Department of Health Sciences
Moss School of Nursing

Student Handbook
for the
Bachelor of Science in Nursing Programs
Including the

- BSN (traditional)
- LPN to BSN
- RN to BSN

Adoption Date for BSN Programs in full: October 2020
Revision Date: October 2020
Disclaimer: This handbook is a supplement to the Colorado Mesa University student policies provided in the *Maverick Guide*.

Students are responsible for adhering to University policies. This nursing handbook includes additional policies and processes for students seeking the Bachelor of Science in Nursing (BSN) degree. Students are expected to uphold the policies of the University and those specific to the nursing programs outlined in this handbook.

NOTE: The Bachelor of Science in Nursing Degree includes three BSN programs, two of which are pre-licensure, and one is post-licensure. These are:

- BSN (traditional) – a Prelicensure Program
- LPN to BSN – a Prelicensure Program
- RN to BSN (Online Accelerated) – a Postlicensure Program

The information and policies herein address all three programs. The BSN student is expected to conform to these policies and processes.
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Mission

The BSN program is designed to respond to the emerging health care needs of individuals, families, groups, and communities providing a foundation for excellence in nursing practice. The graduate is prepared to assume the role of a nurse generalist when delivering culturally competent care in a wide range of health care settings with diverse populations across the life span. The program utilizes critical thinking, leadership, and management of care founded on evidenced-based practice. The importance of engaging in lifelong learning, graduate education, and community service is valued and encouraged.

Philosophy

The philosophy of the bachelor nursing program is consistent with the general goals of a liberal arts and science education at Colorado Mesa University. The program is population-based and community-focused, with an integration of knowledge from the arts and sciences into the nursing curriculum providing a solid foundation for the development of critical thinking skills. The faculty believes the bachelor degree prepares the graduate for entry into the practice of professional nursing and provides a base for graduate study. A professional nursing education prepares a competent practitioner who values the lifelong process of self-evaluation, self-acceptance, and learning which support growth and development as a professional nurse. Graduates of the program are prepared for entry into practice to function in a caring manner within increasingly complex health care settings.

Each learner brings unique qualities that must be recognized. Acknowledging their individuality, students have a responsibility to actively participate and assist the faculty in actively engaging in the educational process. The faculty utilizes traditional and alternative teaching-learning strategies, in accordance with academic requirements of the College, recognized standards of nursing practice, and societal expectations to enhance learner needs. Learning is achieved through progression from simple concepts to complex theories. The faculty further believes in self, comparative, and continuous assessment in nursing education, which is apparent in the program’s formalized evaluation plan.

The faculty identifies patients as individuals, families, groups, or communities, who continuously interact with their environment. Patients, as recipients of holistic nursing care, are complex with physiological, psychological, social, spiritual, and cultural components. Patients assume independent, interdependent, or dependent roles in a variety of health care settings. In some context the patient is referred to as a client, customer, or consumer depending on the nature of the health care encounter. Nursing interventions, the individual receives are based on health promotion, maintenance, restoration, and end-of-life care.

Health, when viewed on a continuum, involves more than just the absence of disease or infirmity. It is a dynamic state in which the potential of each person is realized to the fullest extent possible. Within this framework, the delivery of health care resources is an interdisciplinary, collaborative effort among health professionals. Graduates promote wellness in diverse populations at the local, state, national, and international level.
**Environment** represents a person’s diverse physical, social, cultural, economic, and political dimensions. An environment encompasses one’s surroundings, viewpoints, and beliefs that influence perceptions and interactions regarding health. Each person exists within an ever changing environment, and as such, the environment can be altered to positively affect one’s health by reducing stressors and promoting wellbeing.

**Professional nursing's** ascribed roles are derived from the science and art that is inherent in a practice discipline. Nursing is based on the synthesis of biological, behavioral, social, and nursing sciences. The essence of nursing is a deliberate caring relationship, designed to uniquely preserve and enhance the integrity, dignity and worth of individuals while upholding ethical, moral, legal, and humanistic principles. Nurses provide patient centered care. This involves recognizing the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs (QSEN, 2011). Nurses, practicing from a holistic perspective, are integral members of interdisciplinary teams. They collaborate with patients and other providers to design, provide, manage, and coordinate care in evolving and diverse health care systems. This requires the use of critical thinking, communication, assessment, and technical skills characteristic of a health care professional. Furthermore, to provide professional care, nurses must demonstrate knowledge of the nursing process, health promotion, risk reduction, disease prevention and management, leadership, information technologies, and evidence-based practice. As members of a profession, nurses advocate for quality care that is respectful of human diversity within a global environment. A commitment to enhance the discipline is demonstrated by remaining active in professional organizations as well as in the political and regulatory processes.

**Program Goals**

Graduates of the program will be able to:

1. Practice as a professional nurse.
2. Pursue graduate education.
3. Assume leadership roles.
4. Participate in learning as a lifelong process.

**Student Learning Outcomes**

The BSN student learning outcomes are aligned to the CMU Baccalaureate Student Learning outcomes, and the AACN Baccalaureate Essentials, as follows
<table>
<thead>
<tr>
<th>CMU Baccalaureate Student Learning Outcomes</th>
<th>BSN Student Learning Outcomes</th>
<th>AACN Baccalaureate Essentials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Construct a summative project, paper or practiced-based performance that draws on current research, scholarship and/or techniques, and specialized knowledge in the discipline. <strong>(Applied learning; Specialized knowledge)</strong></td>
<td>1. Construct a practice-based performance/project drawing on knowledge, skills, and attitudes specific to the discipline of nursing. <strong>(Specialized knowledge)</strong></td>
<td>I, II, III, VII, &amp; IX</td>
</tr>
<tr>
<td>2. Analyze data critically, reason logically, and apply quantitative analysis methods correctly to develop appropriate conclusions. <strong>(Quantitative fluency)</strong></td>
<td>2. Employ quantitative reasoning in making judgments and reaching conclusions. <strong>(Quantitative fluency)</strong></td>
<td>II, V, &amp; IX</td>
</tr>
<tr>
<td>3. Make and defend assertions about a specialized topic in an extended well-organized mostly error-free document and an oral presentation that is appropriate to the discipline. <strong>(Communication fluency)</strong></td>
<td>3. Make and defend assertions about a nursing practice topic in a well-organized evidence-based document or presentation. <strong>(Communication fluency)</strong></td>
<td>II, III, V, VI, VII, &amp; IX</td>
</tr>
<tr>
<td>4. Describe reasoned conclusions that articulate the implications and consequences for a particular decision by synthesizing information and methodologies. <strong>(Critical Thinking)</strong></td>
<td>4. Demonstrate critical thinking behaviors as a basis for practice. <strong>(Critical Thinking)</strong></td>
<td>II, V, VI, &amp; IX</td>
</tr>
<tr>
<td>5. Find relevant sources of information, evaluate information critically, and apply the information appropriately and effectively to specific purposes. <strong>(Information Literacy)</strong></td>
<td>5. Utilizes information from relevant sources to improve health among diverse populations. <strong>(Information Literacy)</strong></td>
<td>I, IV, V, VII, &amp; IX</td>
</tr>
<tr>
<td>6. Reflect on and respond to ethical, social, civic, and/or environmental challenges at local, national, and/or global levels. <strong>(Personal and Social Responsibility)</strong></td>
<td>6. Engage in ethical reasoning to provide optimal nursing care. <strong>(Personal and Social Responsibility)</strong></td>
<td>V, VI, VII, VIII, &amp; IX</td>
</tr>
</tbody>
</table>

Revised 12/2018
Guiding Standards

Faculty use professional standards and guidelines as a basis for curriculum development and program evaluation. The rationale for choosing these guidelines is that they are the most comprehensive and widely used in the United States. Additional standards and guidelines are integrated into specific courses in relation to content and outcomes. These are identified in the course syllabi. Currently the following nursing standards and guidelines are incorporated into all courses:


Courses within the curriculum may also include additional guidelines and standards specific to that course, as example:

Quality and safety education for advanced nursing practice (QSEN; 2012), located at http://www.aacnnursing.org/Quality-Safety-Education


Terminology/Definition of Terms

Essential Elements of Bachelor Education for Professional Nursing Practice:

The framework of the BSN programs at CMU is designed and assessed based upon integration of the American Association of Colleges of Nursing\(^1\) (AACN, 2008) nine bachelor essentials throughout the curriculum. The first eight essentials describe practice focused BSN student centered outcomes and the ninth essential describes the expected student outcome as a generalist nurse practitioner at the successful completion of the program. According to the AACN (2008), the role of the bachelor generalist nurse includes a designer, provider and coordinator of care, and a member of the profession of nursing. The bachelor nursing graduate is prepared to practice with individuals, families, communities, and populations across the lifespan and within changing healthcare environments.

Overview of Essentials:

**Essential 1: Liberal Education**—a solid base in liberal education (sciences and the arts) provides the cornerstone for the practice and education of nurses.

**Essential 2: Organizational and Systems Leadership**—high quality health care, knowledge and skills in leadership, quality improvement and patient safety systems are necessary.

**Essential 3: Scholarship for Evidence-Based Practice**—professional nursing practice is grounded in the analysis and application of evidence for practice.

**Essential 4: Information Management and Application of Patient Care Technology**—knowledge and skills in information and patient care technology are critical in the delivery of quality patient care.

**Essential 5: Healthcare Policy, Finance and Regulatory Environments**—health care policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the health care system.

**Essential 6: Inter-professional Communication and Collaboration**—collaboration and communication among health care professionals is critical to delivering high quality and safe patient care.

**Essential 7: Clinical Prevention and Population Health**—health promotion and disease prevention at the individual and population level are necessary to improve population health.

**Essential 8: Professionalism and Professional Values**—professionalism and values such as altruism, autonomy, human dignity, integrity and social justice are fundamental to the discipline of nursing.

**Essential 9: Bachelor Generalist Nursing Practice**—completion of bachelor nursing that integrates the knowledge, skills, and attitudes in the above essentials.

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NOTE: PDF location is [https://www.aacnnursing.org/Portals/42/Publications/BaccEssentials08.pdf](https://www.aacnnursing.org/Portals/42/Publications/BaccEssentials08.pdf)
BSN Faculty Advisors

Having a good relationship with your faculty advisor can be highly beneficial! As a BSN student you should have a BSN Faculty advisor.

The purpose of a faculty advisor is to assist in the process of degree completion. Students are required to have a faculty advisor approve the Graduation Plan on Degree Works when submitting the Intent to Graduate Form to the registrar. Degree Works is a useful advising tool for students and is available on Mav Zone.

It is the student’s responsibility to maintain his/her program sheet and to keep it up-to-date. Advisors are not responsible for failure to meet degree requirements.

Find Your Advisor

Advisor assignments can be found in the student’s Degree Works. If needed, BSN advisor assignments can be requested in the Department of Health Science office.

Faculty Can Help You Succeed as a Student

- Faculty can refer students to other staff, faculty, or services that may meet a student’s needs or interests. Faculty can also be a great resource for information about on-campus clubs, organizations, and activities that can lead to future career opportunities or provide students with the necessary experience for prospective careers.

Faculty Can Help You Plan Your Future

- Career Information & Internships: Faculty can also be an invaluable resource for career information, experience, and contacts!
- Letters of Recommendation: Letters of Recommendation from faculty may be needed for career and scholarship opportunities. Faculty are more likely to recommend internships, letters or recommendation, and job opportunities to students they know--so make an appointment with your faculty advisor today!
- Graduate School: If a student is interested in going to graduate school, Faculty Advisors are the best resource for information. Faculty can advise students about the application process, course selection, activities that may be beneficial, and in identifying potential graduate programs.

NSNA Student Bill of Rights

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures that provide and safeguard the students’ freedom to learn.

4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, lifestyle, disability, or economic status.

5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

8. The student should have the right to have a responsible voice in the determination of his/her curriculum.

9. Institutions should have a carefully considered policy as to the information that should be a part of a student's permanent educational record and as to the conditions of this disclosure.

10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.

13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.

15. As citizens and members of an academic community, students are subject to the obligations that accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.

16. Students have the right to belong or refuse to belong to any organization of their choice.

17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.

18. Nursing programs should adequate street lighting, locks, and other safety measures deemed necessary by the environment should provide adequate safety precautions.

19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.

20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.

21. Students should have a clear mechanism for input into the evaluation of nursing faculty.
Scope of Practice for Registered Nurses (RN)

The following information is taken from the Colorado Department of Regulatory Agencies

Board of Nursing: Laws, Rules and Policies

In Colorado, the practice of professional nursing (including those listed on the advanced practice registry) includes the performance of both independent nursing functions and delegated medical functions. The Board of Nursing (BON) considers RNs to be independent practitioners.

Two things limit the independent scope of nursing practice:
- Task/practice must be within the field of nursing, and
- RN must possess the specialized knowledge, judgment and skill required to complete the job/task undertaken. There is no BON requirement for physician oversight of nurses during the course of independent nursing practice. However, individual facilities or physician practices may have policies requiring some level of physician involvement or oversight.

Dependent nursing function falls under delegated medical. CRS 12-38-103 (4) defines delegated medical function to include the RN implementation of a medical plan. "a written plan, verbal order, standing order, or protocol - whether patient specific or not, that authorizes specific or discretionary medical action, which may include but is not limited to the selection of medication." The amount of physician oversight would be determined by the physician and nurse involved in this process.

Determining the scope of practice for an RN

The Board of Nursing has been working to empower Colorado nurses to determine their own scope of practice. The Board's mission is the regulation of nursing practice in Colorado; this regulation does not mean dictating how individual nurses should carry out that practice, but whether or not the practice meets the standards established by the Nurse Practice Act. Using the following guidelines and the attached flow chart, a nurse may decide what is within scope, and to make certain the task or practice is documented in facility or institution policies and procedures.

Begin by asking the following question: Is this task/practice within my scope of practice?

A. Basic Nursing Education Preparation
   1. Was the skill/task taught in your basic nursing program?
   2. If it was not included in your basic nursing education, have you since completed a comprehensive training program, which included clinical experience?

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3. Has this task become so routine in the nursing literature and in nursing practice (e.g. sharp wound debridement), it can be reasonably and prudently assumed within scope?
4. Is the skill/task in your hiring agency policy and procedure manual?
5. Does carrying out the duty pass the "Reasonable and Prudent" standard for nursing?

If you can answer "yes" to all the above questions, the task is within your scope of practice and you do not need to seek a practice question decision from the Board. If you cannot answer "yes" to all of the above, proceed to option B.

B. If you answer "no" to any of the questions above, consider two possible outcomes:

1. The task is not within your scope of practice - Omit task
2. The task may not be within your scope of practice - Request Board of Nursing advisory opinion if needed.

See form on next page
**Definition of Nursing Delegation:** Delegation of nursing function is per occurrence and is limited to patients that are stable and where the outcome of the delegated task is predictable. It is the responsibility of the delegator to verify adequate skills of the delegate. Delegation of care is only allowed within the RN scope of practice.

