# Baptist Health System School of Health Professions

Department of Nursing

Associate of Applied Science Diploma in Vocational Nursing RN to BSN

# Student Handbook

Policies and Procedures 2022-2023



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#### Welcome

The faculty, staff, and administration welcome you to the Baptist Health System School of Health Professions Department of Nursing. The information contained in this Handbook is provided as a guide to assist in orientation to the policies and procedures of the Department of Nursing. The Handbook is a supplement to the Baptist School of Health Professions Academic Catalog. In any case of diversion or conflict with this publication, the Baptist School of Health Professions Academic Catalog will prevail, with exceptions related to the Texas Board of Nursing Rules and Regulations for nursing education.

This Handbook is a product of a cooperative effort between the Nursing Curriculum Committee and the leadership of Baptist Health System School of Health Professions. All policies and procedures contained in this handbook were originally developed and reviewed by faculty and administration. The Handbook is reviewed annually and revised as needed. As revisions occur, students are notified in writing.

It is the student's responsibility to be familiar with the policies and procedures of the school and the nursing department and review the Handbook at the start of every semester. The Handbook is in the Learning Management System.

# Introduction and History from the President and Dean

Commitment to our students' success is a fundamental tenet in our school. With their strong clinical and theoretical backgrounds, graduates are prepared with outstanding entry-level job skills and foundational coursework that pave the way for continued growth throughout their professional lives.

Your success starts here at the Baptist Health System School of Health Professions. We are the premier education component of the Baptist Health System where learners and graduates are among the very best prepared health care professionals. The School of Nursing was chartered in 1903 as a diploma granting institution. The Vocational Nursing program was established in 1988. In 2009, the diploma program shifted to an Associate of Applied Science degree program, ushering in a new era for the school. The school was approved at the baccalaureate level to offer the RN to BSN in 2012.

Baptist Health System has a reputation for graduating highly competent and caring health care professionals. Graduates will enter the dynamic health care environment at a time when their knowledge and skills are highly valued.

# **Baptist Health System School of Health Professions Mission**

To develop and promote excellence by providing a solid foundation in health care education (using both traditional and distance learning formats) for future and current practitioners with a competent and compassionate approach to patient care and safety.

# **Baptist Health System School of Health Professions Objectives**

- 1. To provide comprehensive educational programs focused in health care and allied health that guide students through the development of competencies needed to meet licensure, registration, and employment as defined in the objectives of the individual programs.
- 2. To provide services and support to a diverse student body in pursuit of postsecondary education and training for health care and allied health careers.
- 3. To provide a solid foundation in health care education through comprehensive courses of instruction that include classroom, laboratory, clinical practicum experiences, and distance learning modalities.

- 4. To provide a quality foundation in general education studies for all associate and baccalaureate students.
- 5. To provide students access to highly qualified faculty, practitioners, and staff who embrace the philosophy of a competent and compassionate approach to education and health care delivery.

#### **Spirit of Community**

The Baptist Health System School of Health Professions is built on a commitment to excellence, engagement in the learning process, and mutual respect and courtesy. This commitment is an integral part of everything we do and is observed when we:

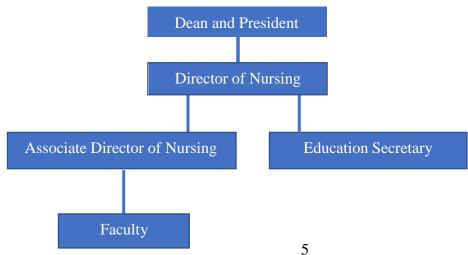
- 1. Respect the rights and property of all members of the campus community.
- Uphold personal and academic integrity.
- 3. Practice honesty in communication.
- 4. Listen to others' viewpoints.
- 5. Serve as good stewards of our resources.
- 6. Work with others to uphold these standards.
- 7. Engage in activities that benefit our community.

#### **Faculty Statement of Values**

Learner success comes first at the Baptist Health System School of Health Professions. Teaching and learning comprise the core of our mission. We dedicate ourselves as a learning community to the continual pursuit of excellence and recognition of the dignity and worth of our individual members. With these as fundamental principles, the following values guide our actions:

- 1. Commitment to Quality: We take personal responsibility for continual improvement and commitment to lifelong learning as we celebrate creativity, innovation, and the success of learners.
- 2. Respect: We insist on an environment of respect. Our actions reflect the respect we hold for our students, our colleagues, our patients, and ourselves. We treat each member of the community as individuals deserving of kindness, dignity, and fairness.
- 3. Trust: We honor the trust placed in us by our students, the community, our patients, and colleagues. With trust, we act openly and ethically, motivated by cooperation and a collaborative team spirit.
- 4. Considerate Open Communication: We take responsibility for sharing information, encouraging the exchange of ideas, listening without judgment, and speaking with honesty and candor.
- 5. Accountability and Integrity: We hold ourselves and others accountable for our professional and personal actions; we are committed to acting responsibly and conducting our business with integrity.

# **Organizational Chart**



#### **Professionalism**

Professional health educators have the responsibility for assisting students in developing a commitment to the profession and following a professional code of behavior. Each department of the Baptist Health System School of Health Professions emphasizes this commitment to the profession and presents opportunities for professional growth within and beyond the educational setting. A framework of professional behavior, based on ethical and legal standards, is presented to the student at increasingly complex levels throughout the curriculum. Students must integrate the professional code of behavior into their professional practice.

**Definition:** Professional character is the integrated pattern of personal, academic, and occupational behaviors that indicate an individual is able to consistently conform his/her conduct to the requirements of professional and generally accepted standards, including but not limited to behaviors indicating honesty, accountability, trustworthiness, reliability, and integrity.

<u>Conduct</u>: Students are responsible for knowing and adhering to the contents and provisions of applicable rules and regulations (Baptist Health System and/or Baptist Health System School of Health Professions). When the student is assigned to a non-Baptist Health System clinical rotation, the student is expected to comply with the rules and regulations of that organization.

Students shall obey the law, show respect for authority, and observe correct standards of conduct. The following is a non-exclusive list of expressly prohibited behavior:

- 1. Gambling, as described by local, state, and/or federal statute or code
- 2. Alcohol and narcotics abuse
- 3. Disorderly conduct, which includes, but is not limited to, any of the following activities:
  - Behavior of a boisterous and tumultuous character
  - Interference with the peaceful and lawful conduct of persons
  - Violent and forceful behavior
  - Behavior involving abuse or assault
- 4. The student or groups of students may not willfully engage in disruptive activity or disrupt a lawful assembly/meeting.
  - Willful and malicious behavior that interrupts the speaker of any assembly/meeting or impairs the right of others to participate in such assembly/meeting
  - Willful and malicious behavior that obstructs or causes the obstruction of any doorway, hall, or any other passageway preventing access to individuals
- 5. Falsification or fabrication of any documents, records, or information
- 6. Refusing to pay or failing to pay a debt, such as loans, fines, or other charges
- 7. Representing or attempting to legally bind the Baptist Health System or School of Health Professions without authorization
- 8. Misuse of any equipment or property
- 9. Weapons possession or use
- 10. Hazing, defined as any intentional, knowing, or reckless act by one person alone or acting with others, directed against a student or employee, endangering the mental or physical health or safety of the individual.

#### **American Nurses Association Code of Ethics for Nurses**

The *Code of Ethics with Interpretive Statements*, provide a framework for nursing practice (American Nurses Association, 2015). The nine provisions listed below are foundational principles that are highlighted in each course.

**Provision 1:** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

**Provision 2:** The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

**Provision 3:** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

**Provision 4:** The nurse has authority, accountability, and responsibility for nursing practice; makes decisions, and takes action consistent with the obligation to promote health and to provide optimal patient care.

<u>Provision 5</u>: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and safety, maintain competence, and continue personal and professional growth.

<u>Provision 6</u>: The nurse through individual and collective effort, establishes, maintains, and improves the ethical environments of the work setting and conditions of employment that are conducive to safe, quality health care.

**Provision 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.

**Provision 8:** The nurse collaborates with other health professionals and the public to promote human rights, promote health diplomacy, and reduce health disparities.

<u>Provision 9</u>: The profession of nursing, collectively and through professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

#### Reference

American Nurses Association. (2015). Code of ethics for nurses with interpretive statements. Author.

#### **Chain of Command**

Students are expected to follow the chain of command. The chain of command starts with self-reflection regarding the matter and follows the steps outlined below.

