas gradebook. Students are responsible for monitoring their success in the program.
2. Any student who does not meet ALL these criteria in a given semester shall not progress to the next semester in the nursing program.
3. If students earn a grade of D or F or Withdrawal in ONE course, they must notify the Admissions and Academic Progression Committee of their intent to remain in the nursing program.
    a. Students must successfully complete the course the next time it is offered (or within one year) in order to continue to progress in the program.
    b. These students will be automatically enrolled in the PASS course for the semester in which they return to courses.
4. Students who have a course failure and or withdrawal in multiple courses in the same semester, or another course in a subsequent semester will be dismissed from the nursing program and may request readmission to the program (see Readmission policy).
    a. Students may be readmitted to the program only once.
    b. Students readmitted to the program will be automatically enrolled in the PASS course for the semester in which they are re-enrolled.
5. Students who complete all courses with a grade of "C" or above but have a first semester GPA of <2.75 will be referred to the Retention Specialist for PASS activities for the following semester.
6. Any student who is in the final semester of the program, must successfully complete (grade of "C" or "CR") the following courses to be eligible to begin or complete the clinical component of NU 489 (Capstone).
    a. NU 484 Population Based Health Concepts
    b. NU 485 High Acuity Nursing Concepts
    c. NU 488 Practicum 3

Procedure:

1. A student may be immediately dismissed from the classroom or clinical setting for breaches in professional conduct.
2. Admissions and Academic Progression Committee will review individual examination grades and the course exam averages of all students several times during each semester and all students at the end of each semester.
3. A student who is identified by the Admissions and Academic Progression committee as being “at risk” for academic failure at any time during the program, will be notified of the required and/or recommended activities to support their success in the program.
4. The Admissions and Academic Progression Committee will notify all appropriate faculty, the faculty advisor, and the School of Nursing Chair of students who are at risk and required activities.
5. The Admissions and Academic Progression Committee will review student examination performance and any other available information and develop a variety of recommendations for at risk students, including (but not limited to): referrals to the Learning Center; development and implementation of a student learning contract, referral to the Retention Specialist for PASS activities for the current and/or subsequent semesters; and required attendance at all course review sessions.
6. The Admissions and Academic Progression Committee will maintain documentation of all recommendations/requirements and student’s adherence to these.
7. Admissions and Academic Progression Committee will notify students of any required activities/course enrollment for the next semester based on patterns and trends of academic performance.
8. Course faculty will maintain documentation of the student's progress in the course. Written documentation may include:
    a. Specific objective data about the student's progress in the course.
    b. Record of student advising and/or counseling and summarization of areas discussed, faculty-student recommendations, and student’s reaction and follow through.
    c. Clinical evaluation tool if a clinical failure.
    d. Anecdotal information (critical incident) regarding the clinical experience, expressed in behavioral terms, and implications of the student's behaviors.
    e. All grades impacting the theory grade if a theory failure.
    f. Professional Conduct forms.
9. Students with one course failure must electronically or via USPS notify the School of Nursing of intent to remain in the program (via SON chair, advisor or chair of Admissions and Academic Progression committee).
    a. The notification must be submitted no later than two weeks after grades are posted to the Admissions and Academic Progression Committee.
    b. The student will be required to:
        i. repeat the failed course the next time it is offered, or within one year.
        ii. be enrolled in the appropriate PASS course when resuming nursing classes.

10. Students with two or more course failures during the nursing program will follow the Readmission policy if they wish to continue in the nursing program.
11. Students may be readmitted to the program only once.
    a. Students will be notified of their status and conditions for progression in the program by letter and email at the end of the semester.
    b. All returning and readmitted students must:
        i. Meet with the Retention Specialist once weekly through the semester to review course progress.
        ii. Attend and be engaged in retention activities This includes involvement in all required activities including but not limited to pre and post examination reviews.
        iii. Schedule an appointment with Student Support Services (unless student has already been referred during a prior semester)
12. Students who are not successful during their final semester courses will not be allowed to begin and/or continue the clinical component of NU 489 and will be withdrawn from the course. If necessary and/or applicable, the process for withdrawal/dismissal/readmission shall be followed.

IDENTIFICATION/TRACKING OF ACADEMIC SUCCESS DURING THE PROGRAM

Policy: Students are expected to demonstrate attainment of program and course objectives through course examinations and standardized assessments. This is essential to success in the program and to first-time NCLEX passage.

Purpose: Students with a history of poor examination performance and/or low scores on standardized testing may not be successful with first time NCLEX-RN testing. Faculty and advisors will be alerted to these students and assistance offered as early in the program as possible to assist students to attain maximum potential in the program and their chosen profession.

Procedure:

1. Faculty will report all examination scores and metrology scores to the Admission and Academic Progression committee after each examination.
2. At a minimum, the Admission and Academic Progression Committee will review examination grades and standardized testing scores at midterm, and at the end of each semester.
3. The Admissions and Academic Progression Committee will review student examination performance and any other available information and develop a variety of recommendations including (but not limited to): referrals to the Learning Center; development and implementation of a student learning contract, followed by Retention Specialist for the current and/or subsequent semesters; and required attendance at all course review sessions (required if student is being followed by Retention Specialist).
4. Admissions and Academic Progression Committee will notify students of any required activities/course enrollment for the current and/or next semester based on patterns and trends of academic performance

General Guidelines for Student Success Interventions – Please note that these are guidelines for action.

- Students will be referred to the Learning Center one time only unless there is a significant change in circumstances
- Students may be required to meet with their individual advisor and compete a learning contract at any time in the program.
- Mandatory attendance at pre and post exam reviews is required as a part of enrollment in PASS courses.

When	Academic Success Identifiers	Potential Student Success Interventions
1st semester after the first 3 exams	Exam average for the first three exams is ≤ 78% or any individual exam ≤ 70%	• Learning Center Referral • Attendance at all course pre and post exam review sessions. • Meeting with instructor • Meeting with advisor
1st semester at the end	Exam average for all exams is < 84% or 1st semester GPA is < 2.75	• Advisor meeting prior to 2nd semester • Learning Center Referral • Followed by Retention Specialist for PASS activities. • Meeting with Assessment & Progression committee member
2nd semester any time during the semester	Exam average < 84% for all courses together or more than one individual exam < 75% or an individual exam ≤ 67%	• Meeting with instructor. • Advisor meeting • Learning Center Referral • Followed by Retention Specialist for PASS activities
2nd semester at the end	Exam average < 84% or ATI < Level 1	• Advisory meeting prior to 3rd semester • Learning Center Referral • Followed by the Retention Specialist for PASS activities • Meeting with Assessment & Progression committee.

When	Academic Success Identifiers	Potential Student Success Interventions
3rd semester – any time	Exam average <84% or multiple individual exams <75% or any individual exam ≤67%	• Advisor meeting • Learning Center Referral • Followed by Retention Specialist for PASS activities
3rd semester at end	Exam average <82% or ATI <Level I.	• Advisor meeting prior to 4th semester • Followed by Retention Specialist for PASS activities • Meeting with Assessment & Progression committee member
4th semester	Any major change in grades will be evaluated by the Assessment & Progression committee for appropriate intervention	

LEAVE OF ABSENCE

Criterion: Pre-licensure students enrolled in the School of Nursing.

Purpose: To allow students the opportunity to deal with health or financial related issues without totally withdrawing from the nursing major.

Policy:

1. A student who is maintaining a grade of "C" in theory, and is earning a passing grade in the clinical component of courses within the nursing major at the time of the leave, may be granted a leave of absence for reasons such as personal health, family health or extreme financial hardship.
2. A student who has been admitted to the nursing program but has not yet begun the nursing courses may also be granted a leave of absence for the same reasons.
3. The leave is not to exceed one academic year.
4. If changes in the curriculum have occurred, the student must complete the curriculum effective at the time of readmission.
5. A student who petitions for a LOA after the official university withdrawal date, must also petition Academic Affairs Office for permission to withdraw from the course(s). If permission for withdrawal is not granted by the university, then the student may not have their grade recorded as a “W“.

Procedure:

1. The student will contact his/her advisor to determine eligibility for LOA.
2. The student completes documentation supporting the LOA for submission to the Coordinator of the Admissions and Academic Progression Committee.
3. The LOA request will be reviewed by the School of Nursing faculty.
4. The student will be notified of acceptance or denial of the LOA request.
5. When ready to return to the program, the student will reapply to the university if not currently enrolled.
6. The student will provide a medical release to the School of Nursing if the LOA was taken for a personal, health necessitated reason.
7. The student will meet with their advisor to discuss a plan for successful completion of future coursework.

WITHDRAWAL POLICY STATEMENT

Criterion: Pre-licensure students enrolled in the School of Nursing.

Purpose: To provide a mechanism to facilitate a student withdrawal from course and/or program.

Policy:

1. A student who withdraws from a course cannot continue in the nursing program in the next semester due to course sequencing.
2. Readmission to the nursing program is required to resume nursing courses.
3. If readmission is desired, the student should refer to the policy statement on Readmission.

Procedure:

1. The student withdrawing from a course and/or the program is responsible to initiate the withdrawal procedure. Students need to be aware of the official date set by the university for withdrawals.
2. International Students must be aware of the implications of course withdrawal prior to initiating the withdrawal, and an appointment with representatives in the Registrar's Office is recommended prior to initiating withdrawal.
3. The student is expected to complete and submit drop slips to the registrar.
4. Withdrawal from a theory course does not necessitate withdrawal from other theory courses, but may necessitate withdrawal from any clinical course the student is enrolled in for that semester. Students need to discuss this with their advisor before initiating the withdrawal request.
5. Withdrawal from any nursing course in the final semester will necessitate withdrawal from NU 488 (Practicum 3), and 489 (as the student will not be allowed to complete the clinical component of that course).
6. For a clinical course, if the student has completed 50% or more of the course AND the clinical instructor has deemed the student's performance as "Progressing Appropriately" prior to the official university withdrawal date, the student may withdraw from the clinical course. Otherwise a grade of "NC" (no credit) will be transcripted for the course.

DISMISSAL POLICY STATEMENT

Criterion: All students enrolled in the School of Nursing.

Purpose: To provide a mechanism to officiate a student's dismissal from the program.

Policy:
A student will be dismissed from the nursing program if they earn 2 D's or F's either within one semester or in two subsequent semesters. A dismissal will occur if a "NC" is earned in clinical and or for breaches in professional conduct.

Procedure:
1. Course faculty will notify a student's academic advisor when a student receives a grade of D or F in any nursing course or a NC in a clinical course.
2. The coordinator of the Student Affairs Committee will notify the advisor when a breach in professional conduct resulting in dismissal from the program occurs.
3. Any student who is in the final semester of the program and receives a failing grade (D or F or NC) in NU 483, NU 484, NU 485, or NU 488 will NOT be allowed to begin/complete the clinical component of NU 489 Capstone. The student will be administratively withdrawn from NU 489 and dismissed from the school of nursing.
4. The academic advisor of a student being dismissed from the nursing program will initiate the dismissal procedure.
5. The academic advisor will notify the student of the dismissal from the program and will discuss the following options available to the student:
    a. Exploration of other career options
    b. Exploration of other academic majors
    c. Exploration of other nursing programs
    d. Reapplication to the Avila Nursing Program– Note: Students may only be readmitted to the program ONE time.
    e. Apply to complete a BS in Wellness Studies (allowed during final 2 semesters of the nursing program only)
6. The academic advisor will notify the School of Nursing Chair of the dismissal and will initiate the dismissal form.
7. The School of Nursing Chair will sign the dismissal form and notify all involved faculty of the student's dismissal.
8. The Admissions and Academic Progression Committee will prepare and send an official dismissal letter to the student regarding the dismissal.
9. The student will complete and submit drop slips to the registrar.
10. Dismissal from a clinical course necessitates withdrawal from all nursing courses.
    a. A student dismissed for clinical cause during the semester may appeal this decision to the Admissions and Academic Progression Committee (see Clinical Failure Appeal Policy Statement).
    b. The student may appeal to remain in non-clinical nursing courses.

11. A grade of “NC” (No Credit) will be transcripted for the clinical course from which the student has been dismissed.
12. All other course grade assignments will be transcripted according to Avila University policies.
13. The student has the right to appeal the final course grade through Avila’s Grade Appeal Policy Statement.

DISMISSAL FROM SCHOOL OF NURSING APPEAL POLICY STATEMENT

Criterion: Any nursing student who is dismissed from the School of Nursing for a reason that is not related to a course or clinical grade.

Purpose: To provide a mechanism to officiate a student's appeal for dismissal from the SON.

Policy Statement:

1. A student who is dismissed from the SON for a reason other than an academic course or clinical failure may appeal this decision to the Admissions and Academic Progression Committee when the student feels that his/her dismissal was unwarranted.
2. Student will remain in the theory component of the course(s) during the appeal process.
3. Pending final outcome, all clinical experiences will be suspended.

Procedure for Appeal:

1. The student must submit a written appeal to the Admissions and Academic Progression Coordinator within two working days of the first notice of dismissal by the faculty. If the faculty involved in the appeal is the Admissions and Academic Progression Coordinator, the written document will be submitted to the Chair of the School of Nursing.
2. Faculty and/or the Chair must submit to the Admissions and Academic Progression Coordinator all materials, evidence and documentation to be considered in response to the student appeal and for the hearing not later than two days following notification of the appeal. Only persons participating in the hearing may have access to these materials.
3. The Admissions and Academic Progression Coordinator will assemble an Appeal Committee consisting of one faculty from the School of Nursing, one faculty from the School of Radiologic Science, and one student from the School of Nursing. If the student appealing the grade is a first-year nursing student, then a second year nursing student will be chosen for the Appeal Committee and vice versa. The Chair of the School of Nursing will also attend the appeal as a non-voting member. The Admissions and Academic Progression Coordinator (or the Chair of the School of Nursing if the Coordinator is involved in the appeal) will serve as Ombudsperson and will notify all members of the date, time, and place of the hearing. The hearing will be held within one week of the receipt of the appeal from the student.

Procedure for Formal Hearing:

1. The Admissions and Academic Progression Coordinator, acting as Ombudsperson, will chair the Appeal Committee. In cases where the Coordinator is the faculty involved in the appeal, the Chair of the School will carry out all of the activities assigned to the Ombudsperson.
2. The student and faculty will each have 15 minutes to present their position.
3. The Appeal Committee has an opportunity for clarification and questions following the presentations; the substance will be limited to the information or documentation

shared in the presentation and in the appeal file. The clarification period will be limited to one hour. The Chair of the School of Nursing may participate as a member during this phase of the hearing to provide clarification of School policies and procedures.

4. The presentations, clarification and questions will be audio taped. Outside witnesses are not permitted to be present for the hearing. Hearsay repeated by any member of the committee, voting or non-voting, will not be considered.
5. When the clarification and question portion of the hearing is completed, the Ombudsperson will ask that the student and involved faculty leave the appeal.
6. The committee may have further discussion and then, by secret ballot and a simple majority, will vote to uphold the SON dismissal or deny the SON dismissal. The only voting members are the two selected faculty members and the selected student. The committee discussion following the appeal will not be recorded.
7. The Ombudsperson will collect and tally the ballots. After recording the vote, the ballots will be retained in a confidential file in the School of Nursing office. Documents from the hearing will be maintained in a confidential file in the School of Nursing office for 10 years.
8. The Ombudsperson will notify the student and faculty of the results of the appeal within 24 hours.
9. The decision of the Committee is final.
10. If the SON dismissal is overturned, the student will need to make-up any missed clinical time.