<table>
<thead>
<tr>
<th>REGISTERED NURSE</th>
<th>LICENSED PRACTICAL NURSE</th>
<th>NURSING ASSISTANT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSESSMENT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent, dependent and interdependent functions</td>
<td>At the direction of RN, APN, licensed physician, dentist, or podiatrist</td>
<td>At the direction and under the supervision of RN or LPN</td>
</tr>
<tr>
<td>Assess and evaluate health status of individuals:</td>
<td>Contribute to assessment of health status:</td>
<td>Collect, report and record basic objective and subjective data</td>
</tr>
<tr>
<td>Collect objective and subjective data</td>
<td>Collect, report, and record objective/subjective data</td>
<td>Observe and report change in signs and symptoms or deviations from normal health status</td>
</tr>
<tr>
<td>Analyze, report and record data</td>
<td>Observe conditions or change in condition</td>
<td></td>
</tr>
<tr>
<td>Validate, refine and modify data</td>
<td>Collect data and report signs and symptoms of deviation from normal health status</td>
<td></td>
</tr>
<tr>
<td><strong>IDENTIFICATION OF HEALTH CARE PROBLEMS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilize all data to identify and document health care problems</td>
<td>Assist in formulating lists of needs/problems</td>
<td>Provide basic patient information which assists the licensed nurse in making lists of problems and needs</td>
</tr>
<tr>
<td><strong>ESTABLISHES GOALS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collaborate with patient, family, significant others and health team to:</td>
<td>Contribute to setting realistic short and long-term goals</td>
<td>Provide basic information regarding the patient which assists the licensed nurse in setting goals</td>
</tr>
<tr>
<td>Identify present and predicted needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establish short and long-term goals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Set realistic and measurable goals</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### PLANNING A STRATEGY OF CARE

<table>
<thead>
<tr>
<th>Develop a written care plan to include:</th>
<th>Participate in development of written care plan</th>
<th>Contribute to the development and revision of the plan of care by providing basic information regarding the patient which assists the licensed nurse in the development and revision of the plan of care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultural, ethical, spiritual aspects and decisions regarding treatment</td>
<td>Recognize, understand, respect cultural, spiritual, religious backgrounds, beliefs, needs/rights to choice</td>
<td></td>
</tr>
<tr>
<td>Measures to support human functions and maintain hygiene, comfort and safe environment</td>
<td>Assist in identification of measures to support human function and maintain hygiene and comfort</td>
<td></td>
</tr>
<tr>
<td>Educational and counseling needs to promote, maintain, restore health.</td>
<td>Maintain environment conducive to well-being</td>
<td></td>
</tr>
<tr>
<td>Utilize community resources for continued care</td>
<td>Assist in assuring access to community resources</td>
<td></td>
</tr>
<tr>
<td>Prioritize needs</td>
<td>Participate in identification of priorities</td>
<td></td>
</tr>
<tr>
<td>Review and revise care plan as necessary</td>
<td>Participate in reviewing and revising plan of care</td>
<td></td>
</tr>
</tbody>
</table>

### IMPLEMENTING STRATEGY OF CARE

<table>
<thead>
<tr>
<th>Consider complexity of care, educational preparation and facility policies when delegating* care</th>
<th>Carry out functions taught in approved PN program</th>
<th>Carry out functions taught in approved nursing assistant programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remains responsible for all delegated* acts</td>
<td>Assist patient with ADLs; encourage self-care</td>
<td>Complete basic duties assigned by a licensed nurse</td>
</tr>
<tr>
<td>Delegate* /assist staff in implementing care</td>
<td>Provide direct care, comfort measures, emotional support to patients whose condition is stable or predictable</td>
<td>Provide total personal care or assist patient with ADLs; encourage self-care</td>
</tr>
<tr>
<td>Delegate*/assign duties as specified in rules and regulations</td>
<td>Under Direct Supervision: Provide care, interventions; and communicate response for patients whose condition is complex or unstable)</td>
<td>Provide physical care, comfort measures, emotional support to patients whose conditions are stable or predictable</td>
</tr>
<tr>
<td>Initiate, provide, assist with delegated* care</td>
<td>Assist with rehabilitation (e.g., ROM, alignment, body mechanics)</td>
<td>Assist with basic restorative nursing, bladder training</td>
</tr>
<tr>
<td>Verify medical orders are accurate, properly authorized; no documented contraindications</td>
<td>Provide environment conducive to safety and health</td>
<td>Provide a safe and healthy environment</td>
</tr>
<tr>
<td>Administer prescribed medications and IV therapy</td>
<td>Administer prescribed treatment and medication, except by intravenous route (IV certified LPNs - see</td>
<td>Repeat patient teaching instructions as given by the RN</td>
</tr>
<tr>
<td>Develop and initiate plan to provide patient education and counseling</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Denotes tasks performed by licensed nurses or delegated to unlicensed assistive personnel (UAP) as appropriate.
**Document interventions and responses**
- Communicate interventions and responses
- Make judgments, decisions and modify care as needed

**Advanced Educational Preparation**
- Perform selected IV therapy functions as delegated* and supervised by RN
- Document prescribed interventions and responses
- Assist and provide reinforcement with patient teaching

**Document and communicate completion of assigned duties and patient responses**

**MAINTAINING SAFE AND EFFECTIVE CARE**
- Evaluate environment and initiate plan to provide a safe environment
- Institute standard procedures to stabilize patient's condition or prevent serious complications in emergency situations
- Act as patient advocate

**Maintain safe environment**
- Consult/seek guidance from RN and others as necessary
- Initiate standard emergency procedures until RN or physician is available
- Apply principles of asepsis and infection control
- Participate in development, revision and implementation of policies and procedures

**Maintain safe environment**
- Seek guidance from a licensed nurse as necessary
- Perform CPR when necessary
- Follow principles of asepsis and infection control
- Share pertinent information with a licensed nurse

**EVALUATING RESPONSES TO INTERVENTIONS**
- Utilize identified goals to:
  - Determine data needed to evaluate outcome of care
  - Document and communicate evaluation data
  - Evaluate effectiveness of common treatments/tasks, document and communicate outcomes of care given
  - Use evaluation data to reassess patient status, revise care plan to reflect needed changes in nursing intervention

**Evaluate effectiveness of common treatments/tasks, document and communicate outcomes of care given**
- Assist with collection of evaluation data
- Contribute to modification of plan of care

**Document and communicate patient responses**
- Assist with collection of data
### MANAGING PRACTICE OF NURSING

| Provide direct care; assign and/or delegate* functions according to education and demonstrated competence | Assign duties to ancillary workers as specified in rules and regulations | N/A |
| Supervise staff to whom nursing functions are assigned! delegated* | Assist ancillary workers to carry out assigned care |  |
| Provide leadership in formulating, interpreting, implementing and evaluating nursing service objectives and policies | Supervise ancillary workers to whom care is assigned |  |
| Direct and evaluate quality of nursing service |  |  |

### COLLABORATION WITH OTHER HEALTH PROFESSIONALS

| Communicate significant changes in patient status | Share pertinent information | Share pertinent information |
| Consult as necessary to meet patient needs |  |  |

### ADVANCED EDUCATIONAL PREPARATION

| Document completion of comprehensive program including supervised clinical; **OR** has previously acquired the additional knowledge/judgment/skill and can provide evidence thereof to employer | ** Complete Board approved IV certification course including supervised clinical; **OR** document completion of such from another state | N/A |
| Maintain evidence (both RN and employer) of original documentation and demonstration of acquired knowledge/judgment/skill | Maintains evidence (both LPN and employer) of original documentation and demonstration of IV knowledge/judgment/skill |  |
| Verify additional duties are within RN scope of practice | Follows written IV policies and procedures approved by medical staff, nursing and agency administration |  |
| Follow written policies and procedures approved by medical staff, nursing and agency administration | ** Advanced Educational Preparation for LPNs in Colorado is limited to IV certification.** |  |
The following policies are applicable to students in the BSN Degree including the prelicensure programs (BSN-traditional, and the LPN to BSN); and the postlicensure program (the RN to BSN [Online Accelerated]). Please refer to the policies of your program found in the following pages.

Policies: Prelicensure and Postlicensure Programs

NOTE: The following policies pertain to the both prelicensure and postlicensure programs.

- BSN (Traditional) – Prelicensure
- LPN to BSN – Prelicensure
- RN to BSN -- Postlicensure
Academic Advising

I. Purposes:
   A. To explain the roles of the student and the advisor in the academic advising relationship.
   B. To insure that students make satisfactory progress toward a degree.
   C. To set standards for satisfactory progress in the nursing program.

II. Policy:
   A. Academic Advising
      1. Students are responsible for contacting their assigned advisor for initial advising prior to each semester's registration and at any other time that the student and advisor may deem necessary.
      2. Students are strongly encouraged to have their advisor review their course load, but the advisor's signature is not necessary for the student to proceed with the registration process.
      3. The help of a faculty advisor does not relieve the student of the fundamental responsibility for establishing and maintaining his/her own academic program. Students are responsible for full knowledge of the provisions of their program.
      4. For courses requiring "permission of the instructor" as an alternate to a stated prerequisite course, the students must receive such permission before registering for class. Instructors reserve the right to withdraw any student who does not have permission.
      5. Colorado Mesa University advisors maintain a minimum of 5 scheduled office hours per week, which are scheduled for the purpose of being available to students.
      6. Students must contact course instructors to have appropriate forms signed when adding or dropping classes or withdrawing from the program.
      7. The advisor will refer the student to the college registrar regarding evaluation of courses for credit and other appropriate matters.
      8. Students are responsible for picking up and completing Intent to Graduate forms from the Registrar’s Office, and for making an appointment with their advisor the semester prior to graduation to complete the Graduation Plan on Degree Works.
      9. Students are responsible for making sure all copies of transcripts from other colleges are current and on file in the nursing department. Student must provide a transcript evaluation from Registrar’s Office.
     10. Students must provide current Colorado Mesa University transcript obtained from the Registrar’s Office.
   B. Personal Counseling
      1. Students may discuss personal problems with an advisor in a confidential, accepting atmosphere.
2. Advisors will refer students for appropriate counseling when the problems are beyond the problem-solving abilities of the advisor and advisee.

3. The Vice President of Student Services is available to provide counseling and referral services to students seeking personal, career or substance abuse counseling and resources.

**Academic Dishonesty**

1.1 Definition per the CMU Maverick Guide: The protection of academic integrity requires clear and consistent standards and definitions, as well as confrontation and sanctions when individuals intentionally violate those standards. The most important of the definitions is that of academic dishonesty.

Academic dishonesty undermines the educational experience, lowers morale by engendering a skeptical attitude about the quality of education, and negatively affects the relationship between students and faculty. Academic dishonesty is the intentional act of fraud, in which an individual seeks to claim credit for the work and efforts of another or uses unauthorized material or fabricated information in any academic exercise.

Academic dishonesty also includes, but is not limited to:
- Forging/fabrication/falsification/plagiarism of academic documents
- Intentionally impeding or damaging the academic work of others
- Assisting others in acts of academic dishonesty
- Cheating in the classroom
- Unauthorized attendance
- Multiple submissions
- Unauthorized collaboration

1.11 Policy:

A. Each semester all students will be required to sign a statement of acknowledgement regarding academic dishonesty. This statement is in effect for the entire program of study.

B. The program director will maintain the security of the signed documents.

C. Course, laboratory, and clinical materials are intended to be for each student’s personal academic use and remain the intellectual property of the BSN Program.

1.111 The BSN program has zero-tolerance for academic dishonesty of any sort on any quiz, exam, or assignment. The student has the choice to continue in the course during the appeal process, if initiated, except in cases where patient, student or other faculty and staff safety has been compromised or there is a potential of continued risk of safety. If the incident involves a clinical setting the student will not be allowed to attend or participate in further clinical work toward course completion. A second act of academic dishonesty will result in termination from the BSN program at the end of the semester the student is currently enrolled if the incident is uncontested and not overturned on final appeal with the institution. The student must follow the appeal process for academic dishonesty as outlined in the Maverick Guide.

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Please print and sign the Academic Honesty Agreement in the appendix of this handbook and return to the Department of Health Sciences office.
Code of Academic and Clinical Conduct

I. Purpose: To outline student responsibilities regarding adherence to the National Student Nurses’ Association (NSNA) Code of Academic and Clinical Conduct.

II. Policy:
   A. Nursing students will be held accountable for following the NSNA Code of Academic and Clinical conduct in both classroom and clinical settings.
   B. Violation of the NSNA Code of Academic and Clinical conduct should be immediately reported to a faculty member and the Program Director.
      1. Self-reporting of a violation demonstrates accountability and will be considered in the disciplinary process.
      2. The identity of a student who reports a suspected violation of the code by another student will be protected in the investigation process.
      3. The faculty member and Program Director will investigate the reported violation to determine if there is evidence that a violation has occurred.
      4. The faculty member and Program Director will develop a report of student performance.
   C. Recurrent violation of the NSNA Code of Academic and Clinical Conduct may lead to dismissal from the BSN program.
   D. Other policies in the BSN student handbook refer directly to specific behaviors in the NSNA Code of Academic and Clinical Conduct.

Code of Academic and Clinical Conduct: National Student Nurses’ Association, Inc.

PREAMBLE

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A CODE FOR NURSING STUDENTS

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development.
Therefore, within these environments we:

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

*Adopted by the NSNA House of Delegates, Nashville, TN on April 6, 2001.*
Confidentiality

I. Purpose: To provide guidelines about Colorado Mesa University's Department of Health Sciences position on confidentiality and protection of privacy

II. Policy

A. A confidential communication is one that contains information given by one person to another under circumstances of trust and confidence with the understanding that such information must not be disclosed. Clearly, information about a patient—gathered by examination, observation, conversation, or treatment—is the type of confidential information the law has always protected. Nurses are legally and morally obligated to keep secret any information about a patient's illness or treatment that is obtained in the normal course of their professional duties. The observance of confidentiality is one of the fundamental tenets of the Code for Professional Nurses adopted by the American Nurses' Association and is also addressed in the NSNA Code of Academic and Clinical Conduct.

B. Students will receive initial and ongoing education about confidentiality and patient privacy during their nursing education.

   1. At the beginning of each semester, students will view the video, "Confidentiality: Ethical and Legal Considerations" by Medcom/Trainex, found in the Clinical Education Center (CEC).

   2. At semester I, the student will receive printed information about Confidentiality (see after this policy in this handbook), and will be required to sign a form stating agreement to comply with this policy.

   3. The form must be signed, and a copy returned to the BSN Program Director to be placed in student's file before being allowed to attend clinical.

   4. In specified courses at each semester, students must re-view the video and provide proof the video was watched. Each semester, faculty will highlight specific issues regarding confidentiality that are unique to each clinical or academic course.

C. In the academic setting, a patient may be extended to include a guest speaker or individual whose knowledge or experience is used to assist with the students’ learning in the classroom or clinical environment. Faculty may also ask students to maintain confidentiality during other learning experiences in which confidential or sensitive information may be shared (i.e. ASSIST training, group discussions or processes).

   1. All members of the health care team are duty bound to treat patients with decency, respect, and the greatest degree of privacy possible. At the very least, this means that the patient should be seen, examined, and handled only by those persons directly involved in his or her care and treatment. Unnecessary exposure of the patient's body or unwarranted discussion of his or her care with third parties will give rise to a legal cause of action for invasion of privacy, with appropriate damages assessed against the offending party. The nurse must always be alert to any witting or unwitting violation of the patient's right of privacy.

   2. Only those individuals directly involved in care of a patient or client shall have access to patient records or information, whether in electronic or paper format.
3. Students may not access patient records of themselves, other students, family members, or patients unless they are directly involved in their care as a student.

4. Students may discuss patient information with their instructor and preceptor or others involved in assisting with care of a patient.

5. Students may discuss their patient with other students to assist with the students’ learning in the classroom or post-clinical conference. No discussions (e.g. direct conversations, cell phones, text messaging) can occur outside of these “confidential” settings, including lunchroom or break rooms, hallways, non-clinical settings, or in social networking media (i.e.: Facebook, YouTube, Twitter).

6. In general, if information from a patient's chart is disclosed without the patient's express consent, or without a court order or express statutory authority, the hospital—as well as those who actually made the disclosure—may be held liable in damages should the patient be able to prove invasion of privacy or perhaps defamation of character.

D. Every person has the right to withhold his or her person, personality, and property from unwarranted public scrutiny. This right—called the right of privacy—includes the freedom to live one's life without having one's name, photograph, or private affairs made public against one's will. A negligent violation can have serious legal consequences. A patient places the integrity of his or her person and reputation in the hands of all health care personnel who attend him or her, and they must always be aware of their legal and ethical responsibility to preserve and protect the patient's right to privacy.