<u>Clinical concerns</u>: The person involved > the Clinical Instructor > the Clinical Coordinator > the Associate Director of Nursing > the Director of Nursing > the Dean and President

<u>Classroom concerns</u>: The person involved > the Theory Instructor > the Theory Coordinator > the Director of Nursing > the Dean and President

# **Professional Nursing**

The Department of Nursing was established in 1903 and celebrated 100 years of continuous operation in 2003. The nursing program is a private, hospital-based nursing program that offers an Associate of Applied Science, a Diploma in Vocational Nursing, and a RN to BSN. As a hospital-based program, the Department of Nursing offers unique advantages. Emphasis is on substantial clinical experience in which

opportunities exist to apply classroom theory to clinical practice. Students spend time in each of the major specialty divisions, such as inpatient perioperative areas, emergency departments, critical care units, psychiatry, pediatrics, and obstetrics, as well as in adult medical-surgical areas and community-based settings. Students work closely with faculty members and nursing staff in the clinical settings.

Through many learning formats, students acquire knowledge and skills. Some of these formats include focused self-directed study, evaluation, cooperative group activities, faculty presentations, active class interaction, innovative internet activities, online courses, and clinical skills laboratories. At the completion of the program, graduates receive an Associate of Applied Science and are eligible to write the National Council Licensure Examination for Registered Nurses (NCLEX-RN) and the Diploma in Vocational Nursing graduates are eligible to write the National Council Licensure Examination for Practical Nurses (NCLEX-PN).

#### **Philosophy**

The Baptist Health System Department of Professional Nursing faculty believes that nursing and health are a necessary and integral part of our society.

Nursing is the protection, promotion, and optimization of health and abilities; prevention of illness and injury; and alleviation of suffering through the diagnosis and treatment of human response and advocacy in the care of individuals, families, communities, and populations (2004).

Society is comprised of health-seeking clients, both individuals and families, who represent a multitude of ethnic, economic, cultural, political, and social backgrounds. Due to a diverse and ever-changing environment, the health care needs of a society evolve.

Health is viewed as holistic and encapsulates the physical, psychosocial, and spiritual needs of clients and families. Health-illness is a continuum across the life span; and the state of health is dependent upon disease processes, human responses, and clients' perceptions of their conditions.

Nursing becomes the conduit between health and society. The goal of nursing is to serve the public by addressing the health needs of society. Diagnosing and treating the actual and potential health problems of clients and their families positively influence the health of society. Nurses collaborate with clients experiencing health care needs to promote, maintain, and restore health or achieve peaceful death.

The art and the science of nursing are derived from both the humanities and the sciences. The melding of these underpinnings into an applied science makes the discipline of nursing unique. Nursing knowledge is conveyed through the teaching-learning process, and recipients of that knowledge include both nursing students and health care clients and their families.

Teaching is a dynamic, collaborative process that includes many formats for learning. Focused self-directed study, evaluation, cooperative group activities, faculty presentations, active class interaction, innovative internet activities, clinical skills laboratories, and diverse clinical experiences represent a few of the strategies used to facilitate the acquisition of nursing knowledge and skills.

The faculty provides a teaching-learning environment that fosters mutual respect; therefore, self-expression, values clarification, divergent opinions, and risk-taking behaviors are encouraged. Topics such as ethical/legal issues, the political and environmental influences on health, and cultural diversity are discussed. The development of critical-thinking skills is a major focus in the curriculum, preparing

students to make clinical judgments based on knowledge and problem-solving abilities. The faculty models the professional role, maintains fiscal responsibility, shares clinical expertise, and sets high standards of practice for students to emulate.

Learning is a dynamic, continuous, lifelong growth process that affects the cognitive, affective, and psychomotor domains. Students are accountable for their own learning and are expected to communicate their learning needs to and collaborate with the faculty. The faculty, in turn, will counsel, direct, refer, and coach students to identify learning problems and offer individualized, corrective solutions. The faculty believes that learning must be a lifelong process and that current professional journals and research contribute to sound clinical judgments and safe nursing practice.

The faculty believes that the goals of nursing education are to produce graduates who can provide and coordinate nursing care in a variety of settings and to ensure future articulation for higher education. The faculty also believes in transitional learning by providing an advanced placement option for LVNs and career progression through a RN to BSN program.

The roles that our graduates are expected to assume include provider of direct care, coordinator of care, and member of the profession. Competencies required as a provider of care include the assessment of health status and health needs; the formulation of client goals derived from nursing diagnoses; the implementation of care plans and teaching plans; the evaluation of clients' responses and outcomes to interventions; the demonstration of therapeutic communication skills; the provision and delegation of care through direct and indirect assignments; and the use of critical thinking in analyzing client data, while applying current literature to promote evidenced-based practice. Competencies required as a coordinator of care include collaborating with clients, families, and the interdisciplinary health care team in planning and delivering care; coordinating human and material resources for providing care; referring clients and their families to appropriate resources; and functioning within the organization of various health care settings. Competencies required as a member of the profession include assuming accountability and responsibility for the quality of nursing care provided, advocating for clients and their families, and participating in activities that promote the profession.

In summary, the Baptist Health System Department of Professional Nursing faculty is committed to meeting the health care needs of society by graduating dedicated professional nurses who engage in safe, quality nursing practice.

#### **Mission**

The mission and philosophy of the School of Health Professions and the Department of Nursing reinforce and support one another. Professional nursing fits within the governing organization by providing a traditional associate degree with a solid foundation in health care education. This education incorporates the Baptist Health System (BHS) mission to help people achieve health for life through compassionate service inspired by faith. The BHS, SHP, and DPN have a commitment to cultural, racial, and ethnic diversity of the school community.

#### Goals

The Department of Nursing provides an outstanding program of study that prepares its graduates to practice as entry-level professionals who provide safe, competent, quality nursing care. Our graduates have incorporated the concepts of health, nursing, and society as their practice focus; therefore, their competencies are based on knowledge of the discipline, clinical skills, societal health needs, and quality nursing care. Throughout the program, a focus on critical thinking, therapeutic communication, and sound

clinical judgments enables our graduates to care for a diverse group of clients and families who may be experiencing predictable and/ or unpredictable health-related needs in a variety of structured settings (e.g., acute, intermediate, long-term, community). The ultimate goal of the faculty is to meet the health needs of society for clients and their families by health promotion, maintenance, and/or restoration through the nursing care provided by our graduates.

# **Professional Nursing End of Program Student Learning Outcomes**

Upon completion of the program, the graduate will be able to:

- 1. Perform the role of the nurse using knowledge, judgment, and skills in providing health care for clients and families.
- 2. Participate in activities that promote the development and practice of professional nursing.
- 3. Utilize critical thinking to provide safe, quality, comprehensive nursing care to multiple clients and their families across the life span through consistent use of assessment, nursing diagnosis, planning, intervention, evaluation, and sound clinical judgments.
- 4. Utilize effective communication techniques when providing, coordinating, and advocating for quality health care with clients, their families, and the health care team.
- 5. Integrate the concepts of health, illness, and the teaching-learning process to meet the health promotion, maintenance, and/or restoration needs of clients and their families throughout the life cycle.
- 6. Collaborate with clients and their families within diverse communities and the interdisciplinary health care team for the provision of quality health care.
- 7. Coordinate resources and manage environmental factors within society when providing holistic health care for multiple clients and their families.
- 8. Assume accountability and responsibility for provision, coordination, documentation, and delegation of health care for multiple clients and their families within the legal and ethical nursing framework.

# **Vocational Nursing**

The Vocational Nursing program prepares students with entry-level skills for the practice of vocational nursing in the care of patients across the life span with commonly occurring predictable health needs in a variety of health care settings. Some of these settings are: acute care hospital, long-term care, freestanding clinics, home health, and doctor's office. Upon successful program completion, the graduate vocational nurse will receive a diploma of vocational nursing. After meeting the Texas Board of Nursing (BON) criteria, the graduate will be eligible to take the NCLEX-PN and, upon passing, will be granted a license of vocational nursing.

# **Philosophy**

The Vocational Nursing program is based on the philosophy grounding linked with the worth and dignity of all people. Human beings have biological, psychological, social, and spiritual needs that are necessary to their self-fulfillment and independence throughout their life span.