CLINICAL FAILURE APPEAL POLICY STATEMENT

Criterion: Any nursing student who fails the clinical component of a nursing course.

Purpose: To provide a mechanism to officiate a student's appeal for a clinical failure.

Policy Statement:

1. A student who receives a clinical failure in a nursing course may appeal this decision to the Admissions and Academic Progression Committee when the student feels that his/her clinical performance did not merit a failing evaluation.
2. Student may ask for permission to remain in the theory component of the course (if applicable) during the appeal process.
3. Pending final outcome, all clinical experiences will be suspended.
4. A student may also appeal to remain in non-clinical nursing courses.

Procedure for Appeal:

1. The student must submit a written appeal to the Admissions and Academic Progression Coordinator within two working days of the first notice of dismissal by the clinical faculty. If the faculty involved in the appeal is the Admissions and Academic Progression Coordinator, the written document will be submitted to the Chair of the School of Nursing.
2. The clinical faculty must submit to the Admissions and Academic Progression Coordinator all materials, evidence and documentation to be considered in response to the student appeal and for the hearing not later than two days following notification of the appeal. Only persons participating in the hearing may have access to these materials.
3. The Admissions and Academic Progression Coordinator will assemble an Appeal Committee consisting of one faculty from the School of Nursing, one faculty from the School of Radiologic Science, and one student from the School of Nursing. If the student appealing the grade is a first-year nursing student, then a second year nursing student will be chosen for the Appeal Committee and vice versa. The Chair of the School of Nursing will also attend the appeal as a non-voting member. The Admissions and Academic Progression Coordinator (or the Chair of the School of Nursing if the Coordinator is involved in the appeal) will serve as Ombudsperson and will notify all members of the date, time, and place of the hearing. The hearing will be held within one week of the receipt of the appeal from the student.

Procedure for Formal Hearing:

1. The Admissions and Academic Progression Coordinator, acting as Ombudsperson, will chair the Appeal Committee. In cases where the Coordinator is the faculty involved in the appeal, the Chair of the School will carry out all of the activities assigned to the Ombudsperson.
2. The student and clinical faculty will each have 15 minutes to present their position.

3. The Appeal Committee has an opportunity for clarification and questions following the presentations; the substance will be limited to the information or documentation shared in the presentation and in the appeal file. The clarification period will be limited to one hour. The Chair of the School of Nursing may participate as a member during this phase of the hearing by providing clarification of School policies and procedures.
4. The presentations, clarification and questions will be audio taped. Outside witnesses are not permitted to be present for the hearing. Hearsay repeated by any member of the committee, voting or non-voting, will not be considered.
5. When the clarification and question portion of the hearing is completed, the Ombudsperson will ask that the student and involved clinical faculty leave the appeal.
6. The committee may have further discussion and then, by secret ballot and a simple majority, will vote to uphold the clinical failure or deny the clinical failure. The only voting members are the two selected faculty members and the selected student. The committee discussion following the appeal will not be recorded.
7. The Ombudsperson will collect and tally the ballots. After recording the vote, the ballots will be retained in a confidential file in the School of Nursing office. Documents from the hearing will be maintained in a confidential file in the School of Nursing office for 10 years.
8. The Ombudsperson will notify the student and clinical faculty of the results of the appeal within 24 hours.
9. The decision of the Committee is final.
10. If the clinical failure is overturned, the student may need to make-up any missed clinical time. This is at the discretion of the individual clinical faculty.

READMISSION OF PRE- LICENSURE STUDENTS TO THE NURSING MAJOR

Criterion: Pre-licensure students submitting applications for readmission to the School of Nursing.

Purpose: To promote high standards of nursing education; ensure fair and equitable treatment of students in determining eligibility for readmission to the nursing major.

Policy Statement:

1. A student who is dismissed or withdraws from the nursing program may apply for readmission to the nursing program by the due date specified each semester by the Coordinator of the Admissions and Academic Progression Committee.
2. Students may only be readmitted to the nursing program ONE time. Subsequent failure to progress in any nursing course (eg. Student fails a course in another semester) will result in dismissal from the nursing program without consideration for readmission.
3. A student who has been denied readmission may not apply to the program again for five years, at which time, if accepted to the program, all nursing coursework must be repeated.
4. Factors included in determining readmission include:
   a. Review of course grades in pre-requisite courses – including number of repeated science courses
   b. Review of course grades and examination grades in all nursing classes.
   c. Patterns of communication with faculty related to grades while taking the class
   d. Professional behaviors while in the nursing program
   e. Letter of request for readmission
5. The decision of the School of Nursing regarding readmission is final.
6. The student seeking readmission must meet the criteria for admission and graduation that are in effect at the time of readmission to the nursing major.
7. Science courses need to be current within 10 years. If the student is not currently enrolled at Avila, the student must follow university readmission policies.
8. The student who is readmitted to the nursing program may be required by the School of Nursing faculty to attend a course(s) or to demonstrate skill/knowledge competency. The student is required to pay the course/lab fees for the semester.
9. If a student failed a theory course, the student must repeat the theory course and needs to repeat a minimum of one half of the practicum hours associated with that semester. The exact number of clinical hours will be determined by the School of Nursing faculty as part of the readmission process. The student will be required to enroll in a directed study clinical to fulfill this clinical component.
10. Nursing Courses may not be over 2 years old at the time of readmission or they must be repeated.

Procedure:

1. The student will submit a letter of request for readmission to the Coordinator of the Admissions and Academic Progression Committee by the date specified each semester. The letter at a minimum should include:
   a. reasons they felt they were unsuccessful this semester
   b. planned actions to promote successful completion if allowed to re-enter the nursing program.
2. The Coordinator of the Admissions and Academic Progression Committee will notify the student when the request for readmission will be reviewed by the School of Nursing.
3. Faculty involved in the withdrawal/dismissal may be asked to provide documentation of the student's course performance to the Assessment and Progression Committee Coordinator prior to the School of Nursing meeting. Clinical adjunct faculty involved in the course grade determination will be requested to attend the meeting.
4. The student's advisor will bring the student's academic history, e.g., transcript, to the review meeting.
5. Faculty members who have had the student in courses will bring information regarding student performance in each course (e.g., individual test performance).
6. Admissions and Academic Progression Committee will bring information gathered as part of the "At Risk" procedures (eg. ATI scores) to the review meeting.
7. The student, and their advisor, will be notified of the faculty decision by a formal letter sent by the Coordinator of the Admissions and Academic Progression committee.
8. If the student is readmitted to the program, the letter will contain information regarding requirements for re-entry into the curriculum course sequence. This letter will include any additional coursework and/or requirements to be completed by the student either prior to or during the semester of return to the program.

PROFESSIONAL CONDUCT

Through the nursing program, students are in multiple situations where professional behavior is expected. They are in frequent interaction with patients, their families and significant others, and health care professionals. All behavior in the educational setting, in the clinical area, and with other students, faculty, and staff reflects the student's ability to interact in an appropriate and professional manner. This behavior is just as important as the student's content knowledge and clinical practice. It is essential for success as a professional.

A Professional Conduct Report will be initiated when any Avila University faculty (nursing or non-nursing), staff (university or agency), other students, clinical instructors or preceptors witness or receive reports of a:

a. Breach in expected behavior that they believe warrants attention or
b. Have concerns about behavior that may need to be observed for patterns.

Breach of expected behaviors may result in an individualized program for improvement and/or could lead to dismissal from the nursing program. Concerns will be reported and filed with the student's advisor.

Professionalism Conduct for Success in Nursing (not limited to the following)

The student follows standards of professional conduct including:

- The student is prompt, reliable, and follows through on commitments.
- The student presents self in appropriate attire for the situation and displays appropriate hygiene.
- The student demonstrates respectful behavior toward professors, other peers, university and clinical staff, patients (their families and significant others), and other health care professionals.
- The student recognizes multiple aspects of diversity and respects others of varied cultural backgrounds, races, ethnicities, religions, sexual orientations, political beliefs and disabilities.
- The student is receptive to constructive feedback and adjusts performance accordingly.
- The student demonstrates respect for others in the appropriate use of personal technology including, but not limited to, cell phones, laptop computers, and PDAs.
- Anything related to Avila University and your educational experience (classroom or clinical) posted on a social networking site should be in support of the mission, vision, and core values of the university and nursing program. Be cognizant that all social networking sites are public domain and what you as a student post can have legal, professional, and/or employment ramifications.
- The student complies with all policies of the university, nursing program, and clinical facilities to which he/she is assigned.

BREACH OF PROFESSIONAL CONDUCT

Criterion: All nursing students.

Policy Statement:
A Professional Conduct report will be initiated using the form in **Appendix A** when any Avila University faculty (nursing or non-nursing), staff (university or agency), other students, clinical instructors or preceptors witness or receive reports of a:

a. Breach in expected behavior that they believe warrants attention or
b. Have concerns about behavior that may need to be observed for patterns.

Breach of expected behaviors may result in an individualized program for improvement and/or could lead to dismissal from the nursing program. Concerns will be noted and filed with the student's advisor. Breaches of academic honesty will be reported to the Academic Chair, Academic Affairs and other nursing faculty.

Rationale:
Through the nursing program, students are in multiple situations where professional behavior is expected. They are in frequent interaction with patients, their families and significant others, and health care professionals. All behavior in the educational setting, in the clinical area, and with other students, faculty, and staff reflects the student's ability to interact in an appropriate and professional manner. This behavior is just as important as the student's content knowledge and clinical practice. It is essential for success as a professional.

Procedure:

1. When a breach of behavior or a behavioral concern is reported or observed, a faculty member or the school of nursing Chair will initiate a professional conduct report.
2. The Professional Conduct Report will be processed as follows:
    a. The faculty member will notify the student, the student's advisor and the Student Affairs Committee that a Professional Conduct report has been initiated.
    b. The student will meet with the faculty member initiating the report within five working days to discuss the breach or concern and complete the form.
3. If a course related issue:
    a. The faculty member may impose consequences, a plan for improvement, and/or follow-up criteria as determined by course policies.
    b. The faculty member will verify student complies with action plan and forward that information to the Student Affairs Committee and the student's advisor.
4. If a non-course related issue:
    a. The faculty member will forward a copy of the completed report to the Student Affairs Committee and to the student's advisor.
    b. The Student Affairs Committee will review the professional conduct report and consult with the school of nursing Chair and/or other university personnel as needed to determine whether a plan for improvement and/or follow-up is indicated and the conditions for such a plan and/or follow- up. Input for the improvement plan will be solicited from the above sources as needed.

5. The Student Affairs Committee will notify and provide copies to the student, the person initiating the report, the student's advisor of any action to be taken, and will follow up as indicated.
6. In cases, either course or non-course related, when dismissal of the student results from the professional conduct process, the Admissions and Academic Progression Committee will notify student of any action to be taken and will follow up as indicated.
7. The Student Affairs Committee will take the student's response to the plan for improvement, patterns of repeated behaviors, as well as the infraction itself into consideration for any future breach of professional conduct.

COURSE POLICIES/SYLLABUS TEMPLATE

These policies are consistent for all nursing courses. These policies are also included in all nursing course syllabi.

EVALUATION: The student's final grade will consist of the following:

a. If the student achieves greater than or equal to 75% test average, the final course grade will be calculated as the course requirements from each course.
b. If the student does not achieve a minimum test average of 75%, the determination of the final grade ("D" or "F") will be based upon the student's completion and performance on other final course grade requirements.
c. Individual grades and the exam average will not be rounded. Final course grades only will be rounded up at 0.5.
d. All requirements must be completed to pass the course.
e. See policies below for additional information.

GRADING SCALE:
A = 92-100
B = 84-91
C = 75-83
D = 67-74
F = 66 or below

ATTENDANCE POLICY: The best learning environment is one in which you attend and participate in class. Attendance at every class session, therefore, is expected. Students participating in the online environment are also expected to meaningfully participate in courses and attendance. This may mean participation in discussion boards, viewing videos or turning in assignments, for example. However, there are sometimes circumstances that prevent a student from attending class or being on time. Please let the instructor know of anticipated absences. The student is responsible for obtaining missed information and/or handouts. At the discretion of the instructor, final course grades may be lowered as a result of repeated absences, lack of meaningful participation, late arrival and leaving class early. In the event of inclement weather when Avila University indicates the physical campus is closed, in-person courses will most likely move to an on-line format. Please look for an announcement via Canvas for information.

ASSIGNMENTS: Assignments are expected to be completed and turned in on the specified due dates. All student assignments submitted electronically must use Microsoft Office products; Word, Excel, or PowerPoint. Papers and homework are due at the beginning of class on the designated day for in-person classes unless otherwise specified. Every assignment (in-class or out-of-class and graded or credit/no credit) must be completed in order to receive a grade of "C" or better in the course. Grades on late assignments will be lowered 5% for each day late. Assignments may not be resubmitted for a change in grade. When the university is unexpectedly closed (for example inclement weather cancellation), all in-person course

assignments scheduled, are due as scheduled in Canvas. All assignments will be graded within (insert time frame) of the posted due date.

EXAMINATIONS: All students are expected to take exams when scheduled. In the event of an emergency preventing the student from taking the exam as scheduled, the student is responsible for calling the instructor or the nursing office PRIOR to the start of the examination. Faculty discretion will be used in determining IF a make-up examination will be issued. A pattern of absences (2 or more missed/rescheduled exams within a semester) on scheduled exam dates may be considered an indication of poor professional responsibility and could result in sanctions against the student. Missed scheduled examinations will be reported to the Admissions and Academic Progression Committee and will be monitored for future missed or rescheduled examinations. (See Make Up Exam Policy)

PRE & POST EXAM REVIEWS: A pre-exam review will be offered prior to every exam. Faculty will be available during this time to answer any questions that students might have pertaining to exam content. It is highly encouraged that all students attend these reviews. Students enrolled in Promoting Academic Success (PASS) MUST attend these reviews.

A post-exam review activity will occur approximately 1 week following the completed exam. Students MUST attend these reviews in order to review missed concepts. If a student chooses not to attend the post-review, no other option for review will be available. The post review is mandatory for anyone who earned less than a 75% on the exam. If a student has a valid excuse for missing the review (supported with written documentation), they will be allowed to set up a review time with faculty.

ACADEMIC HONESTY POLICY: The policy of Avila University concerning academic honesty will be strictly followed in the nursing program. Honesty and integrity are critical personal characteristics especially in the health professions. Independent knowledge of content is vital for the safety and quality of care for those we serve. Consequently, there will be NO tolerance for cheating on examinations or any other assignment and sanctions will be imposed on the first offense. Students who are silent about others cheating also risk sanction. In addition, the use of the writings of an author or authors without appropriate referencing is considered plagiarism. Therefore, any student submitting work identified as plagiarism will be sanctioned on the first offense. The APA Style Manual guidelines should be used for correct referencing of material that is quoted and for assistance in paraphrasing and referencing of the same.

COURSE ASSISTANCE: Nursing faculty believe in the principles of adult learning including the belief that the best learning environment is one in which the student is self-motivated and actively engaged in learning. As a facilitator of this process, the instructor is available for student assistance during posted office hours or at other times as arranged with the instructor. Contact information for course instructors is available in the syllabus.