1. Students must protect the privacy of those they care for and not reveal patient names or identities on assignments, journals, or any other written or electronic means. Students may use a patient’s initials on assignments. “Identity” refers to age, sex, room number, name of hospital, physician, and date of birth.

2. Students may not take photographs of patients without prior written consent according to hospital policies.

III. Disciplinary action

A. Student nurses will be held liable for their own acts of negligence committed in the course of clinical experiences. If they are performing duties that are within the scope of professional nursing, they will be held to the same standard of skill and competence as registered professional nurses. A lower standard of care will not be applied to the actions of nursing students.

1. Breach of confidentiality or patient privacy will result in disciplinary action up to and including immediate expulsion of the student(s) involved.

2. The department head and/or program director will meet with the student(s) to discuss the breach and develop a disciplinary contract that will be in effect for the remainder of the student’s nursing degree program. Any subsequent breach of confidentiality or patient privacy will result in immediate administrative withdrawal from the nursing program.

3. The department head will notify the Vice President for Student Affairs and the Vice President for Academic Affairs to inform them of the disciplinary contract.
4. The department head and/or program director will notify the chief nursing officer when a breach has occurred for a patient at a healthcare facility, and provide information to assist the agency in their investigation and reporting of the breach.

B. **Statutes of Nurse Practice Act 12-38-117. Grounds for Discipline**

1. The board has the power to revoke, suspend, withhold or refuse to renew any license, to place on probation a licensee or temporary license holder, or to issue a letter of admonition to a licensee in accordance with the procedures set forth in subsection (3) of this section, upon proof that such person...has violated the confidentiality of information or knowledge as prescribed by law concerning any patient;

References:


**Course and Faculty Evaluation**

I. **Purpose:** To assist faculty in strengthening course offerings and improving the quality of teaching in the nursing program.

II. **Policy:**

A. **Course Evaluations:**

1. Each course in the curriculum is available to the students for evaluation. Students evaluate the course in relation to whether course objectives have been met, and whether the teaching methodologies were effective in fostering their learning.

2. Students are requested to identify, strengthen and to make realistic suggestions for course improvement.

3. Course evaluations need not be signed by the student evaluator.

4. Access to the course evaluations may be found on the Mav Zone website under the *Student Academics* tab, *Quick Links* section, *Others* option, *Evaluations, Surveys and Voting*.

5. The course evaluations are analyzed by the instructor to determine student perceptions of course strengths and weaknesses.

6. The results of the analysis are shared with the faculty at the close of each semester.

7. The instructors consider student suggestions to strengthen course offerings in revising and updating courses.
B. Evaluation of Faculty:
1. The process of evaluation for faculty is designated in the Trustees of the State Colleges in Colorado Handbook for Professional Personnel.
2. The students are encouraged to provide constructive feedback in relation to areas for improvement and to identify the strengths of the faculty member.
3. Faculty evaluations need not be signed by the student evaluator.
4. The student evaluations of faculty are analyzed and submitted to the Chair. The results are communicated to the faculty member.
5. Faculty members incorporate student suggestions that will strengthen the quality of teaching in the program.

Dismissal
I. Purpose: to set standards for students who may be dismissed from the BSN Program.

II. General Information:
A. Once a student is dismissed from a Department of Health Sciences program for behavioral, safety or academic reason at Colorado Mesa University, the student is not eligible for re-admission to any of the Department of Health Sciences programs.

III. See Academic Dishonesty Policy, section III.

IV. A student who has been dismissed from a Department of Health Sciences program and who seeks re-admission, but is denied re-admission, cannot appeal the re-admission decision.

Ethics
I. Purpose: To define the obligation and responsibility for nursing student and faculty ethical behavior.

II. General Information
A. Having a code of ethics has long been a hallmark of disciplines considered to be professions. A code of ethics guides decision making and behavior and is based on the goals, values, and duties of the profession.

B. The Code of Ethics for Nurses with Interpretive Statements (ANA, 2015) is the nursing profession’s ethical standard, statement of obligations of professional nurses, and commitment to society. The nine provisions are as follows:

1. The nurse, in 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 an individual, 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 obligations 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 healthcare.

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.

C. Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The NSNA Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

D. Human dignity and respect for persons is the foundation of ethical principles used in nursing practice

1. Autonomy is based on the assertion that individuals have the right to determine their own actions and the freedom to make their own decisions.

2. Beneficence is defined as “the doing of good” and is often thought to be the most critical ethical principle in health care. The student nurse should always consider one’s actions in the context of promoting good for others.

3. Nonmaleficence is defined as the duty to do no harm. The student nurse must not knowingly act in a manner that would intentionally harm another.

4. Veracity is defined as “telling the truth” and is the foundation for development of trust between human beings. Student nurses are expected to be accountable in telling the truth with their patients, peers, agency staff, and faculty.

5. Fidelity refers to faithfulness or honoring one’s commitments or promises to patients. A student nurse accepts certain responsibilities as part of the contract with society by upholding the NSNA Code of Academic and Clinical Conduct.

6. Justice states that equals should be treated the same, and that those unequal should be treated differently. Student nurses should treat people fairly.
III. Policy

1. Nursing students will be held accountable for demonstrating ethical behavior.
2. Concerns about unethical behavior by a student nurse should be immediately reported to a faculty member and/or the Program Director.
3. Self-reporting of unethical behavior demonstrates accountability and will be considered in the disciplinary process.
4. The identity of a student who reports suspected unethical behavior by another student or faculty will be protected in the investigation process.
5. The faculty member and/or Program Director will investigate in a timely fashion the reported behavior to determine if there is evidence that a violation of the Ethics policy has occurred.
6. The faculty member and/or Program Director will develop a performance improvement plan that includes disciplinary sanctions that address the specific violation.
7. A recurrent pattern of unethical behavior by a student nurse may lead to administrative withdrawal from the program.

Grading Criteria

I. Purpose: To provide descriptions of the letter grades used in the BSN Program.

II. General Information

The following information provides guidelines for evaluation of clinical practice. The descriptions indicate how well the student has met outcomes or objectives for the course and/or clinical lab.

The descriptors (1,2,3,4) are defined as:

1. Degree of supervision required for the selected course's level of clinical practice (considers safety and accuracy of student performance).
2. Competence of nursing care, such as problem solving, setting priorities, observation skills, and appropriateness in designing care strategies, dexterity, and interactions with clients, staff and peers.
3. Depth and breadth of preparation for clinical practice and ability to apply theory and skills in clinical setting.
4. Motivation and readiness for clinical practice as well as demonstration of interest and self-directed learning.

The A (4) student:

1. Consistently functions with little or no guidance, except in very complex situations
2. Demonstrates outstanding performance of nursing care
3. Demonstrates superior knowledge and consistently integrates appropriate knowledge with skills
4. Is consistently self-directed in his/her approach to learning (e.g. initiates new learning experiences)

**The B (3) student:**
1. Generally functions satisfactorily with minimum guidance in the usual clinical situation
2. Demonstrates above average performance of nursing care
3. Solidly demonstrates accurate and appropriate knowledge and usually integrates knowledge with skills
4. Recognizes learning opportunities but may require assistance in utilizing them

**The C (2) student:**
1. Functions safely with moderate amount of guidance in the usual clinical situation
2. Demonstrates average performance of nursing care
3. Demonstrates adequate knowledge and requires moderate assistance in integrating knowledge with skills
4. Requires some direction in recognizing and utilizing learning opportunities

**The D (1) student:**
1. Usually requires intense guidance for the performance of activities at a safe level
2. Clinical performance reflects difficulty in the provision of nursing care
3. Demonstrates gaps in necessary knowledge and requires frequent assistance in integrating knowledge and skills
4. Requires frequent and detailed instruction regarding learning opportunities

**The F (0) student:**
1. Is considered unsafe to practice without constant, intense guidance
2. Failed to meet clinical objectives
3. Frequently lacks necessary knowledge and skills and is unable to integrate these into practice
4. Requires constant, detailed instruction regarding learning opportunities and is often unable to utilize them

**NOTE** Average score of all exams including unit exams and the final must be at least 76% in order to pass the course

**Grading/Testing**

I. Purpose: To describe the system for grading, the examination process and grade reporting.

II. General Information
   A. Instructors have the freedom to determine the grading scale for individual courses.
   B. All sections of the same course will follow the same grading scale.
C. Instructors will determine the components that comprise the final grade in a course and include this information in the course syllabus, along with course expectations.

D. The commonly used grading system in nursing is:

- 93-100% = A
- 85-92% = B
- 76-84% = C
- 70-75% = D
- 69 and below = F

III. Academic Standards

Academic standards will be followed as explained in the Colorado Mesa University Catalog.

IV. Examinations

A. The faculty member may administer unit, midterm and final examinations as part of the evaluation process.

B. The faculty member may assign an alternate learning project to examine mastery of course content when appropriate.

C. The class must meet during the final examination period to fulfill standard requirements for semester instructional time.

D. Students are expected to take examinations at scheduled times. With prior approval of the faculty member, an examination may be taken at another time. The students and the faculty member must make specific arrangements for date and time and location.

E. Special testing needs must have documentation provided by the appropriate campus student support services.

F. The cumulative exam score on all exams (unit and final) must be 76% or above in any nursing course.

V. Grade Reporting

A. Final grades must be submitted to the Records Office by the deadline. Grades are entered online and the Registrar provides instruction.

B. Faculty members may not post grades unless the students give written authorization.

C. Final grades are posted on Maverick online section of the CMU website.

D. A copy of the final grade submitted by faculty is kept on file in the department office.
Grading System Clarifying Letter for Department of Health Sciences

To Whom It May Concern:

__________________________ has requested that I clarify our grading system in the Department of Health Sciences in comparison to that of Colorado Mesa University, in general. These two grading systems are different. However, the grades that appear on the transcript appear the same. For the general college, the grading system is:

- 90-100% = A 4 quality points
- 80-89% = B 3 quality points
- 70-79% = C 2 quality points
- 60-69% = D 1 quality point
- 59 and below = F 0 quality points

In the Department of Health Sciences, the grading system is:

<table>
<thead>
<tr>
<th>Nursing</th>
<th>Radiologic Technology</th>
</tr>
</thead>
<tbody>
<tr>
<td>93-100% = A</td>
<td>93-100% = A</td>
</tr>
<tr>
<td>85-92% = B</td>
<td>84-92% = B</td>
</tr>
<tr>
<td>76-84% = C</td>
<td>75-83% = C</td>
</tr>
<tr>
<td>70-75% = D</td>
<td>74% and below = F</td>
</tr>
<tr>
<td>69% and below = F</td>
<td>0 quality points</td>
</tr>
</tbody>
</table>

(Individual instructors may use a different grading form.) We felt that you should be aware of this difference in the grading systems when accepting transfer courses. Thank you for your cooperation. If I can provide additional information, please contact me.

Sincerely,

Debra Bailey, RN, PhD, FNP, CDE, SANE-A
Director of Health Sciences
dbailey@coloradomesa.edu
Grievance and Appeals

I. Purpose:
   A. To provide guidelines for timely and fair resolution of complaints or problems related to grades or other academic decisions for students in Health Sciences programs at Colorado Mesa University.

II. Policy:
   A. In the Department of Health Sciences, it is expected that the student will, within five (5) working days following the grade or decision of dispute, schedule a meeting with the clinical preceptor, instructor or faculty member.
   B. If the problem is resolved through the initial meeting, no further action is indicated.
   C. Failing successful resolution, the student may wish to appeal, doing so within five (5) working days by filing a written appeal with the appropriate Program Director.
   D. The Program Director will render a decision in writing, with explanation, within 10 days.
   E. If dissatisfied with the Program Director’s decision, within five (5) working days, the student will file a written appeal with the Department Head. The Department Head will investigate and render a decision in writing within 10 days.
   F. If the student still does not believe the conflict has been resolved, the student is directed to the Colorado Mesa University Student Handbook for further steps to be taken.
   G. The “Colorado Mesa University Student Handbook”3 (also called the “Maverick Guide”), includes information related to student appeal processes including:
      1. Appeals related to a Campus Judicial hearing or decision;
      2. Appeals related to a Sanction for Academic Dishonesty;
      3. Appeals related to a Student Grade.

Independent Study Courses in Nursing

I. Purpose: Permits the motivated student an opportunity to expand his or her body of knowledge beyond the scope of the standard curriculum.

II. Procedure: Students will follow Colorado Mesa University policy.

See Independent Study Contract at the end of the student handbook, or online at CMU Curriculum and Policy Manual4.

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Releasing Contact Information to Outside Agencies

I. Purpose: To establish guidelines for Department of Health Sciences about releasing information about students.

II. General Information:
   A. The Department of Health Sciences will comply with the FERPA (following).
   B. Any information needed about students (i.e., social security numbers) will only be provided with written permission of the student.

Student Awards, Recognition and Scholarship

I. Purpose: To describe the process of nominating students for awards, special recognition and scholarships.

II. General Information:
   A. The criteria and deadlines for nominations for awards and special recognition shall be communicated to all faculty.
   B. An application form, if necessary will be distributed to qualified students by the faculty.

III. Who's Who in American Universities and Colleges:
   A. Department of Health Sciences faculty advisors are encouraged to nominate their outstanding upper division advisees who are full time students with a cumulative GPA of 3.0 or better for academic recognition in “Who's Who Among Students in American Universities and Colleges”.
   B. Application forms are to be completed by the nominated students at the advisor's request.
   C. The student's advisor is responsible for insuring that the application includes a faculty endorsement.
   D. Completed applications are submitted to the department representative of the Who's Who Committee.
   E. Recipients selected by Colorado Mesa University Who's Who Committee and confirmed by Who's Who Among Students in American Universities and Colleges will be announced to the faculty.

IV. Nu Kappa Chapter, Sigma Theta Tau International
   A. Students may be invited to become members of Nu Kappa Chapter if they have demonstrated superior academic achievement in the nursing program and the potential for professional leadership.
   B. Nu Kappa Chapter By-laws outline the process for becoming a member.

V. Scholarships:
   A. The criteria for awarding scholarships shall be communicated to all faculty as they are made known.
   B. The necessary forms shall be secured from the Financial Aid office.
   C. Students shall submit scholarship interest form to Financial Aid office by March 1.
D. Faculty review submitted applications and recommend nominees and alternates for the next academic year. The Chair will submit the list of nominees to Director of Financial Aid. The list of recipients and alternates shall be announced by the Colorado Mesa University President.

VI. Other:
A. Other student awards and achievements will be recognized as available. Criteria will be established as appropriate.

**Student Representative to Faculty Meetings**

I. Purpose: To outline the responsibilities of the student representatives at faculty meetings.

II. General Information:
A. Attendance at these meetings will provide experience for students in working with faculty related to department concerns.
B. The students serve as a liaison between the students and faculty.
C. Designated students may serve on ad-hoc committees.

III. Procedures:
A. A student representative shall be selected from each class to attend faculty meetings.
B. A representative from the Student Nurse Association (SNA) is encouraged to attend.
C. Students will be selected as determined by SNA procedure.
D. The representative from the Student Nurse Association will be selected by the membership.

**Withdrawal, Probation and Suspension**

I. Purpose: To identify conditions related to withdrawal, probation and suspension.

II. Policy:
The BSN program will follow the policies as outlined in the current “Colorado Mesa University Catalog”\(^5\) and the “Maverick Guide”\(^6\).

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The following policies are only applicable to students in the BSN Degree that include the prelicensure programs (BSN-traditional, and the LPN to BSN). Please refer to the policies of your program found in the following pages.

**Policies: Prelicensure Programs (only)**

NOTE: The following policies pertain to the prelicensure programs.

