



COLLEGE OF ARTS AND SCIENCES
LAMAR UNIVERSITY
JoAnne Gay Dishman School of Nursing

Baccalaureate Nursing Student Handbook

Fall 2024

Revised: August 2024

JoAnne Gay Dishman School of Nursing Policies are implemented in a non-discriminatory manner.

The Baccalaureate Nursing Student Handbook is updated each Fall and Spring semester.

Dear Student and Future Colleague:

On behalf of the JoAnne Gay Dishman School of Nursing faculty and staff at Lamar University, we welcome you to our baccalaureate nursing program. We are pleased that you have selected Lamar University to prepare you for a rewarding career in professional nursing. We are committed to providing you with exciting, challenging, and rewarding learning experiences.

The primary purpose of this handbook is to (1) provide you with information about nursing student policies and (2) to answer the many questions which have been posed by students in the past. The preparation of this handbook has been a combined endeavor of the students and faculty. We hope that it will be helpful to you and that you will contribute your ideas for future publications.

For a school to be truly great it must have a great student body and faculty, which requires a high standard of excellence. Ambitious and intelligent students, such as yourself, maintain the outstanding status Lamar University Nursing Programs have achieved. Our students continue to positively impact the nursing profession and those needing nursing care in Texas and across the United States.

Our personal best wishes for success in your chosen profession.

Sincerely,

Joseph W. Tacy, PhD, RN, CNE
Director, Dishman School of Nursing

Gina Hale, PhD, RN, CNE
Associate Director, Undergraduate Nursing Studies and Retention Coordinator

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INTRODUCTION

The Baccalaureate Nursing Student Handbook has been prepared by the JoAnne Gay Dishman School of Nursing for use by students enrolled in the School of Nursing's traditional undergraduate Bachelor of Science (BSN) nursing program. The objective of the UNS Handbook is to readily provide information frequently needed by students about the JoAnne Gay Dishman School of Nursing. This Student Handbook is not designed to be used in place of, but rather in conjunction with the current Lamar University Comprehensive Catalog and Lamar University Student Handbook.

DISCLAIMER

The guidelines and policies presented in this Handbook do not constitute a contract, expressed or implied, between any applicant, student, and faculty member at Lamar University. Lamar University reserves the right to withdraw courses at any time, change fees, calendars, curricula, graduation procedures and/or any other requirement affecting students. Changes become effective when the proper authorities so determine the application to both prospective students and to the students already enrolled.

Lamar University is an equal opportunity, affirmative action educational institution and employer. Lamar University will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, disability, national origin, veteran status, sexual orientation or gender identity, consistent with the Assurance of Compliance with the Title VII of the Civil Rights Act of 1964; Executive Order 11246 as issued and amended; Title IX of the Education Amendments of 1972, as amended; Section 504 of the Rehabilitation Act of 1973.

Lamar University Nursing Programs, baccalaureate and master's degrees, are fully accredited by the Texas Board of Nursing (TBON), (512) 305-7400, and the Accreditation Commission for Education in Nursing (ACEN), 3343 Peachtree Road NE, Suite 1400 Atlanta, GA 30326, (404) 975-5000, fax (404) 975-5020.

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Lamar University JoAnne Gay Dishman School of Nursing

Motto

A Spirit of Caring – A Vision of Excellence

Vision of the Nursing Programs

Excellence in nursing education, in partnership with the community

Mission of the Nursing Programs

The mission of the Lamar University JoAnne Gay Dishman School of Nursing is to educate undergraduate and graduate students to become qualified, competent, professional nurses who are prepared for practice. The School of Nursing provides quality nursing education relevant to a changing profession, society, and healthcare environment. Collaboration between faculty and students promotes excellence in health care delivery to diverse populations. A spirit of caring, continual inquiry, creativity and integrity is promoted through teaching, scholarship, leadership and service.

JOANNE GAY DISHMAN SCHOOL OF NURSING PHILOSOPHY

The JoAnne Gay Dishman School of Nursing faculty believes in preparing students to provide, safe, ethical patient/client-centered holistic/multi-dimensional care using evidence-based practice (EBP), and systems-based practices, clinical reasoning, and clinical judgment. The focus is also on providing quality and culturally sensitive care, working as part of the interprofessional and intraprofessional healthcare team, and using clinical informatic technology to care for diverse populations in an ever-changing global society. Personal, social, and professional strengths of the graduates are developed to form a basis for continued growth.

Undergraduate Metaparadigm

Faculty beliefs about the metaparadigm of nursing associated with undergraduate education are described below and entail:

Nursing

Nursing is based on the concepts of moral agency, responsibility, accountability, reflection, self-analysis, self-care, lifelong learning, effective communication, inquiry, and service to the community. The goals of nursing are to provide safe, compassionate, holistic, multi-dimensional, and culturally sensitive patient/client centered care in collaboration with the intraprofessional and interprofessional team. Nurses utilize theory-based teaching and learning strategies to educate diverse populations on disease prevention, health promotion, health maintenance/and restoration, and support death with dignity. Nursing emphasizes a spirit of caring including the analysis of social determinants of health to address health disparities and the promotion of equity and inclusion to contribute to the health of the individual, humanity, and society. The responsibility of the nurse is to use the nursing process, evidence-based practice, and informatics to support clinical reasoning and clinical judgment to assist people to meet health care needs and attain health related goals within a legal, ethical, and regulatory framework. Nurses use informatics to communicate, manage knowledge, and support decision making to provide competent patient/client-centered care. As members of the profession, nurses collaborate with the interprofessional team to deliver systems-based care and in achieve these goals. The faculty believe in preparing professional nurses with essential competencies in four major roles: Member of the Profession (MOP), Provider of Patient Centered Care (PCC), Patient Safety Advocate (PSA), and Member of the Healthcare Team (MOT).

Health

Health is a dynamic state of physical, mental, and social well-being, requiring constant adaptation to internal and external environmental stressors. Each person experiences varying states of health while progressing through the life span. Health decisions are patient/client-centered and influenced by knowledge, culture, family structure, society, and the personal choices of the patient/client.

Humanity

Humanity consists of unique, multidimensional holistic beings with intrinsic worth and dignity having the right to self-determination, well-being, and equality. Humans are adaptive in nature, constantly interacting within changing environments and society in progressing toward fulfillment of innate potentials for growth, development, and maturation throughout the life span.

Society

Society consists of individuals, families, communities, and populations with diverse cultures and value systems. In a global society, interactions among humans are diverse, continuously evolving, and interdependent. Within society, the cornerstone of humanness is a spirit of caring and commitment to others.

Environment

Environment is an aggregate of all internal and external factors which influence individuals and groups. The environment provides the context for the development of individuals, the identification of health needs, and the evolution of nursing. Through an on-going interactive process, the environment and nursing influence each other. The patient/client environment influences health, growth, trust, and the development of relationships.

Caring

Caring is engagement with the patient/client in an accepting, inclusive, non-judgmental, therapeutic manner. The ability to provide holistic care depends on self-reflection and examination of one's own biases and existing beliefs. Self-care is giving the same compassionate care to ourselves that we give to others and has a profound effect on health and well-being.

Undergraduate Education

Undergraduate Education is a process shared by the faculty and the learner. Learning is the exploration, utilization, and generation of knowledge. Learning is the responsibility of each person and is accomplished through self-motivation, active inquiry, and participation in the educational process. Faculty believe that nursing education is the systematic guidance of the learner toward safe, ethical, and competent clinical practice in the four major roles (MOP, PCC, PSA, MOT) and provides a solid foundation for the development of clinical judgment. Faculty incorporate a variety of evidence-based teaching modalities that integrate interactive and current technological learning resources, including digital classroom environments, simulated scenarios, and independent learning activities. Incorporating online technology facilitates global access to quality nursing information. Constructs of the nursing curriculum include the study of humanity and society, lifespan, health continuum, clinical reasoning, therapeutic interventions, and professional roles. Foundational nursing concepts include professional integrity, communication, active inquiry, and service.

Baccalaureate Degree

Baccalaureate Degree graduates use evidence-based practice, clinical reasoning, and interdisciplinary healthcare team collaboration to provide safe, theory-directed patient/client care to diverse individuals, families, populations, and communities and improve patient/client outcomes. Graduates are prepared with a broad perspective and understanding of nursing, health, humanity, society, and the environment. Baccalaureate education incorporates a broad range of liberal arts, behavioral and social sciences, communication, and technology content to provide a strong foundation for coordinating evidence-based, safe, and competent patient/client care using clinical reasoning and judgment. Baccalaureate education includes instruction in community health, research, leadership, and management and facilitates graduates to synthesize information from various disciplines, think logically, analyze critically, and communicate effectively with patients, the public, and the healthcare team. A baccalaureate degree is the most common requirement for entry into graduate nursing education where nurses may further develop their professional roles to become nurse educators, researchers, leaders, or advanced practice nurses. Graduates promote the practice of professional nursing through leadership and advocacy roles.

Graduate Metaparadigm

The Master of Science in Nursing degree builds upon the undergraduate philosophy and adheres to its goals. The content of the master's program reflects the graduate organizing framework and prepares students for expanded roles and contemporary nursing practice. The paradigms included in the graduate metaparadigm are nursing, health, humanity, society, environment, and caring.

Nursing

Advanced nursing practice synthesizes theoretical frameworks from nursing and other disciplines to expand its knowledge base. The master's prepared nurse functions as an educator, researcher, advocate, consultant, collaborator, and a leader of systems. Evidence-based research methods are used to

investigate problems, serve as a basis for initiating change, and provide new knowledge to improve patient/client centered outcomes. The master's prepared nurse practices from a professional, organizational, and personal perspectives within an ethical, legal, and regulatory framework to advocate for patients/clients. Advocacy is demonstrated particularly for those who become vulnerable as they transition from various states of illness and experience social and cultural disparities. Advocacy involves providing health resources and services; and ensuring that these are available, accessible, and acceptable. The advanced practice nurse advocates for those who are unable or cannot speak for themselves.

Health

Health is a measurable state along a wellness-illness continuum that each person ultimately defines for themselves. It is a composite of physical, psychological, emotional, social, and spiritual functioning. The advanced practice nurse contributes to the design and implementation of interprofessional and intraprofessional healthcare delivery which is based on collaborative systems and contributes to population-focused practice. The healing process is based on the philosophy of caring for the body, mind, and spirit. Health is achieved through illness prevention, health promotion strategies, health education, and continuous quality improvement of the healthcare system.

Humanity

The advanced practice nurse recognizes the person is more than the sum of their parts and honors humans as unique holistic beings of intrinsic worth and dignity that have the right to self-determination, well-being, and equity. Humans are adaptive in nature, constantly interacting with changing environments and society in progressing toward fulfillment of innate potential for growth, development, and maturation throughout the life span.

Society

Society is the scope of humanity: individuals, cultures, families, and communities forming complex adaptive systems. The advanced practice nurse is cognizant of global diversity, health disparities, the challenges these realities bring to the healthcare system. A diverse society accelerates the need for cultural awareness and sensitivity and requires the advanced practice nurse to be culturally responsive to the health needs of individuals, families, groups, and world communities. The advanced practice nurse is aware of the interconnectedness of our global society and supports the interchange of research and evidence-based practice which benefits the whole world community.

Environment

Environment encompasses dynamic physical, cultural, political, and economic factors that influence individuals, families, communities, and populations. The sum of environment requires personal adaptation in order for individuals to progress along the wellness continuum.

Graduate Education

Graduate education builds upon baccalaureate nursing education and leads our students in meeting their academic, personal, and professional goals. Learning at the graduate level stems from an open collegial relationship between faculty and students. Faculty in the graduate program assist the learner to engage in the scholarly exploration of theoretical and clinical concepts while fostering independence, ethical behavior, and sensitive interactions concerning diverse cultures to meet changing societal needs. The graduate paradigm serves as a basis for students to incorporate and synthesize knowledge from an array of theoretical models as a foundation for advanced nursing practice. It prepares students in advanced nursing specialties of administration and/or education and provides the foundation for doctoral studies.

Faculty Association Reviewed and Approved 1/16/2013; Revised 12/4/2015 8/16/2021

HONOR CODE PLEDGE

Expectations of Lamar University JoAnne Gay Dishman School of Nursing

Lamar University JoAnne Gay Dishman School of Nursing promises to create a professional environment that fosters excellence; where the entire School of Nursing works together with integrity and cares for others.

I pledge to strive for:

Excellence

- I will perform at the highest level that I can.
- I will be the best that I can be.

Integrity

- I will commit myself, even in the face of adversity to the five fundamental values of honesty, trust, fairness, respect, and responsibility.
- I commit myself to academic honesty and integrity in the classroom and practicum setting at all times.
- I will take responsibility for what I say and do.

Caring

- I will demonstrate a commitment to the attributes of compassion, empathy, altruism, responsibility and tolerance.
- I will demonstrate caring behaviors at all times.
- I will respect individual diversity through a non-judgmental attitude and approach.

Adaptability

- I will be flexible and adapt to change when needed.
- I will work to become a creative problem solver.

Respect

- I will not tolerate discrimination.
- I will contribute to creating a safe and supportive atmosphere for teaching and learning.
- I will regard privacy and confidentiality as core obligations.
- I will communicate with peers, staff, and faculty in a professional and respectful manner.

Today, I am beginning a career as a professional nurse, which means accepting the responsibilities and unique privileges of that profession. These include monitoring my interactions and behaviors and using self- reflection in order to challenge myself as I evolve into the role of a professional nurse. I understand that it is a great honor and privilege to study and work in the nursing profession. I promise to uphold the highest standards of ethical and compassionate behavior while learning, caring for others, and/or participating in educational activities. I will strive to uphold the spirit and letter of this code during my time at Lamar University JoAnne Gay Dishman School of Nursing and throughout my professional career as a registered nurse.

(Adapted from Lakeview College Honor Code, 2006)

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SOURCES OF INFORMATION

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School of Nursing Hours and Contact Information

This Student Handbook is designed to provide nursing students with information about the JoAnne Gay Dishman School of Nursing which is not readily available from other sources on campus. Nursing students are encouraged to read the Lamar University Comprehensive Catalog and the Lamar University Student Handbook for general information about the campus.

The JoAnne Gay Dishman School of Nursing address is:

Lamar University
JoAnne Gay Dishman School of Nursing
P. O. Box 10081
Beaumont, TX 77710

School of Nursing Administration Hours of Operation:

Monday-Friday, 8 a.m. – 5 p.m.
(Doors to the office suite and classrooms locked at 5 p.m.)