STUDENT ACCESS STATEMENT: Avila University views disability as an important aspect of diversity, and is committed to providing equitable access to learning opportunities to students

with documented disabilities (e.g. mental health, attentional, learning, chronic health, sensory, physical, etc.). If you are a student who has (or may have) a disability, please contact the Student Access Office located in the Center for Student Excellence in Hodes (lower level of Carondelet, building 8) to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom setting. Students are encouraged to register with the Student Access Office as soon as they begin their coursework but may register at any point during their studies. Accommodations, however, are not provided retroactively. Students may contact the Student Access Office by email (DSO@Avila.edu), telephone (816-501-3666), or by stopping by their office. Students may also visit the website to learn more about the Student Access Office

STUDENT CONDUCT: Students enrolled in the nursing program at Avila are not only learning the theoretical concepts of nursing, but are also learning how to conduct themselves in a professional manner. Therefore, it is expected that personal conduct in the nursing classroom, laboratory and assigned clinical facilities adhere to the standards of professional and ethical conduct as reflected in the American Nurses Association (ANA) Code of Ethics, the Avila University School of Nursing Student Handbook (refer to Policy on Professional Conduct), the Avila University Student Handbook, and the policies of our clinical partners. Professional and ethical conduct will be followed in interactions between students, student to faculty, student to client/families, and/or student to staff members. This includes, but is not limited to, the following behaviors:

- Being on time.
- Turning assignments in on time.
- Taking exams at scheduled times.
- Being prepared for class, lab, or clinical activities.
- Silencing cell phones and other electronic devices and not answering during class, lab or clinical.
- Limiting distracting conversations during learning opportunities.
- Treating your colleagues and faculty with respect and consideration.
- Dressing appropriately for the activities of the day – ex. Avila scrubs must be worn for simulations and business casual for classroom presentations, mock interviews, or other professional activities.

AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) DOCUMENTATION GUIDELINES

Avila University School of Nursing

The current APA standards, from the 7th edition, are used for all written assignments. Knowing the APA formatting standards is essential. Below is information about the standards that can be used as a starting place however please refer to the APA 7th edition for more information.

Writing Tips:

- Spell out an abbreviation or acronym the first time it is used, then put the abbreviation/acronym in parentheses following it. Then use the abbreviation/acronym throughout the assignment. Example: registered nurse (RN)
- Spell out contractions. 'Do not' instead of 'don't'
- Numbers less than 10 need to be written out with APA 7th ed.
- Use 3rd person when writing papers. 2nd person should never be used, and 1st person can only be used for school papers when asked for personal experience or opinion.
  - 3rd person = they/them
  - 2nd person = you
  - 1st person = I, me
- Avoid using jargon.
- Thoughts should be clear and concise. Do not use flowery language.

Formatting Tips:

- All papers and written assignments should be submitted using APA formatting guidelines unless told otherwise by an instructor.
- Margins should all be 1 inch.
- Double-space the document.
  - Tip! In Word, the default is to add an extra space when "enter" is used. Make sure to correct this setting or delete the extra space.
- Indent or tab in the first line of a paragraph.
- One space after a period or punctuation at the end of a sentence.
- Font should be either a sans serif font (11-point Calibri, 11-point Arial, or 10-point Lucida Sans Unicode) or a serif font (12-point Times New Roman, 11-point Georgia, or normal (10-point) Computer Modern)
- Put page # in the upper right corner of the document. This should be located in the header.

Citations:

- Citations used in-text are required for any thought, idea, or statement that is not your own.

- In-text citations that are direct quotes should be done as Jones and Smith (2020) stated "……." (p. 12). OR like this "The ……." (Jones & Smith, 2020, p. 12). In-text citations that are paraphrased are set up the same way but without the quotes. When paraphrasing, the page number is not required.
- Direct quotes must include the page or paragraph number after the year. Example: (Jones, 2021, p. 12) or (Jones, 2021, para. 1).
- For works with more than two authors, use the first author's last name, et al., and year of publication for the citation. Example: (James et al., 2020).
- When citing a source from within, another source should be done like this:
  - Ackoff (as cited in Jones & Smith, 2020) identified….
  - OR it can be set up like this - …. is helpful in leadership situations (as cited in Jones & Smith, 2020).

References:

- Always start the reference page on a new page
- Title the reference page, References, and make it centered and bold.
- The reference list should be double-spaced with hanging indents.
- Place references in the list in alphabetical order.
- When listing the authors in a single reference, list them as shown on the book cover or in the article. Do not reorder them to be alphabetical. The reference list should be alphabetical.
- For a work with up to 20 authors, include all the names in the reference. When the work has 21 or more authors, include only the first 19 names, an ellipsis, and the final name
- Only list the reference if there is a matching in-text citation; there must be a matching reference for every citation. The ONLY exception is personal communication.
- For titles of books, journal articles, and web pages, only capitalize the first word, the first word after a colon, and proper nouns.
- All journals need to have retrieval information. This should be the doi URL. Format it as http://doi.org/xx.xx.xx

Citation and Reference Examples:

Book:

Author last name, initial. (year). Title of book (edition). Publisher.

Ignatavicius, D. D., Workman, M. L., Rebar, C. R., & Heimgartner, N. M. (2021). *Medical-surgical nursing: Concepts for interprofessional collaborative care* (10th ed.). Elsevier.

Parenthetical citation: (Ignatavicius et al., 2021)
Narrative citation: Ignatavicius et al. (2021)

Journal Article:

Author last name, initial. (year). Title of article. Journal, volume(number), pages. doi URL.

Kristensen, N., Nymann, C., & Konradsen, H. (2016). Implementing research results in clinical practice: The experiences of health professionals. *BMC Health Services Research, 16*(48). https://doi.org/10.1186/s12913-016-1292-y

Parenthetical citation: (Kristensen et al., 2016)
Narrative citation: Kristensen et al. (2016)

Website:
Author last name, initial OR Web page author OR Company. (date of site creation or update). Title of the web page. URL.

Missouri Department of Health and Senior Services. (2023). *2023 Missouri diabetes report*. https://health.mo.gov/living/healthcondiseases/chronic/chronicdisease/missouri-diabetes-report.pdf

Parenthetical citation: (Missouri Department of Health and Senior Services, 2023)
Narrative citation: Missouri Department of Health and Senior Services (2023)

Mobile Apps: This same formatting can be applied to various software. Instead of [Mobile app], it would need to specify the type of software.

Rightsholder. (Year of the last update). Title of the app (Version #) [Mobile app]. Name of the app store where it can be found. URL of the app in the app store.

Tototomato. (2018). *Stress Management* (Version 1.2) [Mobile app]. Google Play Store. https://play.google.com/store/apps/details?id=com.tototomato.stressmanagement

Parenthetical citation: (Tototomato, 2018)
Narrative citation: Tototomato (2018)

Personal Reference: This is used when citing an in-person or private conversation; an example would be an interview. Used in-text ONLY. No reference is required.

Parenthetical citation: (J. Smith, personal communication, July 1, 2017)
Narrative citation: Smith (personal communication, July 1, 2017)

CINAHL Nursing Guide:
Author last name, initial. (year). Title of the guide. CINAHL Nursing.

Gilreath-Osoff, A. & Caple, C. (2018). Neurological assessment: Assessing reflexes. *CINAHL Nursing.*

Parenthetical citation: (Gilreath-Ostoff & Caple, 2018)
Narrative citation: Gilreath-Ostoff and Caple (2018)

UpToDate:
Author, last name, initial. (year). Title of article. UpToDate. Retrieval date from URL.

Morey, M. C. (2019). Physical activity and exercise in older adults. *UpToDate.* Retrieved on October 21, 2021 from https://www.uptodate.com/contents/physical-activity-and-exercise-in-older-adults

Parenthetical citation: (Morey, 2019)
Narrative citation: Morey (2019)

Per the APA 7th Edition Manual:

- Articles in the UpToDate database are available only in that database and have information that changes over time.
- In the reference list, format UpToDate articles like periodical articles. Italicize the database name in the reference like a periodical title, but do not italicize it if it appears in the text.
- Use the year of the last update in the date element.
- Include a retrieval date because the content is designed to change over time, and page versions are not archived.

Quoting vs. Paraphrasing:

When incorporating resources, it is important to use minimal direct quotes and instead paraphrase the information. This means putting it in your own words and then citing the source. Just changing a few words is not enough. When paraphrasing, think about how it could be explained to someone without prior knowledge about that topic. For example, how would the nurse explain a new medication to the patient? Would they quote word for word the drug manual or drug guide? Instead, the nurse would paraphrase the information to make it easier for the patient to understand.

To set up a direct quote, it needs to be set off by quotations and cited in a particular way. Take, for example, this quote from a book: "This leader is one who will not only be instrumental in all planning phases of the project but will also play a key role in the gap analysis, which is key to implementation" (Hebda et al., 2019, p. 193). Note that the quote is word for word from the book, and the citation includes the page number. It could also be written like this, Hebda et al. (2020) state, "This leader is one who will not only be instrumental in all planning phases of the project but will also play a key role in the gap analysis, which is key to implementation" (p. 193).

To paraphrase, it might look something like this: The project leader plays an essential role during the project implementation. They are involved in all aspects of planning and the project's analysis (Hebda et al., 2020).

ATI POLICY AND PROCEDURES

Criterion: All pre-licensure students enrolled in the School of Nursing.

Purpose: ATI assessments are used to identify areas of strength and areas needing improvement in order to facilitate first time pass success on the NCLEX-RN. These standardized examinations are required for students and are embedded throughout the curriculum. ATI assessments will be used to evaluate the students' mastery of content, retention of vital nursing knowledge, and critical thinking skills. Mastery of these items are essential to deliver safe, high-quality, evidence-based patient care.

Policy Statement:

1. ATI Content Mastery scores will account for 10% of the final course grade in applicable courses.
2. The ATI Comprehensive Predictor will account for 15% of the final course grade. See Capstone syllabi for details.

Procedure:

1. Dates for proctored assessments will be provided to the students at the beginning of each semester.

Assessments: Assessments will help the student to identify areas of competency as well as areas requiring active learning/review in preparation for taking the NCLEX-RN following graduation. Practice assessments will be available to the student prior to each proctored assessment (except for the Critical Thinking Entrance and Exit). Practice assessments are intended to guide the student to review a variety of topics prior to taking the proctored assessment.

Assessments are scheduled during the following semesters, please refer to course syllabi for additional information regarding dates and exams.

Semester 1	Semester 2	Semester 3	Semester 4
ATI Critical Thinking Entrance	ATI Fundamentals	ATI Pharmacology	ATI Medical Surgical
	ATI Mental Health	ATI Leadership	ATI Comprehensive Predictor
	ATI Maternal Newborn		ATI Critical Thinking Exit

Active Learning/Review: Active Learning/Review is a process of identifying content in an area that was not learned or not fully understood as demonstrated on an assessment. It is intended to help the student review important information to be successful in courses and on the NCLEX.

The **individual performance profile (IPP)** will contain a list of the topics for focused review. The expectation is that the student will use the practice assessment and focused review to prepare for the proctored assessment. It is generally recommended that the student spend most of the review time in topic areas where 50% or less of the questions were answered incorrectly.

Instructors have online access to detailed information about the timing and duration of time spent in the assessment, focused reviews created and tutorials viewed by each student. This information can also be viewed and/or printed by each student using the "My Transcript" feature under "My Results" of the ATI Student Home Page.

Grading Rubric:

Content Mastery Series – Proctored Assessments

ATI Proctored Assessment Score	Percentage Awarded
Proficiency Level 3	100%
Proficiency Level 2	85%
Proficiency Level 1	65%
Below Level 1	40%

Comprehensive Predictor Proctored Assessment

See the Capstone Practicum course syllabi for scoring of points.

EXAM POLICY/PROCEDURE

Criterion: All students enrolled in the School of Nursing.

Purpose: To provide consistency in examination administration and to promote honesty.

Policy Statement:
Students are expected to:

- be present and on time for all exams
- behave with professional integrity.

Procedure:

ABSN students.

1. ABSN students will have in-person proctoring for the exams in all courses.
2. There are two proctoring options:
   a. If a traditional student exam is being administered on the same day when the ABSN course exam is due, then the student may 'schedule' to sit with the traditional students in a classroom and be proctored by the faculty at the same time. This should be arranged with your ABSN course instructor.
   b. The ABSN student has the option of getting their own proctor (usually a librarian), requesting the proctor to complete the proctor approval form, and sending that form to the course faculty for approval. This form must be completed at least 2 weeks prior to each exam. See **Appendix B** for the form and the proctor requirements.
3. Students are responsible for preparing their computer for the exam prior to the scheduled examination time. This includes updating software, downloading the appropriate exam.
4. Identity checks of the student will be completed by the proctor before the exam (may be a valid driver's license, military ID, or passport) to ensure the examinee is the person scheduled to test.
5. Copying the exam is prohibited.
6. During the exam, the student does not access notes, articles, or other unauthorized materials.
7. During the exam, the student does not have access to their phone, smart watch or other electronic device and other personal items (purse, backpack, etc.)

For all students for in-person classroom seated exam.

1. Students arriving after the start of the examination will have only the time remaining to take their exam. If ABSN student has scheduled their examination in-person with the faculty they must arrive on time.
2. Students will not be admitted to the examination room after the first completed examination is turned in. ABSN students will not be admitted if late to the faculty proctored examination.
3. There will be assigned seating for all examinations. Look for name card or follow instructions of the instructor.

4. No materials other than a pencil or pen, and your laptop may be taken to your seat in the classroom.
5. On entering the classroom, students will demonstrate that they do not have any materials that could assist themselves or others during the examination. Clothing that you wear to your seat must remain in place during the entire examination.
6. All personal belongings (including but not limited to: caps, backpacks, papers, books, handbags, book bags, study materials, calculators, PDAs, electronic paging devices, recording or filming devices, radios, iPods/MP3s, headphones, portable storage devices, smart watches, cellular phones, and food or drinks etc.) must be stored at the instructor designated area during the examination. All cell phones and/or electronic devices must be turned OFF or to SILENT during examinations.
7. Calculators are included in Examplify. For other assessments, calculators will be supplied by the instructor and will be turned in with your exam answers.
8. If appropriate, scratch paper will be distributed to students once the exam is started.
9. Students may not make written notes or record in any way the contents of the examination. Any scratch paper given to the student must be signed and returned to the instructor prior to leaving the classroom.
10. Students are to refrain from talking during the examination.
11. Students must receive permission of the instructor to leave the classroom for ANY reason during an examination. Proctors may be assigned to accompany the student when leaving.
12. Only questions that are related to typographical or grammatical errors that alter the meaning of the examination questions and will affect all students will be answered during the examination.
13. Students will exit the classroom after they hand in their scratch paper AND either hand in their answer sheet or show the instructor the “green” submission screen on their laptop. Students will follow directions given by the instructor about whether returning to class or if they are free to leave.
14. Students observed engaging in possible violation of examination policy/procedure or other forms of irregular behavior will not necessarily be told of the observation at the time of the exam. The student will be notified of any irregularities noted within 5 working days of the observation.
    - Irregular behavior includes, but is not limited to, having or seeking access to exam materials before the exam, leaving the classroom before uploading the assessment with Examplify, copying answers from someone else or allowing one’s answers to be copied, having study guides or notes present in the exam area, copying or reproducing test items, altering or misrepresenting scores, stealing exam materials, or other such behavior--overt or perceived--which may cast doubt on the exam results of that or another person.
    - Anyone who has information or evidence that violations and/or irregular behavior has occurred should notify the examination proctor. Students should not discuss this concern with others.
    - A Professional Conduct Report will be completed by the course instructor for any observed or reported violations.