- BSN (Traditional) – Prelicensure
- LPN to BSN – Prelicensure
Bloodborne Pathogens/Needle Stick Exposure/Injury Policy

I. PURPOSE
   a. To provide a protocol for students in the Department of Health Sciences to receive appropriate treatment after exposure to a bloodborne pathogen.
   b. To provide systems and processes to minimize occupational exposure to bloodborne pathogens
   c. To comply with the OSHA Bloodborne Pathogen Standard 29 CFR1910.1030
   d. To provide guidelines for injury follow up

II. POLICY
The Department of Health Sciences at Colorado Mesa University has established and maintains the following Exposure Control Plan to eliminate or minimize occupational exposure to bloodborne pathogens.

A copy of the Exposure Control Plan is kept in the department Policy and Procedure Manual. All students are oriented to the policy before clinical rotations involving exposure to bloodborne pathogens.

The Exposure Control Plan is reviewed and updated as needed, but no less than annually by the Policy Committee.

A. Program Administration:
The Department Head is responsible for the implementation of the Exposure Control Plan (ECP). The Department Head will maintain, review and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.

Employees and students who experience an exposure incident will immediately report their exposure as indicated on the Exposure Flow Chart and report to the facility's designated medical provider for confidential medical evaluation and follow-up.

B. Exposure Determination:
Classifications in which all students and employees have occupational exposure:
   - Lab Instructors
   - Clinical Instructors
   - Students

Tasks and procedures in which occupational exposure may occur:
   - Handling of blood, blood products or body fluids or contaminated objects
   - Invasive procedures
   - Phlebotomy or vascular access procedures and care thereof
   - Contact with lab specimens
- Wound care
- Contact with mucous membranes or non-intact skin
- Handling or disposal of medical waste
- Cleaning or processing contaminated equipment
- Suctioning or sputum induction
- CPR
- Handling of soiled linen
- Cleaning or decontamination of environmental surfaces

C. **Methods of Implementation and Control**

- All applicable employees and students will utilize universal precautions and treat all blood and/or other potentially infectious materials as infectious regardless of the perceived status of the source individual.
- Engineering and Work Practice Controls as further described in this Exposure Control Plan
- Housekeeping
- Labels
- Hepatitis B Vaccination
- Post exposure evaluation and follow-up
- Employee Training
- Record Keeping

D. **Engineering and Work Practice Controls:**

Colorado Mesa University institutes appropriate engineering and work practice controls to eliminate or minimize employee exposure to bloodborne pathogens. All clinical settings are also mandated to implement engineering and work practice controls.

New developments in exposure control technology such as needleless systems are evaluated and implemented as they become available and/or on an annual basis. Colorado Mesa University also conducts ongoing evaluation of tasks and medical devices that carry a risk of exposure and solicits input from faculty and students during lab and clinical rotation in the identification, evaluation and selection of engineering and work practice controls.

All students and employees are instructed and trained in the appropriate use of engineering and work practice controls during orientation and at least annually and more often when necessary such as when new tasks are introduced, when tasks are modified or when job classifications are added or modified.

Engineering and Work Practice Controls that are instituted include:

- Hand washing practices including practices to be used in the absence of hand
washing facilities.

- Provision of personal protective equipment
- Standard Precautions
- Needleless systems
- Containment of contaminated sharps and biohazardous waste

E. Work Practice Controls

Students and employees are instructed to wash hands after removal of gloves and whenever there is a likelihood of contamination. Contaminated skin area should be washed as soon as possible.

Waterless hand washing products are permitted for use before and after gloving. When hands/gloves become visibly contaminated with blood or other potentially infectious materials hands should be washed as soon as possible with antimicrobial soap and water.

If blood or other potentially infectious material contacts mucous membranes, those areas should be washed or flushed with water as soon as possible following contact.

Contaminated needles are not to be recapped, bent or broke off. Shearing or braking of contaminated needles is prohibited. They must be deposited in a sharps container immediately after use. If recapping is necessary, only a one-handed technique is allowed.

Sharps containers are provided to students in the lab area and in all clinical settings. This ensures that they are puncture-resistant, color-coded or labeled with a biohazard warning label and leak-proof on the sides and bottom.

All sharps containers must be closed when they are 2/3 full prior to removal or replacement to prevent spilling or protrusion of the contents during handling or storage.

Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure such as patients' homes.

Food and drink must not be kept in refrigerators, freezers, shelves and cabinets or on countertops or bench tops where blood or other potential infectious materials are present.

All procedures should be carried out in a manner that minimizes splashing, spraying, splattering and generation of droplets of blood or other potentially infectious materials such as emptying of bedpans, commodes.

Specimens of blood or other potentially infectious materials are to be placed in fluid-proof, biohazard labeled shipping containers provided by the agency.

Regulated waste material is to be placed in a biohazard labeled container, which is to be closed before removal to prevent spillage or protrusion of contents.

Equipment that may be contaminated with blood or other potentially infectious materials is to be examined and decontaminated as necessary prior to service of shipping. Employees and students should adhere to universal/standard precautions and use appropriate personal protective equipment when handling such equipment.
No parenteral or invasive procedures will be performed in the campus lab except on mannequins.

F. Personal Protective Equipment (PPE)

All PPE is provided to employees and students at no cost.

PPE is chosen based on the anticipated exposure to blood or other potentially infectious materials. The PPE will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees clothing, skin, eyes, mouth or other mucous membranes under normal conditions of use and for the duration of time for which the protective equipment will be used.

The follow personal protective equipment is provided at the clinical facility:

- Disposable gloves
- Safety goggles with side shields
- Face shields
- Masks
- Aprons
- Non-permeable disposable gowns
- Pocket mask for CPR with one-way valve

1. Gloves

Gloves should be worn where there is a reasonable expectation of contact with blood, OPIM, non-intact skin and/or mucous membranes; when performing vascular access procedures, with a reasonable likelihood of blood exposure; and when handling or touching contaminated items or surfaces.

Hypoallergenic gloves or other similar alternatives shall be available to employees allergic to regular gloves.

Disposable gloves are not to be washed or decontaminated for re-use, and are to be replaced as soon as practical when they become contaminated or as soon as possible if they are torn, punctured or when their ability to function as a barrier is compromised.

Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves should be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

2. Other PPE

Appropriate face and eye protection should be worn when splashes, sprays, spatters or droplets of blood or other potentially infectious materials pose a hazard to the eyes, nose or mouth.

All garments that are contaminated should be removed immediately or as soon as possible.
All personal protective equipment should be removed and placed in a designated container prior to leaving the immediate patient care area.

G. **Housekeeping**

All environmental surfaces are cleaned with an EPA approved germicidal on a regular cleaning and decontamination schedule.

Areas contaminated with blood or other potentially infectious materials should be:

- Cleaned with the use of appropriate PPE and a solution that is effective against Hepatitis B & C, HIV and OPIM
- Decontamination should be done with a 1:10 dilution of chlorine bleach (or other approved disinfectant) immediately after contamination (i.e. spill or leakage)
- Decontamination should be done for 10 minutes

H. **Handling of Waste Material:**

- Used sharps containers are to be closed, placed in a red plastic bag and transported to the agency office.
- The sharps container is placed in the large plastic container in the storage room for pickup by a contracted.
- Broken glass that may be contaminated should never be picked up by hand. Use mechanical means such as a brush and dustpan, forceps or tongs to pick up broke glassware.

I. **Laundry**

Handle contaminated laundry as little as possible, with minimal agitation. Avoid contact of clothing with contaminated laundry or use barrier aprons or gowns.

Wet contaminated laundry should be placed in leak-proof containers before being transported for laundering.

Contaminated linens should be washed with detergent in water at least 140-160 degree F for 25 minutes.

J. **Signs and labels:**

Warning labels are placed on containers of regulated waste, refrigerators containing blood or other potentially infectious materials and other containers used to store or transport blood or infectious materials and/or when appropriate, the used of red biohazard containers.

The label will be a fluorescent orange or orange-red biohazard label as illustrated with lettering in a contrasting color.

K. **Vaccination:**

Students in the Health Sciences Programs are at increased risk for exposure to Hepatitis B. Prior to enrolling in the program, the student will be required to:

a. Receive the Hepatitis B vaccination series (three vaccinations)

b. Vaccination is encouraged unless:
• There is documentation that the employee has previously received the series
• Antibody testing reveals the employee is immune
• Medical evaluation shows that vaccination is contraindicated
c. Sign a *Refusal of Hepatitis B Vaccination* declining the vaccination.

Students agreeing to receive the vaccination series must complete the series within the six month designated time frame. Students are responsible for getting the vaccination from their private physician and for covering the cost of the vaccinations. Verification of all vaccinations/immunity must be provided to the Department of Health Sciences. Vaccination status of all students will be maintained on file in the Department of Health Sciences. It is the student’s responsibility to keep their immunization records current.

III. PROCEDURE

A. POST EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, the student shall:

- Wash the affected area with soap and water or other appropriate solution
- Flush exposed mucous membranes with water
- Contact the clinical instructor immediately. The appropriate incident forms for the agency must be completed.
- The designated medical provider or emergency room (for afterhours care) will immediately conduct a confidential medical evaluation and follow-up.
- Faculty will document the incident and follow up for permanent record.
- *Please note: If the student participates in a non-contracted activity the cost for PEP is at the student’s expense*

The written opinion of the treating physician will be limited to the following information:

- The employee has been informed of the results of the evaluation
- The employee has been told about any medical conditions resulting from exposure to the blood or OPIM, which requires further evaluation or treatment

*All other findings shall remain confidential and will not be included in the Written Report*

B. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Department Head will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used
- Protective equipment or clothing that was used at the time of the exposure incident
- Location of the incident
- Procedure being performed at the time of the incident
- Employee's training

If it is determined that revisions need to be made, the Chair will ensure that appropriate changes are made to this ECP,

**IV. FACULTY/STUDENT TRAINING**

All students and clinical faculty who have occupational exposure to bloodborne pathogens will receive training during orientation and at least annually thereafter. Clinical faculty may complete this at their primary workplace or campus.

Training will include at least the following information:

- The epidemiology, symptoms and modes of transmission of bloodborne pathogen diseases
- An explanation of the OSHA standard
- An explanation of the exposure control plan and where employees can obtain a copy
- An explanation of methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infections materials, including what constitutes an exposure incident
- A review of the use and limitations of engineering controls, work practices and PPE
- An explanation of the types, uses, location, removal, handling, decontamination and disposal of PPE
- An explanation of the criteria for PPE selection
- Information about the Hepatitis B vaccine series including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge.
- Information on the appropriate actions to take and persons to contact if an exposure incident involving blood or other potentially infectious materials occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- Information on the post-exposure evaluation and follow up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used by this organization
- An opportunity for interactive questions and answers with the person conducting the training session

Training records are completed for each employee upon completion of training. Training documents contain the following information:

- Dates and times of the training sessions
- Contents or a summary of the training sessions
- Names and qualifications of persons conducting the training
- Names, signatures and job titles of all persons attending the training sessions.

The original records are maintained in a secure file cabinet in the Department of Health Sciences. Copies of documents verifying attendance at the training sessions become part of each employee's personnel record and student’s personal file.

Training records are available upon request to the employee, the employee's authorized representative, those within the organization with access to medical records, to the Assistant Secretary of Labor for OSHA or designated representative or the Director of NIOSH or designated representative and as otherwise required/stipulated by law and regulation.

V. RECORDKEEPING

A. Medical Records

Human resources is responsible for maintenance of the required medical record in accordance with 29 CFR 1910.20 "Access to Employee Exposure and Medical Records."

The Director of Human Resources is responsible for maintenance of the required medical records. These confidential records are kept in the Human Resource office for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Director of Human Resources.

B. OSHA Recordkeeping

The Director of Human Resources is responsible for maintenance of the OSHA 300 Log.

Individual facilities are responsible for maintenance of the Sharps Injury Log.

Rev 3/15
Health Science student sustains an injury during assigned clinical/lab experience

- Report to faculty immediately

Did the injury occur at a healthcare facility where we have an affiliation agreement?

- YES
  - Did the injury occur at St. Mary’s Hospital?
    - YES
      - Go to Occupational Health unless evening or weekend, then go to ED
    - NO
      - Did the injury occur at a facility that indicates that students are to be treated the same as employee’s i.e. VAMC & Community Hospital?
        - YES
          - Follow the facility policy
          - Bring Exposure Paperwork and Report the incident to Human Resources at Colorado Mesa University within 24 hours of the incident to complete Workman’s Comp forms (https://www.coloradomesa.edu/human-resources/occupational-health-safety/workers-compensation.html).
        - NO
          - Refer student to nearest ED for immediate follow up to begin PEP Protocol (at their own expense)

- NO
  - Student will complete follow up as directed through the student health center or their health care provider for at their own expense.
  - Faculty will report the incident to the Department Head at Colorado Mesa University within 24 hours.
  - Department Head will notify the VP for Student Affairs and VP for Academic Affairs.
Bringing Children to Class

I. Purpose: To ensure a conducive learning environment for all students.

II. General Information

A. Children should not be brought to class. It is unreasonable to expect children to maintain decorum for lengthy class periods. Material presented may not always be appropriate for children.

B. In an emergency situation, and only with course instructor's permission, a child may be brought to class. If the child's behavior becomes disrupting or distracting, the child's parent must immediately remove the child from the classroom.

Cardio-Pulmonary Resuscitation (CPR) Certification

I. Purpose: To assure that the student maintains certification.

II. General Information:

A. Students must have a current CPR card upon entry into the nursing program.

B. Students must maintain a valid CPR certification throughout the remainder of the program.

III. Procedure:

A. The student must attend a basic CPR course approved by the American Heart Association, as follows: BCLS-C from the American Heart Association

B. The student must present a valid CPR certification card to the BSN program coordinator at the beginning of each academic year.

Class/Clinical Attendance

I. Purpose: To outline student responsibilities regarding attendance in class and in clinical sessions.

II. Class Attendance:

A. Attendance during classes, examinations, and assigned experiences are mandatory for the Colorado Mesa University Department of Health Sciences. All students are required to be on time and participate in all scheduled classes.

B. Orientations for clinical experiences and specific clinical sites are mandatory and may not be made-up. Students who do not attend orientations may not be allowed to participate in clinical experiences.
C. Failure to attend will cause missed opportunities that contribute to the education of safe nursing practice, and may lead to patterns that will not be tolerated in the workplace.

D. Specific to each course, each faculty member, and outlined in each syllabus will be mandatory guidelines in attendance. Failure to comply may result in a grade reduction and/or course failure.

E. It is the student’s responsibility to contact the course faculty member when an absence is anticipated.
   - Students are expected to use their judgment with unsafe traveling conditions.
   - Absence due to serious illness or strictly unavoidable circumstances will be handled on an individual basis.
   - Should the student need to be absent, clinical agencies and/or faculty members must be notified one hour prior to the clinical experience if this experience will be missed.

F. If a student is unprepared for a clinical assignment, tardy for a clinical assignment more than once, or is a no call/no show for a clinical assignment, specific consequences are outlined in the course syllabus. A consequence may include a grade reduction and/or course failure.

G. Each absence over two for courses lasting an entire semester OR each absence over one for courses lasting half a semester or a condensed course will result in a grade reduction outlined in the course syllabus.

Clinical Preceptor Policy (Prelicensure)

I. Purpose: To assure that the use of nurse preceptors in clinical nursing courses is consistent with the philosophy and mission of Colorado Mesa University Bachelor of Science Program and that these nurse preceptors contribute significantly to the learning experiences of BSN students following the BSN Programs Preceptor and Mentor Information Guide (see separate document).

Preceptor Definition: Registered Nurse who agrees to work with senior level student over an extended period of time.

Primary Nurse Definition: Registered Nurse who works with student nurse at any level on a one or two day basis.