School of Nursing Administration and Staff:

Director, Dishman School of Nursing.....	Dr. Joseph Tacy – 409-880-8817
Administrative Coordinator	Vacant – 409-880-8817
Senior Administrative Coordinator.....	Stacie Granger – 409-880-8817
Associate Director for Undergraduate Nursing Studies.....	Dr. Gina Hale – 409-880-8831
Administrative Specialist.....	Manjeet Kaur Saini – 409-880-8831
Nursing Information Center	
Lauren Gordon, Administrative Specialist	409-880-8868
Callie Melancon, Nursing Academic Advisor.....	409-880-2307
Director, Graduate Nursing Studies	Dr. Ruthie Robinson – 409-880-7720
Administrative Specialist.....	Zulma Briseno-Wolford – 409-880-7720
Director, Articulation Tracks – RN-BSN and RN-MSN	Dr. Keili Peterman – 409-880-8831
Administrative Specialist.....	Manjeet Kaur Saini – 409-880-8831
Edna Horn Gay Learning Center and Simulation Program Director.....	Kacie Calloway – 409-880-8818
Simulation Specialist.....	Janelle Deutsch – 409-880-7935
Recruitment Coordinator	Jennifer Thedford – 409-880-7814
The Caring Place	Holly Thompson, Retention Assistant – 409-880-8812
Standardized Testing and Transition to Practice Coordinator.....	Rose Harding – 409-880-8840
Community Based Service Learning Coordinator.....	Becky Seymour – 409-880-1767
Simulation Computing Coordinator	Jon-Michael Wallace – 409-880-1805

Nursing Faculty

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Linda Wilson	217	409-880-8837	linda.wilson@lamar.edu

CAMPUS RESOURCES

RESOURCES	SERVICES
<p>REDtalks Various Locations redtalks@lamar.edu</p>	<p>REDtalks are free 45-minute presentations by LU faculty, staff, and students sharing expertise and advice to help students succeed at Lamar University. Schedules are posted around campus each academic year.</p>
<p>Student Affairs and Strategic Initiatives Setzer Student Center, Room 230 (409) 880-8458</p>	<p>A variety of services including upholding the Student Code of Conduct and Title IX Compliance</p>
<p>Career and Professional Development Galloway Building, Suite 102 (409) 880-8878 careercenter@lamar.edu</p>	<p>Assists students and alumni in developing and implementing career selection and job search skills.</p>
<p>Counseling Services Student Health Center Sheila Umphrey Recreational Sports Center (409) 880-8466 shc@lamar.edu</p>	<p>Provides support to students for psychological needs such as test-taking anxiety and stress.</p>
<p>Accessibility Resource Center (ARC) Communication Building, Room 105 (409) 880-8347 ARC@lamar.edu</p>	<p>Provides assessments and accommodations for students with disabilities based on federal and state law.</p>
<p>Office of Financial Aid Wimberly Building, Room 200 (409) 880-8450 financialaid@lamar.edu</p>	<p>Assists students in obtaining financial resources to help in obtaining their educational goals.</p>
<p>International Student Programs and Services Wimberly Building, Room 117 (409) 880-7635 international@lamar.edu</p>	<p>Assists international students in educational and financial needs.</p>
<p>Mary and John Gray Library 4400 MLK Parkway (406) 880-7264 www.lamar.edu/library/</p>	<p>Provides students with a wide variety of reference resources, computer access, study rooms, printing, and copying.</p>
<p>Scholarships Wimberly Building, Room 200 (409) 880-1714 scholarships@lamar.edu</p>	<p>Assists students needing financial support. Nursing scholarships are announced via The Virtual Caring Place when available.</p>
<p>Student Health Center Sheila Umphrey Recreational Sports Center (409) 880-8466 shc@lamar.edu</p>	<p>Provides medical services for students (physicals, medications, immunizations, and laboratory testing).</p>
<p>The Caring Place MMW Building, Room 257B (409) 880-8812 caringplace@lamar.edu</p>	<p>Provides support to nursing students to facilitate academic success.</p>
<p>The Writing Center Mary & John Gray Library, 1st Floor (409) 880-8571 uwc@lamar.edu</p>	<p>Assists students with writing papers, reviews for grammar and style (e.g., APA).</p>
<p>Veterans Affairs Office Wimberly Building Room 101 (409) 880-7198 va@lamar.edu</p>	<p>Assist veterans in obtaining veterans benefits.</p>

THE ACCESSIBILITY RESOURCE CENTER

Lamar University is committed to providing equitable access to learning opportunities for all students. The Accessibility Resource Center (ARC) is located in the Communications Building Room 105. Our office collaborates with students who have disabilities to provide and/or arrange reasonable accommodations.

1. If you have, or think you may have, a disability (e.g., attentional, chronic health, learning, mental health, physical, and/or sensory), please contact the ARC at 409-880-8347 or email ARC@lamar.edu to arrange a confidential appointment with the Director of the ARC to explore possible options regarding equitable access and reasonable accommodations.
2. If you are registered with ARC and have a current letter requesting reasonable accommodations, contact your Course Leader(s) early in the semester to review how the accommodations will be applied in the course.
3. To facilitate the arrangements necessary to make accommodations, students enrolled in nursing courses must submit official documentation from the Accessibility Resource Center to the Course Leader.

Tammy Lilly, Director
tilly@lamar.edu

Leslie Nelson, Administrative Coordinator
leslie.nelson@lamar.edu

Communications Building, Room 105
Phone: 409-880-8347
Fax: 409-880-2225
Email: arc@lamar.edu
Communication access email: arc.cadh@lamar.edu

Website: <http://www.lamar.edu/accessibility-resource-center/>

Accessibility Resource Center Lamar University
P.O. Box 10087 Beaumont, TX 77710

BACCALAUREATE PROGRAM INFORMATION

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PROGRAM GOALS AND PROGRAM OUTCOMES
Bachelor of Science in Nursing (BSN)

Program Goals	Outcome Area	BSN Program Outcomes
1. Provide excellent learning opportunities to prepare graduates to meet national standards for entry into practice as competent, professional registered nurses.	Performance on Licensure Exam	88% or more of the Bachelor of Science in Nursing (BSN) graduates will pass the National Council Licensure Examination for Registered Nurses (NCLEX-RN) on the first attempt.
2. Provide a relevant education and resources for students to graduate in a timely manner.	Program Completion (100%)	40% or more of the students entering the BSN program will earn the BSN degree within 100% of the time of the published program length.
	Program Completion (150%)	70% or more of the students entering the BSN program will earn the BSN degree within 150% of the time of the published program length.
3. Prepare graduates to function in role-related nursing employment.	Job Placement	90% or more of BSN graduates contacted report employment in nursing 9-12 months post-graduation.

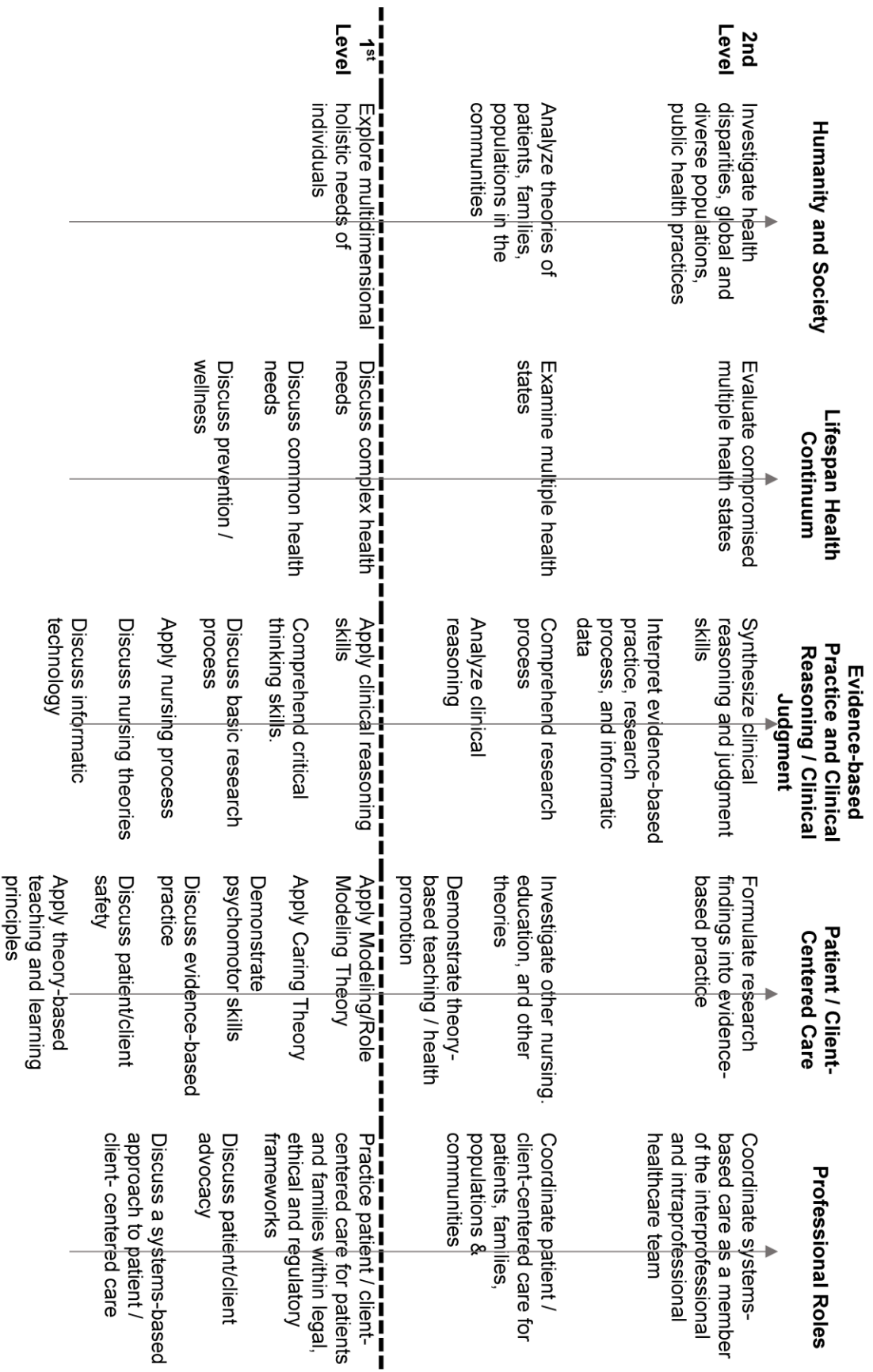
BACCALAUREATE DEGREE END OF PROGRAM STUDENT LEARNING OUTCOMES

BSN Organizing Framework Constructs	At the completion of the program the graduate is expected to be a competent, caring nurse who:
Humanity and Society	1. Practices safe, compassionate, and effective holistic/multidimensional patient-centered care to diverse patients/clients* in multiple settings from a global perspective by incorporating theories and evidence-based findings.
Lifespan Health Continuum	2. Supports patients/clients in preventing disease, maintaining wellness, promoting and restoring health and advocating for death with dignity 3. Evaluates patient-centered care for patients/clients across the lifespan based on common and complex health needs, and compromised multiple health states when considering multiple determinants of health
Evidence- based Practice and Clinical Reasoning	4. Synthesizes clinical reasoning and judgment in nursing practice utilizing critical thinking, nursing process, informatics, research, and evidence-based findings.
Patient/Client- Centered Care	5. Employs safe, effective, compassionate patient-centered care in collaboration with patients/clients and members of the interprofessional and intraprofessional healthcare team.
Professional Roles	6. Differentiates multiple role dimensions and practices within ethical, legal and regulatory frameworks when caring for diverse patients/clients as a member of the interprofessional and intraprofessional healthcare team. 7. Demonstrates professional integrity, effective communication, active inquiry and service to community

* Patient(s)/Client(s) = patients, families, populations & communities

Approved UNS Faculty 12/15/2021

LAMAR UNIVERSITY COLLEGE OF ARTS AND SCIENCES
 JOANNE GAY DISHMAN SCHOOL OF NURSING
BACHELOR OF SCIENCE IN NURSING ORGANIZING FRAMEWORK



Foundation of Nursing Concepts: Professional Integrity/Communication/Active Inquiry/Service Broad, Liberal Education in Related Disciplines (Nursing Pre-requisites)

Approved 8/16/2021

FALL START

LAMAR UNIVERSITY JOANNE GAY DISHMAN SCHOOL OF NURSING BACHELOR OF SCIENCE IN NURSING CURRICULUM PLAN

FIRST YEAR

Fall

BIOL 2401 Anatomy & Physiology I ♦.....	4
ENGL 1301 English Composition I ♦.....	3
MATH 1332 or MATH 1314 ♦.....	3
Communication Elective	3
HIST 1301 US History 1763-1877	3
16	

Spring

BIOL 2402 Anatomy & Physiology II ♦	4
ENGL 1302 English Composition II ♦.....	3
NUTR 1322 Basic Nutrition ♦	3
PSYC 2315 Lifespan ♦	3
HIST 1302 US History or HIST 2301 TX History.....	3
16	

THIRD YEAR

Fall

NURS 3540 Concepts of Prof. Nursing	5
NURS 3241 Practicum: Concepts Prof. Nursing.....	2
NURS 3110 Nursing Simulation Lab I	1
NURS 3330 Principles of Pharmacology	3
NURS 3316 Holistic Health Assessment.....	3
14	

Spring

NURS 3520 Care of Adults.....	5
NURS 3221 Practicum: Care of Adults.....	2
NURS 3112 Nursing Simulation Lab II	1
NURS 3320 Care of Behavioral Health Client	3
NURS 3231 Practicum: Behav. Health Client.....	2
13	

Summer

NURS 4390 Nursing Inquiry & EBP.....	3
NURS 4350 Leadership/Management.....	3
NURS 4251 Practicum: Leadership/Mgt.....	2
8	

SECOND YEAR

Fall

BIOL 2421 (or BIOL 2420) Microbiology ♦	4
Language, Philosophy, & Culture Elective	3
Creative Arts Elective	3
Social and Behavioral Science Elective.....	3
POLS 2301 Intro. American Govt. I.....	3
16	

Spring

CHEM 1306/1106 Chemistry for Allied Health ♦	4
NURS 2373 Basic Pathophysiology* ♦	3
PSYC 2317 or MATH 1342 Statistics ♦	3
POLS 2302 Intro. American Govt. II.....	3
13	

FOURTH YEAR

Fall

NURS 4560 Care of Parent-Child Family	5
NURS 4261 Practicum: Parent-Child Family	2
NURS 4340 Care of Communities	3
NURS 4241 Practicum: Care of Communities.....	2
12	

Spring

NURS 4420 Care of Patients with Compromised	4
Multiple Health States	
NURS 4221 Practicum: Patients with Comp.....	2
Multiple Health States	
NURS 4260 Integration of Bacc. Nursing Practice ...	2
NURS 4481 Preceptorship: Synthesis of Nursing. ...	4
12	

Bachelor of Science in Nursing

Non-Nursing Credits	58
Nursing Pre-requisites (Patho)	3
Nursing Required Credits	59
Total Credits 120	

POLS 2301 and POLS 2302 are not required for admission to the nursing program.

* NURS 2373 Pathophysiology must be taken within 3 years prior to admission to the Nursing Program and must be passed with a grade of "C" or better within a maximum of three attempts.

♦ Prerequisite course requiring a minimum grade of "C."