Vocational nursing is a service occupation. The vocational nurse provides this service for patients who are in a dependent care system and need assistance with their activities of daily living. Provision of care is guided by knowledge of health/illness and related care, the nursing process, legal/ethical standards, scientific problem-solving approaches, and teaching/learning principles. The vocational nurse uses effective communication and organizational skills to contribute to the coordination of care and effective interpersonal skills in working with patients and health care team members. The vocational nurse demonstrates accountability for his/her practice and participates in activities that promote quality health care and the development of the practice of vocational nursing.

The needs of the learner are based on the knowledge and skills required to function according to the Texas BON standards of care, including the Differentiated Essential Competencies, under a supervised practice for patient predictable needs. Learning is dependent on readiness, is goal directed, and is the responsibility of the individual student. It progresses from the known to the unknown, and the learner must be actively involved. Learning requires time and application. The knowledge and skills to be learned are structured. Assessment Technologies Institute (ATI) testing is incorporated throughout the curriculum.

The Vocational Nursing curriculum incorporates the concepts of nursing theorists Patricia Benner, Dorothea Orem, and Jean Watson. These nursing theories assist in guiding the student from novice to expert, learning the fundamentals of self-care, self-care deficit, and the nursing system while incorporating holistic caring. These theories/concepts assist in the students' development of safe patient care and clinical decision making.

Student's interest, motivation, previous knowledge, and life and work experiences are important factors and affect learning ability. Persons who desire to become vocational nurses should consider their own physical, psychological, emotional, and intellectual readiness for vocational nursing and be able to meet the program objectives.

The faculty believes that nursing education can be provided in a continuum with efforts aimed toward supporting educational mobility of graduates. The Baptist Health System School of Health Professions works with other academic institutions to support flexibility, access, and educational mobility for its students and graduates. The Vocational Nursing curriculum is designed to prevent unnecessary repetition of the general support courses for vocational nursing and maintain necessary experiences within clinical nursing courses. Nursing is an art with a broad and deep scientific foundation. The roles of the vocational nurse should be in accord with the scientific complexity of nursing situations incorporating and building upon basic vocational educational preparation.

#### Mission

Prepare the graduate with vocational nursing entry-level skills to work collaboratively with the health care team in the delivery of safe patient care in our community.

#### Goals

The goals of the program are to prepare the vocational nurse graduate for eligibility to write the NCLEX-PN and upon passing be granted a license to practice vocational nursing.

# **Vocational Nursing End of Program Student Learning Outcomes**

Upon completion of the program, the graduate will be able to:

- 1. Assist in promoting an environment conducive to the optimal achievement of patient-centered self-care and function.
- 2. Apply the scientific principles from the biological, psychological, and sociological sciences when participating in planning and providing nursing care to individuals.
- 3. Utilize the nursing process to assist in the identification of patient needs, perform focused nursing assessments, participate in planning nursing care, participate in modification of the care plan, implement appropriate aspects of care, and assist in the evaluation of patient responses.
- 4. Provide direct basic care to patients with predictable needs in structured settings.
- 5. Reinforce the teaching of specific information to patients and significant others that will help prevent illness and/or complications, maintain appropriate health status, and promote established rehabilitative measures.

- 6. Utilize the problem-solving approach to make appropriate judgments/decisions in nursing care situations that are safe and effective for patients, significant others, health care agencies, and self.
- 7. Utilize communication techniques for making observations, reporting and recording, and interacting with patients, significant others, and health care team members.
- 8. Assist in the coordination of care through effective use of organizational skills and identification of appropriate sources for referral.
- 9. Participate in activities that support improvement, safety, and cost effectiveness in health care settings.
- 10. Demonstrate accountability for actions in providing nursing care within limits of nursing knowledge, experience, ethical/legal guidelines, and standards of nursing practice.
- 11. Participate in activities that as a member of the profession promote quality health care and the development of vocational nursing practice.

#### RN to BSN

The RN to BSN curriculum is designed to offer associate degree- and diploma-prepared registered nurses a baccalaureate nursing degree in a fully online format. The intent of the RN to BSN program is to build upon the student's competencies attained in previous general and nursing education. A total of 90 semester credit hours that includes 30 nursing credits awarded for previous nursing education leading to RN licensure and completion of the core nursing courses are needed to complete the baccalaureate degree.

#### **Statement of Purpose**

The purpose of the RN to BSN program at Baptist Health System School of Health Professions is to provide associate degree- and diploma-prepared licensed registered professional nurses with the opportunity to achieve a baccalaureate degree in nursing so that they are prepared to care for clients, families, communities, and populations. The program builds on courses in nursing, the humanities, and social and natural sciences to prepare graduates to provide leadership in professional and health care organizations, pursue graduate education, and advance their nursing careers.

# **Core Nursing Courses**

The RN to BSN curriculum is guided by the nursing department's philosophy, the Texas Board of Nursing's Differentiated Essential Competencies for a Baccalaureate Degree, and the program's student learning outcomes, which are based on the American Association of Colleges of Nursing's The Essentials of Baccalaureate Education for Professional Nursing Practice. The combination of these professional standards and competencies ensures the curriculum will provide the associate degree- and diploma-prepared registered nurse the knowledge and skills to function at a baccalaureate level of competency and the ability to undertake a more active role in the profession of nursing, ultimately improving the quality of health care in society.

The curriculum also reflects the professional nursing standards of the American Nurses Association and strictly adheres to the Texas Board of Nursing's Rules and Regulations Relating to Nurse Education, Licensure, and Practice. Statement of Purpose The purpose of the RN to BSN program at Baptist Health System School of Health Professions is to provide associate degree- and diploma-prepared licensed registered professional nurses with the opportunity to achieve a baccalaureate degree in nursing so that they are prepared to care for clients, families, communities, and populations. The program builds on courses in nursing, the humanities, and social and natural sciences to prepare graduates to provide leadership in professional and health care organizations, pursue graduate education, and advance their nursing careers.

#### RN to BSN End of Program Student Learning Outcomes

- 1. Synthesize knowledge from nursing, the sciences, and humanities to meet the physiological, psychological, socio-cultural, developmental, and spiritual needs of individuals, families, groups, and communities.
- 2. Demonstrate leadership, professional identity, and values within an ethical and legal framework in promoting safe, high quality, evidence-based care with a focus on continuous evaluation and improvement within a variety of organizations and settings.
- 3. Apply current evidence identified in information management technology and information systems to nursing practice related to disease prevention, health promotion, illness care, and restoration of health.
- 4. Evaluate ethical, legal, economic, and political factors that affect the shaping of health care policy and the management of health care for individuals, families, communities, and populations.
- 5. Promote intra- and inter-professional partnerships characterized by teamwork, collaboration, and communication to deliver safe, high quality nursing care in a variety of settings.
- 6. Apply principles and methods of health promotion and health education to the nursing care of individuals, families, groups, communities, and populations.

# **Academic Progression**

The Academic Catalog establishes provisions for satisfactory academic progress. Faculty are encouraged to provide advisements early in situations where students are at-risk for not passing courses. See Appendix A for the Advisement Note template. Advisement counseling could include such things as: present standing in the course; time and requirements remaining in the course; faculty input/suggestions for success; and student input/suggestions for success. Department directors may establish additional guidelines. Faculty need to be sure that students understand their status.

# **Academic Progress Appeal**

A student who wishes to appeal a determination that he/she is not meeting satisfactory progress standards must submit a letter to the department director within five (5) school days of notification of the determination. The letter must describe the circumstances the student feels deserve consideration. A committee consisting of the department director, president or designee, and a faculty member will make an appeal decision. This committee will provide a written decision within five (5) school days.

# **Satisfactory Academic Progress Appeal**

A student who wishes to appeal a determination that he/she is not meeting satisfactory progress standards must submit a letter to the program director within five (5) school days of notification of the determination. The letter must describe the circumstances the student feels deserve consideration. A committee consisting of the program director, president or designee, and a faculty member will make an appeal decision. This committee will provide a written decision within five (5) school days.

#### **Academic Probation**

Academic Probation is a temporary condition or status of progression that results from an inadequate level of student performance. Unsatisfactory performance means the student has earned one or more failing grades ("D" or "F"). A student failing any course at a progress evaluation period will be placed on probation. A student who achieves satisfactory progress at the next progress evaluation point but is not making overall satisfactory progress for the program may be continued on academic probation for one more progress evaluation point.

Any student placed on academic probation is required to attend academic advisement before returning to class. A student who is dismissed or withdraws in a status of probation and requests readmission may be

readmitted in a probationary status. Failure to make satisfactory progress at the first progress evaluation point following readmission will result in student dismissal. A student who is on probation but is making satisfactory progress at the next progress evaluation period will be removed from probation. See Appendix B for the Academic Probation Note template.