15. Exam reviews are scheduled and open to all students to attend. These sessions are designed to review concepts and related course objectives to enhance student learning and include review of the ExamSoft Strengths and Weaknesses report. Students are to be respectful of faculty and other students during these review sessions.
16. Students may schedule individual appointments with the instructor responsible for the exam content **only after attending the review session.** This must be completed before the next scheduled examination.
17. Please refer to the applicable course syllabi for procedures to follow if you are unable to take an examination at the scheduled time. Remember that the course instructor must be notified **PRIOR to the beginning of the scheduled examination**. The format of any make-up examination will be at the discretion of the instructor. The make-up examination need not be in the format of the original examination. Absences fall into three categories:
    a. Anticipated excused. Anticipated absences must be reported to the instructor prior to the examination time. Make-ups due to anticipated excused absences should be scheduled with the course coordinator prior to the absence. Faculty have the option to reschedule the exam in advance of the absence.
    b. Unanticipated excused. In the event of an emergency, the absence must be reported to the instructor as soon as possible. Arrangements to make up examinations that are missed due to unexpected circumstances must be requested by the student the first day back in class or within 72 hours of the absence, whichever occurs first.
    c. Unexcused. Unexcused absences are identified by the course coordinator. It is at the course coordinator's discretion whether or not to reschedule an exam due to an unexcused absence. See your course syllabus for more information regarding course attendance policies.
18. A pattern of absences (2 or more missed/rescheduled exams within a semester) on scheduled exam dates may be considered an indicator of poor professional responsibility and could result in sanctions against the student. Missed scheduled examinations will be reported to the level coordinator. Consequences could include but are not limited to such things as review of professional conduct, course grade changes, or program progression.
19. Off Campus Proctored Exams.
    At times, examinations for traditional program students may be scheduled to be taken off campus. In these circumstances, students are still responsible for following the same rules of conduct that are applicable when taking exams on campus in a classroom setting. Students are responsible for preparing their computer for the exam prior to the scheduled examination time. This includes updating software, downloading the appropriate exam, checking web camera and microphone, and securing a quiet testing spot that is free of distractions. Examinations must be taken at the scheduled time unless you have made prior arrangements with the course instructor. The password for entering the exam will be sent by email from the faculty prior to the exam but you will not be allowed to begin the exam until the

scheduled time. As in the classroom, no additional resources are allowed for the examination. If a resource is allowed by the instructor it must be printed out prior to beginning the exam and be “shown” to the webcam at the beginning of the exam and just again just prior to answering the question where use of the resource is required. Videotapes of all exams will be reviewed following the exam and students will be held responsible for any activities that violate the testing environment policy.

75% EXAM AVERAGE POLICY

Criterion: All pre-licensure students

Purpose: In order to assure competent student nurses who are able to apply information to the clinical setting and who will be best prepared for the licensure exam, the following courses will have a 75% exam average.

Policy:

1. The following courses are required to have NCLEX style exams and will have a 75% exam average.
    a. NU 425 Foundations of Health and Illness Concepts
    b. NU 452 Pharmacology
    c. NU 453 Health Assessment
    d. NU 459 Health & Illness Concepts II
    e. NU 471 Women & Children Health Concepts
    f. NU 473 Psychosocial Nursing Concepts
    g. NU 482 Health & Illness Concepts III
    h. NU 484 Population Based Health Concepts
    i. NU 485 High Acuity Nursing Concepts
2. In these courses, failure to achieve a C or 75% average on the exams will result in a maximum grade of D, prohibiting progression in the nursing program.
3. If the course includes an ATI Content Mastery assessment, it will not be included in the calculation of the 75% exam average but does count in the calculation of the final course grade.
4. Examination grades shall NOT be rounded when calculating the exam average but may be included in rounding processes during final course grade calculation.
5. If the student does not achieve a minimum test average of 75%, the determination of the final grade (“D” or “F”) will be based upon the student’s completion and performance on other final course grade requirements.
6. In the final semester (NU 484 and NU 485), students who fail to achieve a C or 75% average on the exams will be withdrawn from NU 489, Capstone Practicum, and not allowed to begin/complete the practicum portion of the course.

Procedure: Faculty will adhere to the 75% exam average policy.

Clinical Student Requirements Compliance Policy

Purpose: To ensure all students admitted to and enrolled in the School of Nursing (SON) maintain consistent compliance with clinical student requirements that will ensure both the safety and quality of the clinical learning environment. See Appendix I for requirement details.

Policy:

1. **Admission Compliance:**
   - All prospective students seeking admission to the SON must fulfill and be compliant with all clinical student requirements.
   - For Fall admissions, all clinical student requirements must be completed and submitted by September 15.
   - For Spring admissions, all clinical student requirements must be completed and submitted by February 15.

2. **Ongoing Compliance for Enrolled Students:**
   - All currently enrolled SON students must consistently remain compliant with clinical student requirements.
   - It is the responsibility of each student to ensure that they are updated and compliant with all periodic requirements such as:
     - AHA BLS certification renewal.
     - Yearly TB skin tests.
     - Seasonal flu shots.
     - Any other mandated health or clinical requirements that may be introduced.

3. **Non-Compliance Consequences:**
   - Students, whether newly admitted or currently enrolled, found noncompliant with any of the clinical student requirements will face:
     - Immediate temporary deferment of student SON activities
     - Deactivation of their Canvas accounts, thereby denying them access to online learning resources.
   - During the temporary deferment period, students will not be allowed to attend clinical sessions and will receive a NPA/F for the day. Please refer to clinical attendance policy in the AU SON Student Handbook.
   - During the temporary deferment period, students will not be allowed to attend SON classes.
   - Exams will not be rescheduled under any circumstance. Students must take exams at their originally scheduled times.

4. **Reinstatement after Suspension:**
   - Students who rectify their non-compliance by fulfilling the clinical student requirements will have their temporary deferment lifted.
   - Upon reinstatement:
     - They will be allowed to attend clinical sessions and SON classes.
     - Their Canvas accounts will be re-activated.
   - The student has the responsibility to make up for any missed clinical hours or coursework.

5. **Student Responsibility:**
   - It is the sole responsibility of every SON student to ensure that they remain compliant with all clinical student requirements.

- Any missed clinical hours or coursework due to non-compliance and resulting suspension must be made up by the student. The SON will not provide special considerations for missed hours or assignments.

Note: This policy serves to maintain the integrity and safety standards of the SON and its clinical affiliates. All students are urged to prioritize their compliance with these requirements for their benefit and the well-being of the patients they serve.

FITNESS FOR NURSING PROGRAM

Criterion: All students enrolled in the School of Nursing

Purpose: To ensure fitness of the student for nursing

Policy Statement:

1. Health policy requirements are based on requirements from multiple agencies where students attend clinical experiences. Please note that it is possible an agency will have additional requirements that are not included in this handbook. In order to participate in clinical experiences, a student must meet all requirements as stated by an agency. One such requirement is fitness for clinical experiences.
2. The required health assessment form must be completed and returned by each student attesting to the student's fitness to attend clinical experiences.
3. Nursing students providing direct patient care, under direct faculty supervision, perform essentially the same physical and emotional activities as a professional nurse. To meet the objectives of clinical courses, comply with clinical agency agreements and ensure the safety of both students and patients, a student must be able to meet these physical and mental demands and be fit for duty to attend clinical.
4. The following information is a description of the physical and mental activities required in nursing. The listing is not all-inclusive but is meant to provide information related to these major areas in performing safe patient care. These activities are in the medium duty category as defined by the U.S. Department of Labor.
    a. Walking/Standing: Extended periods of walking/standing may occur while in the clinical area. Stairs must be negotiated. Clinical shifts in each clinical course vary and can be up to 12 hours.
    b. Sitting: Occurs in the classroom, computer lab, during clinical conferences and when documenting in the patient's medical record.
    c. Lifting/Carrying: Average lifting requirement is 50 pounds. Nursing requires lifting of patients and carrying of medical equipment, charts, supplies, and medications. In the clinical area and clinical lab experiences, students are required to lift, move, and transfer patients. Requesting assistance when lifting or positioning patients is expected, however, the exertion can be up to 50 pounds.
    d. Pushing/Pulling: Required in positioning and moving of patients and medical equipment. Pushing on a patient's chest with considerable force is required in professional of cardiopulmonary resuscitation (CPR). Able to pull or push a Code Blue cart.
    e. Stooping/Kneeling/Reaching/Climbing: Considerable twisting, bending, stooping, kneeling, and reaching are required during many aspects of patient care (moving

patients, bathing patients, making beds, setting up and monitoring medical equipment). Able to climb on to patient's bed for CPR.

f. Eyesight/Vision: Utilized in assessment of patient's health status when inspecting and observing for changes in color, physical appearance, and non-verbal behavior. Able to accurately read medication labels and prepare medications. Reads written communication and monitors medical equipment findings.
g. Depth Perception: Required for the ability to recognize that objects have depth as well as height and width. Assists in description of wounds, lesions, etc. Required for fine task performance when using medical supplies for insertion into the body or medication administration by injection.
h. Fine Motor Skills: Needs manual dexterity and coordination to write clearly and precisely to perform various nursing procedures and grasp and control medical equipment as necessary.
i. Tactile Sensation: The ability to utilize the hands and fingers as a means of "hands-on" during a physical assessment and medication administration. The individual must be able to feel vibrations, temperature changes, and pulses.
j. Temperament: The skills vital in nursing include the ability to adapt to continually changing environment and critical thinking abilities. Must demonstrate professional behavior at all times, especially while caring for patients. Must be able to accept constructive criticism and accept own limits. Must be aware that they will be exposed to communicable diseases and body fluids. Students will be provided knowledge on how to handle their own protection as well as the protection of others.
k. Emotional stability is needed to maintain a therapeutic relationship with patients, families, and health team members. Emotional stability includes adapting to stress, dealing with patient's worsening clinical status or death, cope with the strong emotions of others and cope with your own emptions well enough to maintain professionalism. A student nurse may not pose a significant risk to the health and safety of those in the clinical area.
l. Analytical Thinking Ability to transfer knowledge from one situation to another, process and interpret information from multiple sources, analyze and interpret abstract and concrete data, prioritize care, and evaluate outcomes.
m. Long-term and short-term memory is required. Must synthesize knowledge and skills and adapt decisions based on new information.
n. Communication Skills Ability to teach (patient and family), listen carefully, influence people, and direct/manage/delegate activities to others.
o. Must collaborate with others, respect/value cultural differences and negotiate interpersonal conflicts professionally.

Adapted from Jameson Health System Department of Nursing and Northwest Arkansas College. Retrieved July 5, 2023 from

https://www.nwacc.edu/academicdivisions/healthprofessions/nursing/physicaldemandsnursing.aspx.

Procedure:

1. Student obtains approval from a healthcare provider attesting to the student's fitness for the nursing program. See form, **Appendix C**
2. Student submits this form in Clinical Student by the due date.

POLICY STATEMENT ON REQUIREMENT FOR BACKGROUND DISCLOSURE ON CLINICAL STUDENTS

Criterion: All students enrolled in the School of Nursing.

Purpose: To facilitate safe and competent health care; meet professional standards of conduct which support the public's confidence; comply with the Missouri state law.

Policy Statement:

1. In order to comply with the Section 660.317 of the revised Statutes of Missouri and the terms of affiliation agreements between Avila's health career programs and clinical agency sites, all students must:
   a. Disclose whether they are listed on the Employee Disqualification List as provided in Section 660.315 of the Revised Statutes of Missouri.
   b. Disclose their criminal background history of convictions and guilty pleas of all misdemeanor and felony charges.
   c. Give written consent and release to Avila University to, directly or indirectly, obtain criminal record background checks.
2. Failure to provide this information will result in permanent dismissal from the nursing program.
3. Students must be able to meet and maintain agency requirements on background disclosure. Students will not be admitted to the program or continue in the program, if any screening finds convictions such as crimes against persons (murder, sexual misconduct offenses, domestic violence, stalking, etc.), kidnapping, burglary, sale (or possession) of illegal drugs, arson, weapons violations, wire fraud, drug trafficking, tax law violations, crimes on federal property, and/or drug and/or alcohol abuse.
4. Requirements are subject to change based on state, regulatory, or agency requirements

Procedure:

1. Prior to entering clinical agencies, student must submit the required criminal background information.
2. If additional background checks are required at any point during the program, the student will pay associated fees.

ALCOHOL AND DRUG SCREENING

Criterion: All students enrolled in the School of Nursing.

Purpose:
Drug free environments provide increased safety and decreased costs for all persons in the health care environment. The student will not use alcohol or drugs that impair his/her ability to perform the work of the profession or results in compromised patient care. It is the responsibility of every student to strive to protect the public from an impaired colleague whose capability is impaired because of alcohol or drug use.

Policy Statement:
1. ***All students will complete a drug and alcohol screening prior to beginning nursing courses.***
2. In the clinical setting, if there is suspicion that a student is impaired, the clinical instructor will be immediately notified and the student will be dismissed from the clinical site and be required to submit a drug screen at their expense. Students must provide evidence of a negative alcohol and drug screen to be allowed to continue in clinical.
3. If a student fails to submit to alcohol and drug screening, or the alcohol or drug screen shows presence of either alcohol or controlled substances, the student will be dismissed from the clinical course.
4. Dismissal from a clinical course necessitates withdrawal from all nursing courses.
5. The student will have a transcripted grade of "NC" (No Credit) for the clinical course from which they have been dismissed. All other course grade assignments will be transcripted according to Avila University policies.
6. The dismissed student will be eligible for consideration of readmission to the nursing program upon successful completion and documented evidence of treatment related to the cause for dismissal.
7. Readmission to the program will be considered only one time (see Readmission policy).
8. Students are required to pay for the cost of the alcohol and drug screening, including any costs incurred for medical review officer services.

Procedure:
1. Student will submit alcohol or drug screen as requested.
2. Pre-licensure students dismissed for clinical cause during the semester may appeal this decision to the Admissions and Academic Progression Committee. (See Clinical Failure Appeal Policy Statement.)
3. Student will follow process for readmission as indicated in the Readmission Policy.

CLINICAL ATTENDANCE

Criterion: All students enrolled in the School of Nursing.

Purpose: To facilitate the learning process, subsequent safety of clients, and professionalism.

Policy Statement:

1. Attendance at all scheduled clinical experiences is expected. Clinical experiences include assigned days on in-patient units, observation activities, simulations and on-campus post conferences.
2. Alternative clinical days/activities will be arranged for any missed clinical experiences.
3. If the student is unable to attend for any reason, the student must notify the clinical instructor and clinical site before the assigned clinical time.
4. Students must notify the Clinical Coordinator and clinical instructor of conflicts with clinical days related to other courses (IS travel courses) or sports team participation at the beginning of the semester and if changes in scheduling of these events occurs to determine procedure for these days.
5. If the clinical faculty member is unable to attend or there has been a cancellation due to inclement weather, the clinical faculty member will notify the affected students and provide details of the expected alternative clinical day/activity.
6. Alternative clinical day/activities will be scheduled as either an inpatient clinical day (may replace an observation or be an additional day), or as a virtual clinical day that may include simulations and/or a written make-up assignment. Content and expected time for completion will be determined by the time and type of experience that was missed.
7. Loss of direct patient contact hours will mandate a review of the student's progress in meeting course objectives by the Clinical Coordinator and clinical faculty.