SPRING START

LAMAR UNIVERSITY JOANNE GAY DISHMAN SCHOOL OF NURSING BACHELOR OF SCIENCE IN NURSING CURRICULUM PLAN

FIRST YEAR

Spring

BIOL 2401 Anatomy & Physiology I ♦	4
ENGL 1301 English Composition I ♦	3
MATH 1332 or MATH 1314 ♦	3
Communication Elective	3
HIST 1301 US History 1763-1877	3
	16

Fall

BIOL 2402 Anatomy & Physiology II ♦	4
ENGL 1302 English Composition II ♦	3
NUTR 1322 Basic Nutrition ♦	3
PSYC 2315 Lifespan ♦	3
HIST 1302 US History or HIST 2301 TX History	3
	16

THIRD YEAR

Spring

NURS 3540 Concepts of Prof. Nursing	5
NURS 3241 Practicum: Concepts Prof. Nursing	2
NURS 3110 Nursing Simulation Lab I	1
NURS 3330 Principles of Pharmacology	3
NURS 3316 Holistic Health Assessment	3
	14

Summer

NURS 4390 Nursing Inquiry & EBP	3
	3

Fall

NURS 3520 Care of Adults	5
NURS 3221 Practicum: Care of Adults	2
NURS 3112 Nursing Simulation Lab II	1
NURS 3320 Care of Behavioral Health Client	3
NURS 3231 Practicum: Behav. Health Client	2
	13

SECOND YEAR

Spring

BIOL 2421 (or BIOL 2420) Microbiology ♦	4
Language, Philosophy, & Culture Elective	3
Creative Arts Elective	3
Social and Behavioral Science Elective	3
POLS 2301 Intro. American Govt. I	3
	16

Fall

CHEM 1306/1106 Chemistry for Allied Health ♦	4
NURS 2373 Basic Pathophysiology* ♦	3
PSYC 2317 or MATH 1342 Statistics ♦	3
POLS 2302 Intro. American Govt. II	3
	13

FOURTH YEAR

Spring

NURS 4560 Care of Parent-Child Family	5
NURS 4261 Practicum: Parent-Child Family	2
NURS 4340 Care of Communities	3
NURS 4241 Practicum: Care of Communities	2
	12

Summer

NURS 4420 Care of Patients with Compromised Multiple Health States	4
NURS 4221 Practicum: Pts. Comp Mult. Health	2
	6

Fall

NURS 4350 Leadership/Management	3
NURS 4251 Practicum: Leadership/Mgt	2
NURS 4260 Integration of Bacc. Nursing Practice	2
NURS 4481 Preceptorship: Synthesis of Nursing	4
	11

Bachelor of Science in Nursing

Non-Nursing Credits	58
Nursing Pre-requisites (Patho)	3
Nursing Required Credits	59

Total Credits 120

POLS 2301 and POLS 2302 are not required for admission to the nursing program.

* NURS 2373 Pathophysiology must be taken within 3 years prior to admission to the Nursing Program and must be passed with a grade of "C" or better within a maximum of three attempts.

♦ Prerequisite course requiring a minimum grade of "C."

BSN PROGRESSION AND GRADUATION POLICY

Purpose

The purpose of the BSN Progression and Graduation Policy is to provide the requirements for student progression throughout the nursing program. Information related to progression, transfers, exceptions, withdrawals, and graduation is included in this policy.

Progression Policy

1. All nursing courses must be successfully completed in the order in which they are offered or in the progression outlined in the student's readmission letter. The APEG Committee monitors and enforces the progression of students.
2. Nursing is an art and a science, requiring professional competency to meet national standards. The JoAnne Gay Dishman School of Nursing requires a minimum standard of achievement of 75% in all nursing courses for progression. Each nursing course establishes the criteria for achievement of the 75% standard. (Refer to specific course syllabus for evaluation/grading criteria.)
3. An overall GPA of 2.0 must be maintained in all course work.
4. Grade Scale:
 - A = 90 - 100
 - B = 80 - 89
 - C = 75 - 79
 - D = 60 - 74
 - F = 0 - 59
5. The 75% Weighted Grade Rule: Students must achieve a minimum of 75% average of all exams before any other assignments are included in the grade calculation. Failure to achieve the 75% exam average will result in the course failure irrespective of grades achieved on other assignments.
6. As part of course requirements, standardized examinations specified by the JoAnne Gay Dishman School of Nursing will be administered to students throughout the pre-licensure BSN Curriculum. The results of these examinations are used for the following purposes: 1) assurance of student preparation for NCLEX-RN®, 2) comparison of student knowledge with an external national standard to assure competence, 3) assurance of continuous quality improvement of the curriculum, and 4) evaluation of program performance. In courses where these exams are required, the standardized exam grade will count at 10% of the course grade. The specialty exam grade will be included in exam calculation required for the 75% Weighted Grade Rule in didactic and lab courses as applicable.
7. A student who fails to perform satisfactorily in a practicum course will receive an unsatisfactory grade resulting in course failure and will not progress.
8. BSN Progression Policy regarding Co-Requisite Courses:
 - a. Co-requisite courses are didactic, lab, and practicum courses that share similar learning content. For example, NURS 3540 Concepts of Professional Nursing, NURS 3241 Practicum: Concepts of Professional Nursing, and NURS 3110 Nursing Simulation Lab 1 are co-requisite courses. Students apply the didactic knowledge in the co-requisite practicum course. It is important for students to demonstrate competency in didactic knowledge and skill performance in order to competently provide patient care in a practicum setting.
 - b. If a student fails the didactic class but passes the practicum course, upon readmission the student is required to repeat all co-requisite courses.
 - c. If the student passes the didactic class and fails the practicum or lab course, upon readmission the student is required to repeat all co-requisite courses.

9. Students will have only one opportunity to repeat one nursing course. All subsequent courses must be satisfactorily completed on initial enrollment for the student to remain in the nursing program.
 - a. Students who fail a nursing course are required to complete an exit interview with the Associate Director of Undergraduate Nursing Studies after final examinations of the current semester.
 - b. Students who fail a nursing course need to be aware that future readmission is based on space availability. Students failing a nursing course are required to reapply to the nursing program within ten days of their scheduled exit interview with the Associate Director of Undergraduate Nursing Studies. Students can only be readmitted to the pre-licensure BSN program one time.
 - c. When a student is readmitted to the nursing program, he/she will be under the BSN curriculum plan as designated by the readmission letter and the Lamar University Dishman School of Nursing Undergraduate Student Handbook at the point of readmission.
 - d. Student who are readmitted to the program are placed on RX Prescription for Success and need to adhere to provisions outlined in the readmission letter.
10. A student will be considered a program failure and dismissed from the nursing program if he/she fails two or more nursing courses, including a repeated course on the second attempt. The student will not be eligible to reapply to the program for half the length of the program completion time (1 year). Eligible students who seek to reapply to the program after this period of time must submit an application and be ranked for admission consideration. Admission cannot be guaranteed. Eligible students readmitted to the program will be required to start in first semester. No course credit will be given for previously completed nursing courses.

Transfers

Potential students seeking to transfer into the Dishman School of Nursing must be of good standing at their current nursing program. Potential students should contact the Associate Director of Undergraduate Nursing Studies regarding their interest in the program. Potential students will need to submit a letter of good standing from their current nursing program, should have all required pre-requisites completed, submit official transcripts for evaluation, and submit syllabi for all nursing courses taken to determine course equivalencies for appropriate entry and progression. Students transferring with less than a "C" grade in any nursing course must pass all subsequent nursing courses with a grade of "C" or better on initial attempt.

Exceptions

Any student who wishes to request an exception to the admission and/or progression(s) criteria should meet with the Associate Director of Undergraduate Nursing Studies and proceed through the following steps:

1. Submit a written request for an exception to the BSN Progression and Graduation policy to the APEG Committee. The written request should explain the extenuating circumstance(s) that impacted the students' academic performance and provide supporting documentation as applicable.
2. The APEG Committee will communicate the committee's recommendation to the Associate Director of Undergraduate Nursing Studies. The Director of the Dishman School of Nursing will review the recommendations made by the APEG Committee and render the final decision.
3. The Associate Director of Undergraduate Nursing Studies will notify the student of the decision regarding the requested exception.
4. If the student is dissatisfied with the committee's decision, he/she may utilize the formal grievance procedure for the JoAnne Gay Dishman School of Nursing (see Lamar University Academic Grievance Policy).

Withdrawal

Students considering withdrawing from the BSN program should meet with the Associate Director of Undergraduate Nursing Studies to discuss the circumstances related to the request for withdraw.

1. The Associate Director of Undergraduate Nursing Studies reserves the discretion for approval of withdraw requests based on the student's individual circumstances.
2. A student who withdraws from the BSN nursing program will also be required to withdraw from the co-requisite and companion courses. The student's academic standing at the time of withdrawal may impact their progression, opportunity to repeat one nursing course, and/or eligibility to reapply to the nursing program. Students eligible to return to the program must complete an application for readmission, meet all admission requirements, and be aware that future readmission is based on space availability.
3. Students who withdraw from the nursing program can have a leave of no more than one long semester and one summer semester. Students should communicate their return status to the Associate Director of Undergraduate Nursing Studies. Students experiencing exceptional circumstances that may require an extended period of absence may submit an exception request.
4. Course drop requests will only be approved in circumstances where the student's course failure prevents them from progressing in the BSN program.

Graduation

Criteria for graduation from the BSN nursing program include:

1. General requirements as stipulated in the Lamar University Comprehensive Catalog.
2. Compliance with all aspects of the written degree plan to include all prerequisite and nursing courses.

Revised by Faculty Association 8/15/2024

BSN PRELICENSURE PROMULGATION POLICY

Purpose

Inform undergraduate nursing students of applicable JoAnne Gay Dishman School of Nursing (SON) policy changes in an efficient and timely manner.

1. New and modified SON policies will be distributed to students affected by implementation of the policy change through LU Learn (The Virtual Caring Place) announcement and e-mail within thirty days of implementation.
2. Implementation of policies may vary depending upon subject matter; an implementation date should be noted with the LU Learn announcement/e-mail.
3. New and modified SON policies will be added to the BSN Undergraduate Nursing Studies Student Handbook with each new reprinting.

Adopted Faculty Association 5/10/2016; Revised Faculty Association 5/10/2024

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EXPECTATIONS OF STUDENTS

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EXPECTATIONS OF STUDENTS

Students entering the JoAnne Gay Dishman School of Nursing (SON) are making a commitment to a profession requiring maturity and sound judgment. Thus, mature adult behavior must be demonstrated by students. This behavior is demonstrated by the student's time and attendance patterns, appearance and conduct. It is expected that students arrive to class, lab, and practicum experiences prepared and present themselves as sincere and motivated learners. Should a student be unable to maintain these expectations, withdrawal from the program may be indicated. Furthermore, students are expected to be aware of and follow the policies of Lamar University and the Dishman SON.

Students are seen as having responsibility for their own learning and must be active learners. Students are expected to fulfill all requirements for didactic, lab, and practicum courses and course and program learning outcomes. Courses may require students attend professional meetings, exam review, and other mandatory meetings outside of scheduled class time.

Students are expected to be available to complete a pre-assessment the day before the assigned practicum day. Learning experiences may necessitate some evening, night or weekend classes for fulfillment of learning outcomes. An effort is made by faculty to apprise students of these requirements at the end of the previous semester to facilitate student planning.

Students will be assigned to practicum groups by course faculty. A variety of faculty and alternate clinical sites will broaden the clinical exposure and strengthen learning experiences.

As mandated by the Texas Board of Nursing, if anything changes during the course of the program regarding mental health/chemical dependency or legal action other than a misdemeanor the student is responsible to notify the Associate Director Undergraduate Nursing Studies.

§213.27

- (a) Every individual who seeks to practice nursing in Texas must have good professional character related to the practice of nursing. This requirement includes all individuals seeking to obtain or retain a license or privilege to practice nursing in Texas.
- (b) The Board defines good professional character as 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 the Nursing Practice Act, the Board's rules, and generally accepted standards of nursing practice. An individual who provides satisfactory evidence that he/she has not committed a violation of the Nursing Practice Act or a rule adopted by the Board is considered to have good professional character related to the practice of nursing.
- (c) A determination that an individual does not have good professional character related to the practice of nursing must be based on a showing by the Board of a clear and rational connection between a violation of the Nursing Practice Act or a rule adopted by the Board and the individual's ability to effectively practice nursing. When evaluating the rationale connection between the relevant conduct and the ability to effectively practice nursing, the Board will consider the following factors:
 - (1) whether the individual will be able to practice nursing in an autonomous role with patients/clients, their families, significant others, healthcare professionals, and members of the public who are or who may become physically, emotionally, or financially vulnerable;
 - (2) whether the individual will be able to recognize and honor the interpersonal boundaries appropriate to any therapeutic relationship or health care setting;
 - (3) whether the individual will be able to make appropriate judgments and decisions that could affect patients/clients and/or the public;
 - (4) whether the individual has exhibited an inability to conform his/her behavior to the requirements of the Nursing Practice Act, Board rules and regulations, including §217.11 (relating to Standards of Nursing

Practice) and §217.12 (relating to Unprofessional Conduct) of this title, and generally accepted standards of nursing practice; and

- (5) whether the individual will be able to promptly and fully self-disclose facts, circumstances, events, errors, and omissions, when such disclosure could enhance the health status of patients/clients or the public and/or could protect patients/clients or the public from an unnecessary risk of harm.

- (d) Actions from Other Jurisdictions A certified copy of the order of the denial, suspension, or revocation or other action relating to an individual's license or privilege to practice nursing in another jurisdiction or under federal law is conclusive evidence of that action.

Source Note: The provisions of this §213.27 adopted to be effective October 29, 2015, 40 TexReg 7403; amended to be effective February 25, 2018, 43 TexReg 863

Reference

Texas Administrative Code (2018, February). Rule 213.27: Good Professional Character. Retrieved from https://www.bon.texas.gov/rr_current/213-27.asp.html

LINES OF COMMUNICATION

Communication is the creation of, or exchange of ideas and information among people. Professional communication is vital to the sustainability of relationships that accomplish the functions of an organization.

Policy

There is a correct line of communication in all organizations. These communication lines involve the appropriate people in the resolution of a problem and demonstrate respect for authority. The appropriate lines of communication in the JoAnne Gay Dishman School of Nursing are described below.

Communication Lines for Issues

Students should initiate the discussion of an issue with the course faculty. If no resolution is reached, then the issue should be discussed with the course leader. If the course leader is unable to resolve the issue, then the Associate Director of Undergraduate Nursing Studies should be informed. If no resolution is reached, the Associate Director of Undergraduate Nursing Studies will refer the student to the Director, Dishman School of Nursing. Informal discussions may occur with the Director, Dishman School of Nursing School or more formal processes may be used in situations like grievances, grade appeals and other issues. The Director, Dishman School of Nursing should be consulted before contacting the Dean of the College of Arts and Sciences. Contacting the Provost or University President directly about issues is inappropriate (see the Lamar University Comprehensive Catalog for more information).