#### **Clinical Conferences**

A clinical conference is a group discussion between students and faculty or an individual discussion between one student and one faculty member. It may occur prior to or following contact with patients. Freedom of exploration and expression should be encouraged.

Examples of more specific purposes and content for conferences follow:

- 1. Clarification of expectations, values, and/or attitudes
- 2. Promotion of problem-solving and critical-thinking abilities by assisting the student through the steps of the problem-solving and critical-thinking processes
- 3. Ventilation of feelings
- 4. Correlation of classroom theory to specific clinical situations and patients
- 5. Demonstration and clarification of new skills
- 6. Discussion of student-patient and/or student-staff relationship
- 7. Determination of student achievements and further learning needs

#### **Guidelines for Clinical Requirements and Evaluation of Clinical Courses**

Clinical evaluation is that part of the teaching-learning process concerned with determining the extent to which students are achieving clinical educational objectives. At the beginning of each course, the student will receive a copy of the clinical experience objectives along with the clinical evaluation tool that identifies the clinical evaluation process and criteria. The clinical performance may be rated as "Pass/Fail" or graded according to the individual program stipulations.

The student will receive written feedback on his/her clinical performance at the course's scheduled evaluation periods. The student must consistently meet the required clinical objectives and meet all required course requirements as identified in the course syllabus and related course guidelines to pass the clinical course. In addition, the student must demonstrate professional conduct and safe clinical practice throughout the clinical experiences (see related policies in the Academic Catalog).

Collection of data for the evaluation of clinical performance is the shared responsibility of the student, clinical faculty, and clinical staff/preceptor (where appropriate). However, the ultimate authority for determining the final ratings remains with the clinical faculty.

Each student and his/her clinical faculty will meet to discuss progress at the interim clinical evaluation conference times as designated on the course schedule. At that time, recommendations and/or requirements will be given to aid the student in planning for additional assistance and remediation as needed. The department director should be notified for disagreements related to satisfactory clinical progress. Make-up work for clinical experiences is department guided.

#### **Clinical Advisement**

Clinical advisement is a temporary condition that results from an inadequate level of student performance. See Appendix C for the Clinical Advisement Note template. A student may be placed on clinical advisement if they do not satisfactorily meet the requirements of clinical assignments. Clinical advisement will remain in effect during the clinical in which it was initiated. Clinical advisement may result from

absence without notification, tardiness without proper notification, incomplete preparation, incomplete upload/submission, late upload/submission, incivility, failure to respond to faculty correspondence within 24 hours, or other instances of unprofessional behavior. The third instance of any of the above, or a group of 3 or more occurrences will result in clinical probation. A student who does not demonstrate that they are able to satisfactorily meet the requirements of clinical assignments may be dismissed.

A student is placed on probation for three or more occurrences of unprofessional conduct. A student may be placed on probation for unsafe clinical performance or unsafe clinical actions. In order to pass the course the student must adhere to clinical guidelines outlined in the clinical course syllabus.

#### **Clinical Probation**

Probation is a temporary condition or status of progression that results from an inadequate level of student performance. See appendix D for Clinical Probation Note template. A student may be placed on clinical probation if they do not satisfactorily meet the requirements of clinical assignments. Clinical probation will be lifted if at the next clinical opportunity, the student satisfies the requirements of the clinical assignment. A student who does not demonstrate that he/she is able to satisfactorily meet the requirements of clinical assignments may be dismissed.

A student is placed on probation for three or more occurrences of unprofessional conduct. A student may be placed on probation for unsafe clinical performance or unsafe clinical actions. In order to pass the course, the student must adhere to clinical guidelines outlined in the clinical course syllabus.

#### **Connecting Students with Resources**

Student Services is the central point of contact for a range of resources. Faculty and students should advise their department director of students that have non-academic barriers to success to explore options.

#### **Patient Occurrences**

Any time there is a patient occurrence involving a student, faculty and the student will log on to the Baptist Health System intranet and locate the "Occurrence Reporting" system. Faculty and the student will complete the form, and faculty will communicate the occurrence to the department director.

# **Faculty-Student Relationships**

Organizational values were discussed in the handbook introduction. Values particularly relevant in the context of faculty-student relationships include respect, trust, and accountability. We insist on an environment of respect. Our actions reflect the respect we hold for our students, our colleagues, our patients, and ourselves. We honor the trust placed in us by our students, the community, our patients, and colleagues. We hold ourselves and others accountable for our professional and personal actions.

#### **Professional Boundaries**

Faculty relationships with students involve professional boundaries. Students can expect faculty to:

- 1. Comply with provisions in the academic catalog, organization policies, and system policies.
- 2. Carefully plan course work that reflects the current state of specialty evidence and the scholarship of teaching.
- 3. Establish clear expectations.
- 4. Be available to answer questions within the timeframe specified in the syllabus.
- 5. Define and consistently apply grading practices.
- 6. Establish office hours and other mechanisms to communicate regularly.

- 7. Work to understand individual student backgrounds to identify academic and non-academic matters that impede success.
- 8. Be respectful in all communication formats by taking into account age, gender, and culture.
- 9. Ensure interactions with students do not cross, or appear to cross, professional boundaries.
- 10. Provide advisement that delineates a pathway to success.
- 11. Provide clinical oversight to ensure patient safety.
- 12. Keep academic and other student information confidential.
- 13. Avoid physical contact unless for a defined purpose (i.e. repositioning hand for more appropriate auscultation location).

#### **Communication During Duty and Non-Duty Hours**

Communication with students, especially online students, is key to student retention and success. Faculty are encouraged to manage expectations related to availability in the syllabus. As a general framework, resident faculty members are required to be able to be reached from the start of class or clinical through the end of each working day. Online faculty should anticipate responding to emails during virtual office hours including weekends. In most cases students will expect an answer to questions as soon as possible, but within 24 hours. In most cases, faculty will expect an answer to student emails within 24 hours throughout the week.

# **Promoting Academic Integrity in Students**

The Baptist Health System School of Health Professions expects all students to uphold high standards of honesty and professional conduct.

# **Testing Procedure**

Refer to the SHP-DPN-06 Testing Procedures Policy located in the Learning Management System.

# **Consequences of Academic Dishonesty**

Any form of academic dishonesty, whether in the classroom, clinical, or online environment, is a serious offense for which disciplinary penalties, up to and including assessment of an "F" in the course, dismissal from the program, permanent expulsion from the Baptist Health System School of Health Professions, and withdrawal of a degree previously awarded, may be imposed. For remote testing, students are expected to follow faculty instruction on such things as an environmental scan, use of reference material (generally prohibited), and location. Students are strongly discouraged from taking exams at their place of employment. Students found to have engaged in acts of academic dishonesty may also discover such misconduct negatively affects future scholastic, employment, and career opportunities, as well as their professional reputation. Academic dishonesty includes cheating, plagiarism, fabrication, or otherwise obtaining grades under false pretenses. Any work turned in for individual credit must be entirely the work of the student submitting the work.

# Cheating, Plagiarism, Fabrication

Cheating is defined as an individual or group act of dishonesty for the purpose of gaining an advantage. Examples of cheating include, but are not limited to:

- 1. Obtaining or providing unauthorized information during an exam, test, or assignment through verbal, visual, or unauthorized use of books, notes, texts, electronic devices, other student examinations, and other materials.
- 2. Colluding with one or more people to prepare and/or produce course work that is then presented as the student's own work or the work of another student.
- 3. Taking an exam or test for another student or arranging for another person to take an exam in one's

place.

4. Altering or changing test answers after submittal for grading, altering or changing grades after grades have been awarded, or altering or changing other academic records once they are official.

Fabrication is the presentation of invented or fictitious information. Fabrication includes, but is not limited to, submission of clinical patient information for which care was not rendered by the student and/or creation of fictitious citations or references in a bibliography.

Plagiarism is defined as any attempt to represent the language, ideas, thoughts, or work of another as one's own. Plagiarism includes copying and pasting information from another source and using this as one's own original work without properly citing the reference. The original source might be an internet source, a written work, or words spoken by another person. Plagiarism includes having someone else complete a written assignment for which the student takes credit, calling it his own work. It also includes closely paraphrasing someone else's work without giving credit. Any student assisting in the act of plagiarism by allowing his/her work to be submitted by another may be subject to disciplinary procedures. Using the intellectual property of someone else, without giving proper credit is considered a form of theft.