II. Procedure:
   A. Preceptors for prelicensure BSN students must be licensed as an RN in the state of Colorado (preferably with a BSN degree), have at least one year of experience as an RN, and at least six months experience in their present position.
   B. Each preceptor shall be assigned to one BSN student, but a student may have multiple experiences.
C. The University supervising faculty for prelicensure students will provide orientation materials to each preceptor including at least the following:
1. The name of the student assigned to the preceptor
2. A list of objectives for the course
3. A copy of the student evaluation tool
4. Contact information for the student and faculty supervisor

D. Supervising faculty are responsible for:
1. Facilitating the student evaluation and overseeing the evaluation placement in the student’s file
2. Evaluating the experience and effectiveness of the preceptor

E. Data collection and storage
1. The Nursing Clinical Preceptor sheet will be completed by each preceptor.
2. These information sheets will be kept confidential and will be stored in a locked file within the Department of Health Sciences.
3. Each student will evaluate his/her preceptor.
4. The completed Preceptor Evaluation Tool will be kept confidential and will be stored in a locked file within the Department of Health Sciences.

III. Roles and Responsibilities
A. RN Preceptor: The preceptor’s role includes those of coach, teacher, facilitator, resource person and evaluator. The preceptor will:
1. Serves as clinical expert, role model, and direct supervisor of the student nurse (SN).
2. Meets with the SN initially and throughout the experience to review and reevaluate objectives and activities, in addition to the daily contact on the unit.
3. Jointly with the SN plans assignments, projects and activities to meet the learning objectives with the designated time frames.
4. Encourages the SN to be increasingly self-directed.
5. Shares experiences and knowledge with the SN.
6. Allows the SN to provide direct patient care in order to gain experience and meet objectives.
7. Gives feedback to the SN about performance and progress on an ongoing basis.
8. Participates in the site visits/telephone calls made by the instructor during the experience.
9. Informs the faculty advisor of any problems arising from a student’s placement.
10. Evaluates the SN’s progress in meeting his or her objectives.
Collective Bargaining Activities

I. Purpose: To clarify the role of students in collective bargaining activities in clinical agencies.

II. Policy:
   A. When functioning in the student role, individuals will maintain a position of neutrality in relation to collective bargaining activities at agencies used for clinical experiences.
   B. In the event of a work stoppage, the faculty will evaluate the appropriateness of the site for the scheduled learning experience.
   C. If it is determined that the facility would not provide the desired learning experience, alternate methods of meeting clinical objectives will be utilized.
   D. If a faculty member or student is assigned to an institution where they are also an employee, as an independent professional, he/she will assume accountability for action regarding strike notice activities during non-working or non-clinical assignment hours.

Criminal Background Investigation

I. Purpose: To maintain a safe and productive educational and clinical environment, potential students who have been accepted into one of the health sciences programs will undergo criminal background investigation.

II. General Information
   A. Beginning in 2004 the Joint Commission on Accreditation of Hospital Organizations (JCAHO) began requiring criminal background checks on all employees and students who attend a JCAHO accredited hospital for clinical laboratory experience. Some agencies may request a copy of background information or complete their own background investigation including drug screening. Clinical agencies have the right to refuse clinical rotations to any student based on adverse information noted in the background investigation.
   B. To comply with agency requirements, the Department of Health Sciences at Colorado Mesa University will begin criminal background checks on applicants prior to admission to the programs.
   C. All acceptance into the program is provisional, pending successful completion of the criminal background investigation.
   D. Health science programs may conduct follow up background investigation at selected intervals throughout the program to comply with clinical placement requirements.
   E. Colorado Mesa University has partnered with CertifiedBackground (www.CertifiedBackground.com) to provide these background checks.
   F. The criminal background investigation will include a record of all convictions. Only conviction information will be considered. A “conviction” is considered to be a verdict, a guilty plea or a Nolo Contendere (“No contest”) plea. If the investigation reveals information that could be relevant to the application, the designated individual or committee within the Department may request additional information from the applicant.
If the investigation reveals more than minor traffic convictions, it shall be reviewed by
the designated committee.

G. The existence of a conviction does not automatically disqualify an applicant from
entering the programs. Considerations may include, but are not limited to: the date, nature
and number of convictions; the relationship the conviction bears to the duties and
responsibilities of the position; and successful efforts toward rehabilitation. Any decision
regarding admission is at the discretion of the Department Head and Background Check
Committee.

H. Information obtained for the purpose of and during the background investigation will be
retained by the Department Head in a separate file from the student’s records. Reasonable
efforts will be made to ensure that results of criminal background checks are kept as
confidential as possible with a limited number of persons authorized to review results.

I. The following criminal offenses that appear on a background investigation will disqualify
an applicant for admission to the Health Sciences program.
1. A crime of violence as defined in §18-1.3-406. C.R.S.
2. Crimes against persons (homicide, assaults, kidnapping and unlawful sexual
behavior) as defined in Title 18-3-101 through 18-3-405.5 and 18-6.5-101.C.R.S.
3. Any act of domestic violence, as defined in Title 18-6-800.3. C.R.S.
4. Any crime of child abuse or incest, as defined in Title 18-6-401 and 18-6-301. C.R.S.
5. Any offense involving moral turpitude (prostitution, public lewdness, indecent
exposure, etc.), unlawful sexual behavior as defined by Colorado law.
6. Any crimes of theft, burglary or robbery except misdemeanor shoplifting.
7. Felony crimes of arson, criminal mischief, fraud or forgery.
8. Any felony conviction for drug abuse or distribution in the 10 years prior to
application.
9. Multiple Driving Under the Influence (DUI) or Driving with Ability Impaired
(DWAI) offenses.
10. Any felony or misdemeanor in another state, the elements of which are substantially
similar to the elements of any of the offenses listed above.
11. Multiple arrests that may suggest a pattern of behavior that is of concern for a
professional nurse.

III. Procedure
A. Upon notification for need for background investigation the incoming health sciences
student will access the CertifiedBackground website www.CertifiedBackground.com.
Applicants who refuse to complete this section or who do not answer truthfully and fully
will not be allowed to enter any of the programs.

B. Individuals must complete the application online including payment of associated fees
directly to CertifiedBackground (approximate cost $55.00).

C. CertifiedBackground will update the status of the background check report via their
website. Administrative Assistants and the Director of the Department have login access
to the administrative site to review and process the background check. The Applicant
may review the criminal background investigation information completed by using their
CertifiedBackground login and password created when the background check was
ordered.
D. A flagged background check will be reviewed initially by the Department Head. Additional information related to the offenses may be requested from the applicant for consideration by the Department Head and Background Check Committee. If the applicant feels that there are extenuating circumstances to be considered, he/she may submit a written request to the Department Head.

E. Additional information must be submitted to the Department Head within 10 business days. The Background Check Committee will review all criminal background investigation results and additional information submitted by the student within 7 business days. The committee will be responsible for making the final decision regarding whether results will disqualify an applicant from admission. The Background Check Committee may make exceptions where it is deemed to be in the best interests of the Colorado Mesa University Department of Health Sciences.

F. The applicant will be notified in writing of the Background Check Committee decision.

G. If the applicant disagrees with the accuracy of information obtained, he/she may request in writing a review of the accuracy of the information. The process of application will be on hold pending results of the review.

H. The applicant has the right to appeal the decision of the Department Head and/or Background Check Committee to the Vice President for Student Services within 10 days. The decision of the Vice President for Student Services is final.

1. Students are responsible for self-reporting offenses that occur after admission to a health sciences program to the Department Head. The Department Head will review offenses with the respective Program Director and Background Check Committee to determine whether the student can continue in the program. Failure to self-report an offense may lead to immediate removal from the program.

I. Clinical agencies have the right to refuse clinical rotations to any student based on adverse information noted in the background investigation process.

J. Background checks revealing offenses after admission to the health science programs will be reviewed by the Department Head and Background Check Committee per the procedure noted in E - G above. In order to comply with agency requirements, the Department Head will notify clinical agencies about students’ offenses that occur after admission to the program.

K. Follow up background investigations for BSN students will occur at the following intervals to comply with clinical agency requirements:

1. Semester 1: VA hospital will complete a background check and fingerprinting will be conducted by Colorado Bureau of Investigation. The VA hospital will require a background check every six months.

2. Semester 2: SMH hospital will complete a background check prior to beginning clinical rotations.

3. Semester 3: Prior to beginning clinical rotations in the school district, students must contact the Colorado Bureau of Investigation, print off an updated online background check, and submit the background check to the Department. The cost for this is $6.85, paid online with a credit card at: https://www.cbirecordscheck.com/Index.aspx

4. Semester 4: Prior to beginning clinical rotations in the school district and at the Mesa County jail, students must contact the Colorado Bureau of Investigation, print off an updated online background check, and submit the background check to the
Department. The cost for this is $6.85, paid online with a credit card at: https://www.cbirecordscheck.com/Index.aspx

5. All transfer students will require a background check through VA or indicated sites upon acceptance to the program.

L. Student who do not pass a clinical agency background check, will be dismissed from all nursing classes and the nursing program. The student will not be allowed back into the nursing program until all background check issues are cleared.

**Electronic Media and Communications**

I. Purpose: To define appropriate use of electronic media in classroom and clinical settings

II. General Information:

A. Electronic communication devices (cell phones, texting), which can facilitate sharing information in a timely and consistent manner, may also create the potential for breaching patient privacy in clinical settings.

B. Electronic media (cell phones, laptops, IPads) can facilitate the learning process in the classroom setting, however, can also create the potential to interfere with the classroom learning environment.

C. Social networking media (i.e. Facebook, YouTube, Twitter, Snap Chat, Instagram) are public forums which can facilitate networking and communication. Unprofessional and unethical communications by nurses in such public forums has led to serious consequences with their employers and the state Board of Nursing. In addition, confidential information about a patient discussed by a nurse at any time represents a violation of the Health Insurance Portability and Accountability Act (HIPPA) (Nursing 2010, Jan. 2010, p. 10).

III. Policy:

A. Students may not use cell phones, smart phones, or laptops in a hospital or community clinical facility. Electronic device(s) should remain in the student’s car or in the designated location for student backpacks/coats/personal belongings. Students may use electronic devices outside of the clinical facility, however, should use discretion when patients or families are present and avoid all circumstances that might breach patient confidentiality or privacy.

B. The use of SMART watches in the clinical setting varies by Level, clinical instructor, and clinical setting. Review the syllabus for clarification. If students are granted permission to wear a Smart watch, the device must be placed on airplane mode while in the clinical setting. Students are prohibited from taking photos with the device while in the clinical setting.

C. Students in community based clinical rotations may carry a cell phone for emergency communication purposes, however, should use discretion when patients or families are present and avoid all circumstances that might breach patient confidentiality or privacy.
D. Students shall use the pager system to contact their instructor for assistance during their clinical experience. In the event of an emergency, families or day care providers may contact a student during clinical or classes according to the Emergency Contact policy.

E. Cell phones and Smart watches must be completely turned off and stored with other personal items during all exams. In the event a student is found to have a cell phone or smart watch such as a 360 or Apple watch on their body or in their possession during an examination, the student will be asked to leave the examination and will receive a zero for the examination.

F. Faculty will inform students in each class of the appropriate uses of electronic media in the classroom settings for note taking, reviewing power point slides, in-class assignments or research.
   1. Faculty has the right to restrict student use of electronic media during examinations.
   2. Faculty has the right to restrict student use of electronic media when students are using the device for non-academic purposes in the classroom setting.
   3. Faculty may initiate Report of Student Performance contracts for students who violate the privilege of using electronic media in the classroom or clinical setting.

E. Communications in social networking media which violate the BSN Student Handbook policies (i.e. Code of Academic and Clinical Conduct, Confidentiality, or Ethics) will lead to disciplinary action according to the respective policy.

Revised: 02/10, 01/17, 8/17

Email Addresses

I. Purpose: To enhance relevant communication within the Department of Health Sciences.

II. General Information:
   A. Electronic communication will facilitate information in a timely and consistent manner.
   B. Students are given free email addresses as part of the university community.

III. Policy:
   A. Student must have a CMU email account upon entering the program, which may be obtained from the Computer Lab in the Library.
   B. It is the student’s responsibility to check his/her email address on a routine basis. Important student announcements and program information will be sent to all nursing students via email.
Emergency Communication

I. Purpose: To identify a process for facilitation of emergency communications between students, families, and faculty members.

II. Policy

A. Students and faculty who are in hospital clinical settings will not have access to use of cell phones for emergency communications from family members, day care providers, or others.

B. Clinical faculty will create a handout at the beginning of each semester with emergency contact information (pager numbers) for students to share with family, day care providers, and schools.

C. Clinical faculty will carry a pager that can be activated when a student (or faculty) needs to be contacted in the event of an emergency.
   1. To activate a faculty pager – **970-298-7606; enter pager id number for the faculty member; enter your call back number.** The faculty member will call you back from a phone at the clinical facility.
   2. In the event of an emergency, family members or day care providers can also call the Department of Health Sciences during normal business hours (Monday-Friday, 8:00-5:00) at **970-248-1398**.
   3. In the event of an emergency outside of normal business hours, family members or day care providers should contact the appropriate clinical faculty using the pager number provided.

D. Clinical and class schedules and emergency contact numbers for all students and faculty will be maintained in the Department of Health Sciences and updated each semester to facilitate rapid communication in the event of an emergency.

Graduation (Prelicensure)

I. Purpose: to identify requirements for graduation from Colorado Mesa University with a Bachelor of Science degree in Nursing.

II. Policy:

A. Graduation requirements

   To graduate from Colorado Mesa University with a bachelor degree, a student must:

   1. Have been regularly enrolled for at least 2 semesters, including the semester during which graduation requirements are met, and must have earned a minimum of 20 semester hours at Colorado Mesa University for a bachelor degree.
   2. Satisfy all general and specific requirements of the college including the fulfillment of all financial obligations.
   3. Have removed from the official record all marks of deficiency in those subjects for credit toward graduation.
   4. The catalog used to determine graduation requirements is the academic year in which the student enrolls in the first nursing course.
   5. Bachelor of Science in Nursing Degree Distinction (6 semester hours). Must receive a grade of “C” or above in STAT 200 and a Humanities or Social/Behavioral Science (each 3 credit hours)
6. Must have completed MATH 113 or higher (3 semester hours. Must receive a grade of “C” or better. Course is pre-requisite for entry into the program. Three (3) credits apply to the essential learning requirements and one (1) credit applies to elective credit.)

B. Scholastic requirements
1. Only lower division courses will be accepted in fulfilling essential learning requirements.
2. A minimum of 40 semester hours of upper division credit are required for graduation from Colorado Mesa University.
3. Students are required to complete the curriculum or course of study in which they initially enroll, provided courses needed to complete the program are available. The student cannot choose part of the program from one catalog and part from another. If a student resumes study or begins a new course of study at Colorado Mesa University after having been absent from college for one academic year or more, the student must follow the curriculum or course of study at the time of re-enrollment unless the school concerned gives written authorization for the student to pursue a different curriculum or course of study.
4. Colorado Mesa University reserves the right to evaluate on a course by course basis any transfer credits earned 15 or more years prior to enrollment, which the student wishes to apply toward any degree.
5. Upper division nursing course credits which are earned 5 or more years prior to the semester of graduation and meets degree requirements must be revalidated. (See Revalidation of Nursing Courses Policy.)
6. Any basic science courses required by the program must have been taken within the last five (5) years to fulfill graduation requirements. These include BIOL 209 and 209L, BIOL 241, BIOL 210 and 210L and BIO 250 and 250L. If the course was not taken within the last five (5) years, the course must be re-taken or competency proven by a challenge examination. The challenge examination process may only be accomplished if a college-level course has been successfully completed previously with a letter grade of "C" or higher awarded. The five-year requirement is waived for RNs who have been working in the nursing field since taking courses. The final approval for all accepted support course requirements and/or challenge examination will be made by the Department of Health Sciences.
7. A cumulative GPA of 2.0 or higher must be maintained in all courses that apply to the BSN degree.
8. An overall cumulative GPA of 2.0 is required for graduation.