Procedure:

1. Student will attend all scheduled clinical experiences. This will include all clinical activities including simulations, observations, and post-conferences.
2. Student will give prior notification to faculty and clinical site of any alterations in attendance.
3. Faculty will notify student of expected make-up assignments and due dates/times.
4. Guidelines for clinical missed days.
   a. Verification of the reason for any absence will be required (death in the family, student illness, car accident, etc.). Documentation of the absences must be submitted to the clinical coordinators within 48 hours of the absence.
   b. On the first clinical miss – weather or instructor related - including clinical days, simulation EKG classes, post conferences, etc., the student will be rescheduled to an available clinical day or given a make-up assignment. Students must indicate “Snow Day” or “Instructor absence” in the Overall Weekly Performance Evaluation Box on the CI form but do not need to turn it in on an absent week.
   c. First missed day – student related - including clinical days, simulation EKG classes, post conferences, etc., the student will be rescheduled to an available clinical day or

given a make-up assignment. The student will receive a Not Progressing Appropriately (NPA) for the day. A contract will be drafted by the clinical coordinators and clinical faculty member involved. Adjunct will be notified of any contracts for students assigned to their rotations.

d. The second individual missed clinical day will earn an F for the day. This must be indicated in the Overall Weekly Performance Evaluation Box on the CI form. Students will be required to come before a faculty panel to discuss clinical success. Consequences for breach of the contract will be outlined in the contract.

e. The third individual missed clinical day will result in failure from the course

5. The total hours of clinical for all students will be verified by the Clinical Coordinator at the end of each semester.

Office – Person(s) Responsible for Implementation/Enforcement: School of Nursing Faculty.

PROFESSIONAL IMAGE

Criterion: All students enrolled in the School of Nursing.

Purpose: To facilitate infection control and patient and student safety; project a professional image for the Avila University School of Nursing; be a role model for patients and other health care professionals; prevent untoward patient reaction to effects of odors; instill in students an awareness of professional dress standards; comply with agency policies.

Policy Statement:
As a MOKAN member school, we agree to follow the standards for professional dress code.

MOKAN DRESS CODE POLICY

The following minimum standards for dress were developed to support patient safety while promoting a professional image among nursing students. Individual school and clinical facility policies for dress should be reviewed for additional information.

- Students will be required to wear their school badge (ID), that clearly identifies them as a student, above the waist. Certain facilities may require additional identification to be worn while in the clinical setting.

- Hair should be neat and clean without extreme colors (acceptable colors are only those that naturally exist). To avoid contamination hair should be controlled so that it does not fall over the eyes, and in the immediate work area or on patients (ex. Long ponytails will be required to be pinned up to avoid falling into work areas). Head coverings worn for religious reasons or for protection must be appropriate and secured to prevent any cross-contamination.

- Facial hair should be short, clean, and well-groomed and must in no way interfere with the technical and professional requirements of a nursing student's work assignment. Some settings, such as the operating room, may require covering over a beard. If being fit-tested to utilize N95 masks, prior to fit-testing, all facial hair needs to be removed.

- Good hygiene such as bathing, use of deodorant and brushing teeth is expected.

- Perfumes, colognes, and scented toiletries should be avoided, as some individuals may have adverse reactions to the scents.

- Fingernails should be clean, well-groomed, and no longer than ¼ inch from tip of finger to tip of nail. Artificial nails include bonding tips, wrappings, acrylic, and gel finishes are not allowed. In other words, any fingernails with which you were not born are considered artificial and may not be worn by health care personnel who provide direct patient care. Nail polish may not be worn.

- Make-up should be conservative and in good taste. False eyelashes are not allowed.

- Jewelry acceptable while in uniform in the clinical setting includes watch (no "smart" watches), plain band (simple with no raised stones*), and one set of simple post earrings. Flesh or clear spacers must be worn in other piercings or gauges. If wearing a post piercing in the ear for alleviating migraines (Daith piercing), the sum of ear piercings may not exceed three. A doctor's note for wearing a Daith Piercing may be requested.

- No hooded sweatshirts or hooded jackets are allowed in the clinical setting.

- Undergarments should be worn but not visible.

- Refer to individual schools and clinical agencies policies regarding tattoos.

- School uniforms should be clean and unwrinkled. Those bearing a school insignia must not be worn outside of the educational setting. It's the expectation that while in school uniform, students are functioning in their student nurse role and are subject to all applicable policies and procedures.

- Shoes worn in the clinical setting must be closed toe and heel and made of non-permeable material.

**The rationale for not wearing rings with raised stones relates to the hygiene of wearing jewelry with settings/stones that can trap microorganisms.*

Caveat: Students wearing uniforms, make-up, hair accessories, or jewelry deemed inappropriate may be asked to remove or alter the items being worn, at faculty or facility discretion.

Additional requirements for pre-licensure BSN Avila nursing students in any clinical setting and the simulation lab include the following:

1. Remove or cover body adornments (e.g. body piercing, tattoos) as required in certain clinical settings
2. Official university name badge identifying the school and person is to be worn on the upper chest. Name badge should be visible on outermost garment.
3. Wear clean, neatly pressed clothing appropriate to the clinical agency/site. In most settings, including Capstone Practicum, students will wear scrubs, with the university logo, in the approved colors of purple or black, ordered through the School of Nursing's vendor. Scrubs must be either all purple or all black and hemmed so that they do not touch the floor. Wear solid white, purple, gray, or black shirts under scrubs as needed.
4. Students may wear a black scrub jacket. Sweaters, hoodies, or other clothing are not allowed while giving direct patient care in the clinical setting.

5. Nursing or athletic shoes must be worn with hose or socks. Shoes must be clean and in good repair.

Other requirements may be made at the discretion of the course faculty and/or clinical agency/site.

Procedure:

1. Students will adhere to the policy. Any student who fails to adhere to the professional image guidelines may be given a warning, assigned a clinical failure for the day, or sent home. Time away from clinical site will count as a clinical absence.

MEDICATION ADMINISTRATION: METROLOGY COMPETENCY POLICY

Criterion: All pre-licensure students in the School of Nursing.

Purpose: To ensure individual student competency in medication dosage calculation

Policy Statement:

1. Patient safety is an integral part of the School of Nursing curriculum.
2. Students are expected to safely administer medications in their clinical rotations.
3. Metrology is an essential component of safe medication administration and will be taught throughout the curriculum in designated courses each semester.
4. Competency Testing: Metrology assignments, quizzes, and exam questions are a portion of the junior and senior level coursework. See Table 1 below. Practice metrology exams will be available prior to each competency assessment. Metrology competencies will be administered at the following times throughout the curriculum. ***Passing the competencies will be a prerequisite for students' participation in clinical experiences.***

Table 1. Competency Exam Schedule

Semester/Time	Competencies to be tested	Evaluation Method
1st semester NU 425	• Equivalencies—metric; kg/lbs; ml/oz; tsp/ml; tbsp/ml • Oral and parental dosage calculation • Simple and weight-based calculation • Reconstitution • IV flow rates by gravity and pump (intermittent & continuous)	Graded competency
2nd Semester Clinical Orientation	Review Previous Metrology Competencies learned in NU 425	P/NP
3rd Semester Clinical Orientation	Review Previous Metrology Competencies AND new concepts learned in NU 459 • Heparin Dosing • Sliding Scale Dosing	P/NP
4th Semester Clinical Orientation	Review Previous Metrology Competencies AND new concepts learned in NU 482 • Complex IV calculations (e.g. mcg/min; mg/kg/min)	P/NP
Prior to Capstone Clinical	Review Previous Metrology Competencies AND new concepts learned in NU 485 • Emergency drug administration	Graded competency

*P/NP = Pass/No Pass

5. Evaluation of Metrology Competency: A score of 100% is required for each of the metrology competencies given at the times noted in Table 1. Students who do not score a 100% on any metrology competency will be required to complete additional testing until 100% is achieved. If a student is unsuccessful on the second or subsequent attempts, they must complete mandatory remediation. Students who have not passed their metrology competency will be unable to administer medications in clinical. Medication administration is a component of the students' clinical indicators form; not meeting this standard will result in inability to pass the clinical course.
6. Remediation: Remediation is available by appointment with faculty.
7. Rounding Rules for all Courses:
    a. Rounding instructions are included as needed in all metrology questions.
    b. Questions will specify if the answer is to be in whole numbers or rounded to one or two decimal places.
    c. When rounding, if the number is 5 or greater, round up.

Procedure:

1. The Clinical Coordinator and/or course faculty, will be responsible for scheduling, administering, and grading metrology competencies per the content listed above.
2. Faculty will provide remediation for students who are not successful on the first or subsequent attempts.

CLINICAL EVALUATION POLICY

Criterion: All students enrolled in the School of Nursing.

Purpose:
A minimum number of clinical hours must be successfully completed to pass each individual practicum course and to meet program objectives for graduation. Clinical experience is required to allow the student to apply theoretical knowledge in a practical environment. Clinical experiences are arranged to provide experience with patients across the life span and in a variety of settings. Activities associated with each practicum experience are detailed in individual course syllabi (examples include assigned clinical hours, observation hours, simulations, post-clinical conferences).

- Successful completion of clinical hours is evaluated using the Practicum Critical Indicators Tool for all Practicum courses except for Capstone Practicum.
- Successful completion of the required number of clinical hours is monitored throughout each semester and at the conclusion of the program.

Policy Statement:
Procedures for Grading Practicum Clinical Objectives using the Critical Indicators Tool:

1. Evaluating for a specific objective (one row on the form):
   a. The first time a student does not meet a clinical objective they earn an NPA (if the student performance is egregious, the first incident could be an F and the next incident would warrant a contract)
   b. The second time the student does not meet the same objective they earn an F.
   c. Once a student has earned an F for any objective, a contract will be drafted by the clinical instructors that are assigned to this student for the semester or by the clinical coordinator(s).
   d. If the student has a breach of the contract, they are at risk of not meeting the outcomes of the course and successfully completing the course.
   e. The consequences of not meeting the contract will be outlined in the contract.
   f. Adjuncts will be notified of any contracts for students assigned to their rotations.
2. Evaluating for a clinical day (consideration of all objectives on the form):
   a. If a student has multiple NPA's for a day, this could warrant an NPA for the entire day.
   b. The second time the student has multiple NPA's or F's (NPA or F will depend on the criteria listed in #1 above) for the day, the student would earn an F for the clinical day.
   c. Once a student has earned an F for a clinical day, a contract will be drafted by the clinical instructors that are assigned to this student for the semester or by the clinical coordinator(s).
   d. Consequences for breach of the contract will be outlined in the contract.
   e. Adjuncts will be notified of any contracts for students assigned to their rotations.
3. Evaluating Simulation
   a. If a student has 2 or more NPAs in the same category in simulation or 2 or more NPAs in a simulation day, the simulation coordinator will contact the clinical coordinators to assess for patterns throughout clinical and meeting of course objectives.

See Clinical Attendance policy for attendance expectations. The student's clinical attendance impacts their ability to successfully pass the practicum course.

NU 489 CAPSTONE PRACTICUM CLINICAL GUIDELINES

Please read these Capstone Practicum Guidelines and complete the Preference Survey, **Appendix D**, and return by the assigned due date.

- During the Capstone experience, students complete a minimum of 135 clinical hours during the last 4 class weeks of spring semester. The student will follow the schedule of his or her clinical preceptor.

- Priority must be given to the Capstone experience. It is the students' responsibility to pre-plan personal schedules (including work schedules, childcare, vacations, and personal appointments), to minimize disruptions during this time. It is possible that students may not receive their clinical schedules until the week prior to beginning the capstone experience.

- Priority consideration for the Specialty Area assignments will be determined by the student's cumulative program exam average to date at the time Capstone placement decisions need to be made.

- Placement preferences cannot be guaranteed.

- Students are NOT to ask nurses at clinical facilities directly if they can serve as preceptors. This creates additional confusion between the educational and practice partners. Likewise, requests from agencies requesting specific students may be considered at the discretion of the Clinical Coordinator.

- Assignments are contingent upon agencies/preceptor commitments. These commitments are made at varying times during the academic year. It is possible not all students will be notified of placements simultaneously. It is possible you may not know your placement until much closer to the Capstone start date.

- Please explain, write, describe as much as possible on the following page, to assist clinical coordinators in placing students in the appropriate Capstone experience.

CLINICAL SAFETY

Criterion: All students enrolled in the School of Nursing.

Purpose: To protect the safety of the client as well as the student nurse.

Policy Statement:

1. Each student must uphold the policies of the school and clinical agencies.
2. When health issues are involved, both student and client safety will be considered.
3. Specifically, the student is expected to disclose to the student's advisor health related issues that may put either student or, if in clinical, a client in danger. Pregnancy should be disclosed as soon as possible.
   a. For situations including, but not limited to surgery, pregnancy, delivery, and other major health related issues, the Health Release form will be required before beginning or returning to clinical activities. A copy of the Health Release form is available in the Nursing Student Handbook for this purpose (See **Appendix E**).
   b. Information must be updated with the advisor with significant change in student health status.
   c. While engaging in clinical activities, the student may not be under the influence of any medication that is impacting their cognitive functioning, including but not limited to prescribed medication. (Please see associated policy on alcohol and drug screening.
   d. Student may need to withdraw from nursing courses to allow time to receive treatment and improve his/her health condition and to maintain the safety of clients. Refer to Leave of Absence and Withdrawal policies in the Nursing Student Handbook.
4. Undergraduate students may provide care to clients only when a faculty member or preceptor is present in the health care agency.
5. In arranged observational experiences, contact information for a designated nursing faculty member must be provided to the identified resource member and does not require a faculty member to be present with the student. In acute care settings, a clinical instructor in the facility must be designated as the contact faculty to be notified in case of emergencies/issues.
6. Students may not transport clients in their own car nor in an agency car.
7. Students may not witness signatures on legal documents.
8. Students may not take verbal or telephone orders.
9. Students may not photograph clients.
10. Student may not work overnight directly prior to a clinical student shift.
11. Students are expected to maintain skill and metrology competency after successful completion of the skills course.
12. Clinical experiences are subject to the professional judgment of the clinical instructor and may vary according to agency policies and procedures.
13. Students must be accompanied by agency personnel when making home visits.

14. Students must be accompanied by agency personnel when moving patients from their assigned hospital room to other sites in the hospital or to their transportation source at discharge.

Procedure:

1. Students will adhere to the policy on Clinical Safety. Failure to do so may result in a warning, Professional Conduct Report, or dismissal from the program.

INCLEMENT WEATHER ATTENDANCE COMMUNICATION PLAN

Criterion: All students enrolled in the School of Nursing

Policy:

1. It is assumed that classes, labs, and simulations will be held unless the campus is officially closed.
2. Students and faculty must use independent judgment about driving in inclement weather conditions.
3. Because nursing clinical experiences involve off campus sites and travel at early morning hours, faculty will attempt to make decisions related to cancellation approximately two hours before the scheduled activity.
4. Any assignments that were due to be posted on Canvas are STILL DUE at the original due date and time
5. Alternate activity assignments will be posted on Canvas and will be due at the date and time specified.