The Academic Catalog outlines the process of investigative procedures, administrative disposition of violations, and authorized disciplinary penalties imposed for incidents of academic dishonesty.

#### **Ethical Student Conduct in the Clinical Setting**

Faculty plan student clinical rotations to provide experiential learning opportunities that will best meet student learning needs. Students are expected to enter the clinical setting fully prepared to provide care for their assigned patients. All clinical procedures are to be performed safely, in accordance with standards and standardized procedures, and within the student's scope of practice.

#### **Unprofessional Conduct**

Unprofessional conduct in the patient care/clinical areas includes, but is not limited to:

- 1. Verbal or physical abuse of patients
- 2. Intentional performance of an act that will injure or cause undue distress to a patient;
- 3. Falsification or misrepresentation of any information recorded in the patient's hospital record
- 4. Falsification or misrepresentation of any information concerning the patient's health status reported to any of the nursing staff members, the attending physicians, the patient, or the patient's family
- 5. Violation of a patient's right to privacy or confidentiality as defined by the Health Information Portability and Accountability Act (HIPAA). Formal discussions of patient cases for learning purposes will be presented in clinical and classroom areas with considerations incorporated to protect the patient's rights
- 6. Taking any drug that has been prescribed and charged to a patient, for the student's own use or the use of others
- 7. Misuse of any equipment or property of the hospital or patient
- 8. Being in the clinical area while under the influence of alcohol or any drug including prescribed medication that will have detrimental effects on the student's behavior or ability to reason
- 9. Unsafe clinical practice as designated by each department's specific policies and procedures

Faculty is expected to report to the department director any violations to the code of conduct. The director will investigate such reports. The department director has the authority to dismiss a student according to policy. In the absence of the department director or in a contentious situation, the Dean and

President may take immediate interim disciplinary actions, including suspending the right of a student to be present on campus.

# **Appeal of Non-Academic Student Misconduct**

Students may appeal any findings or sanctions related to non-academic student misconduct as outlined in the Academic Catalog.

# **Dismissal from the Nursing Program**

- 1. If a student on academic probation fails to achieve satisfactory progress for the first probationary progress evaluation period, the student will be ineligible to continue in the program and will be dismissed.
- 2. Repeat Program Courses: A failed program course may be repeated only one time. Failure of the same program course for a second time will make the student ineligible to continue in the program. The student will be dismissed from the program.
- 3. Failure in any two program courses will make the student ineligible to continue in the program. The student will be dismissed from the program.
- 4. If the student enters the last 16-week semester with one prior failure and fails a course in the final semester, the student will be given one additional opportunity to retake the second failed program course.
- 5. Students who have been dismissed are not eligible for readmission to the program.

#### **Course Procedures**

Attendance, testing, and participation online and laboratory activities must be in accordance with the Baptist Health System School of Health Professions Academic Catalog and the Department of Professional Nursing Curriculum Policies and Procedures. Attendance will be obtained via log in to Moodle, online activity participation, and on campus lecture or lecture activities.

- 1. Absences totaling more than 20% of the total clock hours in a course may result in termination from the course. All absences will be recorded.
- 2. The student is expected to be prepared for and actively participate in the class and laboratory sessions.
- 3. The student will be responsible for all notices and any additional assignments posted on the course Moodle site and communicated via student email.

# **Laboratory Skills**

To complete a course with laboratory skill components successfully, the student must demonstrate satisfactory competency in selected skills in the laboratory setting. Failure to demonstrate competency in the required skills will result in failure of the course.

# **Learning Laboratory Practice Guidelines**

1. **Purpose:** To define appropriate actions in the learning lab area for students to learn required skills

#### 2. Definition

Invasive skill – Any diagnostic or therapeutic technique that requires entry of a body cavity or interruption of normal body functions.

#### 3. Policy

- A. Practice models will be provided for the practice of invasive skills. Student practice of invasive skills on another student is <u>not</u> allowed.
- B. Students are expected to practice physical assessment skills on each other during supervised laboratory practice. Students being assessed by classmates will remain fully clothed. Any student

- may decline to be examined.
- C. Students should adhere to appropriate clinical dress code while in the lab.
- D. Students should bring appropriate equipment when attending activities in the lab. Examples include a watch with a secondhand or timer function, stethoscope, penlight, bandage scissors, and pen.
- E. Belongings brought to the lab must be limited due to lack of storage space in the lab. Aisles must remain clear and uncluttered for safety.
- F. No food is to be brought into the lab. Beverages in covered containers can be brought to the lab but must be kept on a central table and not at the bedside.
- G. Faculty overseeing activities in the lab are to return the lab to an acceptable state at the end of the session.

#### **Clinical Procedures**

To receive a course grade of "Pass," the student must consistently meet all of the clinical objectives during the final evaluation period. The student will receive written feedback on their clinical performance at the course's scheduled evaluation periods. In addition, the student must meet all course requirements as identified in the course syllabus and related course guidelines.

The course grade will be derived from the final ratings obtained at the end of the summative evaluation period. A passing status in clinical performance is required for promotion to the next semester.

#### **Additional Requirements:**

- 1. In courses requiring a dosage and calculation examination, the student must achieve a minimum math proficiency grade of 90% on the course dosage and calculation examination to continue in the course. One retake will be permitted. Students scoring below 90% on the first attempt are required to contact the course coordinator within 48 hours to arrange remediation, attend scheduled remediation, and retake the exam on the designated date. The second unsuccessful attempt will result in withdrawal from the course.
- 2. The student must satisfactorily complete all laboratory and clinical assignments by the times designated to pass the course.
- 3. The student must consistently demonstrate safe and professional behaviors as defined in the Baptist Health System School of Health Professions Academic Catalog and Department of Professional Nursing Curriculum Policies and Procedures to continue in the course. The student may be dismissed for unprofessional and/or unsafe clinical practice at any time during the course.
- 4. The student is expected to maintain current CPR certification and must arrange for recertification prior to the designated expiration date to be considered in good standing. Failure to do so will result in the student being barred from course activities until the task is accomplished.
- 5. The student is expected to use the Medication Time Out Sheet for all medication administration.
- 6. The student is responsible for completing the BSHP Stop Sign at the start of each clinical shift.

# **Nursing Student Medication Administration**

Students in Foundations and Commons, will only administer medication with their Faculty. Medications may not be administered without the Faculty unless the Faculty has approved the medication administration and the Baptist Health System Medication Administration Policy is followed.

# **Baptist Health System Student Medication Administration Policy**

1. **Purpose:** This policy will define the process for the safe and accurate administration of patient medication by nursing students.

- 2. **Definition(s):** When used in this Policy, these terms have the following meaning:
  - A. Nursing Student: An individual who is enrolled in an undergraduate nursing course at the Baptist School of Health Professions (SHP) or in a nursing program with a current affiliation agreement with BHS. The nursing student is assigned to a BHS unit to participate in direct patient care during a scheduled clinical rotation.
  - B. Affiliate School: For the purpose of this policy, an "affiliate school" is an accredited college or university which has a current affiliation agreement with BHS.
  - C. Preceptor: A BHS Registered Nurse who has been designated to oversee the clinical experience of a senior level nursing student. The Preceptor directly supervises the student throughout the entire shift. Faculty is available to the nursing student and preceptor as needed.
  - D. Faculty: A Registered Nurse employed by a nursing program and responsible for supervising the student learning experience.
- 3. **Policy:** Nursing students are permitted to administer scheduled medications under the supervision of Faculty, the BHS Preceptor, or the nurse caring for the patient.
  - A. Faculty Preparation
    - 1) Faculty will contact the Director/Nurse Manager to discuss clinical objectives and expectations for student medication administration. Access to Omnicell will only be granted to BHS SHP licensed nursing faculty. Nursing students will not receive access to Omnicell.
    - 2) Omnicell Access for Baptist SHP Faculty:
    - 3) A Tenet eID will be requested for SHP Nursing Faculty and approved by the SHP Director of Nursing. Pharmacy will be notified through the eID system and will enter security privileges.
    - 4) The Pharmacy will be notified through the eID system when SHP faculty terminates, transfers, or security privileges need to be changed. Pharmacy will immediately revoke or change user privileges.
    - 5) Faculty from Non-BHS Affiliated Schools will not be granted Omnicell access. Medication administration must be coordinated with the nurse assigned to the patient.
  - B. Student Requirements: Nursing students may only perform medication administration if the following criteria are met:
    - Student has successfully demonstrated competency (calculating medication dosages and medication administration) in a lab/classroom setting prior to administering patient medications in the clinical setting. Students will carry a Clinical Passport documenting competency.
    - 2) Student has been assigned to care for the patient.
    - 3) Student is directly supervised by faculty, approved preceptor, or the primary nurse assigned to the patient.
    - 4) Student and faculty has received a verbal hand-off medication report from the patient's assigned nurse.
    - 5) Student is prepared to demonstrate knowledge regarding the patient's present and past medication history, age and weight considerations, reason for admission, medication indications, side effects, drug interactions, compatibility, dose limits, and expected outcomes prior to administration.
  - C. Procedure for Student Medication Administration: The student and faculty will communicate and receive approval from the nurse assigned to the patient before any patient medications are given.
    - 1) Faculty (or BHS Nurse/Preceptor) will remove confirmed medications from the Omnicell. If any medications are not verified by pharmacy, a warning will be displayed on the patient's electronic medication administration record with a pestle icon. Faculty/student are not to administer and the assigned nurse will be informed.