C. Bachelor Degree in Nursing requirements
1. Students who meet requirements for the bachelor degree in nursing must complete a minimum of 120 semester hours.
2. Of the 120 credit hours, a minimum of 58 semester hours must be in nursing courses. There must be 33 semester hours of lower division general education courses selected as indicated in the College Catalog, plus 2 semester hours in Human Performance and Wellness physical activity courses.
3. Students with a previous bachelor degree do not need to fulfill the essential learning requirements nor the Human Performance and Wellness courses.
4. All students must complete the requirements of College Algebra to meet admission and graduation requirements for the BS degree.

III. Guidelines for Completing Petition to Graduate:
   A. Student Responsibilities:
      1. Obtain Intent to Graduate form from Registrar’s Office.
      2. Submit Intent to Graduate to Registrar by required date.
      3. Create a Graduation Plan on Degree Works.
      4. Make appointment with nursing faculty advisor to review the Graduation Plan.
      5. Make certain there are no missing requirements or errors on the Degree Works.
   B. Faculty Responsibilities:
      1. Meet with student to complete the Graduation Plan on Degree Works.
      2. Review the Graduation Plan with the student.
   C. Graduation with Honors
      1. Cum Laude—Bachelor degree graduates with cumulative point average of 3.50-3.74.
      2. Magna Cum Laude—Bachelor degree graduates with cumulative grade point average of 3.75-3.89.
      3. Summa Cum Laude—Bachelor degree graduates with cumulative grade point average of 3.90-4.0.

Immunizations

I. Purpose: To provide information and guidelines for vaccinations required for admission and ongoing progress in the nursing program.

II. General information:
   A. It is the student’s responsibility to submit proof of compliance to all required immunizations and paperwork including: TB Skin Tests (TST), Tdap, varicella, influenza, MMR, Hep B, yearly physical, health insurance, liability insurance, and American Heart Association BLS: Healthcare Provider CPR certification. Students who fall out of compliance at any time during the semester will not be allowed in the classroom or clinical setting until compliance is reestablished.
   B. Hepatitis B
      Student must have received the series of shots in order to continue in the program. Documentation that student has started the series is required on admittance to the program and dates of completion of the series must be submitted to the department.
   C. Tetanus
      A current Tetanus, Diphtheria and Pertussis (Tdap) vaccination must be documented for admittance into the nursing program. Tetanus boosters are required every 10 years and must be current to continue in the program.
   D. Measles, Mumps, Rubella, Varicella
      Documented immunity to Measles, Mumps, and Rubella and Varicella are required for admittance into the nursing program. Immunity may be documented by one of the following:
      1. Born before 1/1/57 (date of birth)
      2. Documentation of physician-diagnosed illness
      3. Documentation of two doses of vaccine
4. Laboratory evidence of immunity to illness (titer)

E. Tuberculosis

There is no recommended vaccination for tuberculosis. Students must obtain either a two-step Tuberculin Skin Test or proof of negative TST documented yearly for two years upon admission to the BSN program. Certain facilities may require additional testing and it is the student’s responsibility to comply.

F. Students who are pregnant are referred to their physician for advice re: safety of immunization during pregnancy. A written waiver for immunizations must be submitted to the department.

G. Due to increased risk of exposure during clinical or college environment, students are encouraged to obtain meningococcal, influenza and other vaccines recommended for health workers.

Kaplan Testing Exams

I. Purpose: To inform students about the assessment-driven review program designed to assess content mastery and increase student pass rates on the nursing licensing exam (NCLEX).

II. General Information:

A. Student performance on NCLEX is an important outcome assessment indicator for the nursing curriculum. Content is presented throughout the curriculum to prepare students for the licensing examination.

B. The use of nationally benchmarked examinations assists the student in self-assessment of content mastery and focused their preparation for the licensing examination.

C. The use of nationally benchmarked examinations assist faculty in better preparing students for the NCLEX exam by identifying weaknesses for remediation. The examinations also assist in program evaluation and curriculum review.

D. Kaplan provides a comprehensive assessment and review program which begins prior to admission to the nursing program and continues beyond graduation as the graduate prepares for the licensing examination.

1. Kaplan Nursing School Admission Test – is designed to predict the academic readiness of applicants prior to admission into a program of study in nursing. The four subtests are reading, math, science, and critical thinking. The Kaplan is one component of the admission process.

2. On-line Mid Fidelity Simulations - Completing mid-fidelity simulations requires students to think critically and make sound clinical judgments while taking a client through the entire nursing process of Chart Assessment, Physical Assessment, Nursing Diagnosis, Care Plans, and Evaluation.

3. Skills Review Videos/Drug Calculation Modules – are available to the student for review and to improve critical thinking skills.

4. Focused Review Tests – are available for students in integrated testing categories, system or population specific topics, and math or drug calculations. The tests may be customized by the student and are available for practice at any time. The tests are designed to coach students through the specific content, providing rationales for the
correct and incorrect answers, comprehensive content remediation to enhance student comprehension.

5. **Kaplan Benchmark Testing** – Kaplan Nursing’s end-of-course tests are nationally normed and tagged for QSEN and common accreditation categories. Because they are standardized tests, reports will still show an accurate snapshot of how students are performing compared to the normed cohort with over 140 trackable ear-marked items to each question. Students will take an Integrated Kaplan Exam in Fundamentals, Pharmacology, Health Assessment, Medical Surgical, Community Health, Mental Health, Pediatrics, Obstetrics, and Professional Issues. This program aids students in the review and remediation process for the state licensing exam in nursing.

6. **NCLEX RN Prep Resource** – This comprehensive prep program includes Review Resources and a four day NCLEX Review Course scheduled for BSN students at the end of the final semester. The review resources include a suite of tests, video reviews, NCLEX practice tests, and the NCLEX Predictor Exam. All BSN students will be scheduled to take the NCLEX predictor exam before graduation.

**Liability Insurance for Students**

I. **Purpose:** To comply with Agency's requirements that all students entering clinicals must have proof of liability/malpractice coverage.

II. **General Information:**
   A. According to agency mandate, the policy must be comprehensive medical professional liability insurance with minimum coverage limits of $1,000,000 per claim/$3,000,000 annual aggregate. Each student shall be required to provide a Certificate of Insurance as evidence of such insurance coverage prior to participation in any clinical experience within the program.
   B. Students are required to obtain this at their own expense and maintain throughout the program. Information will be provided by the Department of Health Sciences.

**Math Competency**

I. **Purpose:** to assure basic math competency to progress in the nursing program.

II. **Math requirements:**
   A. **Semesters 1-4**
      Students will demonstrate medication calculation competency at the beginning of every semester. The medication calculation exams will reflect the math needed for the clinical setting students will be exposed to that semester.
   B. Medication calculation exams are based on Pass/Fail with a minimum of 90% required to pass. It is a program requirement to pass the math competency exam each semester with scores of 90% or higher to administer medications in the clinical area.
   C. Students will be required to take the exam using an appropriate math method.
   D. Students may retake the math exam up to two times after the initial exam if 90% is not achieved, for up to a total of three chances to pass.
E. Prior to taking the exam a third time, remediation is required with a faculty member or appropriate tutor.
F. Failure to pass the calculation exams in three chances may result in the student’s failure to pass the clinical course that semester or further remediation per faculty discretion.
G. These exams are independent of any individual course grade and are considered a program requirement. Faculty may choose to add additional math competency tests and exams throughout their courses in addition to the basic exams described above.

Professional Appearance and Grooming Policy

Purpose: The purpose of the professional appearance and grooming policy is to provide a minimum standard for all health sciences students enrolled at Colorado Mesa University. This policy is intended to provide consistency throughout our health science programs and to help prepare and educate students for professional appearance and grooming expectations in the clinical setting and workforce. Many of the standards are present for professional image, while others are intended to provide safety measures for healthcare workers and the patients we serve. Although a clinical site may have stricter or lenient standards than the policy as stated; the student is required to comply with the stricter standard at all times. Students observed in violation of the dress and grooming policy will be asked to take corrective action immediately, after that, the student may be excused from courses. All instances of professional dress, appearance and grooming are impossible to list. Students are encouraged to consult with their instructors first before deviating from the policy as stated.

Personal Hygiene and Appearance (Grooming):

1. The hair, body, and mouth are clean and free from offensive odor.
2. Gum chewing, eating, or drinking in a patient care area or laboratory is prohibited.
3. Tobacco use is prohibited, as is the use of any electronic cigarettes or vaporizers while students are in attendance in the classroom, in lab or at the clinical site.
4. Hair is clean, short or styled in a controlled, restrained manner so hair does not fall into the eyes or face. Hair longer than chin length is styled off the face with a simple band or hair clip. Hair bands may be white, beige, brown or black. Caps or adorned/colorful restraints are inappropriate. Dyed hair must be of a natural human color.
5. Facial hair is clean-shaven or neatly trimmed, chest hair must not be visible even when bending or lifting.
6. Artificial nails or extenders in any form, or long natural nails, are not appropriate for health care workers for infection control reasons. Natural nails shall be no longer than ¼ inch and clean. A solid neutral colored nail polish may be used, the same color must be used for all nails. Nail art is not allowed. Individual clinical sites may restrict the use of nail polish when providing direct patient care.
7. Perfumes, aftershave/cologne, or scented lotions are not permitted.
8. Makeup is conservative and applied moderately.
9. Permitted jewelry/hardware are a wedding/engagement ring and a maximum of 2 matching, small, post style earrings. Medic alert bracelets and watches are not considered...
jewelry. Earring location is limited to the ear lobes only. Other jewelry such as necklaces and bracelets are not permitted. Facial, body and tongue piercing (s) are not permitted, these piercings must be removed and may have flesh toned replacements inserted. Gauged ear lobes are not permitted.

10. Every attempt should be made to cover all body art/tattoos with clothing.

**Dress Code**

Individual course syllabi will specify acceptable dress code for the course. Dress code may vary depending on the nature of the course, e.g. review, lecture, laboratory, conferences and clinical sites.

1. Clinical Sites

   a. Uniform: All white scrub style uniform, short sleeve top and pants or white dress/skirt. Fabric must be free of embellishment and thick enough that undergarments are not visible through the uniform. Uniforms must be clean, in good repair and neatly pressed. No white denim. Gale at Uniform Junction in Grand Junction is available for recommendations regarding uniforms at (970) 256-1600.

   b. Fit: Uniforms must be well fitted such that skin is not exposed while either upright or bending over in the chest or seat area. Choose tops that cover to mid-hip length to avoid skin exposure while reaching or bending over. Wear a high neckline undershirt if your top gapes in the front when bending over.

   c. Program patch: All students will have their program patch sewn on the upper left sleeve of the scrub top as well as lab coats (if required).

   d. Length: Hem of pants must be full length, reach the top of your shoes and not drag on the floor. Dress/skirt must be at least knee length.

   e. Undergarments: Undergarments must not be visible through the scrub fabric, avoid color/print undergarments. White/nude shade undergarments are best for both males and females. Students may find white, thin, “long john” type undergarments offer more coverage if the scrub fabric is too thin. White crew socks or white/natural hose are to be worn with pants. Hose must be worn with a dress/skirt uniform. A white undershirt may be worn with the uniform, it must be short or long sleeved and without embellishment. (No “burnout” tees, lace, embroidery, logos etc.)

   f. Shoes: All white, clean and polished, leather, professional, or athletic shoes with a closed toe and heel (lace-up shoe preferred). Shoes should not be perforated or made of absorbent material.

   g. Name tag: The Colorado Mesa University name pin (with first name and last initial), which is ordered shortly after school begins, must be worn with uniform or lab coat at all times.

   h. Clinical facility badge: A clinical site badge (if required) must be visible on the upper third of the torso at all times, including entering and exiting the clinical site. Plastic lapel pin holders are acceptable if they do not obscure the badge. Badge information must be visible and not obstructed when badge flips over. Lanyards are not acceptable for clinical site badges.

   i. Uniform code modifications, if permitted in a course syllabus, would be subject to the following requirements:
1) Pants: Black/khaki (Dockers style slacks) should be full-length, clean, no holes or slits, and should not drag on the floor.
2) Shirts: Solid color polo shirt in white, maroon or black with official CMU logo.
3) Shoes: Business or casual shoes with closed toe and heel (no athletic shoes or sandals).
4) Sweater/cardigan: washable, plain, white, cardigan-style sweaters may be worn.

2. Business casual, if permitted in a course syllabus, would be subject to the following requirements:
   a. Pants: Slacks that are similar to Dockers and other makers of cotton type material pants, and dress pants are acceptable. Slacks must be well fitting and the waistline must fall at or slightly below the natural waistline.
   b. Dresses/skirts: business casual dresses and skirts, including skirts that are split no higher than at or below the knee are acceptable. Dress and skirt length should be at a length at which you can sit modestly in public.
   c. Shirts: business casual shirts, dress shirts, sweaters, tops, polo-type shirts, and turtlenecks are acceptable. Most suit jackets or sport jackets are also acceptable.
   d. Shoes: Conservative walking shoes, loafers, clogs, flats, dress heels, and leather deck-type shoes are acceptable. No sandals or athletic shoes.
   e. Lab coats: a white lab coat with program patch sewn to the upper left sleeve may be required at certain times during the clinical experience. Lab coats are worn over professional dress.

Professional Behavior in the Academic and Clinical Setting

I. Policy: To provide guidelines for faculty concerning student behavior in the classroom and the clinical setting.

II. General Information:
   A. As students prepare for transition into professional life, certain behaviors are expected, consistent with safe and ethical professional nursing practices in the classroom and in the clinical setting.
   B. Professional behavior and respect for classmates, faculty, preceptors and guest speakers is expected at all times. This is also addressed in individual course modules.

Examples of non-professional behavior include:
   • Tardiness to class and clinical
   • Sleeping in class
   • Interruption of class by talking, passing notes, use of cellular phones, pagers, etc.
   • Use of profanity, name-calling
   • Being rude and hostile to faculty or classroom presenters or in clinical setting
   • Intimidating others
C. Assigned coursework should be original for each class or clinical.

D. When student behavior interferes with the conduct of class or the clinical experience or when safety of members of the campus community is endangered, such behavior will result in disciplinary action up to and including immediate expulsion from the program.

E. The Department of Health Sciences expects their students to be ambassadors for CMU at all times when professional uniforms are worn, both on campus and off campus (i.e. scrubs, CMU polo shirts, name tags). Illegal drugs and/or alcoholic beverages must not be consumed when professional attire is worn, neither on campus nor in the community.

**Progression (Prelicensure Programs)**

I. Purpose: to set standards for satisfactory progress in the prelicensure nursing programs.

II. General information:

A. All pre-requisite courses must be completed prior to beginning nursing courses. Some exceptions may be made by the Admission Committee on an individual basis.

B. All required 300 level nursing courses must be taken in sequence. All 300 level nursing courses must be completed before 400 level nursing courses may be taken (exception—nursing electives).

C. Students must attain at least a grade of C in all required courses in the curriculum, including electives, and maintain a cumulative grade point average (GPA) of 2.0 or higher for all college courses. This policy applies regardless of when or where the course was taken. A grade lower than a “C” is an “F” and not transferred into the program.

D. Any student without a passing grade of "C" or above in required nursing classes may not progress to the next nursing course and will have to re-take the course the next time it is offered as space is available. This requirement also pertains to non-nursing pre- or co-requisite courses.

E. The cumulative exam score on all exams (unit and final) must be 76% or above in any nursing course.

F. Students enrolled in nursing courses having both theory and clinical components must take these components concurrently. If a student receives a grade of less than "C" in either component (theory and/or clinical) both components must be repeated. The student may not progress to the next nursing course and will have to retake both components the next semester that the course is offered as space is available.

G. In the event of a BSN course failure, the student nurse is required to meet with the program Director and sign the Acknowledgement of BSN Course Failure form. The Acknowledgement of BSN Course Failure form serves to instruct and guide students who have experienced a course failure.

H. All nursing courses must be completed or revalidated within 5 years from the semester the first nursing course was taken. This includes transfer of nursing courses from other institutions.

I. A student may not obtain credit by examination for a failed course.

J. A student may not obtain credit by examination to improve a grade.
K. Advisors will refer to Degree Works for progress records for each advisee.