Procedure:

1. Students will sign up through MyAU for push notifications from Avila University.
2. Use KCScout.net for up to date road information to assist in your driving decisions, including estimated travel times.
3. Students should check Canvas for any changes in scheduling for classes, labs, and/or simulations.
4. For morning decisions related to clinical experiences:
   a. Decisions to cancel or delay clinical will be made by the Clinical Coordinator with input from other full-time faculty as early as possible.
   b. If clinical is cancelled/delayed the Clinical Coordinator will text all clinical instructors with instructions for the day.
   c. The Clinical Coordinator will also post the decisions related to clinical on Canvas. Students need to be sure to have their Canvas account set up for notifications or plan to check it frequently on mornings when the weather and/or road conditions are questionable.
   d. Clinical instructors will call their scheduled units to let them know of any cancellations or late starts.
   e. The Clinical Coordinator will notify observation sites of cancellations.
5. For decisions related to clinical experiences after students and faculty are already at sites:
   a. Weather conditions will be carefully monitored at the SON office during the day. The decision to send students home from clinical early will be based on road conditions and weather forecasts. Because students and faculty travel to and from various locations throughout the metropolitan area, the decision to send students home early is made for all students. Concerns about impending weather and road conditions should be communicated to the Clinical Coordinator.

b. The Clinical Coordinator will make the decision regarding early dismissal.
c. Clinical instructors will be notified by text and/or telephone messages.
d. Students in observation sites will be notified by text of any early dismissals.

6. If clinical is cancelled due to inclement weather, students will be notified by the Clinical Coordinator or clinical faculty of the alternate activity assigned. These activities must be completed and submitted by the applicable due date. This may include virtual meeting(s) throughout the clinical day.

LATEX ALLERGY RESPONSE PLAN POLICY

Criterion: All students enrolled in the Avila University School of Nursing

Purpose: A student in the clinical setting or the Avila School of Nursing NERC may be exposed to latex. These environments cannot be completely latex free. Avila University School of Nursing does not have the equipment nor necessary medications to treat an allergic reaction. The purpose of this policy is to protect students with a latex allergy or sensitivity from harm by a) identifying students at risk for a latex allergy response and ensuring they have an appropriate plan in place for self-management of an allergic reaction; b) communicating a plan of action should an allergic reaction occur.

Policy:

1. All students complete the Latex Allergy Response Plan Form (**Appendix F**).
2. Students with a known latex allergic reaction or sensitivity must consult with their personal healthcare provider to discuss risks, management, and treatment and complete the lower part of the Latex Allergy Response Plan Form.
3. Students with a known latex allergy or sensitivity are responsible for providing equipment/medications necessary for initiating self-management of a reaction.

Procedure:

1. Students with a known latex allergic reaction or sensitivity must provide written notification to Avila University School of Nursing (see attached document).
2. The treatment plan—developed in consultation with a health care provider--will be communicated, in writing (see attached document), to the School of Nursing. Examples might include oral Benadryl and/or epinephrine injection.
3. The treatment plan will be kept in the student's advising file and will be shared with appropriate clinical and lab faculty.
4. In the event of a student experiencing an allergic reaction the following will occur:
   - If the event occurs in the clinical setting, off the Avila University campus, the policy and procedure of the clinical site will be followed.
   - If the event occurs in the Avila University School of Nursing facility, the affected student will initiate their documented allergy response plan determined by their personal healthcare provider. Any faculty member, staff member, or student who witnesses a severe allergic reaction should follow the procedure below:
     a. Call 911 immediately. State that you are from the Avila University School of Nursing, and that you have a student with a life-threatening allergic reaction. Direct the emergency medical responders to Borserine Hall, Building 6 (if applicable)
     b. Another individual should contact Campus Safety at (816)985-6079 to assist with directing emergency responders.

NURSING EDUCATION AND RESOURCE CENTER POLICY

Criterion: All students enrolled in the School of Nursing

Policy:

1. Absolutely NO food or drink is allowed in the simulation area, at patient stations or near simulators and associated computer equipment.
2. Consuming beverages or food is restricted to the desk area of the NERC only. All trash should be disposed of appropriately and desk area wiped down if needed.
3. Hi-fidelity Simulators should NEVER be used for skills practice unless instructed by Faculty or NERC Coordinator.
4. The simulation area will be restricted during specified times and will not be accessible for student use unless otherwise instructed by Faculty or NERC Coordinator.
5. No equipment or supplies may be removed from the NERC without prior permission (see below).
6. Some pieces of equipment will be made available to the students on loan throughout different courses. All equipment must be signed in and out in the equipment log located in the NERC. Equipment must be returned upon the set time determined by the NERC Coordinator. In some cases, equipment may need to be returned within 24 hours for students to have access to the equipment during scheduled labs. These time constraints will be communicated to students when necessary.
7. Equipment and supplies may only be used for practice of designated skills.
8. No invasive skills may be practiced on human subjects at any time except in the clinical environment under the supervision of approved clinical faculty or preceptors.
9. For safety, only nursing students and their practice partners are allowed at patient stations in the NERC. If visitors are present, they must remain in the classroom area of the NERC. Students are responsible for their own behavior and the behavior of any guest in the NERC.
10. Students are required to participate in the upkeep, operation and maintenance of all items located in the NERC. This includes but is not limited to:
    a. Reporting any broken or inoperable equipment to the NERC Coordinator.
    b. Returning all unused or reusable supplies to the area they were obtained.
    c. Maintaining responsibility for supplies provided in student supply bags.
    d. Ensuring each station remains clean, with no trash or supplies left on floor, bedside table or bed.
    e. Each station is stocked with specific supplies and equipment. Following use, all items are to be returned to their designated area.
    f. Returning beds to lowest position, bed linens neat and manikins/simulators in appropriate positions.
    g. Moving the manikins to/from the bed if requested by the instructor.
    h. When appropriate, emptying full bedside trash cans for the next group of students to use.

Procedure:

1. Deviations from these policies must be discussed with the NERC Coordinator prior to the event.
2. When appropriate full bedside trash bags will be tied closed and stacked against the wall near the storage closet

NERC AND WYLIE STUDY ROOM: AFTER HOURS ACCESS

Criterion: All students enrolled in the School of Nursing.

Purpose: To allow student access to static manikins and equipment in preparation for class and practicum activities.

Policy Statement:

Nursing students may have access to the Nursing Education and Resource Center (NERC) and the Wylie Study Room after normal business hours, on weekends and holidays unless previously scheduled events are in session.

Procedure:

1. In the evenings, weekends or over holidays students can access the NERC and the Wylie Study Room using their Avila University Student ID in the keyless entry on the doors to the School of Nursing suite and NERC.
    a. The Goppert/Borserine building is open M-F 7:15 am to 10:30 pm. On Saturdays the Goppert side of the building is open from 7:15 am to 7:00 pm. The building is closed on Sundays.
    b. To gain access to the building when it is closed, call campus security at 816-985-6079 or 816-501-2466.
    c. When leaving the lab and building, students need to verify that all doors are locked in the nursing suite, turn off any lights or equipment used, and notify security upon leaving.
2. All Nursing Education and Resource Center Policies are in effect at all times.
3. Students are responsible for leaving the lab in the same condition in which they initially found it.
4. If students do not show respect for the lab and equipment, the School of Nursing reserves the right to deny continued access to the lab.

NURSING EDUCATION AND RESOURCE CENTER (NERC) REFERRAL

Criterion: All students enrolled in the School of Nursing.

Purpose: To promote development of clinical competency

Policy Statement:

1. A nursing student may be referred by any faculty to the Nursing Education and Resource Center (NERC) for supervised assistance.
2. Faculty must review reasons for referral with the student and establish a deadline for completion of the assigned skills.
3. Student attendance is mandatory.
4. Failure to comply will lead to a professional conduct report and may lead to a non-passing grade in the related course.

Procedure:

1. Faculty making referral to the NERC should complete the appropriate form (available from the School of Nursing) and make arrangements for supervised assistance.
2. The student is responsible for arranging time with the NERC Coordinator for skill performance.
3. The NERC Coordinator or designated faculty will keep anecdotal notes on student progress and will return a copy to the referring faculty when the assignment is completed.

NURSING VILLAGE STUDENT POLICY

Criterion: All students enrolled in the School of Nursing

Policy:

1. Eating food in the Nursing Village is prohibited.
2. Drinking of beverages is restricted to the desk area of the debriefing space. Containers must have a screw on lid that is sealable. NO food or drinks are allowed in the area of the simulators/manikins or the associated computer equipment.

Procedure:

1. Students have access to the Nursing Village only during simulations and scheduled activities.
2. Students cannot access the Nursing Village without having a nursing faculty or staff member present.
3. Doors to the Nursing Village will be unlocked prior and during the scheduled activity, but will locked promptly following the conclusion of the activity.

Office - Person(s) Responsible for Implementation/Enforcement: Simulation Operations Specialist, Simulation Coordinator, School of Nursing Faculty, Students

STUDENT CONCERNS

Criterion: All students enrolled in the School of Nursing.

Purpose: To provide an avenue for students to voice their concerns.

Policy Statement:
The Student Affairs Committee will hear student concerns related to School of Nursing policies.

Procedure:
1. If a student has a concern about School policies (e.g., dismissal, leave of absence, dress code), the student will contact the coordinator of the Student Affairs Committee.
2. The Student Affairs Committee Coordinator will call a meeting of the Student Affairs Committee, the student, and other involved parties, as needed, to review the concern within 10 working days.
3. The Student Affairs Committee will bring the concern and the committee's recommendation to the faculty.
4. If the student's concern is beyond the scope of the Student Affairs Committee, the committee will refer the student to the appropriate person(s).

STUDENT FORMAL COMPLAINT POLICY STATEMENT

Criterion: All students enrolled in the School of Nursing.

Purpose: To give students a means to have formal complaints reviewed.

Policy Statement:

1. A formal complaint is any complaint related to the School of Nursing that has been filed in writing and/or moves forward in the designated channel for resolution.
2. A student who desires to make a formal complaint will follow the procedure specific to that issue as outlined below.

Procedure:

A. Final Course Grades: Refer to Grade Appeal procedure as outlined in the University Undergraduate Catalog.
B. Clinical Failure: Refer to the Appeal of Clinical Failure Policy Statement in the Student Nurse Handbook.
C. Non Academic Dismissal: Refer to the Dismissal from School of Nursing Appeal Policy Statement in the Student Nurse Handbook.

For A, B, and C. Faculty:

1. Complaints that are not resolved through interaction with the faculty member may be submitted in writing to the Chair of the School of Nursing for consideration.
2. A student has the opportunity to evaluate faculty performance on individual course evaluations and to write specific comments. Those evaluations are reviewed by the individual faculty person, Chair of the School of Nursing, Dean of the College of Science and Health, and the Provost/Vice President of Academic Affairs.

Other Students: Refer to the Code of Student Conduct procedures found in the Avila University Student Handbook.

School of Nursing Policies: Refer to the Student Concerns Policy Statement in the Student Nurse Handbook.

Harassment: Refer to the Harassment Policy Statement in the University Undergraduate catalog or the Avila University Student Handbook.

Disability: Refer to Avila University Student Access Services

Accreditation/Approval Agencies: Refer to appropriate accreditation / approval agency.

SOCIAL MEDIA POLICY

Criterion: School of Nursing Students

Purpose: To ensure that confidentiality and privacy of all clients will be maintained, and to ensure the same of our faculty, staff, and students. As ambassadors of the profession of nursing, Avila University School of Nursing, and Avila University as a whole, student nurses must protect client information to ensure that this information remains private and confidential. In the current atmosphere where social media is readily available to all individuals, it is necessary to develop a common understanding of the ethical and legal obligation to maintain client privacy and confidentiality.

Policy Statement:

Client Focused Issues

1. Students will maintain the privacy of all individual, identifiable health information of clients.
2. Students will not discuss any clients they have cared for, any aspect of client care, or any confidential student/client matters outside of the clinical or learning environment.
3. Students will not videotape or photograph clients.
4. Students will not publish, post, or discuss any client interaction on any social media.
5. Students will have no contact with current clients via social media while in the student role. Students will maintain the distinction between a professional and personal relationship.

Classroom/Clinical Issues

1. Students will not engage in social media while in class or clinical.
2. Students will use cell phones/smart phones in the clinical area for health information access only. Some facilities will not allow any personal devices in patient care areas. Personal phone calls and/or texting are not allowed in the immediate clinical area.

Professional/Personal Issues

1. Students are personally responsible for the content they publish on social media outlets, including but not limited to: blogs, Face Book, LinkedIn, You-Tube, Twitter, Snap Chat, Instagram, Pinterest or any other outlet for user generated media.
2. Creation of a social media site/network/group that identifies with the Avila SON must be reviewed, approved and monitored by an approved member of the Nursing faculty.
3. Negative comments about Avila University or the School of Nursing will not be posted on personal social media sites.
4. Students will not use Avila University logos and graphics on personal social media sites. Use of the Avila University logo for School sanctioned events must be approved by the Office of Marketing and Communication (OMC). This includes T-shirts, slogans, flyers, website postings, etc.
5. No student shall make a video-recording, audio-recording or take photographs of professors or fellow students for personal or social media use without the express written permission of the faculty or fellow student.

6. Students will self- monitor and must promptly report any identified breach of confidentiality or privacy to the SON faculty.
7. Students will not become “friends” with nursing faculty on Facebook or any similar avenue of social media relationship/connection prior to the student’s graduation from nursing school.

Procedure and Consequences

1. Each student is responsible for individual postings and may be subject to liability if individual postings are found defamatory, harassing, or in violation of any other applicable law or copyright.
2. Suspected or confirmed breaches in this policy reported by the nursing personnel or nursing student will be reported to the SON or AU Student Affairs committee.
3. Violation of these social media guidelines may result in the completion of a Professional Conduct Report (**Appendix A**), dismissal from the nursing program, and/or dismissal from the university.

LETTERS OF REFERENCE REQUESTS

Criterion: Students enrolled in the nursing major.

Purpose: To provide reference letters in a timely and efficient manner.

Policy Statement: Faculty members receive numerous requests to write letters of reference on behalf of students and graduates. For this reason, the student is expected to:

1. Choose a faculty member who will best meet the need for this reference (e.g. your academic advisor and/or clinical instructor). Understand that a faculty member may choose whether or not to write such a letter.
2. Complete the Request for letter of Reference form (see **Appendix G**) and submit it to the faculty member at least two weeks prior to needing the letter. If special circumstances such as an unexpected opportunity require shorter notice, ask whether it will be possible for the faculty member to meet your deadline.
3. In order to facilitate your request, you must provide the following type of information: A resume or fact sheet about you which can include a brief narrative highlighting talents, skills, and experiences, such as a particularly rigorous part of your record, the leadership roles which you have held, or an unusual study or travel experience.
4. If you are asking a faculty member to attach his or her letter of reference to a form, be sure that you have accurately and completely filled out that form.
5. Under the terms of the Family Educational Rights and Privacy Act of 1974 (FERPA), you have the right to access your reference letters unless you choose to waive that right. As you consider your choice, please be advised that if you elect to have a confidential letter written on your behalf, you permanently waive your right to access the contents of that letter.

POLICY STATEMENT ON STARTING INTRAVENOUS SOLUTIONS AND ADMINISTERING INTRAVENOUS MEDICATIONS

Criterion: All pre-licensure students enrolled in the School of Nursing.

Purpose: To protect patients, faculty, and students.

Policy:

1. Students may perform basic intravenous (IV) maintenance after didactic presentation, supervised practice and successful demonstration in the NERC has been completed.
2. Basic IV maintenance includes: observing the site, monitoring pumps, and discontinuation of an IV site.
3. The following skills must be performed under the direct supervision of the instructor or a RN and within specific clinical agency guidelines.
    - Perform venipuncture on clients. Student is limited to two attempts for insertion per client.
    - Administer and titrate IV solutions and medications. This includes saline flushes, medicated IV solutions, total or peripheral parenteral nutrition, antibiotics, narcotics, and other IV push or piggyback medications.
    - Initiate and monitor administration of blood products.
    - Change dressings on central venous lines, Hickman catheters, and PICC lines.
    - Access or de-access an infusaport.