- 2) Faculty (or BHS Nurse/Preceptor) in conjunction with the student will:
  - a. Verify the correct patient identification by comparing the two hospital approved identifiers (patient name and account number) on the patient's identification band with the eMAR and the medication is confirmed.
  - b. Scan the patient's armband.
  - c. Scan the medication barcode.
  - d. Verify the following using the medication packaging and eMAR:
    - i. right medication
    - ii. right indication
    - iii. right dose to ensure the dosage matches the prescribed dose and that the prescribed dose does not reflect an unsafe dosage level
    - iv. right route
    - v. right time adherence to prescribed time and frequency stability of medication
    - vi. contraindications
    - vii. patient allergy information
  - e. Scan the patient's armband. If the patient's armband or medication barcode does not properly scan, the faculty and student will not be allowed to participate in the administration of the medication. Faculty will immediately notify the nurse assigned to the patient, who will be responsible for administering the medication.
  - f. Students will administer patient medication under the supervision of Faculty (or BHS Nurse/Preceptor).
  - g. Nursing students from the Baptist SHP will chart medications directly on the patient's electronic health record using their student issued access code. Faculty/BHS Nurses who supervise non-SHP students with administering medications will document the name of the nursing student in the comment section for each medication given.
  - h. Any error in the medication pass will immediately brought to the attention of the nurse assigned to the patient.
  - i. Students will assess the patient's response to the medication at appropriate intervals and communicate findings to the nurse assigned to the patient.
  - j. The student will provide a thorough hand-off report to the nurse assigned to the patient.

#### 4. Limitations and Timing

- A. Students May Not:
  - 1) Administer oral or IV chemotherapy medications or investigational drugs
  - 2) Administer IV Phenergan
  - 3) Initiate, titrate, or push IV vaso-active medications
  - 4) Initiate or perform any care related to the epidural catheter
  - 5) Push IV heparin
  - 6) Access implanted ports for the purpose of drawing blood or administering medications
  - 7) Administer or co-sign for blood/blood products
  - 8) Administer IV narcotics
  - 9) Titrate drips
  - 10) Initiate PCA therapy
  - 11) Add medication to an IV fluid
  - 12) Leave medications at the bedside
- B. Students Are Not To:
  - 1) Verify/enter written physician orders
  - 2) Receive/enter telephone/verbal orders
  - 3) Receive critical lab values

- 4) Perform narcotic counts
- 5) Witness the wasting of a controlled substance

This list is not all-inclusive. Additional school or unit-specific limitations may apply.

#### C. High Alert Medications

High alert medications require a double check and 2 licensed signatures prior to administration following the BHS High Alert Medications policy (MEDMGT-08). The student may participate in this process only with the Faculty or Preceptor in attendance in addition to the licensed staff member who is to administer the medication. The staff member will have the medication name, concentration, dose, amount, route of administration, and pump settings (if applicable) ready before asking the student (and Faculty/Preceptor) to perform the independent double check of the medication against the physician's order or eMAR. Both the staff nurse and Faculty/Preceptor will document the double check in the medical record. The student nurse's name will be added in the comments.

#### D. IV Push Medications

Intravenous push medications not excluded under IV. Limitations and Timing, section A. of this policy will be administered under the direct supervision of the Faculty or BHS nurse assigned to the patient, and only after the Faculty has received pre-approval for the student to administer.

#### E. Timing of Medication Administration

Students will follow the BHS Medication Administration and Monitoring policy (MEDMGT-22) to ensure medication administration times are followed.

#### References

Nursing Practice Act, Nursing Peer Review and Nurse Licensure Compact, Texas Occupations Code and Statutes Regulating the Practice of Nursing as Amended September 2017,

http://www.bon.texas.gov/laws\_and\_rules\_nursing\_practice\_act.asp

The Joint Commission. (2018). National patient safety goals.

http://www.jointcommission.org/standards\_information/npsgs.aspx

#### Student Name Badge Color Coding Policy Professional Nursing Students

**Purpose**: To designate a student's level within the curriculum as a communication method to clinical staff regarding the student's competencies and expected performance in the clinical unit.

#### **Policy**

- 1. Students will attach a color-coded hanger to their name badges at the start of each designated course. The course coordinators for the designated courses will distribute the appropriate badge hangers and collect and discard the used ones.
- 2. Students in semester one first and second terms will use a **red** badge hanger to signify they are in the beginning level of the nursing program.
- 3. Students in semester two first and second terms and semester three first and second terms will use a **vellow** badge hanger to signify they are in the intermediate level of the nursing program.
- 4. Students in semester four first and second terms will use a **green** badge hanger to signify they are in the advanced level of the nursing program.
- 5. Staff within the clinical units can use the color coding to identify the student's placement within the curriculum and expected performance of the student on the clinical unit.

#### **End of Course Evaluation**

Upon the completion of each course, students are provided the opportunity to evaluate the course and assigned clinical sites. These evaluations are electronic and completed online during the final week of the course. Evaluations are anonymous and confidential. Results are submitted to the department director, who reviews summaries with the appropriate faculty member(s). The information gathered from this process will be used to improve the quality of the course and provide insight for faculty growth.

#### **Attendance Policy**

In order to achieve the objectives of the curriculum and demonstrate student success, the Baptist Health System School of Health Professions monitors and records student attendance as described in the course syllabi. Student attendance in online courses is defined as active course participation as outlined in the course syllabi and is demonstrated by weekly activities that include, but are not limited to, the submission of an assignment, discussion posting or reply, and/or participation in computer-assisted instruction. A login and/or course review is not considered participation. Absences totaling more than 20% of the total clock hours may result in withdrawal from the course. Absences totaling 10 consecutive school days will result in withdrawal from the course.

Methods of participation include, but are not limited to, the following examples:

- 1. Student submission of an academic assignment
- 2. Student submission of an examination
- 3. Documented student participation in an interactive tutorial or computer-assisted instruction
- 4. A posting by the student showing the student's participation in an online study group that is assigned by the institution
- 5. A posting by the student in a discussion forum showing the student's participation in an online discussion about academic matters
- 6. An email from the student or other documentation showing that the student initiated contact with a faculty member to ask a question about the academic subject studied in the course

#### **Clinical Attendance**

Each hour of the clinical experience is considered critical to the student's attainment of the clinical course objectives. Achievement of each course's objectives determines the student's subsequent progression and/or graduation. Absences interfere with the student's ability to meet the course objectives.

The student is expected to arrive prior to the designated start time of the clinical experience and is expected to remain actively engaged in the experience until the scheduled end of the day. Arriving late, leaving early, or missing the entire experience will be counted as absence from clinical.

Students are expected to be on time to clinical. Students who arrive later than the start time of the clinical day will be allowed to participate with limited clinical experience that day. Students are expected to notify the clinical instructor if the student will be tardy or absent as soon as possible. (Advisement on the second tardy. Probation on the third tardy and will attend clinical make up on week 8).

Attendance during clinical day: Students are to remain at the clinical site for the duration of the assigned clinical day. Clinical hours are posted on the clinical schedule. Leaving the hospital during a break is not acceptable. Breaks cannot be combined for an extended break or an extended meal break and cannot be used to leave clinical early.

Certain clinical facilities (example, behavioral health hospitals) require that the faculty member and

students all enter the facility at the same time. Students arriving later than the designated start time will not be allowed to participate that clinical day.