Initially Adopted 6/24/2016; Revised Faculty Association 8/15/2024

STANDARDS FOR NURSING STUDENTS

Purpose

Responsibilities and standards in nursing practice are determined by the Board of Nursing, national accreditation guidelines, and practicum agencies. Additionally, as described in various practicum evaluation tools and course guidelines, students must be able to provide safe patient care.

Policy

Technical Standards for Nursing Practice

Nursing is a practice discipline and successful completion of the nursing program requires that students demonstrate ability to effectively and safely perform several essential skills. All students are assessed in practice labs and practicum practicums throughout the program to confirm adherence to the technical standards, with or without accommodation.

Intellectual Requirements: Critical thinking is an important part of clinical judgment needed to provide safe patient care. Students must be able to measure, calculate, reason, and quickly analyze information in order to apply complex information in the classroom and practicum settings.

Gross and Fine Motor Requirements: Nursing students must be able to provide general care (including preparing medications and administering treatment and completing patient assessments). For example, students must be able to perform basic life support (CPR), function in an emergency situation, and have the ability (within reasonable limits) to assist a patient in moving, such as from the chair to the bed.

Observation Skills: Student nurses must be able to observe patients accurately to assess their condition and perceived signs of disease and responses to treatments through physical examination, including visual images, auditory information (patient voice, heart tones, bowel, and lung sounds), and palpable changes in certain organs and tissues.

Communication Requirements: Nursing students must be able to communicate effectively with patients, staff, physicians, and family members, verbally and in writing. Students must be able to process and accurately convey information about the patient status to faculty, staff, and other health care providers in a timely manner.

Social and Behavioral Requirements: Student nurses must possess sufficient mental and emotional health to exercise good clinical judgment, promptly complete assessments, and function in what can be a physically and emotionally demanding dynamic environment. Nursing students must be able to demonstrate compassion, empathy, and concern for others while maintaining a mature, sensitive, and effective relationship with patients, families, and other professionals.

Revised 12/1/2014

STUDENT BEHAVIORAL EXPECTATIONS POLICY

Purpose

Students in the Lamar University JoAnne Gay Dishman School of Nursing must adhere to standards consistent with the nursing profession.

Policy

Compliance with the following behavioral expectations is required of all students who are enrolled in the JoAnne Gay Dishman School of Nursing.

All students are expected to:

1. Assume responsibility for recognizing personal limitations and seek help through appropriate avenues. Students who experience difficulty in satisfying course or program requirements are expected to communicate those difficulties with faculty and assume a collaborative role in problem solving, keeping faculty informed of progress.
2. Assume responsibility for fulfilling program, course, and practicum affiliate requirements in a prompt and dependable manner:
 - a. Course
 - 1) Complete Learning Center and Practicum Simulation Laboratory requirements in a timely manner.
 - 2) Demonstrate promptness and accountability in class attendance, attendance at required workshops, submission of written assignments and required program materials, i.e., insurance, physical exam.
 - 3) Prepare for practicum experiences, attend, and participate in practicum conferences.
 - b. Agency
 - 1) Meet agency requirements for orientation.
 - 2) Adhere to agency policies.
 - 3) Notify practicum faculty if unable to attend practicum prior to beginning of assigned practicum time.
3. Avoid Plagiarism, which is recognized as a form of cheating. Students are expected to use the American Psychological Association (APA) format for documentation. Paraphrasing is permitted but this must be accompanied with complete and appropriate documentation (see *Academic Honesty Policy* under the *Academic Policies* Section).
4. Demonstrate the following behaviors:
 - a. honesty and integrity in all endeavors relating to the completion of the nursing program
 - b. ethical behaviors as defined by the American Nurses Association (ANA) Code of Ethics when working with clients, significant others, peers and faculty.
 - c. acceptance of proper and total nursing responsibility and accountability when providing care to clients.
 - d. respect and protect the rights, safety and confidentiality of all individuals.
 - e. adhere to federal privacy law, Health Insurance Portability and Accountability Act (HIPAA), enacted to protect the health information of clients. Violation of federal law includes disclosure of protected information including unintended disclosure or use of protected information beyond the minimum necessary. Healthcare providers, including nursing students, should only access patient information necessary to provide quality care for assigned patients. Violations may result in sanctions against the student by the JoAnne Gay Dishman School of Nursing (such as dismissal from the program) and extend to fines and other penalties beyond the jurisdiction of the faculty or Lamar University.
 - f. responsibility and accountability for his/her own learning, growth and professionalism.
 - g. a citizen in "good standing" within the university and the community.
5. Accept responsibility for damaged or broken equipment caused by students due to negligence.
6. Comply with the university policies governing student conduct and discipline.
7. Utilize appropriate avenues of communication in seeking resolution of problems.
8. Resolve conflicts at the School of Nursing level.

Adopted by Faculty Association 5/7/96, Revised UNS 11/18/2016

DRUG & ALCOHOL SCREENING POLICY (PRE-LICENSURE)

Do **not** get your drug screen without first reading and **carefully** following the instructions.

Purpose:

Lamar University has implemented the federally-mandated Drug-Free Schools and Communities Act. Lamar University (LU) policy prohibits the unlawful manufacture, distribution, possession, or use of illicit drugs or alcohol by students and employees on University property, at any school activities, or while employees are on official duty. All faculty, staff, and students are required to obey the law and to comply with the Rules and Regulations of the Board of Regents of the Texas State University System and the institutional rules for Lamar University students as well as faculty and staff. Anyone violating these policies is subject to disciplinary action ranging from a warning to expulsion, an arrest or conviction.

<https://www.lamar.edu/students/files/documents/student-engagement/health-center/awareness-and-prevention-policy-notification-letter.pdf>

<https://www.lamar.edu/students/files/documents/student-engagement/health-center/policy-on-alcohol-13.pdf>

Policy:

The Lamar University (LU) JoAnne Gay Dishman School of Nursing (SON) adheres to the policies of Lamar University and all practicum facilities with which the School of Nursing is affiliated for student practicum learning experiences. A priority for patient safety has led many practicum facilities and schools of nursing to require mandatory drug screening of all individuals that come in contact with patients. Therefore, the LU SON requires that all students accepted for admission have a negative “clear” urine drug screen prior to enrollment in courses (at the students’ expense).

A student found noncompliant with the LU SON policy on alcohol and other drugs are subject to sanctions commensurate with the offenses and any aggravating and mitigating circumstances. Sanctions that may be imposed against a student are found in the Student Disciplinary Policy detailed in the Student Code of Conduct, which can be found online at <https://www.lamar.edu/students/academic-support/code-of-conduct.html>

<https://www.lamar.edu/students/files/documents/student-engagement/health-center/policy-on-alcohol-13.pdf>

Admission Drug Screening:

Upon acceptance into the LU SON, students must submit to a urine drug screen. Instructions for obtaining the drug screen for admission to the LU SON are found below. Students may not begin coursework until a negative “clear” test report is received. Failure to comply with this requirement will be equivalent to a positive test result and negate the student’s admission status. Students who fail to comply will be removed from the admission cohort and will not be enrolled in nursing courses.

Drug screens may not be completed more than 30 days prior to, nor less than 15 days before the first day of class.

Explanation of Test Results:

A negative “clear” urine drug screen is required for full admission and for continuation in the program. **The LU SON does not accept drug screens from non-PreCheck labs without prior approval from the Associate Director of Undergraduate Studies.** Prospective students who do not pass these requirements will not be admitted to the LU SON.

Suspicion “cause” Drug/Alcohol Screen:

Students may be asked to submit to a drug or alcohol test anytime throughout the program. If drug and/or alcohol use is suspected as a cause of unsafe or erratic behavior in students at any time, a drug and/or screen may be required (at the student’s expense). Suspicion “cause” testing must be completed within 8 hours. Failure to comply with the request for a suspicion or “cause” drug and/or alcohol test will be treated equivalently to a positive test result.

Substances tested for include but are not limited to: amphetamines, cocaine, marijuana, opiates, phencyclidine (PCP), benzodiazepines, barbiturates, methadone, methaqualone, propoxyphene, and ethanol urine; and other substances as may be required by a health care facility at which the student is assigned for a practicum rotation.

PreCheck Instructions:

Pre-registration with PreCheck is required before you go to an approved collection lab.

Drug screens may not be completed more than 30 days prior to, nor less than 15 days before, the first day of class.

Pay/Pre-Register

1. Go to www.mystudentcheck.com. Start typing Lamar, then select “Lamar University School of Nursing – DS” from the drop-down menu that appears. (It is at the bottom of the list.) Select “Nursing Drug Screen” and check the box for “Drug Test.”
2. Complete all required fields as prompted, then hit *Continue* to enter your payment information. The payment can be securely made online with a credit or debit card. You can also pay by money order, but that will delay the processing of your drug screen until the money order is received by mail at the PreCheck office. All personal and protected health information will be kept confidential.
3. If you pay by credit card, the link to the instructions for pre-registration will be provided at the confirmation page after you complete your order. If you are paying by money order, you will be emailed instructions to obtain your drug screen once payment has been received

Make an Appointment

1. After you’ve paid and registered for the Drug Screen, you will receive a list of approved collection sites near your location. Collection sites have different policies on setting up appointments for drug screening. For your convenience, PreCheck recommends calling your chosen collection site ahead of time to set up an appointment. It is also your responsibility to pre-register and complete the drug screen at within the timeframe required by the LU SON.
2. For most students, the Electronic Chain of Custody (ECOC) process will register the student to a collection site instantly; however, the location of some students may require PreCheck to mail a paper Chain of Custody Form to get you to a collection site close to your location. We encourage you to pre-register with enough time to allow mailing time if needed. PreCheck will not use your information for any other purposes other than the services ordered. Your credit will not be investigated and your name will not be given out to any businesses

Going to the Collection Site Appointment

1. Take your lab confirmation form (Electronic Chain of Custody) and picture ID to the collection site at the time of testing. Prior to collection, students have the opportunity but are not required, to disclose the use of prescription medications that may result in a positive test. If the use of prescribed medications results in a positive test, the student is required to obtain written verification from the prescribing provider.
2. Students will provide a urine sample inside the collection facility at the direction of facility staff with a container provided to them. The collection is unobserved, but to be valid, it must meet specimen specifications for color, temperature, and concentration. A student has a three-hour window to produce a valid specimen. If a student is unable to produce a valid specimen within the specified three-hour time-frame (such as from shy bladder, or due to an excessively dilute off-temperature, or contaminated sample), the student will be allowed one additional retesting under direct supervision.
3. If a student is unable to produce a valid specimen on a second attempt, this will result in a “Positive/Not Clear” report. Such students are not allowed to begin or continue in the curriculum and will be subject to the same consequences as any “Positive/Not Clear” result.
4. A diluted positive drug screen will be considered positive. A diluted negative drug screen must be repeated. A second positive or not clear drug test will result in the inability to continue in the nursing program for a minimum of 12 months.
 - a. If a student does not keep a collection appointment or declines to participate, he/she will not be allowed to begin or continue in the nursing program.
 - b. Drug screens may not be completed more than 30 days prior to, nor less than 15 days before, the first day of class.

The LU SON will review test results received from PreCheck on a regular basis. PreCheck will maintain the records as part of a secure database. Drug test results will remain separate from the academic record. Positive results will include the name of the drug but will not include quantitative data.

The test results reported by PreCheck are final and not subject to appeal. The test may be repeated at the discretion of the Director of Undergraduate Studies (at the student's expense). Positive test results will be reported to the Assistant Dean of Admissions, Vice President of Student Engagement and Dean of Students for intervention. A positive test result may also lead to disciplinary and/or legal actions. A positive drug screen with initial pre-admission screening will require a negative retest prior to beginning the nursing program. Any student who tests positive at any point in the nursing program will be disciplined and subject to random subsequent testing. If positive on subsequent random testing, then student may subject to additional actions up to and including dismissal from the nursing program. Students See "The Alcohol and Other Drug Awareness and Prevention Policy Notification Letter", which can be found online at <https://www.lamar.edu/students/ files/documents/student-engagement/health-center/awareness-and-prevention-policy-notification-letter.pdf>

Adopted 4/29/2019, Revised Faculty Association 8/15/2024

PERSONAL ELECTRONIC DEVICE USE POLICY

Purpose

JoAnne Gay Dishman School of Nursing prohibits the use of personal electronic and communication devices when such activity undermines the integrity of an individual(s)' rights to privacy, affects the quality of patient care and interferes with efficient operation of the classroom or practicum experience. Personal electronic and communication devices include but are not limited to cell/smart phones, tablets, iPads, laptops and/or any wireless devices.

While the School of Nursing does not wish to unreasonably constrain the use of such devices, it is the School of Nursing's responsibility to ensure that they are used in a reasonable manner and to ensure the integrity of proprietary information, and respect individual rights to privacy. This policy serves to define the use of personal electronic and communication devices.

Policy

While in the classroom and in the practicum facilities, students and faculty are expected to exercise the same discretion in using personal electronic and communication devices as is expected for the use of these devices by employees of the facilities. Although electronic devices may have practicum applications (e.g., medication, pathophysiology, patient care references), excessive personal use of electronic devices during the practicum day may interfere with student learning, distract others, and negatively impact patient care and patient safety. Students are asked to use the personal electronic and communication devices in non-patient areas and set devices on the silent or vibrate mode.

Students failing to comply with the standards outlined in this policy will be subjected to JoAnne Gay Dishman School of Nursing and the practicum affiliates' disciplinary policies and may be terminated from the program.

Revised 6/24/16

CIVILITY POLICY

Purpose

Students are full partners in fostering a classroom environment which is conducive to learning. In order to assure that all students have the opportunity to learn from time spent in classroom, practicum, and digital environments, faculty reserve the right to dismiss students from class due to uncivil behavior. Incivility is described as disrespectful verbal, non-verbal, written, or digital communication.

Policy

In order to prevent the appearance of incivility, follow these simple guidelines.

Classroom

1. Do not interrupt the presenter when speaking; wait for a pause or a preset time for questions to be asked.
2. Word questions without the use of sarcasm or a demanding nature.
3. Be respectful of your peers' rights to ask questions.

Practicum Experience

1. Do not interrupt or act disinterested when other students are presenting their patient information.
2. Come prepared to care for assigned patients; students are responsible for their learning.
3. Be respectful to all members of the healthcare team (e.g., faculty, staff, and peers).

Digital

Conform to appropriate digital etiquette by ensuring posts are relevant, respectful, and constructive.

There is no tolerance for disrespectful communication or incivility toward faculty or other students in the JoAnne Gay Dishman School of Nursing. Students engaging in uncivil behavior will receive disciplinary action according to processes defined in the JoAnne Gay Dishman School of Nursing Baccalaureate Nursing Student Handbook.

Approved Faculty Association 12/16/2011, Revised 6/24/16

MANDATORY COURSE EVALUATION POLICY

Purpose

Lamar University and the JoAnne Gay Dishman School of Nursing support the evaluation of courses for the purpose of the improvement of instruction. When students evaluate courses, faculty analyze the data and read the comments, and often use student observations and suggestions to make changes in course content and delivery. Both the administration and faculty take student input via course evaluation very seriously.