Procedure:

1. Student will adhere to policy on IVs or be subject to academic performance and/or professional conduct sanctions.

LACTATION/BREASTFEEDING POLICY

As part of our family-friendly policies and benefits, Avila University supports breastfeeding mothers by accommodating the mother who wishes to express breast milk during her workday. For additional information please go to http://www.dol.gov/whd/nursingmothers/.

The University provides a private lactation room in Whitfield down the hall from security. The room is the Mother's Lounge. The room is furnished with a table, chairs, and electrical outlets. It also has a small refrigerator reserved for the specific storage of breast milk and a microwave.

Employees and students may use the Mother's Lounge anytime during normal business hours. The room has signage for "Available" when it is not occupied, or "Occupied" when in use. The security office also maintains a key for this room.

General Rules Regarding Use of Mother's Lounge Room Procedure

- Mothers should change the signage to "Occupied" while using the room and change the signage back to "Available" upon exiting the room.
- The Mother's Lounge's sole intent is for the purpose of expressing breast milk.
- Please maintain cleanliness of this room, and do not leave any items in the room for storage after use, except for milk in the refrigerator. The University is not responsible for any lost or stolen items.
- Please report any maintenance issues with the room to Campus Services at ext. 3629 immediately.

Refrigerator Rules

- The sole intent for this refrigerator is to store expressed milk during the work day.
- All breast milk should be labeled with mother's name and date, and taken home daily.
- Any milk remaining at the end of the work week will be disposed of.
- Please maintain the cleanliness of the refrigerator, and wipe any spills that may occur.

OVERVIEW OF STUDENT SCHOLARSHIPS AND AWARDS

The Student Affairs Committee supports, sponsors, and initiates the following: Most Outstanding Senior in Nursing Award (MOSINA), Excellence in Clinical Practice Award, and Excellence in Leadership award.

Each award and scholarship have criteria and deadlines specific to the individual program. The Student Affairs Committee will communicate opportunities to eligible students by announcement via student email.

After the student receives notification of their nomination/eligibility for scholarships and/or awards, it is the student's responsibility to communicate with the Coordinator of the Student Affairs Committee regarding application and submission procedures.

TRADITION OF EXCELLENCE IN NURSING SCHOLARSHIP

Criterion: Second semester junior nursing students.

Purpose: To recognize junior nursing students who are committed to and demonstrate potential for excellence in nursing.

Policy Statement:

1. Students, will complete an essay at a time determined by faculty during the first two weeks of the semester.
2. Students will complete the first semester of nursing program with a 3.0 nursing GPA.
3. Of those eligible, 25% of students with the highest GPA will be selected for review.
4. The student writing the highest scoring essay will receive the scholarship.
5. The Financial Aid office will notify the student of the scholarship.
6. A letter of award will be sent to the student in the spring semester.

MOSINA AWARD

(Most Outstanding Senior in Nursing Award)

Criterion: Senior nursing students enrolled in the School of Nursing

Purpose: To recognize nursing students who demonstrate outstanding overall achievement in the Avila Nursing program.

Policy Statement: The senior nursing student, who has best demonstrated overall excellence, as evidenced by outstanding academic and clinical performance and achievement of program outcomes, will be recognized with the MOSINA Award.

Procedure:

1. Upon completion of the first semester of the senior year, nursing students with a cumulative G.P.A. of 3.2 or higher will be eligible for the MOSINA.
2. Every full-time faculty member will have the option to nominate a senior nursing student from the list of eligible candidates whom they believe has demonstrated overall excellence in the nursing program.
3. The Student Affairs Committee will prepare a first-round ballot of all the nominees. The top three candidates will be placed on a second ballot for a final vote.
4. Presentation of the MOSINA will be at the Annual Honors Recognition Ceremony.

EXCELLENCE IN CLINICAL PRACTICE AWARD

Criterion: Senior Nursing Students

Purpose: To recognize a pre-licensure nursing student who demonstrates outstanding clinical achievement in the Avila Nursing program.

Policy Statement:
The senior pre-licensure nursing student who has best demonstrated overall excellence in the clinical environment will be recognized with the Excellence in Clinical Practice Award.

Procedure:
1. Upon completion of the first semester of the senior year, students will be eligible for the Excellence in Clinical Practice Award.
2. All full-time faculty and clinical adjuncts who supervise clinical will have the option to nominate a senior nursing student based on the following criteria:
    a. Communicates effectively with patients, families and members of the interdisciplinary team.
    b. Provides safe, high-quality, patient-centered care for all patients.
    c. Demonstrates ability to think critically and applies theoretical knowledge in the clinical setting.
    d. Is accountable for personal and professional behavior in the clinical setting.
    e. Engages in team building and is actively engaged in all clinical experiences.
    f. Advocates for their patients and engages in teaching-learning activities.
    g. Prioritizes patient care activities and is beginning to learn the role of delegation.
3. The Student Affairs Committee will prepare a first round ballot of all the nominees. The top three candidates will be placed on a second ballot for a final vote by full-time faculty.
4. Presentation of the Excellence in Clinical Practice Award will be at the Annual Honors Recognition Ceremony.

EXCELLENCE IN LEADERSHIP AWARD

Criterion: Senior Nursing Students

Purpose: To recognize pre-licensure nursing students who demonstrate outstanding leadership achievement in the Avila Nursing program.

Policy Statement: The senior Pre-licensure nursing student, who has best demonstrated overall excellence in leadership potential, interpersonal skills, and a commitment to life-long learning will be recognized with the Excellence in Leadership Award.

Procedure:

1. Upon completion of the first semester of the senior year, all nursing students will be eligible for the Excellence in Leadership Award.
2. The criteria for this award are:

A. Leadership potential – Students who were active in their student organization or who were active in organizing activities for the class are eligible.

B. Interpersonal skills – Students who worked cooperatively with faculty, other students, and agency staff are eligible.

C. Continuing professional growth – Students who show an interest in continuing learning beyond graduation are eligible.

3. The Student Affairs Committee will prepare a first round ballot of all the nominees. The top three candidates will be placed on a second ballot for a final vote by full-time faculty.

Method Of Recognition: Presentation of the Excellence in Leadership Award will be at the Annual Honors Recognition Ceremony.

SCHOOL OF NURSING ACADEMIC HONORS

Criterion: Senior nursing students enrolled in the School of Nursing

Purpose: To recognize nursing students who demonstrate academic excellence in the Avila Nursing program.

Policy Statement: Senior nursing students who have a 3.5 or above nursing G.P.A and are in the top 35% of the cohort will be recognized with an honor cord.

Procedure

1. Upon completion of all nursing courses except NU 489 - Capstone, senior nursing students with a nursing G.P.A. of 3.5 or higher AND are in the top 35% of the cohort will be selected to receive the nursing honor cord.

Appendices

Appendix A. PROFESSIONAL CONDUCT REPORT FORM

Name of student: _____ Date: _____

Name of person(s) initiating report: _____

Academic honesty: Professional Behaviors: Procedural:

- Examination
- Written Assignment
- Other
- Classroom
- Clinical
- Office/Campus
- Policy violations
- Other

____Course Related ____Non-Course

Description of situation:

____Student notified ____Student Not Notified

Date student was notified (if indicated):
Date of meeting with student (if indicated):
Attendees at meeting:
Student statement related to situation:

_____ Date: _____
Student's Signature

Course consequences (if indicated):

Plan for improvement (if indicated):

Date for follow-up conference (if indicated):_

_____ Date: _____
Student Signature

_____ Date: _____
Faculty or Advisor Signature

Action:
____Monitor for patterns ____Warrants attention

If indicated:
Academic Chair Notified – Date:
Forwarded to Academic Affairs Office – Date:
Other faculty Notified – Date:

Summary of student resolution (Reassessment):

Date: _____

_____ _____
Student Affairs, Coordinator OR Date
Faculty (as indicated)

Copy to be provided to student (if indicated); a copy will be kept in student's advising file and Student Affairs Committee file.

Appendix B. Proctor Approval and Exam Agreement Form

Proctor Approval and Exam Agreement Form

The student and proctor must complete this form for each exam. Proctor must email the completed form to the instructor 1 week prior to the exam date. The instructor must notify the student and proctor of his or her approval or rejection prior to the exam.

Student Name_____ Student Email _____

Course Name/Number_____ Instructor Name _____

Semester/Year_____Instructor Email _____

Student Signature _____ Date_____

The individual selected to serve as proctor must have no vested interest in the exam outcome.

Proctor Name_____ Proctor Job Title_____

Proctor Workplace _____ Proctor Email_____

Proctor Qualifications/Certifications

I am one of the following:

_____ Armed Forces Education Officer or Officer of a higher rank.
_____ University/College Testing Center, Private Testing Center
_____ State Certified High School Superintendent, Principal, Vice Principal, Teacher or Counselor
_____ University/College Professor, Dean or Director
_____ Full time Public Library Librarian
_____ Minister, Priest or Rabbi of an established church, temple, mosque or synagogue

I am not any of the following:

_____ Teaching assistant tutor, neighbor, co-worker, relative, student, or anyone with a conflict of interest

As a proctor I agree to the following:

- To supervise the exam for the student named above in an environment where the student is not likely to be interrupted during exam administration. A computer with internet access must be available.

- To check the identity of the student before the exam (may be a valid driver's license, military ID, or passport) to ensure the examinee is actually the person scheduled to test.
- To ensure no copies of the exam are made.
- To ensure that the student does not access notes, articles, or other unauthorized materials.
- To ensure that the student does not have access to their phone, smart watch or other electronic device and other personal items (purse, backpack, etc.)

PLEASE NOTE: Exam time limits are already set in the online LMS program used by Avila University.

I verify my agreement with the statements above.

Signature _____ Date_____

Scan and Email Completed from to Instructor

Appendix C.

FIT FOR NURSING PROGRAM FORM

_____
(Name)

The person identified above has been accepted to the Avila University nursing program. This document serves as a release that the nursing student can fully participate in all classroom, laboratory, and clinical activities required for the nursing program.

Please be advised that during these activities the student will, at a minimum, be:

- expected to lift and transport patients of a variety of weights,
- expected to maintain stamina for a 12-hour shift,
- expected to stand and walk for prolonged periods of time, and
- expected to have cognitive function that enables safe patient care.

If you have any questions about this form and/or student activities, please contact the Avila University School of Nursing at 816.501.3672.

____This student is able to fully participate in all School of Nursing classroom, laboratory and clinical activities.

Printed Name and Credentials of Health Care Provider: _____

Signature and Credentials of Health Care Provider: _____

Contact Information:_____

Date_____

Appendix D

NU 489 CAPSTONE PRACTICUM PREFERENCE SURVEY

Name: _____ Date: _____

Most students will receive a Medical-Surgical assignment as determined by the available slots we are granted. We only receive a small percentage of Specialty Area options, so please consider this when ranking your preferences.

Please remember, priority consideration for the Specialty Area assignments will be determined by ATI Med-Surg and the Pre-Assessment (TBD) exam scores and previous clinical performance.

1. Please rank your Top 5 choices of the following options:

Medical/Surgical areas:
ICU
Pediatrics
OB
Other _____

2. What is the most important factor you want to be taken into consideration when being assigned to a Capstone site: type of placement, shift or location. explain why this is important to you. Rank the preferred location from 1 to 3 (highest to lowest) in order of importance, and then state why you have ranked them the way you did. Write on the back if needed. ***You may not request a specific facility.***

   ___ Type of placement/unit (as requested above)

   ___ Shift: Day Night (circle the one you prefer)

   ___ Location: (see #4)

3. If you currently work in a health care facility, where do you work?

4. What city and state do you live in? List what suburb you live in.

Appendix E

SCHOOL OF NURSING HEALTH RELEASE FORM

Return to Duty

_____

(Name of Student/Patient)

The student/patient identified above has disclosed to the Avila University nursing program that he/she has experienced health related concerns. This document serves as a release that the nursing student can now fully participate in all classroom, laboratory, and clinical activities. Please be advised that during these activities the student will, at a minimum, be expected to:

- lift and transport patients of a variety of weights
- maintain stamina for a 12-hour shift
- stand and walk for prolonged periods of time
- cognitively functioning, enabling safe patient care

Please check which one of the following statements most accurately reflects your opinion of the student's status:

_____This student can fully participate in all School of Nursing classroom, laboratory and clinical activities effective immediately.

_____This student will be able to fully participate in all School of Nursing classroom, laboratory and clinical activities effective on the following date _____.

_____This student must be reassessed by a health care professional prior to fully participating in all School of Nursing classroom, laboratory and clinical activities.

Printed Name & Credentials of Health Care Provider: _____

Health Care Provide Contact Information: _____

_____ _____

Signature and Credentials of Health Care Provider Date

If you have any questions about this form and/or student activities, please contact the Avila University School of Nursing at 816.501.3672.

Appendix F

LATEX ALLERGY RESPONSE PLAN FORM

When working as a student in the clinical setting or the Avila School of Nursing NERC, students may be exposed to latex. These environments cannot be completely latex free. Complete the student acknowledgement below.

To be completed by the student:
_____ I do not have a latex allergy.
_____ I have a known allergic reaction or sensitivity to latex. Complete a written student plan of care in the event of an allergic reaction ***using the bottom portion of this form***.

I have reviewed the Latex Allergy Response Plan Policy and understand that I am responsible for working with my personal health care provider to develop my own allergic reaction response plan. I am also aware that Avila University faculty and staff may deem it necessary to call 911 in the event of an allergic reaction.

Printed Name: _____

_____ Date: _____
Student Signature

****

Health care provider to complete and sign this portion of the document.

Nature of Student Allergy:

Health Care Provider Recommendation for student's self-management of a latex reaction.
(NOTE: This is a recommendation to the student for self-care in the event of a reaction to latex.)
If the student is having a severe reaction 911 will be called.

Printed Name: _____

_____ Date: _____
Health Care Provider Signature

Appendix G

REQUEST FOR LETTER OF REFERENCE

I,_____, request that the faculty

member,_____, provide a letter of reference for (check

appropriate response)

___graduate school

___employment

___scholarship

___other – please specify: _____

Letter needed by: _____

Check one of the two following responses:

_____This letter is confidential. I waive my right to see this reference

_____This letter is NOT confidential. I do NOT waive my right to see this reference

The reference letter is to be sent to:

_____

(Name and title) (Organization) (Address, City, State, Zip or, if appropriate, E-mail)

_____ _____

Student Date

Appendix H

AVILA UNIVERSITY BLOOD OR BODY FLUID EXPOSURE REPORT

Name: _____

Circle one: Student Faculty Staff

If student, also include clinical instructor name: _____

Place of exposure: _____
Date of Exposure: _____ Time of Exposure: _____

Was exposure related to a sharp device?
yes no

Details of the procedure being performed, including where and how the exposure occurred:

If exposure was related to a sharp device, describe the device and how the injury occurred with the device.

What was the type and amount of fluid or material and the severity of the exposure (e.g., percutaneous exposure, depth of injury and whether fluid was injected or skin exposure on chapped, abraded or intact skin)?

What do you know about the exposure source, e.g., HIV or other bloodborne pathogens, stage of disease, history of antiretroviral therapy, and viral load, if known.

Plans for counseling, post-exposure management, and follow-up.