Clinical absence will require a make-up day. Make-up clinical does not erase the absence. Planned clinical make-up includes the information below: Clinical Make-up days are assigned on week 8 for any missed in person hours and/or for tardy (more than two days). Students cannot miss more than 2 days of clinical. Absences > 16 hours can result in a probation status or failure of the course. Refer Academic catalog.

Incomplete: A grade designation of "In Progress" (indicated using a symbol of "IP") is applied in limited circumstances. An instructor may recommend an "IP" when there are limited numbers of evaluation criteria that cannot be met in the regular timeframe scheduled for course completion. In negotiating the time extension for work due the student must sign the IP contract, stating the following:

- 1. the reason the student was unable to complete required course work,
- 2. a description of the work remaining to be completed, and
- 3. an exact date the work will be submitted for final grading. The date for submission of the work must not extend beyond 30 calendar days from the last scheduled meeting day of the course.

Failure of the student to submit promised work on the date indicated in his/her petition will result in a change from a status of incomplete in the course to grade-to-date for the course. Even though the student may have registered for subsequent course work in the program and be attending classes, unsatisfactory resolution of the incomplete grade status from a previous course will result in withdrawal from the current course(s).

# **Department of Nursing Committees**

Students are encouraged to provide input to the nursing program curriculum. The Curriculum Committee wants your feedback on all matters related to the curriculum. One Student Nurse Association student member will be invited to all Curriculum Committee meetings. One Student Nurse Association student member will be invited to all Clinical Progression Committee meetings. If the assigned Student Nurse Association student member is unable to attend, an alternate member will be invited. Additionally, please email any questions, input, concerns, or ideas to the Director of Nursing. Please put Curriculum in the Subject line of the email. The Director of Nursing will bring your input to the Curriculum Committee meetings.

#### **Student Government Association/Student Committees**

The Student Government Association (SGA) is a student driven committee. Other student ad hoc committees/working groups may be formed for a limited time to address specific issues. Students will seek help from/report concerns to leadership as needed.

# **Student Health Program**

Certain symptoms/medical conditions limit when students should be in class/clinical. Medical documentation for clearance to return to work/school may be required. When in doubt, faculty should contact the school nurse.

# General Guidelines for Not Reporting to Class/Clinical

- Fever higher than 101.5° F (38° C)
- Vomiting

- Diarrhea
- Rashes with or without fever
- Uncontrollable coughing
- Any type of draining lesions, wounds, or weeping dermatitis
- Conjunctivitis (pink eye)
- Upper respiratory infection with fever
- Persistent sore throat lasting longer than three days with or without fever
- Any condition that affects the ability to wash his/her hands
- Any condition that affects the ability to perform the physical demands of the job description
- Known infectious disease, such as chickenpox, hepatitis A, influenza, tuberculosis, measles, mumps, rubella, etc.
- Special circumstances: At the time of this revision, BSHP practices are aligned with system guidance related to COVID-19 screening. During future pandemics and/or other unique public health emergencies, students/faculty will be provided specific guidance.

#### **Faculty Responsibilities and Student Illness**

When on-site and health issues occur, consult the student health nurse. When off-site at clinical or when the student health nurse is not present:

- 1. Send the student to a hospital emergency room or his/her own physician for illnesses that require a physician evaluation. Students will be responsible for payment of any charges for an emergency room visit or physician evaluation.
- 2. Some injuries such as sharps/needle sticks or other infectious disease exposures require immediate attention. Follow organizational policy. Some injuries can be followed when the student health nurse returns.
- 3. Notify the department director if the illness is of a serious nature.

# Student Accident and Injuries at Baptist Health System Facility

Complete the Non-Employee Accident/Injury Form. Notify the student health nurse and send the student to either the student's personal physician or a hospital emergency room.

# Student Accident and Injuries at Non-Baptist Health System Facility

If a student accident/injury occurs in a non-Baptist Health System facility, follow organizational processes and complete the paperwork required by the guest facility. Although the Baptist Health System does not require the Non-Employee Accident/Injury form unless treatment occurs at one of the Baptist Health System hospitals, completion of the form is recommended.

#### **Dress Code**

Good grooming and clean, appropriate attire are part of the image of the healthcare professional. Baptist Health System School of Health Professions students are representatives of various health care professions; therefore, the appearance of our students reflects upon individuals, our school, and students' future professions. Any attire considered contrary to good hygiene, distracting or disruptive in appearance, or detrimental to the educational environment or the public image of the school will not be permitted. All clothing/uniforms should be neat, clean, and professional looking and not compromise student, staff, or patient safety. Online Students.

#### **Classroom Dress Code**

Classroom Resident students will wear solid navy blue scrubs attire with the appropriate program patch

on the upper left sleeve when attending class and clinical laboratory on campus. Program directors will provide guidance related to the wearing of school- and BHS-sponsored T-shirts in place of the scrub top during class. Hair may be worn down during classroom time but must be restrained as required in clinical areas. Flip-flops are not allowed.

#### **Clinical Dress Code**

Clinical/Laboratory Areas Students must wear the solid blue navy scrub uniform with the appropriate program patch on the upper left sleeve at all times. A white or navy T-shirt, either long- or short-sleeved, may be worn under the scrub uniform. A navy scrub jacket with the appropriate program patch may be worn over scrubs. Scrub pants must be clear of the floor.

#### **Shoes and Footwear**

Shoes must be solid black or white with closed-in heel and toe. Athletic shoes in a solid black or white are permitted. Crocs are not allowed.

# **Photo Identification Badge**

All resident students are provided with a photo identification badge at the beginning of their program. The school badge is required to be worn at all times when on campus or in hospital areas, including during all class, laboratory, and clinical hours. The badge is to be worn at collar level where it is clearly visible. Alternately, students may utilize a lanyard to display the badge. No added decorations on the badge are permitted. Should a badge be misplaced or lost, it must be replaced within one week. The cost of replacement is the responsibility of the student. Badges may be purchased in the Student Services Department. Students who are not routinely called by their legal first name and who prefer to use a legal middle name on the photo identification badge may request this at New Student Processing. Only the legal first or middle name may be used. No contractions or nicknames are allowed.

# **Jewelry**

The only jewelry allowed when in patient care areas is listed below:

- Visible pierced body jewelry limited to two small earrings in each earlobe.
- Rings, one to each hand, not dangling or high domed, are permitted. Engagement and wedding rings count as one.
- One necklace is permitted if worn under the uniform without creating a safety problem.
- One watch may be worn. It must have a second hand.
- Bracelets are prohibited

# **Appearance and Grooming**

- Hairstyles Keep in mind that in a hospital setting infections are a prime concern; hair should be kept clean and neat, not falling over the face. Hair should not exceed collar length. Hair longer than collar length must be pulled away from the face and secured in the back. Hair accessories must be in moderation as befitting a healthcare professional image.
- Mustaches should be kept trimmed and within reason. Beards are acceptable if they are kept short, neat, clean, and well-trimmed. Facial hair cannot interfere with fit-tested respirators.
- Make-up should be light and in good taste to promote a professional image. Any cologne or perfume should be very mild.
- Chewing gum is prohibited in the clinical areas.
- Fingernails should be neatly manicured and of reasonable length, up to 1/4" beyond fingertip. The wearing of artificial fingernails/nail enhancements is not allowed.

- No facial or body piercing, tongue, chin, eyebrow, etc. is permitted. One stud is permitted in the nose. Spacers may be worn in other areas that are clear or matching skin tone. Gauges that are larger than 1/4 inch in diameter must have a clear or skin toned spacer.
- Tattoos may be visible provided they are not extreme, indecent, vulgar, hate-charged, gang-affiliated, sexist, racist, or excessive. If there is doubt, program directors will serve as the final authority as to whether the tattoo(s) should be covered.

# **Dress Code – Cooperating Agencies**

In addition to clinical experiences in the Baptist Health System facilities, students may spend clinical time at outside agencies and various field trip placements. Students must follow the guidelines for attire that have been specified by the agency.

# **Email Policy**

Email accounts are provided to students by the Baptist Health System School of Health Professions. Management of these accounts is in accord with the Tenet email policy. A copy of the addendum to the Tenet policy is distributed to students in the admissions packet to be signed prior to the first class day. A Baptist Health System School of Health Professions email account shall be the official means of communication with all students. Students are responsible for the information received and are required to monitor their email accounts on a daily basis. Any communications utilizing the Baptist Health System School of Health Professions student email system must conform to the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Standards adopted by Baptist Health System and the Family Educational Rights and Privacy Act (FERPA).