Policy

Students must complete the End-of Course Evaluation for each nursing course and provide verification of completion in a timely manner to receive a course grade. Students, who do not complete the End of Course Evaluation during the time period will receive an "I" (incomplete) and must see the course leader to determine when a change of grade can be posted.

Approved 03/19/10 UNS: SCEM

SOCIAL NETWORKING POLICY

Purpose

Lamar University Dishman School of Nursing (LU-SON) students are expected to adhere to the high standards of the nursing profession with regard to maintaining confidentiality and professionalism. This includes guarding patient confidentiality at practicum sites, in the classroom, at home and online. All health professionals and students are required to follow Health Insurance Portability and Accountability Act [HIPAA] regulations, when using social networking/media.

Policy

Professional conduct is required of students in all settings, including social media. Professional behavior is to be maintained at all times when identified as a LU nursing student. Unprofessional online conduct will be deemed a violation of SON "Student Behavioral Expectations Policy".

Students who have personal social networking sites established should enable the highest privacy settings limiting access to personal profiles, information, and photos. SON students must adhere to the following guidelines:

- maintain a social media site with professional integrity that does not contain any type of information about patients and/or clinical affiliates.
- do not post derogatory remarks or threats about anyone associated with the SON (e.g., students, faculty, staff, university administrators, clinical affiliates, and patients).
- do not post photos of other students, faculty, and/or staff without their permission. Posting photos of patients, their families, and/or staff at practicum affiliates is forbidden.
- observation of any inappropriate postings on social media should be addressed by student directly or reported within the SON.
- do not foster a personal relationship with a patient through social media.

Student organizations associated with Lamar University are required to register on the LU OrgSync portal. OrgSync is LU's online community of student organizations and may be used as a means to communicate among members of a student organization. Class officers register their class via the OrgSync tab under the student access at LU Connect <https://orgsync.com/home/>.

Lamar University Texas Nursing Student Association (LUTNSA) and class organizations may choose to create a social media page for class communication. Social media settings must be set to the highest level of privacy (e.g., Facebook pages should be set as a "secret group"). LUTNSA Advisors and Faculty Class Advisors must be members of the social media page and all classmates must be given access. It is recommended that at least two students serve as administrators of the page (e.g., president, historian). LUTNSA and class organizations are required to adhere to the Lamar University Social Media Policy: <https://www.lamar.edu/marketing-communications/guidelines/policies-and-guidelines/social-media-policy.html>

Approved by Faculty Association 5/7/2012, Revised Faculty Association 3/23/2018

STUDENT EMPLOYMENT RECOMMENDATIONS

Employment should be balanced with learning needs to allow students adequate time for study and rest. Students who are employed must not display their school insignia or Lamar identification badge at any time while working in any setting. Students who are employed are expected to maintain grades and satisfactory practicum performance; no allowances will be made for failure to maintain program criteria. Students who are employed, work under the auspices of the agency and are not representatives of Lamar University.

Revised UNS 11/18/2016

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ACADEMIC POLICIES

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ACADEMIC HONESTY POLICY

Purpose

Academic honesty implies integrity and ethical conduct in the development and submission of all student assignments. The JoAnne Gay Dishman School of Nursing complies with the University Academic Honesty Policy (<https://students.lamar.edu/academic-support/academic-policies.html>).

Policy

Academic Honesty

The university expects all students to engage in all academic pursuits in a manner that is above reproach. Students are expected to maintain complete honesty and integrity in the academic experiences both in and out of the classroom. Any student found guilty of academic dishonesty in any phase of academic work will be subject to disciplinary action.

Defining Terms for Academic Dishonesty

Cheating includes:

1. copying, without authorization from the instructor, another student's test paper, laboratory report, other report, or computer files, data listing, and/or programs;
2. using, during a test, materials not authorized by the person giving the test;
3. collaborating, without authorization, with another person during an examination or in preparing academic work;
4. knowingly, and without authorization, using, buying, selling, stealing, transporting, soliciting, copying, or possessing, in whole or in part; the contents of a test or assignment that has not been administered or assigned.
5. substituting for another student; permitting any other person; or otherwise assisting any other person to substitute for oneself or for another student in the taking of an examination or test or the preparation of academic work to be submitted for academic credit;
6. bribing another person to obtain a test not yet administered or information about such; and
7. purchasing, or otherwise acquiring and submitting as one's own work any research paper or other written assignment prepared by an individual or firm (This section does not apply to the typing of the rough and/or final versions of an assignment by a professional typist).
8. The JoAnne Gay Dishman School of Nursing considers the following to be a form of academic dishonesty:
 - a. *Unauthorized Multiple Submission*: Using any work previously submitted for credit without prior permission of instructor.
 - b. *Fabrication/Falsification/Alteration*: Intentional misrepresentation, invention, exaggeration or alteration of information or data, whether written, verbalized or demonstrated.
 - c. *Unauthorized Use of Exam Materials*:
 - 1) Posting, transmitting, recording of, or sharing test questions, quiz questions, answers to case studies - presented in class, conferences, or online - in any format, without prior authorization by the School of Nursing.
 - 2) The purchase and or distribution of test questions or test banks from nursing textbooks or an online vendor. This practice is a violation of the textbook copyright and may lead to legal repercussions and/or dismissal from the School of Nursing.
 - 3) Representing oneself, online or otherwise, as a nursing faculty to obtain access to materials that the publisher holds for faculty use only.

NOTE: Students may purchase nursing review books, which have multiple sample NCLEX questions and review materials, to facilitate achievement in the program.

Plagiarism

According to the American Psychological Association (APA, 2020), plagiarism “is the act of presenting the words, ideas, or images of another as your own; it denies authors or creators of content the credit that they are due. Whether deliberate or unintentional, plagiarism violates ethical standards in scholarship.” (p. 254). Authors should ensure that credit is given to the source when paraphrasing, directly quoting, and referring to data/tables/images (APA, 2020)

Please refer to the most current APA Publication Manual for detailed guidance on paraphrasing, direct quotations, referring to data sources, citations, and references.

Collusion is the unauthorized collaboration with another person in preparing work offered for credit.

Abuse of research materials is the mutilation, destruction, concealment, theft or alteration of materials provided to assist students in the mastery of course materials.

Academic work is the preparation of an essay, dissertation, thesis, report, problem, assignment, or other project that the student submits as a course requirement or for a grade.

Procedures

The faculty member and School of Nursing administration shall conduct a complete, thorough, and impartial investigation of the charge of academic dishonesty and determine whether or not the student was responsible for the violation. If the faculty member determines that the student was responsible for the violation, the faculty member may assess an appropriate and reasonable sanction (e. g., grade of zero on the examination, assignment). The student shall be entitled to a written notice from the faculty member of the violation, the penalty, and the student’s right to appeal the determination of dishonesty and/or the sanction imposed. A copy of the faculty member’s notice to the student shall be forwarded to the appropriate Lamar University Administrator(s). Academic dishonesty will result in disciplinary action up to and including program dismissal and/or suspension or expulsion from the university.

These procedures are in accordance with the Texas State University System (TSUS) Rules and Regulations and the Lamar University Academic Honesty Policy.

American Psychological Association (2020) *Publication manual of the American Psychological Association* (7th ed.). American Psychological Association

Approved Faculty Association 6/1/2005, Revised Faculty Association 8/22/2018, 12/9/2020; 12/15/2021.

ACADEMIC GRIEVANCE

Purpose

Academic grievances assert the improper application of institutional and/or Dishman School of Nursing policies. This policy outlines the process to provide for the resolution of alleged academic grievances in a prompt, fair, and equitable manner. Resolution of students' issues should occur with the appropriate faculty on an informal basis whenever possible.

Policy

If resolution is not reached informally, then formal university policies apply as specified in the Lamar University Academic Grievance Policy.

Informal School of Nursing Process:

- Step One: The student should discuss the issue directly with the faculty involved as soon as possible after the occurrence of the alleged incident/situation.
- Step Two: If the issue is not resolved, the student should consult with the course leader as applicable.
- Step Three: If the issue is not resolved, the student should consult with the Associate Director of Undergraduate Nursing Studies.
- Step Four: Issues not resolved by the Associate Director of Undergraduate Nursing Studies may be referred to the Director of the Dishman School of Nursing by the student, faculty, or Associate Director of Undergraduate Nursing Studies.
- Step Five: Informal resolution of the situation will be addressed by the Director of the Dishman School of Nursing. If informal resolution is not attained, the student may seek a formal review.

Formal School of Nursing Process:

- Step One: The student may request a formal review of the alleged issue/situation by submitting a written statement to the Director of the Dishman School of Nursing requesting a formal review.
- Step Two: The Director of the Dishman School of Nursing will review the issue/situation and make a determination. The Director may choose to refer the issue/situation to the Student and Faculty Relations Committee of the JoAnne Gay Dishman School of Nursing for recommendation prior to making a final determination.
- Step Three: If the issue is not resolved, the student should follow the Lamar University Academic Grievance Policy which includes submitting a written statement to the Dean of the College of Arts and Sciences within one calendar week of the written response from the Director of the Dishman School of Nursing

Initially adopted by Faculty Association 5/12/2004, Revised 3/18/2024.

DISCIPLINARY PROCESS

Purpose

The purpose of this policy is to provide clarity and transparency related to the JoAnne Gay Dishman School of Nursing disciplinary process.

Policy

Students are expected to be knowledgeable of and adhere to the JoAnne Gay Dishman School of Nursing (SON) policies and program requirements. Students, who are in violation of any of the SON policies and/or program requirements, will be disciplined as follows:

NOTE: Each policy violation will begin with First Incident Disciplinary Action. Students who demonstrate a pattern of policy infractions will be placed on behavioral contract.

First Incident Disciplinary Action:

Student will be verbally counseled and written documentation of the policy violation and verbal counseling using the "Counseling Form" will be placed in the student's permanent record.

Second Incident Disciplinary Action:

Student will be formally counseled utilizing the School of Nursing Situation / Incident form. The Situation / Incident Form will be signed by the student and faculty and placed in the student's permanent folder. The student's signature signifies his/her intent to comply with the actions delineated in the Situation / Incident Form. The Associate Director of Undergraduate Nursing Studies (UNS) will be notified by the course faculty for students requiring formal counseling for a disciplinary violation; a meeting with the Associate Director of UNS to discuss the incident may be required at the discretion of the Associate Director of UNS.

Third Incident Disciplinary Action:

Student will be placed on a Behavioral Contract. The terms of the contract will be determined by the appropriate faculty (as applicable) and approved by the Associate Director of UNS and/or the Director of the Dishman School of Nursing. The contract will be signed by the student, faculty (as applicable), Associate Director of UNS, and Director, Dishman School of Nursing and placed in the student's permanent record. The student's signature signifies his/her intent to comply with the actions delineated in the Behavioral Contract.

Depending on the severity of the violation(s) (e. g., academic honesty) the course faculty may proceed directly to the second or third incident disciplinary action after consulting with the Associate Director of UNS. Violation of Dishman SON policies will result in disciplinary action up to and including program dismissal and/or suspension or expulsion from the university.

Initially adopted by Faculty Association 5/96, Last revised 8/15/2024

LAMAR UNIVERSITY
COLLEGE OF ARTS AND SCIENCES
JOANNE GAY DISHMAN SCHOOL OF NURSING

BACCALAUREATE OF SCIENCE IN NURSING PROGRAM

SITUATION/INCIDENT*

STUDENT: _____ L# _____

*If patient care error:

Appropriate Hospital personnel informed: Yes _____ No _____

Appropriate Hospital forms initiated: Yes _____ No _____

COURSE OF ACTION

STUDENT RESPONSE: _____

_____ Date

_____ Student

Any appeal to this counseling must be submitted in writing to the Director of Undergraduate Nursing Studies by 3:00 p.m. on _____ .

TESTING POLICY FOR UNDERGRADUATES

PURPOSE

Testing policies and procedures are provided to maintain consistency in testing procedures and ensure test security. In addition, this policy establishes guidelines for reviewing and clarifying exam content in order to enhance the learning experience.

POLICY

Electronic Administration

1. Students will be oriented to the electronic examination software system prior to the first examination in the first semester of admission to the nursing program.
2. Testing dates and time will be stated in syllabus course calendar.
3. No exams will be given in advance of the scheduled date and time without approval from the Associate Director Undergraduate Nursing Studies.
4. Tests will be administered electronically. Students will be provided with:
 - a. Exam Access Code sheet that also serves as a scratch sheet
 - b. Test Item Question Form
 - c. Earplugs
 - d. Pencil
5. Exams will be timed based on question format and course policy. The exam timeframe will be stated in the syllabus course calendar. Students will only receive credit for answers provided during the allotted time.
6. Registration:
 - a. Students will arrive at the designated time/location to register/sign-in for the exam
 - b. All students must present a photo identification (e.g., driver's license, student ID) to the registration personnel
 - c. All belongings (e. g., backpacks, cell phones, electronic devices) will remain in the registration room for the duration of the exam. Students are encouraged to lock valuables in their vehicles during examinations. The JoAnne Gay Dishman School of Nursing is not responsible for lost or stolen items.
7. Students who arrive late for an exam will not be given additional testing time.
8. Students are prohibited from writing any notes on their scratch sheet of paper until the exam begins.
9. Exam Dress Code:
 - a. Students will be subject to visual inspection by the exam proctor upon arrival to the registration and/or exam room. This includes but is not limited to inspection of the ears, hands/arms, clothing, pockets, inside of face masks (if worn) etc.
 - b. No head coverings of any kind are allowed, including hats, caps, or hoods. Exceptions are made for religious / cultural purposes.
 - c. No cardigans, coats, jackets, or any other articles of clothing that may open are allowed in the exam room. Pullovers without pockets are acceptable.
 - d. Scarves and gloves are not allowed in the exam room.
10. During the exam:
 - a. Drinking and eating are not permitted. Hard candies such as peppermints or cough drops are allowed but must be unwrapped prior to the start of the exam.
 - b. Electronic devices (including but not limited to, phones, smartwatches, and earbuds) are prohibited during examinations.
 - c. If a phone or other electronic device goes off during the exam, all students will be asked to remove their hands from the keyboard until the phone is silenced. Time will not be added to the exam.
 - d. If the exam is interrupted due to technical difficulties additional time will be allotted to the exam.

11. Students are responsible for uploading their exam to the ExamSoft System prior to exiting the examination room. If a student does not upload their exam, he/she will be required to return to the examination room for a manual upload.
12. A preliminary score will be displayed upon uploading the exam to ExamSoft.
13. After uploading their exam, students are to sign out of the testing software.
14. Upon completion of the exam students will submit the following documents to the exam proctor:
 - a. Access Code Sheet (scratch sheet of paper)
 - b. User instructions for electronic examination software (as applicable)NOTE: The Test Item Question Form and the pencil remains at the assigned computer to be used during the Exam Review with Rationales session
15. Students will then return to the registration room and wait for Exam Review with Rationale to begin at the designated time. **NOTE:** DO NOT wait outside of the exam room.