Appendix I

MOKAN POLICIES (REQUIREMENTS FOR ALL STUDENTS AND FACULTY IN CLINICAL SETTINGS)

The participating members of the Collegiate Nurse Educator Group of Greater Kansas City (CNE) and the Kansas City Area Nurse Executives (KCANE) have agreed to the following:

In the event of a conflict between any of the terms and conditions of this Amendment A and the terms and conditions of the Agreement, the terms and conditions of this Amendment A shall control.

Both parties agree that the Agreement is here by amended as follows: Fundamental Responsibilities:

1. In order to continue the effective preparation of nurses to enter the profession, education partners and clinical partners each have responsibilities to the educational process.

2. The primary role of the faculty member while in the clinical educational role is that of teacher to student.

3. The primary responsibility for patient care remains that of the clinical partner's staff nurse assigned to the patient regardless of student assignment to the same patient.

4. Faculty members are health care professionals who use discretion when assigning students to patient care. The selection of teaching opportunities is based on ability, experience, and clinical learning needs of the student(s). In addition, faculty members are responsive to the needs of the unit, e.g., time constraints of staff or crisis that may result in altered patient care and/or student assignments.

5. Faculty members meet the faculty guideline standards of the Boards of Nursing.

6. School clinical coordinators will use the MOKAN scheduling process to communicate with clinical partner education coordinators on an annual basis to confirm scheduling needs (including numbers of students and types of experiences).

Confidential Information:

1. Academic institutions and clinical facilities must comply with requirements set forth by federal regulations: the Family Educational Rights and Privacy Act of 1974 and Health Insurance and Portability Accountability Act to protect confidential student identification and personal information.

2. Facilities agree to protect confidential faculty and student information including, but not limited to, social security numbers, student ID numbers, health records, background checks and urine drug screens. Upon request, education partners will provide documentation that confirms that current students and faculty have met the criteria in Section B. During an accreditation visit or audit, the education partner may be required to provide more specific documentation to the facility within 24 hours when the school is in session. When school is not in session, an authorized school representative will provide the requested documentation.

Every nursing student should maintain a personal record of TB, vaccination and immunity status. Documentation of this status will be required for every employer and every position in health care. Good records may prevent unnecessary blood tests and vaccinations. A facility's obligation to their employees is different than their obligation to a student. They are not required to make any accommodations to students in regard to vaccinations. These guidelines are required by clinical sites for patient safety, regardless of personal thoughts or spiritual conviction. 1

NOTE: Information provided to your school may be shared with clinical agencies as needed. Some agencies may require additional identifying information such as SSN or birthdate for access to electronic health records. Students enrolled in nursing programs must be a minimum of 18 years of age.

[1] Clinical faculty who are currently employed by the facility in which they are teaching, and have met standards for employment there, meet the requirements to take students to that facility. Faculty must maintain nursing licensure appropriate for the state in which they are teaching. Nursing faculty who are only making periodic clinical visits to evaluate internship/capstone students/courses and other similar precepted clinical experiences are not mandated to meet all the Amendment A (AKA Exhibit A) faculty requirements, but rather are only required to annually (a) sign the confidentiality form, and to (b) complete/pass the CNE Orientation Manual exam. Clinical faculty may be required to upload information into Clinical Student.

[2] Some clinical facilities in the KC metropolitan area do not require annual TB screening. Check with your school's administrator for further instruction.

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Kansas City Area Nurse Executives

Tuberculosis Screening	TB Screening	Unique Situations (Exceptions)
	The CDC recommends that all healthcare personnel, including clinical students, have a baseline TB test for M. tuberculosis infection. This baseline TB skin test (TST) or blood test (IGRA) will be required to have been done within one year of starting the nursing program and *may be required annually thereafter, depending on the facility to which the student is assigned for clinical activities.* [2] If submitting baseline screening with a skin test (TST), two readings will be required. While two TSTs within a three-week timeframe is ideal (see "2-Step process below"), having one within 12 months prior to admission is acceptable as the 1st step, with a second test being done just prior to the start of clinical activities (2 TSTs within 12 months) is acceptable as a "2-Step." Initial Two-Step TST Screening (if no other TST documentation available in the past 12 months): 1. If first TST is ***positive*** (+)—see guideline for + TST in next column. 2. If first TST is ***negative*** (-)—do the 2nd TST 1-3 weeks after the first test is read.	1. Newly discovered positive TB screening must have a chest X-Ray and complete the Missouri Department of Health & Senior Services TB Risk Assessment Form (in Clinical Student). The positive TB test must be reported to the health department in the county where the student resides except for Kansas City, (Jackson County) Missouri, which is reported to the KCMO Health Department. Documentation of the new positive TB test(s), chest x-ray report and TB Risk Assessment Form should be provided to the Health Department. Documentation of the new positive TB test(s), chest x-ray report and TB Risk Assessment Form should be provided to the Health Department. Treatment is determined between the person testing positive, the health department and the person's personal physician. Treatment is not required unless mandated by the health department. 2. **Repeated chest X-rays** of persons with a positive TB screening **<u>are not indicated</u>** unless symptoms of TB are present, as indicated on the Missouri Department of Health & Senior Services TB Risk Assessment Form (see Appendix E). 3. If IGRA or TST is positive (+):

	3. If 2nd TST is ***positive*** (+)— see guideline for + TST in next column. 4. If 2nd TST is negative (-)— considered a negative (-) baseline. ***NOTES:*** ***1.*** Be aware if receiving a live virus immunization (such as varicella, MMR or FluMist), you will need to either have your TB screening (TST or IGRA) done at the same time or ***wait 4 weeks***. The TB screening must be done first, prior to receiving any other live vaccines. ***2.*** Chest X-ray is not permitted in lieu of TB Screening. ***3.*** Annual TB screening may be required depending on the facility where clinical activities are taking place[2]. Check with your school administrator for requirements.	a. Individual will provide documentation of a negative (-) chest X-Ray (two views—PA and lateral) b. Provide a MO Department of Health & Senior Services TB Risk Assessment Form (see Appendix E) signed by a provider. **c.** Then annually, the individual will submit a new Missouri Department of Health & Senior Services TB Risk Assessment Form (see Appendix E). **Annual chest X-Ray or TB screening is not indicated.** d. If the individual can provide documentation of completed treatment from a physician or health department for LTBI, no further annual requirement is needed. If there is no documentation of completed treatment, then an annual TB Risk Assessment form is required. **4.** If an individual has documentation of having been vaccinated for TB (BCG) or has had TB (LTBI or disease) and can provide documentation of treatment, please see program administrator at the school of nursing for guidance prior to any TB screening.

	5. If traveling outside of the US into an endemic region (defined as any country with 25 cases per 100,000 or>), note the following: If traveling endemic region to provide mission work including health care for ANY length of time – recommend TB screening 8-10 weeks after return. If traveling to endemic region to **visit friends or relatives for 1 MONTH or GREATER** – recommend TB testing 8-10 weeks after return.
Measles (Rubeola), Mumps, Rubella-MMR	Provide documentation of 2 (two) MMR vaccinations at least 28 days apart, ***OR*** serological proof of immunity (+) positive IgG titers for measles (rubeola), mumps and rubella. *A post vaccination titer is not recommended per the CDC.*
Varicella (Chicken Pox)	Provide documentation of 2 (two) varicella (chicken pox) immunizations at least 28 days apart, ***OR*** serological proof of immunity (+) positive IgG titer for varicella. *A post vaccination titer is not recommended per the CDC.*

Hepatitis B	Receive a series of two (Heplisav-B) or three (Engerix or Recombivax) vaccines followed by a post-series surface antibody titer at least 4-8 weeks after the last vaccine is given. If documentation of an initial Hepatitis B immunization series is not available, documentation of a (+) titer is acceptable. Though not recommended, this vaccine can be waived (See Hepatitis B Fact Sheet & Waiver Form—Appendix E).	If Hepatitis B titer is **negative** after initial vaccines: 1. Receive *one* additional vaccine (first of a possible second series) 2. Do a HepB surface antibody titer at least 4- 8 weeks later. a. If titer is positive, no further action needed. b. If titer is still negative, receive vaccines to complete the second series and receive a Hepatitis B surface antigen test to determine if infection is present. 3. After the last dose of a second series, re-titer after 4-8 weeks, and if still negative, **individual is considered a "non- responder" and will require additional treatment if exposed to Hepatitis B.**
Tetanus-Diphtheria-Acellular Pertussis (Tdap)	Show evidence of one dose of Tdap vaccine (usually given around age 11-12 years). A Td (tetanus-diphtheria) or Tdap is required every 10 years thereafter or, if wound injury occurs after 5 years.	
Influenza	Show documentation of seasonal flu vaccine per annual CDC announced date (usually available sometime in September). Some clinical sites may require flu vaccination earlier than others. Check with your program administrator for seasonal flu vaccination deadlines.	• In the rare occurrence a student has a medical contraindication or requests a religious exemption, an appropriate accommodation form must be completed, approved by a designated hospital representative, and on file. ***[Clinical Partners may not honor an accommodation—please allow 4-6 weeks for this process to take place.]*** • There is an alternative flu vaccine for those with severe egg allergies. • Wearing a mask at the clinical site may or may not be an option for non-immunized; Check at specific facilities for

COVID-19Vaccination ***Highly recommended—****Some education partners and most clinical partners are requiring this vaccination. Check with your school's administrator for the most updated information.*	Many clinical and education partners in the KC metro are now requiring COVID-19 vaccination to participate in clinical activities. Some will consider religious or medical exemptions, and some will not. Schools of nursing may accommodate an exemption request, but individuals must understand that a request may not be granted by either the EP or CP. Choosing to not vaccinate for COVID-19 puts students at risk of not being able to participate in clinical activities which could lead to non-promotion/progression in the program.
HealthInsurance	Students may be required to provide documentation of personal health insurance. Some schools may allow a waiver for personal health insurance. Check with your school administrator for more information. Students should be aware that they are responsible for expenses incurred from an injury at a clinical site.
CPR	Basic Life Support (BLS)—must be through **American Heart Association** and be the Basic Life Support **(BLS) course listed under CPR & AED training for Healthcare Professionals**. This must be kept current throughout the program. Go to *https://cpr.heart.org/en/courses/basic-life-support-course-options*, and scroll down to the section where you can locate and register for a class. Courses for lay rescuers such as "heartsaver" are not acceptable. The course must include a physical hands-on validation of skills. While most schools require BLS to have been taken through the American Heart Association some schools may allow students to take a BLS course through the American Red Cross. Check with your program administrator for the most current information.
ColorBlindness	Color blindness screen must be performed once at the beginning of the program and results documented. **Screening must be done using *Ishihara's Test***.
CriminalBackgroundCheck	Students must complete a criminal background check per requirements of Appendix G on admission to their nursing program as a requirement of admission prior to the start of clinical activities. Schools will provide documentation of a criminal background checks for their students. If a student exits a nursing program and readmits, they will be required to submit a new criminal background check upon readmission. *For faculty: If teaching in the same facility where they are employed, the requirement might be considered met, but faculty should check with their program administrator to determine if an additional background check and drug screen need to be performed. If a faculty member leaves the employ of an educational institution and then returns at a later date to resume teaching, a new criminal background check will be required upon re-hire*
Drug Screen The student will not use alcohol or drugs that impair their ability to perform the work of the profession or results in compromised patient care. It is the responsibility of every student to strive to protect the public from an impaired colleague whose capability is impaired because of alcohol or drug use. If there is suspicion that a student is	Drug screens will also be obtained on admission to the nursing program as requirement of admission prior to the start of clinical activities. Refer to individual facilities used for requirements. The following list meets requirements at most facilities in the KC metropolitan area (as of March 2015). Some labs will refer to this as a 5 panel, a 9 panel or an 11 or 12 panel. Ensure with lab that these drugs are covered:

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<td rowspan="2">impaired, the facility will contact the Clinical Faculty and Program Director, the student will be dismissed from the clinical site and may be required to submit a urine drug screen at the student's expense. Clinical partner policy will supersede education partner's policy for suspected drug or alcohol impairment in a clinical setting. A positive drug screen without appropriate documentation could jeopardize the student's ability to complete the clinical rotation. [A positive drug screen for marijuana will be considered a failed drug screen, even if the marijuana is being used for medical purposes. The rationale of marijuana being used for medical purposes will not be accepted as a valid reason to waive a negative drug screen]</td>
<td>

AMPHETAMINES
BARBITURATES
BENZODIAZEPINES
COCAINE METABOLITES
MARIJUANA METABOLITES
METHADONE
MDA(SASS)

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<td>

MDMA (ECSTASY)
OPIATES
PHENCYCLIDINE
PROPOXYPHENE
METHAQUALONE
OXYCODONE
OXYMORPHONE

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<td colspan="2">**NOTES:
1. A dilute test result will require further testing. Check with individual schools for policies regarding dilute specimens.
2. If a student exits a nursing program and readmits, they will be required to submit a new drug screen upon readmission.
3. If a faculty member leaves the employ of an educational institution and then returns at a later date to resume teaching, a new drug screen will be required upon re-hire.</td>
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ADDITIONAL INFORMATION ON IMMUNIZATIONS AND TITERS

Health care workers have a responsibility to themselves and to their clients to maintain their own health. We require all individuals keep their immunizations current in order to protect the health of the student, faculty and clients.

Adult Tetanus toxoid should be received every ten years.

Health care workers are at high risk of coming into contact with the Hepatitis B virus. Therefore, it is highly recommended that students receive the Hepatitis B immunization. If you choose not to have this immunization you will be required to sign a waiver.

Please review the following information from the Centers for Disease Control as you make decisions regarding immunizations
http://www.cdc.gov/vaccines/schedules/index.html

HUMAN IMMUNODEFICIENCY VIRUS (HIV) OR HEPATITIS B VIRUS (HBV) INFECTION

The Missouri State Board of Nursing recognizes the serious implications the spread of HIV or HBV has on the health, safety, and welfare of the public, and the Board's mandated responsibility to the public for assuring safe and competent nursing care.

As mandated by Section 191.694 RSMo, 1992 all licensed nurses and nursing students shall immediately implement and adhere to the universal precautions recommended by the Centers for Disease Control in the care of all clients.

All licensed nurses and nursing students who discriminate against a client on the basis of HIV or HBV infection or makes HIV or HBV testing a condition of treatment shall be subject to the denial of licensure or the disciplinary processes of the Missouri State Board of Nursing.

All licensed nurses and nursing students with HIV or HBV who perform invasive procedures are encouraged by the Missouri State Board of Nursing to voluntarily participate in the Department of Health's evaluation process.

All licensed nurses and nursing students who violate a restriction or limitation placed on their practice by the Department of Health shall be subject to denial of licensure or the disciplinary processes of the Missouri State Board of Nursing.

It is the position of the Missouri State Board of Nursing that all licensed nurses and nursing students with HIV or HBV are entitled to the same reasonable accommodation guaranteed by the Americans with Disabilities Act.

References: 1. North Carolina Board of Nursing (1991). Policy regarding HIV/AIDS infection. Raleigh: Author. 2. State of Missouri, 86th General Assembly, Second Regular Session [Truly agreed to and finally passed] Senate Committee Substitute for Senate Bills Nos. 511 & 556. (1992). Jefferson City: Author. 3. State of Missouri Revised Statutes (1992). Section 191.694 to 191.700 RSMo Supp. 1992. In Chapter 191: Health and Welfare. Jefferson City: Committee on Legislative Research