#### **Student Cellular or Wireless Communication Devices**

When used responsibly, technology is an essential part of today's learning environment. When used inappropriately, technology may degrade the learning environment. This policy covers the use of when and how wireless communication devices may be used by students when on the school's campus or in any clinical settings. Communication devices include, but are not limited to, cell phones, smart watches, media players, tablets, and laptop computers. Any breach of HIPAA regulations may result in the student's termination from school.

#### **Use of Wireless Communication Devices in Classroom and Clinical Settings**

Students may carry cell phones or other wireless communication devices while on campus according to the following guidelines:

Class/laboratory: All cell phones or other wireless communication devices will be placed in "silent" or "vibrate" mode upon entering the classroom/laboratory to prevent disruption of faculty and fellow students. Texting will be regulated by the instructor per the course syllabus. Calls are to be restricted to emergencies only. If an emergency call must be taken during a class/laboratory period, the student is expected to leave the room quietly to take the call.

**Examination/quiz periods:** To maintain academic integrity during these periods, the course syllabus will warrant the use of electronic devices. Students in violation of this requirement could be subject to sanctions under the academic integrity and/or professional conduct guidelines and policies.

<u>Clinical settings</u>: All cell phones or other wireless communication devices will be placed in the "silent" mode upon entering the clinical area to prevent disruption of care for patients. Students may text faculty, only, if requested by the faculty member. Cell phone use is prohibited in all patient care areas unless approved by faculty.

<u>Camera features:</u> To maintain academic integrity and privacy of patients, camera features may not be used in the classroom or in any clinical setting.

**Bluetooth devices:** must be removed before entering all classroom and clinical settings.

The activation of mobile device hotspots while connected to the school wireless network is prohibited.

#### **Use of Laptop/Tablet Computers**

It is recognized that use of laptop/tablet computers assists and supports student learning. Laptop/tablet computers may be used in the classroom setting within the following guidelines: Class lecture/presentation — Use of the laptop/tablet to take notes or access faculty notes or handouts is permitted. Any non-classroom-related use is strictly prohibited. Students observed to be accessing nonacademic-related websites will be asked to turn their computers off.

On-campus examination/quiz periods – Laptop/tablet computers will be turned off and placed at the front of the room unless approved by faculty and used for testing purposes. Students in violation of this requirement could be subject to sanctions under the academic integrity and/or professional conduct guidelines and policies.

Clinical settings – Laptop/tablet computers are not permitted in the clinical setting unless approved by the clinical instructor.

Emerging Technology - Any new devices not addressed in this section must be approved by faculty prior to use in classroom/laboratory/ clinical settings.

#### **Social Media**

The emerging availability of social networks represents a powerful new tool for communications, marketing, work collaboration, and customer interaction. Baptist Health System is built around innovation in the delivery of health and health care. As an innovator, open exchange among each other, with our patients, and between our physicians, staff, and students can catalyze and inspire change and motivate invention. At the same time, it is important we all share an understanding of the basic "rules of the road" for their use, the manners and mores of social media sites, and some special considerations based on our role as health care providers (See Academic Catalog).

# **Bruce A. Garrett Medical Library**

The print collection in the Bruce A. Garrett Medical Library maintains information that complements the programs of the School of Health Professions. In addition to books, the collection is rich in online journals that provide full-text articles through various databases providing articles and full text e-books. Materials may also be placed on reserve for a faculty member, which means it can only be used/read by students in the library. If an item cannot be found in our library, contact the library assistant to request this item through interlibrary loan. To keep the most recent information available, the librarian seeks faculty input and suggestions for collection development.

CD-ROMs, DVDs, and videos are housed in the multimedia area and can be checked out for classroom viewing. TV/VCR carts are available to faculty check-out. The library provides the faculty a four-station computer resource room, including a scanner that supports more technically advanced software applications than can be found on desktop computers. All print jobs come to the printer located in the workroom across the hall. In addition to print jobs, this printer may be used as a copier for faculty.

Faculty may also schedule information literacy sessions for classes through the librarian. Sessions can be done either in the library computer laboratory or the distance learning classrooms. The library is a perfect place for students, faculty, and staff to come to study; and three separate study rooms are available on a first-come first-serve basis. Faculty may donate reading material, such as student-focused journals, newsletters, and newspapers, for leisure reading.

# **Copyright Guidelines**

Faculty and students will adhere to the school's copyright guidelines. Internet and changing laws require faculty to consider copyright rules when including video, software, digital materials, music, and webbased materials in courses. Baptist Health System School of Health Professions disapproves all unauthorized use or duplication in any form of any prohibited copyrighted materials. The librarian may be contacted if further clarification is needed.

# **Appendix A Theory Course Advisement**

# **Department of Nursing Theory Course Advisement Note**

Student Name:	Date:
Course:	
Identification of issue:	Date(s) of Occurrence(s)
Absence on Exam Day (without proper notification	on)
Tardy on Exam Day (without proper notification)	
Evam Grade Less than 76%	
Incivility	
Other:	
	-
Student's Plan for Success and Comments:	
Student signature:	Date:
Instructor signature:	Date:

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Routing Instructions: One student copy and one Department Director copy for student file 12/8/2022pfp

# **Appendix B Theory Course Probation Note**

# **Department of Nursing Theory Course Probation Note**

Student Name:	Date:
Course:	Current Grade
Time and requirements remaining in course:	
Probation is a temporary condition or status of progression performance. Unsatisfactory performance means the stude "F," "WF"). A student failing any course at a progress even who achieves satisfactory progress at the next progress even progress for the program may be continued on academic p	ent has earned one or more failing course grades ("D," aluation period will be placed on probation. A student aluation point but is not making overall satisfactory
Any student placed on academic probation is required to a student who is on probation but is making satisfactory pro removed from probation.	
	ne. Failure of the same program course for a second time gram. The student will be dismissed immediately from the ble for the grievance process.
• Failure ("D," "F," "WF") in any two program courses	will make the student ineligible to continue in the
student will be given one additional opportunity to ret	ram.  The prior failure and fails a course in the final semester, the take the second failed program course. If the student is seed. Dismissal for two course failures in the last semester
Suggestions for improvement:	
• Review ATI Skills Inventory Assessment or VARK re	esults
Apply individual learning styles	
<ul><li> Use ATI tools and practice exams</li><li> Read all the assigned material before class</li></ul>	
<ul> <li>Read all the assigned material before class</li> <li>Use course resources</li> </ul>	
<ul> <li>Ask instructor questions related to course content</li> </ul>	
Instructor Comments:	
Student's Plan for Success and Comments:	
Student signature:	
Instructor signature:	Date:

# Appendix C Clinical Advisement Note

# **Department of Nursing Clinical Course Advisement Note**

Student Name:	Date:
Course:	
Identification of issue:	Date(s) of Occurrence(s)
Absence (without proper notification)	
Tardy (without proper notification)	
Incomplete Preparation	
Incomplete Upload/Submission	
Late Upload/Submission	
Incivility	
Failure to respond to faculty (correspondence required v	within 24 hours)
Other:	
remain in effect until the next evaluation point.  Instructor Comments:	
Student's Plan for Success and Comments:	
Student signature:	Date:
Instructor signature:	Date:

 $Routing\ Instructions:\ One\ student\ copy\ and\ one\ Department\ Director\ copy\ for\ student\ file\ 12/8/2022pfp$ 

# **Appendix D Clinical Probation Note**

# **Department of Nursing Clinical Course Probation Note**

Student Name:	Date:	
Course:		
performance. A student may be placed o requirements of clinical assignments. Clithe student satisfies the requirements of the/she is able to satisfactorily meet the requirements.	atus of progression that results from an inadequate level of student in clinical probation if he/she does not satisfactorily meet the inical probation will be lifted if at the next clinical opportunity the clinical assignment. A student who does not demonstrate that equirements of clinical assignments may be dismissed. A student able to satisfactorily meet the clinical requirements may be	
Advisement). A student may also be place	e or more occurrences of unprofessional conduct (see attached ced on probation for unsafe clinical performance or unsafe see the student must adhere to clinical guidelines outlined in the	
Instructor Comments:		
	ts:	
Student signature:	Date:	
Instructor signature:	Date:	
Continued Probation (date)	Student notified (date)	
End Probation (date)	late) Student notified (date)	
Routing Instructions: One Student copy and one Depa	rtment Director copy Revised 12/8/2022pfp	