Violation of the testing policy will result in disciplinary action up to and including possible dismissal from the nursing program.

Appropriate adjustments are made for students who meet the criteria of the Americans with Disabilities Act.

Missed Exams

1. **Make-up exams will NOT be administered under any circumstances** other than a university sponsored event or with permission of the Associate Director of Undergraduate Nursing Studies.
2. Students scheduled to miss an exam due to participation in a University sponsored event shall provide appropriate documentation to faculty in advance of the exam and are eligible to complete the missed exam.
3. Students who miss an exam for any other reason than a University sponsored event shall receive a **zero** on the exam. Students may submit an appeal to this policy by presenting rationale to the Associate Director Undergraduate Nursing Studies no later than two (2) business days following the exam. The student is responsible for seeking the exception from the Associate Director Undergraduate Nursing Studies.
4. If an exception to the policy is made the student will be assigned the grade made on the final exam as the grade for the missed exam.
5. If two exams are missed, the student will be given a zero for the second (2nd) missed exam. An alternative plan may be proposed at the discretion of the Associate Director of Undergraduate Nursing Studies and/or the Director, Dishman School of Nursing.
6. The Associate Director Undergraduate Nursing Studies will document all exceptions in the student's file and notify the course leader if an exception is granted.
7. Missed critical thinking exercises/activities will also result in a zero grade unless it is due to a University sponsored event.

Exam Review with Rationales

Exam Review with Rationales is conducted after each to allow students to view correct / incorrect responses and rationales for each exam item. During this time, the student has the opportunity to give written feedback on the Test Item Question Form. This session is time limited. Students will be allotted 15 seconds per exam item plus 15 minutes (for example, students will have 40 minutes to review a 100-item exam). Students are not required to attend Exam Review with Rationales. If a student chooses not to attend the Exam Review with Rationales session, the student must sign out and will not be allowed to re-enter the registration or exam rooms.

1. Students will return to the same exam room and same computer for Exam Review with Rationales. Exam Review with Rationales must be conducted on the same computer as the exam. The same policies listed above for testing apply to the Exam Review with Rationales Session. The following rules also apply:
 - a. All belongings must remain in the registration room.
 - b. Students are not allowed to talk amongst themselves during this session.
 - c. Students are required to sign and date the Test Item Question Form.

2. Students who arrive late for Exam Review with Rationales will not be given additional review time.
3. Students will log into the Review of Rationales using the following steps:
 - a. Enter the Exam Password
 - b. Enter the Review Password

Note: Students only have 3 attempts to enter the correct Review Password. Students are encouraged to request assistance from faculty/proctor after 2 unsuccessful attempts.
4. During the Exam Review with Rationales session:
 - a. Students may write comments on the Test Item Question Form as they review the exam.
 - b. Disruptive behavior will not be tolerated. If students become disruptive, faculty will end the Exam Review with Rationales Session.
5. Upon completion of the Review the students will submit the Test Item Question Form to the exam proctor before exiting the exam room, return to the registration room, sign out, and retrieve belongings.
6. At least 1 proctor will monitor the Exam Review with Rationales Session.

Content Clarification

Content Clarification is a learning experience for students to promote a better understanding or application of a nursing concept. Content Clarification affords faculty an opportunity to give rationale for exam items and/or to reinforce nursing concept application.

Content Clarification Policy

1. Content Clarification will be conducted for each exam by the course team members who contributed exam items.
2. Content Clarification may be conducted within a reasonable timeframe after the exam.
3. Faculty will clarify vital concepts or discuss specific exam items during this session. Information regarding credited items, rationale and exam statistics may be provided.
4. Students are strongly encouraged to attend Content Clarification sessions.
5. Electronic devices must be OFF during Content Clarification
6. Students may be asked to put all belongs away at faculty discretion
7. Disruptive behavior will not be tolerated. If students become disruptive, faculty will end the content clarification session.

Content Standardized Specialty Examinations

Content Standardized Specialty Examinations (e. g., fundamentals, psych-mental health nursing, medical-surgical nursing, maternity/pediatric nursing) are given in several courses through the nursing program to assess student knowledge of specific content areas. If a specialty examination is given, it is considered a requirement of that course. Administration of the exam will follow the Testing Policy for Undergraduates with modifications as appropriate along with testing vendor guidelines. Students who miss a specialty exam for any other reason than a University sponsored event shall receive a **zero** on the exam. Students may submit an appeal to this policy by presenting rationale to the Associate Director Undergraduate Nursing Studies no later than two (2) business days following the exam. The student is responsible for seeking the exception from the Associate Director Undergraduate Nursing Studies.

Students who receive a **zero** on the exam but were successful in the course and will progress in the curriculum, will be given an opportunity to take the missed exam to facilitate remediation of core content and preparation for the exit examination and the NCLEX-RN® examination. Results of the exam will not fulfill the evaluation criterion for the respective course. Students who are unsuccessful in the course will not be given an opportunity to take the exam.

Initially adopted by Faculty Association 5/5/1998, Last revised 8/15/2024

RX PRESCRIPTION FOR SUCCESS STUDENT POLICY

Purpose

The purpose of the RX Prescription for Success Student Policy is to facilitate academic success for all students enrolled in the JoAnne Gay Dishman School of Nursing.

The Caring Place serves to promote student success in nursing school and facilitates students to be lifelong adult learners. The RX Prescription for Success Plan is a remediation process that will require all students readmitted into the nursing program (the semester of readmission only) and those who do not score above 76% on nursing course unit exams to collaborate with the course faculty and The Caring Place in implementing a plan to support students' academic success.

Policy

The RX Prescription for Success will be implemented utilizing the nursing theory, Modeling and Role Modeling. By building on this theory, students will be accepted as unique, worthwhile individuals. Positive orientation will be promoted, and students' strengths will be affirmed. Furthermore, students will exert control of their learning by actively engaging in the development of goals and a plan of action.

Faculty Responsibilities

1. Course team members and The Caring Place will collaborate with students in the development of individualized RX Prescription for Success.
2. Students who were academically unsuccessful in a nursing course and readmitted into a nursing program will be informed that they are required to meet with the course faculty within the first week of resuming nursing courses in order to initiate an individualized RX Prescription for Success.
3. The course leader or designated course team member will identify students who score $\leq 76\%$ on either exam I or II or have an average of $\leq 76\%$ after exam III. The course leader or designated course team member will contact these students within 7 days of the exam and refer them to a faculty member to develop the RX for Success Plan.
4. The faculty and student will collaborate on developing an individualized RX Prescription for Success utilizing the following digital forms:
 - a. RX Prescription for Success Assessment Form
 - b. RX Prescription for Success Referral Form
5. Students will be asked to complete and e-mail the RX Prescription for Success Assessment form to the designated course team member prior to the scheduled meeting.
6. Faculty and student will collaboratively complete The RX Prescription for Success Referral form based upon the student's individualized academic and personal needs. Remediation resources (e.g., textbook, publisher's website, The Caring Place) should be identified that are consistent with the course learning outcomes.
7. The RX Prescription for Success Assessment and RX Prescription for Success Referral forms will be:
 - a. Saved on the LAN in the respective course folder
 - b. E-mailed to the student and The Caring Place
8. The faculty and student will communicate (by e-mail, phone, face-to-face meetings) every one to two weeks for the remainder of the semester to monitor the student's progress and facilitate academic success.

Student Responsibilities

1. Upon admission to the Dishman SON, students will complete the RX Prescription for Success Agreement posted in LU Learn.
2. Students who score $\leq 76\%$ on either exam I or II or have an average of $\leq 76\%$ after exam III are responsible for collaborating with course faculty in developing and implementing an individualized RX Prescription for Success Assessment plan.
3. Students are responsible for setting goals and formulating an action plan utilizing the RX Prescription for Success Assessment.

4. Students are expected to be accountable for their learning and utilize suggested resources for academic remediation.
5. Students are responsible for fulfilling all aspects of the RX Prescription for Success Referral within a reasonable timeframe.
6. Students who do not fulfill the responsibilities established by this policy must meet with the Associate Director of Undergraduate Nursing Studies and then, if deemed necessary, the Director, Dishman SON.

Approved by Faculty Association 2010, Revised 8/22/2018; Revised 8/15/2024



COLLEGE OF ARTS AND SCIENCES
LAMAR UNIVERSITY
 JoAnne Gay Dishman School of Nursing

RX PRESCRIPTION FOR SUCCESS ASSESSMENT

<p>Name: _____</p> <p>Cell # _____</p> <p>Current Living Arrangements: <input type="checkbox"/> Dorm <input type="checkbox"/> Apt. <input type="checkbox"/> Home</p> <hr/> <p>Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated Other _____ Children in the household <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>Travel time to school: _____</p> <p>Employed: Y ___ N ___ Hours per week _____</p> <p>“American” English as a first language? Y ___ N ___</p> <p>Have you received?</p> <table style="margin-left: 20px;"> <tr> <td>Y ___ N ___</td> <td>Grants</td> </tr> <tr> <td>Y ___ N ___</td> <td>Student loans</td> </tr> <tr> <td>Y ___ N ___</td> <td>Scholarships</td> </tr> </table> <p>Explain method of preparing for exams.</p> <p>_____</p> <p>_____</p> <p>What circumstances impeded your academic success?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>What do you believe will promote your academic success?</p> <p>_____</p> <p>_____</p> <p>_____</p>	Y ___ N ___	Grants	Y ___ N ___	Student loans	Y ___ N ___	Scholarships	<p>Class Preparation Y ___ N ___ Required Textbook Reading (Before class) Y ___ N ___ Faculty Provided Handouts</p> <p>Class attendance: Always ___ Mostly ___ Sometimes ___ Rarely ___ Never ___</p> <p>Number of hours/week spent studying? _____</p> <p>Where do you study? _____</p> <p>Method of study Alone ___ Group ___ Both ___</p> <p>Do you feel comfortable approaching course faculty for assistance / concerns? Y ___ N ___</p>
Y ___ N ___	Grants						
Y ___ N ___	Student loans						
Y ___ N ___	Scholarships						
<p>Learning Style</p> <p><input type="checkbox"/> Auditory <input type="checkbox"/> Tactile <input type="checkbox"/> Visual</p> <p>What motivates you?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Identify areas for improvement / growth:</p> <p><input type="checkbox"/> Class Preparation <input type="checkbox"/> Doing Practice Questions <input type="checkbox"/> Evaluating Knowledge <input type="checkbox"/> Motivation <input type="checkbox"/> Organization <input type="checkbox"/> Study Skills <input type="checkbox"/> Test Taking Strategies <input type="checkbox"/> Time Management <input type="checkbox"/> Other _____</p>						
<p>Self-Goal Statements:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <hr/> <p>Specific Action Plan to meet each Goal Statement:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>							
<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Student _____</td> <td style="border: none;">Date _____</td> <td style="border: none;">Faculty _____</td> <td style="border: none;">Date _____</td> </tr> </table>		Student _____	Date _____	Faculty _____	Date _____		
Student _____	Date _____	Faculty _____	Date _____				

Type of referral:

- 1st Encounter
- 2nd Encounter
- 3rd Encounter
- Readmission RX Prescription for Success



RX Prescription for Success - Referral Form

Student:

Course(s):

Date:

Did the student carry out previous RX Prescription for Success recommendations?

- Yes *Faculty Comments:*
- No
- NA

Course Resources

- Textbook
- Textbook Digital Resources - Publisher Website
- PrepU®
- Other

Digital Resources

- Lippincott NCLEX-RN® PassPoint Powered by PrepU®
- HESI® Trio Package (Case Studies, Practice Questions)
- Other

The Caring Place

- Creating A Study Schedule/ Time Management Plan
- Facilitated Learning
- Handouts from The Virtual Caring Place
- iPad Apps
- Review Books/ Supplemental Texts

Accessibility Resource Center (ARC)

*Communications Building Room 105
 Phone: 409-880-8347 Email:
 ARC@lamar.edu*



Student Health Center (SHC) and Counseling Services

*Student Health Center Building (Behind the library, between the Dining Hall and Communications Building) Phone: 409-880-8466
 Email: SHC@lamar.edu*



Other Recommendations

Faculty Notes/ Comments:

Student Signature

Date

Faculty Signature

Date

**LAMAR UNIVERSITY
JOANNE GAY DISHMAN SCHOOL OF NURSING**

THE CARING PLACE

Facilitated Learning Student Agreement

Facilitated Learning is an opportunity for motivated students to obtain assistance with challenging areas of didactic content. The goal of facilitated learning is to promote independent active learning throughout nursing school and throughout life.

1. Facilitated learning is a free resource provided by the Dishman School of Nursing available to any nursing student. Participation is a privilege and not an entitlement. I understand that resources are available on a limited basis.
2. I understand that participation in facilitated learning sessions through The Caring Place is voluntary.
3. Participation requires an **active** involvement on my part.
4. As an adult learner, I am **responsible** for **being prepared prior to attending a session**. Preparation includes, but is not limited to, having read the pertinent material (i.e., chapters, notes).
5. It is my **responsibility** to bring all pertinent material to facilitated learning sessions (i.e., textbooks, notes, PR's).
6. I understand that lack of preparation on my part may result in cancellation of the facilitated learning session.
7. Facilitated learning works best with small groups, so please make appointments. If you are not able to keep an appointment, please **call 880-8812 OR e-mail: caringplace@lamar.edu**

Participants Signature

Date

Printed Name

STUDENT PRACTICUM POLICIES

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ATTENDANCE, ABSENCE, AND CHANGE OF LIFE EVENTS POLICY

Purpose

Class, practicum and laboratory attendance is essential for academic success.

Attendance Policy

1. If absences are interfering with the successful completion of course outcomes, the student will be counseled by faculty about the consequences on the course grade.
2. No children are allowed in class since this interferes with the learning process of fellow students.
3. Students are responsible for all course material missed while absent.
4. Arrival to class after the starting time presents a problem. Students are expected to arrive on time. Students who arrive late to class are to enter by the back door and will be seated in the last two rows only. The instructor reserves the right to lock the classroom door and allow admittance at the next break time.
5. Students whose late entry for either class or practicum is excessive will be counseled and a plan or corrective action determined.
6. During the scheduled practicum time, students are not allowed to leave the practicum site without practicum instructor approval.
7. Students should make every attempt to be on time for exams. If an emergency arises, the student should notify the course leader and or the program office at (409) 880-8817.
8. Students arriving late for an exam must turn in their exam at the original announced finish time. These students will be placed at a table in the front of the room to minimize distraction to the other students. A counseling note will be placed in the student's file. No additional time to finish the examination will be given.

Absence Policy

Excused Absence

Absences from practicum or a lab will be deemed excused when appropriate faculty have been informed of absence, in a timely manner, i.e., prior to the event if possible or within 2 school days of returning to campus, and appropriate documentation is submitted to the Associate Director of Undergraduate Nursing Studies. When an absence is excused, the student will be allowed to participate in any activities designed to make-up the missed experience.