L. Faculty members may withdraw a student due to unsafe clinical practice or behavior jeopardizing professional practice at any time during the semester.

Re-Admission (Prelicensure Programs)

I. Purpose: to inform students who have been out of the nursing program for one semester or more of the policy/process for re-admission into the prelicensure BSN program.

II. General Information:

A. All students requesting a Leave of Absence from the BSN program must complete a Request for Leave of Absence Form. Students requesting re-admission must complete a Request for Re-admission Form. All forms are available on the Department of Health Sciences website.

B. Any student withdrawing from the BSN program must complete an Intent to Withdraw from the BSN Program form. Students withdrawing from the program may not request re-admission. All forms are available on the Department of Health Sciences website.

C. The number of spaces available for returning students is limited. Student re-admission is not guaranteed and is based upon space available, reason for leave of absence, and preparedness to return. Applications for re-admission are due February 15th for fall semester and September 15th for spring semester.

D. Students may apply for re-admission to the BSN program once. The BSN Program Director and select program faculty will review any second re-admission applications on a case-by-case basis.

E. Students are responsible for understanding the implications of a temporary leave of absence or permanent withdrawal from the program regarding financial aid, health insurance, and progression toward completion of the degree.

F. Failed nursing courses may only be repeated once.

G. Two failed nursing courses will result in dismissal from the program and the inability to apply for re-admission.

H. If a student fails a course due to unsafe physical or emotional care of patients, the student may not be allowed to repeat the course.

I. Criminal background check, drug screening, health records and BLS certification must be resubmitted prior to re-entry regardless of the length of time a student is out of the program.

III. Process:

A. Students who withdraw from or fail to complete any of the first semester course in the BSN course must re-apply for admission into the program. These individuals will be considered according to the criteria utilized for all other applicants.
B. Students who request a semester of absence from any other course(s) of the BSN program may submit a request for re-admission.

C. Students re-admitted to the BSN program may be required to successfully validate clinical skills and/or knowledge obtained from previous nursing courses. Re-validation may be required for re-admission for one or more semesters off. For students withdrawn for one semester, in good standing, no re-validation is required. Guidelines for re-validation requirements are listed below:
   a. Overall GPA for the BSN program less than 3.0.
   b. Foundational nursing course or lab grade in any completed level < 84%.
   c. More than one semester off.
   d. More than 2 consecutive semesters off will require revalidation of all levels up to re-admission level.

D. Once re-admission application has been reviewed, the Program Director will notify the student of their re-admission status.

E. Priority for re-admission applicants is based on space availability and the following guidelines:
   a. High priority: leave of absence due to personal health reasons, family health reasons or military commitment.
   b. Medium priority: financial reasons.
   c. Low priority: academic issues, discipline issues, personal/family/elective issues.

F. Other factors considered in re-admission approval include the following:
   a. Preparedness for re-admission.
   b. Successful completion of revalidation requirements.

G. Each applicant may be placed on a wait-list if space is limited.

H. If re-admitted, the student must follow the curriculum currently in place.

I. A copy of the application for re-admission can be found at the end of this handbook.

**Report of Student Performance**

I. Purpose: To provide written agreement between student and faculty to satisfy areas of needed growth for a particular course.

II. Procedure:
   A. The faculty and student (and program director, if needed) will jointly establish
      1. Area in need of improvement
      2. Plan for improvement
      3. Resources
      4. Date for Completion
      5. Outcome
B. Both parties will sign form

C. The student will receive a three percent grade reduction for the course/clinical the RSP is initiated.

D. Faculty will make copy to place in student file and the student will receive a copy.
Colorado Mesa University

REPORT OF STUDENT PERFORMANCE

Student Name: ______________________ Level/ Year: _____/_____ Course: ______
☐ Clinical  ☐ Lecture  ☐ Other: ______________________ 1st RSP: ☐ 2nd RSP: ☐ 3rd RSP: ☐

1. REPORT OF STUDENT PERFORMANCE (RSP): If a student exhibits unsatisfactory/inappropriate behaviors relating to class/clinical practice or failing to meet clinical objectives, the instructor will initiate an RSP with the student. The RSP will serve as a learning contract between the student and the instructor.
   a. The RSP will include the behavior(s) which led to the performance report, goals, expected outcomes, strategies and/or interventions to achieve the goals.
   b. The student and the instructor will specify a date when they will meet to evaluate the effectiveness of the RSP.
   c. A 3% overall grade reduction will be applied in the course the RSP was initiated. Inability to meet the terms of the contract will result in a course grade of “F”.
   d. A student who fails a course as a result of performance in the clinical area may be given an RSP even though one was not completed earlier in the term. Doing so may assist the student in planning for readmission.

2. Refer to specific nursing course syllabus/clinical evaluation tool/Nursing Student Handbook to identify what comprises a deficiency which may result in an RSP being initiated.

3. Faculty members reserve the right to have a student immediately removed from a class or from a clinical unit based upon unsafe student performance. This can result in a course grade of “F”.

☐ Written Warning  ☐ Verbal Warning  ☐ On-going review  ☐ Program Termination

EVENT: Description, Date/ Time (add additional pages if necessary):

<table>
<thead>
<tr>
<th>RECOMMENDATIONS FOR REMEDIATION (add additional pages if necessary):</th>
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<tr>
<td>☐ Apology</td>
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<tr>
<td>☐ Write paper</td>
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<tr>
<td>☐ Review Article/DVD</td>
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<td>Details:</td>
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Your signature indicates you have read and understand this document.
Student Signature: ______________________ Date: ______________________
STUDENT OUTCOME (add additional pages if necessary):  

IS THERE A NEED FOR ONGOING REVIEW?

☐ No, Student has attained expected level of performance following remediation
☐ Yes,  Date of next review: __________

Additional dates of review: __________, __________, __________, __________
(Document all reviews in Student Outcomes Box)

Date: __________  Initials: ______

Final Copies:
Original should be completed, signed and placed in student file.
Copies to Program Director, faculty completing form, and student.
Revalidation of Nursing Courses

I. Purpose: To provide a mechanism whereby students will graduate from the Bachelor nursing Program with current nursing knowledge and skill.

II. General information:

A. Revalidation of Nursing courses and/or labs may be required as part of the re-admission process.

B. Revalidation of a Nursing course will be evaluated by pass/fail. Pass is greater than 76%.

C. A student may attempt to revalidate a Nursing course once. If the attempt results in a failure the student will be required to repeat the course.

III. Process:

A. The Program Director will notify the student of courses that must be revalidated. The revalidation plan will be outlined on the BSN Program Request for Re-admission form.

B. A faculty member will conduct the revalidation and will notify the student of the assignment.
   a. Revalidation of a theory course may include a final examination or a comprehensive paper.
   b. Revalidation of a lab may include skills check-offs.

C. The student is responsible for arranging for revalidation with the faculty member.

D. The plan for revalidation will be approved by the Program Director.

E. The fee for course revalidation must be paid prior to revalidation.

F. Upon completion of revalidation a copy of the revalidation plan will be placed in the student file.

See Readmission Application at end of Handbook

Students' Response to Emergency Situations at Clinical Facilities

I. Purpose: To assure students know how to respond to emergency situations (i.e. fire, codes, security, etc.) at clinical facilities.

II. General Information:

A. Emergency demonstration/training is included within the BSN program.

B. Information regarding security, fire, codes, etc., is included in clinical orientation for Medical/Surgical Nursing, as well as other nursing courses.
Substance Abuse

I. Purpose: To apprise the student of rules regarding substance abuse related to class and clinical attendance.

II. General Information:

A. Chemical dependency may impact all aspects of life negatively and is a condition that can be treated successfully.

B. Dependency may result from any mind-altering substance that produces psychological or physical symptoms. These include alcohol, over-the-counter or prescribed medication, illegal drugs, toxic vapors, or synthetic designer drugs.

C. According to the Colorado Mesa University Student Handbook, students must comply with state and federal laws concerning dangerous drugs. Offenses may result in prosecution by civil authorities and disciplinary action by the College.

D. Students are responsible for coming to class and the clinical area mentally alert and physically capable to care for assigned patients/clients.

E. The faculty has the responsibility to intervene when patient safety and clinical performance are compromised by a student who exhibits chemically impairment.

F. If an instructor suspects that a student has ingested any mind-altering substance which may interfere with safe clinical performance, the student will be asked to leave the class or clinical area.

G. The instructor must objectively document the behavioral symptoms noted and indicate how the learning environment, client safety and/or clinical performance were compromised.

H. Students may be subjected to drug screening during clinical rotations at some health care facilities.

I. If the student refuses to obtain a drug screen when requested, he or she is administratively dismissed from the program.

J. If the random drug screen test is positive the student can be dismissed from the program.

K. Students who may have a substance abuse problem typically will exhibit a pattern of objective, observable behaviors that eventually compromise client safety and clinical standards of performance. In most cases the patterns of possible substance abuse emerge slowly over a period of several semesters; occasionally a faculty member will encounter a student who exhibits clear evidence of intoxication. Faculty will be alert for behavioral evidence of signs/symptoms of possible substance abuse (See list below).

L. Chemical dependency can be identified in a professional substance abuse evaluation and treatment programs are available to those with chemical dependency.

M. After acceptance to the Department of Health Sciences, students must refrain from any illicit drug use or alcohol abuse. Peers and/or classmates are encouraged to report any suspicions of substance abuse to the faculty. Those reporting such information will remain anonymous.
N. Students may be subjected to drug screening prior to participating and at random during clinical rotations at some health care facilities.

O. The Department of Health Sciences expects their students to be ambassadors for Colorado Mesa at all times when professional uniforms are worn, both on campus and off campus (i.e. scrubs, Colorado Mesa polo shirts). Illegal drugs and/or alcoholic beverages must not be consumed when professional attire is worn, neither on campus nor in the community.

III. Procedure:

A. If an instructor suspects that a student has ingested any mind-altering substance which may interfere with safe clinical performance, the student will be asked to leave the class or clinical area. The instructor must objectively document the behavioral symptoms noted and indicate how the learning environment, client safety and/or clinical performance were compromised by the student’s actions. Transportation should be arranged to take the student home safely.

B. This action will count as an absence and an appointment will be scheduled for an informational meeting within three working days between the student, instructor(s), and Department Head.

C. A pattern of possible substance abuse may emerge slowly over a period of several semesters and observed by more than one faculty member. If an instructor identifies a suspected pattern of signs and symptoms of substance abuse, they are to objectively document the behavioral symptoms noted and consult with other faculty who have interacted with student to verify the suspected substance abuse.

D. Once a pattern is established that strongly suggests substance abuse, the student is contacted and an appointment is scheduled for an informational meeting within working three days between the student, instructor(s), and department head.

E. Informational meeting: The purpose of the informational meeting is to make the student aware of the faculty’s suspicions and to review the policy and procedure. The informational meeting will include the student, faculty who identified the problem and the department chair. The faculty will present the documentation concerning the student’s behavior and provide the student an opportunity to discuss the observations. The student’s behaviors, faculty’s recommendations for follow-up, student’s written response to the allegations, and the date and time for the intervention meeting is documented and signed by all parties in the meeting. The original document is placed in the student file, and a copy is given to the student.

F. Intervention meeting: The purpose of the intervention meeting is to review the student’s behavior and clinical performance, discuss the policy for impaired student nurses and its implementation, discuss the academic consequences related to the policy violation, and secure the student’s agreement to seek a comprehensive substance abuse evaluation. The intervention meeting will include the student, faculty who identified the problem and the department chair, and a representative from student affairs. Documentation is completed that articulates the problem behaviors, any academic consequences, the students’ agreement to seek a professional evaluation for a potential substance abuse problem, and the student’s understanding that failure to abide by the recommended treatment plan will
result in dismissal from the program.

G. The student will be referred to the campus affiliated behavioral health services for substance abuse evaluation. If the student refuses to obtain an evaluation, he or she is administratively dismissed from the program. There are three general outcomes anticipated from the substance abuse evaluation:

- The evaluation DOES NOT substantiate the alleged substance abuse by the student. If this occurs, all documentation related to the alleged incident is removed from the student’s file and the student may return to all courses without negative academic consequences.

- The evaluation DOES substantiate the alleged substance abuse by the student, but the student refuses to abide by the policy of enrollment in a treatment program and ongoing monitoring. If this occurs, the student is dismissed from the program.

- The evaluation DOES substantiate the alleged substance abuse by the student, and the student agrees to abide by the policy. If this occurs, the student signs an agreement to participate in a treatment program and to have his or her progress monitored by the Department Chair. The student is allowed to continue in the program as long as he or she is compliant with the treatment contract.

**Signs & Symptoms of Possible Substance Abuse**

**Psychological Problems**
- Irritability
- Moodiness
- Tendency to isolate self

**Mental Status Changes**
- Forgetfulness
- Confusion
- Decreased alertness

**Social Changes**
- Eats alone

**Impaired judgment in the clinical area**

**Changes in Performance**
- Avoids social gatherings
- Avoiding faculty/peers
- Avoiding group work

**Deteriorating productivity**

**General Behavioral Changes**
- Inappropriate responses

**Unsafe clinical performance/placing clients at risk**

**Elaborate excuses for behavior**
- Late assignments with elaborate excuses

**Symptoms**

**Changes in Personal Appearance**
- Intolerance of others for not meeting deadlines

**SYMPTOMS**
<table>
<thead>
<tr>
<th>Change in dress</th>
<th>Odor of alcohol</th>
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<tbody>
<tr>
<td>Unkempt appearance</td>
<td>Slurred speech</td>
</tr>
<tr>
<td>Flushed complexion</td>
<td>Unsteady gait</td>
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<tr>
<td>Red eyes</td>
<td>Errors in judgment</td>
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<tr>
<td>Swollen face</td>
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<tr>
<td>Hand tremors</td>
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</table>
Testing of Nursing Competencies

I. Purpose:
To provide guidelines for demonstrating mastery of clinical skills to meet course objectives for advanced place students.

II. General Information:
A. Any student may petition the faculty to be allowed to demonstrate competency in specific areas.
B. Student must provide documentation of current (within 5 years) experience illustrating competency in area to be tested. Written guidelines will be provided for each course.
C. Courses that may be challenged will be evaluated on an individual basis.
D. See college competency policy from the Colorado Mesa University website at [www.coloradomesa.edu](http://www.coloradomesa.edu)

III. Process:
A. The student must petition the faculty in writing the semester prior to enrollment in the course.
B. The student will register for the course and will be held responsible for required course material. Attendance at the course orientation is required.
C. All tests must be taken within specified time, according to individual faculty guidelines.
D. Clinical competencies must be demonstrated at a time and in the manner designated by the course instructor.
E. The established clinical evaluation tool will be used to determine the student's clinical competence.
F. Competency must be demonstrated at a grade of C or higher.
G. Students may attempt to prove competency in any given area *one time only*.
H. Failure to demonstrate competency at the required level necessitates completion of the course in the usual manner.

END OF SECTION
The following policies are only applicable to students in the BSN Degree postlicensure program (the RN to BSN [Online Accelerated]). Please refer to the policies of your program found in the following pages.

---

**Policies: Postlicensure Program (only)**

**NOTE:** The following policies pertain to the postlicensure program.

- RN to BSN -- Postlicensure Program

---

In addition to the policies provided in this Student Handbook, online students also refer to the “Distance Education at CMU”\(^7\) information.

The postlicensure student is an associate- or diploma-degree RN who is attending the RN to BSN program in completion of the Bachelor of Science in Nursing (BSN) degree. In addition to the policies written herein, students in the RN-BSN program are expected to adhere to each one’s professional policies outlined by his or her employer in professional practice. These policies include but are not limited to:

- Bloodborne pathogens
- CPR
- Immunizations
- Professional appearance
- Substance Abuse

Students attending online classes also follow the processes outlined for distance learning found on the CMU web.