Unexcused Absence

Absences from practicum or a lab will be deemed unexcused as follows: when the student has failed to contact the course faculty or course leader regarding the absence in a timely manner and/or there is a lack of appropriate documentation submitted to the Associate Director of Undergraduate Nursing Studies; when a student is either not prepared, has dress code violations, or tardy; when a student is not approved to attend practicum due to student failure to submit PRDs by the designated deadline; or when a student fails to pass the practicum orientation exam. Unexcused absences must be made up, but will be documented as a breach of professional conduct and will be treated as a disciplinary problem. Once initiated, disciplinary action for unexcused absences will remain in effect over the course of the entire nursing program.

The student will receive a written warning upon the first occasion of an unexcused absence. Documentation will be placed in the student's folder and will remain in effect over the course of the entire nursing program.

Short Term Absences

Short term absences are defined as those that range from one day or less, to 2 weeks. *All absences* from educational activities deemed mandatory (i.e. on-campus practicum activities, off-campus practicum placements) must be approved by the Associate Director of Undergraduate Nursing Studies and course leader. When the absence is deemed **unexcused**, it will be documented on the practicum evaluation tool (PET) by the course faculty. More than 3 unexcused absences may result in untoward consequences, including course failure. See the Excused/Unexcused absence policy.

Students will be responsible for making up the missed practicum hours as arranged by the Course Leader and practicum faculty. Consequences of not making up missed practicum hours will result in course failure. Completion of course requirements ensures achievement of course Student learning outcomes and patient safety as the student progresses in the program.

For absences that occur due to illness, documentation from a healthcare provider must be submitted according to the policy attendance policy to support the medical reason. For absences that occur due to other circumstances (i.e. personal loss), relevant and acceptable documentation of the circumstance may be required. Documentation must be submitted to the Associate Director of Undergraduate Nursing Studies.

Major Illnesses or Injuries, Major Surgery, Pregnancy

In the event of contracting infectious illnesses or development of non-infectious conditions such as major surgery, serious injury, or pregnancy, the student must obtain a physician's release prior to participating in the practicum experience, notify the course faculty, and the Associate Director of Undergraduate Nursing Studies. In addition, Centers for Disease Control (CDC) guidelines relating to infected health care workers must be adhered to, as applicable.

Emergency and extraordinary circumstances will be addressed on an individual basis. In all other **foreseen or planned absences** from practicum activities (i.e. religious holidays, university sponsored events), students must initiate a request within the first two weeks of the semester in writing for an advanced approved absence from their Course Leader and Associate Director of Undergraduate Nursing Studies.

Students who are absent from on-campus or off-campus practicum activities for a period ranging from greater than 2 weeks to less than one term should consult immediately with the Associate Director of Undergraduate Nursing Studies to discuss progression in the course and program.

Absences from Nursing Courses Exams

See the Testing Policies/Procedures for Undergraduates in the UNS Handbook.

Change of Life Event

Leave policy related to short term leave, short term disability resulting from acute change of status event

Change of status event: Any life event that alters the health status of the student requiring absence from class, exams, and or practicum for more than 2 weeks of the semester. Generally, during a change of status event the student temporarily does not meet the physical or mental health standards required for participation in the nursing program. Full continuation in the program may result in threats to safety to the student or to the patients. The SON will make reasonable accommodations for change of status events. Medical events such as pregnancy, acute fractures, etc. require submission of medical documentation from the healthcare provider.

During a change of status event, the student may contact the Accessibility Resource Center (ARC). The ARC will assist the student and faculty to make appropriate accommodations, such as record lectures.

Pregnancy has the potential to become a change status event. Students may continue in the nursing program during pregnancy.

1. The student must submit documentation with each prenatal visit that states that they can continue the didactic and practicum courses.
2. The documentation must address if there are any limitations placed on the student
3. The student must inform the course faculty any time their health status changes.
4. The student must work with the course leader and practicum faculty to develop a plan to complete any missed learning activities.
5. At the completion of the pregnancy, the student must obtain two medical releases:
 - a. The first, to return to didactic classes.
 - b. The second should address whether the student is safe/well enough to return to the strenuous work that occurs in practicum as specified by the nursing program and the practicum agencies. There is no "light duty".
6. It is the student's responsibility to demonstrate eligibility to return to practicum courses, in consultation with the Associate Director of Undergraduate Nursing Studies. This may involve some practicum remediation as

per the individual student's academic needs.

7. Absences for more than 25% of the practicum hours may result in the students being required to withdraw from the course and enroll again at their own expense, with guaranteed placement in the course(s), the next time the course is offered. Because space for practicum placement is an issue, the student returning to practicum courses after a several week absence may be placed on a waiting list for placement. All efforts will be made to place/readmit these students.

Initially approved by UNS 3/19/10; Revised by Faculty Association 8/15/2024.

PRACTICUM/SIMULATON MAKEUP POLICY

Purpose

The Texas Higher Education Coordination Board (THECB) and the University have assigned credit hours for each nursing course. The THECB regulates the ratio of didactic hours to practicum hours which then determines the number of practicum contact hours for each course. The Texas Board of Nursing expects each nursing student to obtain sufficient practicum experience to facilitate passage of NCLEX and to ensure safe practice upon graduation.

Policy

The faculty will assign a practicum makeup day on the course calendar for each practicum course. Whenever possible the student will return to the same or similar practicum facility for the make-up day.

If a student is unable to return to the same facility, the faculty will assign the student to a facility or practicum area which ensures student will focus on the practicum outcomes for that specific course.

Students who miss more than one practicum day in a semester should be referred to the Associate Director Undergraduate Nursing Studies. The course faculty in conjunction with the Associate Director Undergraduate Nursing Studies may recommend that an "I" be given and additional practicum or assignments be arranged for the individual student.

Revised by Faculty Association 8/15/2024

PRACTICUM EXPERIENCE RESTRICTIONS

Students **shall not**:

1. Serve as a witness on consent forms.
2. Complete variance/occurrence reports of any kind without instructor assistance.
3. Breach patient confidentiality. Violation of HIPAA policies will result in disciplinary actions.
4. Take verbal/telephone orders from physicians.
5. Transcribe orders without staff/instructor supervision.
6. Procure and/or administer any medication that does not adhere to the Medication Administration Policy.
7. Use facility resources for personal use.

NOTE: Other restrictions may apply to specific practicum rotations or practicum facilities.

Approved UNS 5/7/2010, Revised UNS 9/30/2016. Revised Faculty Association 10/28/2016

STUDENT UNIFORM POLICY & DRESS CODE

Purpose

The uniform and dress policies provide a consistent dress code for all students enrolled in JoAnne Gay Dishman School of Nursing programs. It clarifies faculty expectations of students' dress in the practicum setting and allows nursing students to be easily recognized.

Policy

The following requirements have been established. Students are expected to comply with these guidelines to maintain a professional presentation in the classroom and practicum settings.

Dress Code:

Class:

Students are free to wear street clothes that are in good taste (not provocative, revealing or suggestive).

Course:

Students are instructed to follow the specific course dress code practicum/simulation requirements.

Practicum/Simulation:

Uniform

Students are required to have a complete practicum uniform. The practicum uniform consists of the following:

1. Identification Badge
 - a. One (1) Lamar University identification badge with the student's first name and title BSSN-LU is required.
 - b. The associated badge fee will be deducted from the student's Lamar University account.
 - c. Badge holders with Lamar University/Dishman School of Nursing logos are acceptable; all other badge holders are prohibited.
2. Students must wear the specified uniform white tops, pants, or skirt fitted at the waist (See Uniform Details). Skirts should be at least three (3) inches below the knee; hosiery must be worn with skirts. White hosiery can be worn alone or natural skin-tone hosiery with white socks.
3. Students must arrive to practicum wearing the required white lab coat (See Uniform Details).
4. The Lamar University JoAnne Gay Dishman School of Nursing patch must be permanently attached to the left sleeve of uniform top and lab coat, three (3) inches below shoulder seam.
5. All students are to wear white, leather or vinyl, duty or athletic shoes with minimal color (sling backs, open toes, clogs, and sandals are prohibited).
6. Students must wear white socks above the ankle (e.g., sports socks, tube socks, or support hose) or hosiery.

Hair

1. Hair color must be within range of naturally occurring human hair.
2. Hair longer than collar length must be worn up off the collar.
3. Hair ornaments (e.g., ribbons) are not allowed.
4. Hairstyles must be appropriate in order to don Personal Protective Equipment (PPE).
5. Artificial eyelashes are prohibited; individual exceptions for medical necessity must be approved by the Associate Director of Undergraduate Nursing Studies.
6. Scarves (except for religious beliefs) are not allowed.
7. Sideburns are to be neat and well-trimmed.
8. Mustaches and beards are acceptable on campus but may vary according to the policies of the practicum facility.

Jewelry

1. One pair of small (3-5 mm) earring studs are allowed in the ear lobes.
2. Students must wear an approved watch.
3. Students may wear a wedding band, small religious necklace (inside the collar), and the White Coat Ceremonial Pin (as applicable).
4. Jewelry is not allowed in any body piercing.
5. Gauges are prohibited.

Personal Grooming

1. Personal hygiene must be maintained (e.g., oral, body, hair hygiene).
2. Make-up should be moderate.
3. Nails should be neat, clean, and not longer than the tip of the finger.
4. Artificial nails are not allowed; nail coatings are not allowed.
5. Tattoos must be hidden from view unless on the hand or wrist as coverings will interfere with hand hygiene and infection control.
6. Avoid using perfumes, colognes, and scented soaps/lotions when providing direct patient care.
7. Appropriate undergarments must be worn (e.g., bras/sports bras should be consistent with skin tone. Undershirts should match uniform top).

Required Accessory Items

1. Bandage scissors
2. Calculator
3. CPR Mask
4. Goggles
5. Pen (black and red) and pencil
6. Pen light
7. Professional watch with second-hand capabilities
8. Stethoscope with bell and diaphragm

Community Based Service Learning (CBSL)

1. Lamar University JoAnne Gay Dishman School of Nursing monogrammed red polo shirt
2. Khaki or dark colored slacks or skirt, fitted at the waist
3. Professional (all one color) closed toe shoes

Potential Suppliers of Uniforms and Healthcare Supplies:

Frank's Medical Mart – 2405 McFaddin, Beaumont, TX

Alliance Medical – 3440 College, Beaumont, TX

Initially adopted Faculty Association 6/1/2005; Last revised 03/18/2024

UNIFORM DETAILS

Female and Male shirt may be any white tunic with pockets. No scrub tops or Polo shirts or any other type of pullover shirt. The white uniform top is required for ALL students.

If the student requires a long-sleeved shirt under the top in practicum, it must match the color of the uniform top and be made of cotton material.

The white lab coat must come to fingertip level.

White Lab Coat:

Females: Dickies #85400
Cherokee #CK452
Meta #15104
Landau #8726

Males: Meta #15007
Wonder Works #7102
Meta #15007

Unisex: Meta #6119

White Top:

Females: Cherokee Allura #CKA685
Cherokee Workwear #4728
Landay #LT100 or #LT105

Males: Landau #LT109
Landau #LT108

Red Top (Senior Preceptor students ONLY):

Females: Cherokee Workwear #4700
Dickies #85906
Wonder Works #100A or #101A

Unisex: Dickies #83706

Bottom:

Females: Wonder Work #W701A (Skirt)
Dickies #86106
Landau #LB405
PRO Women's Knit Waist Cargo Scrub Pant 5419-REDT

Males: Wonder Works 503A
Landau #LB408

Unisex: Cherokee Workwear #4100
Dickies #83006
WonderWork Unisex Drawstring Cargo Scrub Pant 500-REDT

Initially adopted by Faculty Association 6/1/2005; Last revised 03/18/2024..

PRACTICUM ORIENTATION POLICY

Purpose

Students enrolled in undergraduate nursing practicum courses must complete the Practicum Orientation Requirements and the facility specific orientation prior to attending practicum to meet yearly Occupational Safety and Health Administration guidelines. The facility specific orientation familiarizes the student with the policies and procedures of the practicum facility.

Policy

Practicum Orientation Requirements must be completed annually. These must be completed at the start of the first semester that the student is admitted, and at the start of the third semester. Students who are readmitted to the program must complete the practicum orientation requirements upon readmission to the School of Nursing.

Practicum Orientation Requirements:

1. Orientation videos: Students must watch the required videos and provide proof of completion by the designated due date.
2. Students review facility policies as designated by the practicum facility and sign the accompanying forms, including the forms related to the HIPAA privacy rules.

Additional Practicum Requirements:

1. Facility specific orientation requirements must be completed with every practicum course before students may attend practicum in that facility.
2. Dosage calculation exams and accompanying reviews must be satisfactorily completed before administering medications in the practicum facility. Completion date will be determined by the course faculty. See Dosage Calculation Proficiency Exam Policy.

Adopted by Faculty Association 8/20/2013; Revised Faculty Association 12/9/2020

SIMULATION EXPECTATIONS

Purpose

This policy serves as an agreement between the nursing student and School of Nursing (SON) faculty that the student is aware of the simulation expectations, such as confidentiality, civility in the learning environment, academic honesty, and professional behavior. The simulations may be recorded for future education or advertisement purposes.

Students must adhere to the following guidelines:

1. All CLIENT/ PATIENT information is confidential, and any inappropriate viewing, discussion, or disclosure of this information is a violation of SON policy.
2. This information is privileged and confidential regardless of format: electronic, written, overheard or observed.
3. The simulation lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The students involved in the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and no discussion of the action(s) of fellow students should take place out of the lab. A debriefing session will be provided for all simulation experiences.
4. Any inappropriate viewing, discussion, or disclosure of client information will be considered a violation of this policy, similar to how disclosing patient information is considered a violation of the Health Insurance Portability and Accountability Act (HIPAA) and disclosing educational information is a violation of the Family

Educational Rights and Privacy Act (FERPA). Destructive criticism and/or punitive or negative discussion in the lab or at another location, regardless of student performance, is considered unprofessional behavior.