In addition to the policies outlined in the section titled *Policies: Prelicensure and Postlicensure Program*, the follow policies are specific to the RN-BSN program.

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\(^7\) Colorado Mesa University. (2019). Distance education at CMU. Retrieved on February 16, 2019 at [https://www.coloradomesa.edu/distance-education/index.html](https://www.coloradomesa.edu/distance-education/index.html)
Graduation (Postlicensure)

I. Purpose: to identify requirements for graduation from Colorado Mesa University with a Bachelor of Science degree in Nursing.

II. Policy:
   A. Graduation requirements:
      Graduates from the RN-BSN Program follow the CMU Institutional Degree Requirements. See Catalog for complete disclosure.

Practice Experience Mentor Policy (Postlicensure)

I. Purpose: To assure that the use of mentors in nursing courses having practice experiences is consistent with the philosophy and mission of Colorado Mesa University Bachelor of Science Program and that the mentors contribute significantly to the learning experiences of RN-BSN students following the BSN Programs Preceptor and Mentor Information Guide (see separate document).

   Preceptor Definition: Registered Nurse (or those otherwise approved by the course faculty) who agrees to work with senior level RN student over an extended period of time.

   Primary Nurse Definition: Registered Nurse (or those otherwise approved by the course faculty) who works with student nurse at any level.

II. Procedure:
   A. Mentors for RN-BSN students will preferably have a Bachelor’s degree), have at least one year of experience in the area relating to the practice experience, and at least six months experience in their present position.

   B. The mentorship is a one on one relationship.

   C. The mentee will work closely with the mentor throughout the practice experience. Course faculty are available for questions or concerns.

   D. The mentee will:
      1. Provide the mentor with the Mentorship packet outlining the practice experience expectations.
      2. Evaluate the experience and effectiveness of the preceptor

   E. Data collection and storage
      1. The Nursing Clinical Preceptor sheet will be completed by each preceptor.
      2. These information sheets will be kept confidential and will be stored in a locked file within the Department of Health Sciences.
      3. Each student will evaluate his/her preceptor and submit the information to the course in a designated DropBox.
4. The completed Preceptor Evaluation Tool will be kept confidential and will be stored in a locked file within the Department of Health Sciences.

III. Roles and Responsibilities

A. Mentor: The mentor’s role includes those of coach, teacher, facilitator, and resource person. The mentor will:
   1. Serve as a clinical expert, role model, and provide direction of the student nurse (SN).
   2. Meets with the student initially and periodically throughout the experience to review and reevaluate objectives and activities.
   3. Jointly with the student plans assignments, projects and activities to meet the learning objectives within the designated time frames.
   4. Encourages the student to be increasingly self-directed.
   5. Shares experiences and knowledge with the student.
   6. Fosters the practice experience.
   7. Gives feedback to the student about performance and progress on an ongoing basis.
   8. Interacts with course faculty as needed.

Progression (Postlicensure Program)

I. Purpose: to set standards for satisfactory progress in the postlicensure nursing program.

II. General information:

A. Visit the RN-BSN website for program details.

B. Essential Learning course requirements and Other Lower Division course requirements may be completed prior to beginning nursing courses or while enrolled in nursing courses per the program sheet and suggested course sequence.

C. The student may be admitted as a pre-nursing (RN-BSN) or nursing (RN-BSN) major. Pre-nursing (RN-BSN) majors are completing their RN degree (Associate or Diploma) and/or licensure, and/or are completing their Foundation Courses. These students can take the NURS300, the NURS408 and the NURS409 courses while in the pre-nursing (RN-BSN) major.

D. The student admitted as a nursing (RN-BSN) major will have completed the Foundation courses and will have an RN license.

E. All required 300 level nursing courses must be taken in sequence. All 300 level nursing courses must be completed before 400 level nursing courses may be taken (exception—the NURS408 and NURS409 courses).

F. Students must attain at least a grade of C in all required courses in the curriculum, including electives, and maintain a cumulative grade point average (GPA) of 2.0 or higher for all college courses. This policy applies regardless of when or where the course was taken. A grade lower than a “C” is an “F” and not transferred into the program.
G. Any student without a passing grade of "C" or above in required nursing classes may not progress to the next nursing course and will have to re-take the course the next time it is offered as space is available. This requirement also pertains to non-nursing pre- or co-requisite courses.

H. The cumulative exam score on all exams (unit and final) must be 76% or above in any nursing course.

I. Students enrolled in nursing courses having both theory and laboratory components must take these components concurrently. If a student receives a grade of less than "C" in either component (theory and/or laboratory) the failed component must be repeated.

J. In the event of a BSN course failure, the student nurse is required to meet with their nursing advisor; and is also encouraged to develop a plan for successful completion.

K. A student may not obtain credit by examination for a failed course.

L. A student may not obtain credit by examination to improve a grade.

M. Advisors will refer to Degree Works for progress records for each advisee.

N. Faculty members may withdraw a student due to behavior jeopardizing professional practice at any time during the semester.

Re-Admission (Postlicensure)

I. Purpose: to inform students who have been out of the nursing program for one semester or more of the policy/process for re-admission into the postlicensure BSN program.

II. General Information:

A. The RN-BSN program is flexible and students determine the rate of progression through the program. If the student steps away from classes for one or more semesters they may apply for re-admission to the BSN program. The BSN Program Director and select program faculty will review any second re-admission applications on a case-by-case basis.

B. Students are responsible for understanding the implications of a temporary leave of absence or permanent withdrawal from the program regarding financial aid, health insurance, and progression toward completion of the degree.

C. Failed nursing courses may only be repeated once.

D. Students are encouraged to consult with their nursing advisor if life-events are preventing successful completion in any one course that may result in a failure.

E. Two failed nursing courses will result in dismissal from the program and the inability to apply for re-admission.

III. Process:

A. Students who are readmitted may have a change in catalog year. Contact the nursing advisor for direction.
APPENDICES
Agreement to Read Handbook

I have read and agree to comply with the policies in the Bachelor Nursing Student Handbook.

_______________________________________________________________
Print Student Name

_______________________________________________________________
Student Signature

_______________________________________________________________
CMU Student ID#

_______________________________________________________________
Date
Department of Health Sciences
Bachelor of Science in Nursing Program

Academic Honesty Agreement

Any evidence of plagiarism, any form of cheating or knowingly furnishing false information will result in disciplinary action up to and including immediate expulsion of the student(s) involved. (Colorado Mesa University Student Handbook and Colorado Mesa Catalog.)

Student’s Name (Print) ____________________________________________

Semester 1 ____________________________________________

Student’s Signature __________________________

DATE

Semester II ____________________________________________

Student’s Signature __________________________

DATE

Semester III ____________________________________________

Student’s Signature __________________________

DATE

Semester IV ____________________________________________

Student’s Signature __________________________

DATE
Substance Abuse Agreement

I have read the Substance Abuse Policy. By signing this agreement, I understand and agree to comply with the stipulations of the policy.

________________________________________
Print Student Name

________________________________________
Student Signature

________________________________________
CMU Student ID #

________________________________________
Date
Confidentiality Agreement

I have watched the video on confidentiality "Confidentiality: Ethical and Legal Considerations" by Medcom/Trainex. Also, I have read the information on confidentiality contained in my BSN Nursing student handbook.

Patients, medical staff, and employees have a legal right to privacy. All students must exercise extreme caution and sensitivity with communicating or accessing information about patients and clinical facility operations: careless talk, inquiry in the system, repeating rumors or unauthorized access can result in serious harm to patients and their families or employees. Such communication and inquiry are limited to necessary disclosures required by individuals having a need-to-know.

Clinical facility standards prohibit employees and others with direct access to protected information about a clinical facility, its patients or their families, medical staff or its employees except when properly authorized. The release of all confidentiality information must meet all policy and legal requirements. Complete confidentiality is expected.

I understand and agree to comply with the confidentiality requirements as set by the Department of Health Sciences programs at Colorado Mesa University. If I should break patient confidentiality, I understand that I may be removed from the program.

Student’s Name (Print) ________________________________________________

Student’s Signature ________________________________________________

Date ______________________________________________________________
Electronic Media and Communications Agreement

I have read the Electronic Media and Communications Policy. By signing this agreement, I understand and agree to comply with the stipulations of the policy.

________________________
Print Student Name

________________________
Student Signature

________________________
CMU Student ID #

________________________
Date
Criminal Background Investigation Agreement

I have read the Criminal Background Investigation Policy. By signing this agreement, I understand and agree to comply with the stipulations of the policy.

__________________________
Print Student Name

__________________________
Student Signature

__________________________
CMU Student ID #

__________________________
Date
Department of Health Sciences
Moss School of Nursing
Bachelor of Science in Nursing Program

Acknowledgement of BSN Course Failure

I understand that:

_____ 1. During: _____________, I failed ____________________________________
(Semester/Year)           (Course name and number)

_____ 2. The reason for this failure is related to:
☐ Academics
☐ Academic dishonesty
☐ Clinical Performance
☐ Other ______________________________________________________

_____ 3. If I fail a second course, it will result in my dismissal from the BSN program.

_____ 4. I am responsible for scheduling an appointment and meeting with the BSN
Program Director once each subsequent semester that I am in
the BSN program.

_____ 5. The BSN Program Director will communicate with faculty regarding my
progress throughout the remainder of the BSN program.

_____ 6. It is my responsibility to know my grade and be aware of my standing
in all of my BSN courses.

Student Nurse Printed Name              Student Nurse Signature              Date

BSN Program Director Printed Name        BSN Program Director Signature        Date
COLORADO MESA UNIVERSITY

Independent Study Contract

Student’s Name _____________________   Social Security No. ________________________

Course*: _____________________________ CRN**: __________ Section: __________

* **NOTE TO INSTRUCTOR: Instructors must contact the Schedule Coordinator in Academic Affairs to set up Courses and CRNs not listed in the current semester schedule. The Schedule Coordinator enters the new course and CRN into the Banner Student system before the student can register.

I. Eligibility Standing—To Be Completed by the Supervising Instructor

☐ The student has completed a minimum of 8 semester credit hours in the study discipline with a GPA of at least 2.75 within that discipline.

☐ The student meets requirements published in the college catalog as well as any additional requirements established by the academic department.

☐ The student has completed foundation courses appropriate to the intended independent study.

NOTE TO STUDENT: No more than six semester credit hours of Independent Study may be taken at Colorado Mesa University. The Dean of the School issuing credit must approve any exceptions. Independent study courses satisfy neither general education requirements nor specific course requirements. They may be taken as elective hours only.

II. Description or Outline of Plan of Study/Research - to be completed by student (may be completed on other side or attached).

III. Description of Reporting, Monitoring, and Evaluation Procedures - to be completed by the supervising instructor (may be completed on other side or attached).

IV. Contract Details

Minimum contract hours required (at least 30 hours of student work is required for each semester hour of academic credit awarded):

Semester and year of study: ______________________________

Minimum contract hours required: _____  Credit hours to be granted: _____

V. Signatures

Student’s Signature: ___________________________ Date: __________

Supervising Instructor’s Signature: ___________________________ Date: __________

Department Chair’s Signature: ___________________________ Date: __________

VI. Filing

• THIS COMPLETED, SIGNED AND DATED CONTRACT IS TO BE FILED WITH THE OFFICE OF ADMISSION AND RECORDS AT THE TIME OF REGISTRATION. NO REGISTRATION FOR INDEPENDENT STUDY COURSES WILL BE PERMITTED WITHOUT RECEIPT OF THIS SIGNED CONTRACT.

• ADMISSION AND RECORDS WILL FILE A COPY OF THIS CONTRACT WITH THE APPROPRIATE DEAN’S OFFICE UPON RECEIPT OF A COMPLETE CONTRACT.

Copy sent to Department Head on __________ Initials: _____
Description or Outline of Plan of Study/Research:

Description of Reporting, Monitoring, and Evaluation Procedures:
Request for Leave of Absence Form

This form must be completed by any student who deviates from the standard progression of the BSN Program from the program.

Name_______________________________________Date________________________

Student ID 700____________________________________Phone_______________________

Email Address_____________________________________________________________

Starting Date of Leave of Absence ______________________________

Current Level:  Semester 1 □  Semester 2 □  Semester 3 □

Reason for Leave of Absence - Check all that apply:

□ Personal: Medical  □ Family: Medical reasons
□ Military Commitment  □ Financial
□ Required withdrawal – academic  □ Required withdrawal – disciplinary
□ Elective – Academic  □ Elective – Not sure of nursing
□ Person Elective  □ Family Elective
□ Psychological– recommendation by Counseling Center
□ Other: ________________________________________________________________

Readmission to the BSN program is on a “space available” basis. If you choose a temporary leave of absence from the program, readmission is not guaranteed. If time away from program exceeds one semester, re-validation of skills and/or knowledge is required. All students considered for readmission must be in “good standing” at the time of Leave of Absence.

Anticipated Date of Readmission____________________________________

Student Signature__________________________________  Date______________

Program Director Signature___________________________  Date______________

October 2014
Intent to Withdraw from the BSN Program Form

This form must be completed by any student who permanently withdraws from the BSN program.

Name_______________________________________Date________________________________

Student ID 700__________________________________Phone________________________________

Email Address_______________________________________________________________

Date of Withdrawal _________________________________________________

Current Level:  Semester 1 □  Semester 2 □  Semester 3 □

Reason for Withdrawal - Check all that apply:
□ Personal: Medical  □ Family: Medical reasons
□ Military Commitment  □ Financial
□ Required withdrawal – academic  □ Required withdrawal – disciplinary
□ Elective – Academic  □ Elective – Not sure of nursing
□ Person Elective  □ Family Elective
□ Psychological– recommendation by Counseling Center
□ Other: ___________________________________________________________________

Students withdrawing from the BSN program may not request re-admission.

Student Signature_____________________________________  Date ______________________

Program Director Signature______________________________  Date ______________________

October 2016
BSN PROGRAM REQUEST FOR READMISSION

This form must be completed by any student who deviates from the standard progression of the BSN Program. Any student eligible for readmission should return the completed form to the BSN Program Director by the request for readmission due date (Fall: Spring: )

Semester Requesting Re-admission to:   Fall 20___   Spring 20 ___

Level requesting re-admission to:   Semester 1 □   Semester 2 □   Semester 3 □

Name: ________________________________  CMU ID# 700__________________________

Email address: _____________________________________________________________

Cell Phone/Home Phone: _____________________________________________________

Date of Leave of Absence: _____/_____/_______ thru _____/_____/_______

Last Semester Completed:  Semester 1 □   Semester 2 □   Semester 3 □

Reason for Leave of Absence- Check all that apply:
Health/Medical: □ Personal  □ Family
□ Family  □ Elective

Academic:
□ Required withdrawal  □ Financial
□ Disciplinary Issue  □ Not sure of nursing
□ Elective – Academic

□ Military Commitment

□ Other: _______________________________________________________________

Comments:
**COMPLETED BY BSN PROGRAM DIRECTOR:**

**BSN Program Recommendation:**
If space available, based upon listed criteria:

- [ ] High priority re-admission  
- [ ] Medium priority re-admission  
- [ ] Low priority re-admission  
- [ ] Committee Review

- [ ] Denied, Reason for denial:

**Re-Validation Plan:**

- [ ] Prepared for re-admission.
- [ ] Skills check-off for last completed level. *List required check-offs:*

- [ ] Skills check-off for previous levels. *List required check-offs:*

- [ ] Final Exam(s) for last completed level. *List required exams:*

- [ ] Final Exam(s) for previous level courses. *List required exams:*

**SIGNATURES:**

_____________________________________________   ______________________
Student              Date

_____________________________________________   ______________________
Program Director     Date

**REVALIDATION RESULTS:**

<table>
<thead>
<tr>
<th>Course</th>
<th>Date of Revalidation</th>
<th>Instructor</th>
<th>Result : PASS/FAIL</th>
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<tbody>
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10/2016