5. Students will be asked to complete an evaluation form for the scenario/lab. Use the time to reflect on your experiences in the simulation lab and offer constructive feedback which will improve future learning experiences.
6. The simulation mannequins are to be used with respect and treated as if they were live patients.
7. No betadine, ink pens, markers, etc. are to be used near the mannequins. Only use 22 g IV catheters (or smaller) for initiating IV lines. Students must wash hands and wear gloves when working with all mannequins.
8. Wear uniforms appropriate for the practicum specialty areas according to SON dress code.
9. Complete Pyxis® orientation and training prior to simulation if Pyxis® is to be used during the simulation.
10. **Minimum Expectations** for all simulations include, but are not limited to:
 - a. introduction of self to the “client/patient.”
 - b. proper hand hygiene before and during all simulation experiences.
 - c. demonstrate initial data collection skills (ABCs).
 - d. active participation in case scenarios/ debriefing.
 - e. therapeutic and culturally sensitive communication with the client, faculty, family, and interprofessional team members.
 - f. accurate communication with “physician/ practitioner” utilizing the SBAR system.
 - g. use the 6 rights of medication administration and standard client identification procedures(s).
 - h. consistently use Standard Precautions.
 - i. perform skills according to procedures learned in the Learning Center / Skill Simulation Lab.
 - j. maintain client safety at all times.
11. If standardized patients are utilized and actual problems are identified, such as abnormal vital signs, the simulation student will notify the practicum/laboratory faculty and assist in referring the patient to primary care. Standardized patient information will remain confidential.
12. Students must review this policy annually, abide by the terms, and complete the **Simulation Expectations Quiz** in LU Learn (Blackboard) the semester admitted to the program and each following Fall semester to verify knowledge of this information. Completion of the **Simulation Expectations Quiz** serves as an agreement to abide by this policy.

Adopted 8/28/2009, Revised 4/11/16, UNS 11/18/16

NURSING STUDENT PRACTICUM DOCUMENTATION POLICY

Purpose

Lamar University (LU) is committed to providing a healthy and safe learning environment for students and faculty while maintaining patient safety and confidentiality. LU is committed to keeping patient information safe and maintaining compliance with Health Information Portability and Accountability Act (HIPAA) standards.

Policy

The School of Nursing (SON) strives to prepare students to be competent in informatics technology including documentation with electronic health records (EHR). It is the policy of the SON to assure, to the best of its ability, student documentation in practicum agencies adheres to HIPAA standards of patient confidentiality while facilitating charting competence, efficiency and compliance with legal and ethical standards of nursing practice.

Procedure:

The nursing student will:

1. consider all patient information as confidential and any inappropriate viewing, discussion, or disclosure of this information is a violation of SON policy.
2. adhere to the requirements of the practicum facilities/course requirements on student documentation.
3. utilize practicum agency computers for documentation when applicable.
4. continue to document medications administered in the actual patient record according to hospital policy.
5. immediately report abnormal values or critical information to practicum faculty and facility staff.
6. keep login information confidential and close down the computer application when away from the computer.
7. comply with SON regulations on the use of electronic devices in the practicum setting.
8. document their name and credentials as follows: full first name, full last name, degree program, and the SON identifier (LU). *Example: Jane Doe, BSSN, LU*

The nursing student will not:

1. allow anyone to access practicum documentation except practicum faculty or assigned preceptor.
2. document names or any other specific patient identifying information in any written documentation such as birth date, medical record number, physician, hospital, unit, or any other patient identifying information.

Approved Faculty Association 9/11/2009, Revised UNS 11/18/2016

INFECTION CONTROL POLICY

Purpose

The purpose of this policy is to reduce the spread of infection among patients and students in the health care setting while maintaining compliance with state and federal regulations.

Every patient is considered potentially infected. Isolation no longer depends on a diagnosis. Health care workers must protect themselves from exposure to all patients' bodily fluids or contaminated equipment (e.g., blood, feces, urine, saliva).

Policy

1. Wear Gloves: When coming in contact with any bodily fluid or contaminated equipment (e.g., when starting and discontinuing IV's; when performing mouth care, perineal care, Foley care, injections, accessing central lines, enemas; handling blood products, urine, feces, sputum, amniotic fluid, placentas, when diapering and providing newborn care).
2. Wear Gloves, Gown, and Mask or Goggles: When the possibility of being splashed occurs (e.g., labor and delivery, surgery, emergency department, all diagnostic labs).
3. Dispose of Needles and Sharps Properly: Do Not Recap! Place used needles and sharps in special containers provided.
4. Resuscitation: Use mouthpieces purchased, resuscitation bags, or other ventilator devices. Students are encouraged to not perform mouth-to-mouth breathing.
5. Wash Hands: Before and after contact with each patient, and after contamination. When gloves are used, wash hands before applying and after removing.
6. Clean Spills: Any blood or body fluid spills should be cleaned up promptly, using gloves and a disinfectant provided by the health care agency.
7. Specimens: All bodily fluid specimens should be considered biohazardous. Gloves should be worn when collecting and transporting specimens.
8. In addition, students are expected to follow institutional guidelines of affiliate agencies including isolation procedures and Centers for Disease Control and Prevention (CDC) guidelines.
9. In event that an incident should occur, report immediately to practicum instructor.

Initially Approved by faculty 9/10/1987; Revised UNS 11/18/2016

DOSAGE CALCULATION PROFICIENCY EXAM POLICY

Purpose

A Dosage Calculation Proficiency Exam (DCPE) is administered in selected didactic courses and the corresponding co-requisite practicum throughout the nursing curriculum. This policy applies to courses that identify medication administration as a critical behavior.

Based on successful completion of the prerequisite math course, students are expected to have basic math proficiency. Review and maintenance of basic math skills are essential to professional nursing practice.

The exams are designed to validate the retention of and acquisition of skills necessary to administer medications safely in the practicum setting. New material/skills may be taught using a variety of strategies. Students may acquire knowledge in class or via independent study assignments. Study guides, reading assignments, formal classes and informal sessions may be required prior to drug calculation exams.

Policy

1. The foundation for dosage calculation competency is provided in NURS 3330 Principles of Pharmacology. The course includes basic calculation skills related to the following areas:
 - a. Converting Units of Measure
 - b. Dosages Based Upon Body Weight
 - c. Calculating Safe Doses
 - 1) Minimum safe dose
 - 2) Maximum safe dose
 - d. Oral Medications
 - 1) Solids (tablets and capsules)
 - 2) Liquids
 - e. Preparing/Diluting Enteral Feedings
 - f. Parenteral Medications
 - 1) Liquids for injection
 - 2) Reconstitution of medications
 - 3) Intravenous drip rates for continuous and intermittent infusion (e.g., ml/hr, gtts/min)
2. Dosage calculation proficiency is a minimum competency for medication administration.
3. Students must successfully complete a timed drug calculation exam before medications can be administered in a practicum course.
4. Students have 3 opportunities to score 90% or greater on the Dosage Calculation Exam (initial test and 2 retakes) per course.
5. If a student fails to obtain the **required score (90%)** by the conclusion of the third test, the student will be deemed unsafe to administer medications, thereby unable to pass the practicum and will be required to withdraw from the practicum and co-requisite didactic courses.
6. Exam Administration
 - a. Faculty will provide a general study guide (e.g., The Caring Place Math Resource Guide) for the exam.
 - b. Calculators will be enabled within the digital testing platform.
 - c. Conversion tables will be provided in first and second semester courses (e.g., NURS 3330 & 3520/3221).

- d. Students are strongly encouraged to show all work on exams with calculations.
- e. Students will be given an opportunity to review a failed proficiency exam prior to subsequent testing.
- f. Remediation is required between each exam; course faculty will provide the remediation.
- g. Dosage calculation problems are to be congruent with course learning outcomes.
- h. Dosage calculation exams will be leveled and increased in depth of material as students progress through the curriculum.
- i. Three (3) minutes will be allowed for each calculation problem.
- j. All exams with calculations will include rounding instructions.
- k. Calculation problems may be a part of any exam based on course learning outcomes.
- l. Faculty will not answer any questions during the testing period.

7. Exam Blueprint

- a. Each Dosage Calculation Exam will consist of 20 fill-in-the-blank questions.
- b. Students can expect calculation problems on the following topics:
 - 1) Converting units of measure
 - 2) Calculating doses based on body weight
 - 3) Calculating safe doses
 - 4) Solid oral medications
 - 5) Liquid oral medications
 - 6) Preparing/diluting enteral feeding
 - 7) Liquids for injection (IV, IM, Sub Q) - Including injectables with large unit doses (e.g., penicillin and heparin)
 - 8) Reconstitution of medications
 - 9) Intravenous drip rates
 - 10) Specialty specific calculations as applicable to course outcomes (e.g., milliunits/hr, mg/min, mcg/min, mcg/kg/min)

8. **Unsatisfactory performance on the Dosage Calculation Examination:**

If a student does not satisfactorily pass the drug calculation examination on the third attempt, then the student is deemed unsafe to administer medications and will receive a grade of "U" in the practicum course associated with the drug calculation examination. The student must withdraw from the co-requisite companion courses.

9. **Exam Review with Rationales:**

An exam review with rationales will be completed immediately after completing the Dosage Calculation Proficiency Exam (DCPE). Fifteen seconds per question will be allotted for a total of 5 minutes for the review time (0.25 minutes X 20 questions = 5 minutes).

MEDICATION ADMINISTRATION POLICY

Purpose

The Lamar University JoAnne Gay Dishman School of Nursing (SON) adheres to the policies of all practicum facilities with which the School of Nursing is affiliated for student practicum learning experiences. The purpose of this policy is to establish guidelines for administration of medications by undergraduate nursing students to promote a safe environment for patients/clients.

Policy Process:

1. Students must pass a dosage calculation proficiency exam with a 90 or above at the beginning of the second semester and for every subsequent practicum course where students administer medications. Upon successful completion of the dosage calculation proficiency exam, and after successful demonstration of safe medication administration practices, permission will be granted to administer medications with supervision by faculty or a staff nurse in a practicum facility.
2. At the beginning of each practicum rotation when students will be administering medications, the Medication Administration Policy will be reviewed with students. Students are required to complete the LU Learn policy quiz with an electronic signature to acknowledge understanding of the policy.
3. Students will review the practicum facility's policies on medication administration and medication documentation during practicum orientation. Students must adhere to the medication administration and medication documentation policies of the assigned practicum facility.
4. Students must utilize individual computer access codes from the assigned facility to administer medications.

Procedure: The student must

1. prepare and administer all medications with a faculty member or staff nurse*.
2. notify a faculty member and staff nurse* when a discrepancy or error is identified.
3. verify the Medication Administration Record (MAR) against the original health care provider's order.
4. know the purpose, the classification or sub-classification, side effects and important teaching facts for each medication to be given (in accordance with the Texas Nurse Practice Act).
5. review allergies prior to each medication preparation and administration.
6. perform an individualized "quick" assessment based on the shift report (including pertinent lab values and vital signs) before preparing ordered medications.
7. verify dosage calculations with a faculty member or staff nurse prior to administration.
8. place unopened packages of medications in a labeled medication container consistent with the facility policy.
9. label all syringes with the medication, dose, date, time, and student initials (including flushes for irrigation that are not prepackaged) and place in a labeled medication container consistent with the facility policy.
10. Adhere to the rights of medication administration when preparing medications for administration. The student will adhere to the No Interruption Zone (Red Zone) standard while preparing medications.
11. follow patient/client identification procedures at the assigned facility (e. g., check armband, identify patient/client by name, date of birth, medical record number). Two identifiers should be used to verify patient/client identity before giving medications.
12. follow assigned facility's documentation process for medication administration.

General Guidelines:

1. Administer medications the first time each semester with a faculty member or staff nurse as directed by course faculty.
2. Take medications to only one patient/client at a time.
3. Assess pertinent vital signs and laboratory results before preparing medications for administration.
4. Listen to the patient. If the patient/client questions medications to be administered, double check with the faculty member or staff nurse, the MAR, and the original health care provider order.
5. Always double check insulin with two nurses with one being the patient's nurse.

6. Follow the facility's guidelines or window for administering medications before or after the scheduled time.
7. Do not take medications out of original packaging until documented in medication administration record in the patient's room.
8. Medications should be verified with a faculty member or staff nurse* before being crushed.

Restrictions: Students shall not

1. prepare or administer any medications without a faculty member or staff nurse* present.
2. give experimental medications, blood, blood products, chemotherapeutic medications, or cardiac intravenous push medications.
3. administer intravenous sedation or any type of paralytic agent.
4. use parenteral syringes to administer oral medications.
5. administer medications during a code situation.
6. administer medications in the emergency department (except for NURS 4481 preceptorship).

*A staff nurse is a licensed nurse employed by the facility and who is assigned to deliver patient centered care.

Approved UNS 5/7/2010; Revised 9/18/2017; 10/22/2021.

STUDENT MEDICATION ERROR POLICY

Purpose

The Lamar University JoAnne Gay Dishman School of Nursing (SON) adheres to the policies of all practicum facilities with which the School of Nursing is affiliated for student practicum learning experiences. The purpose of this policy is to promote a culture of accountability where students will be responsible for timely reporting of medication errors. Reporting of medication errors is in compliance with the American Nurses Association Code of Ethics, the legal standards for professional nurses and as required by regulatory parameters.

Policy Process:

1. The student will report all medication errors immediately to the faculty member, staff nurse and/or preceptor.
2. If a medication error occurs, the patient's condition will be assessed immediately by the staff nurse and/or preceptor and student. The assessment will be documented in the patient's record by the staff nurse and/or preceptor and student when applicable to the course.
3. Errors in administration of medication will be reported to the charge nurse or nurse manager.
4. The attending health care provider will be notified of any medication errors.
5. The student making an error or the one discovering an error will assist in completing the agency's incident/variance/occurrence report form according to the facility's policy with supervision of the faculty member.
6. No documentation of the error, or the completed incident/variance/occurrence report or any other required form will be documented in the patient's record.
7. The student and faculty will debrief after a medication error. Written documentation will be placed in the student's file and will be appropriately evaluated on the practicum evaluation tool (PET).
8. Examples of medication errors are as follows but not limited to:
 - a. Not following the rights of medication administration (i.e., wrong medication, patient, dose, route, time, documentation, reason, education, assessment, evaluation).
 - b. Omission of an ordered medication
 - c. Unauthorized medication administration (see medication administration policy)
 - d. Incorrect medication preparation
 - e. Failure to document medication administration, incorrect documentation, or failure to document indicated assessment data (e.g., heart rate, blood glucose)

9. A near-miss medication incident is a potential error that is caught before reaching the patient. A patient is exposed to an unsafe situation but does not experience harm either through luck or early detection. (AHRQ, 2017, Retrieved from <https://psnet.ahrq.gov/primer/adverse-events-near-misses-and-errors>)

A near-miss incident will be reported to the Associate Director of Undergraduate Nursing Studies. If a near-miss medication incident occurs, the student will be required to:

- a. complete a root cause analysis of the near-miss incident
 - b. complete any other remediation assigned by faculty.
10. Medication errors may be subject to the disciplinary process based on situation and severity. Students who make a medication error will be placed on contract and a Situation Incident Form will be completed. Students who make a medication error will complete a root cause analysis of the error, meet with the Associate Director of Undergraduate Nursing Studies, and complete any other remediation assigned by faculty. Errors in administration of medications will be considered as unsatisfactory and will be appropriately evaluated on the practicum evaluation tool (PET).

Initially adopted by UNS Faculty Committee 5/7/2010; Last revised by Faculty Association 8/15/2024

PRACTICUM READINESS DOCUMENTS

All Practicum Readiness Documents (PRDs) must be current one week before the first class day of each semester as published by the university. It is solely the student's responsibility to maintain updated Practicum Readiness Documents. Compliance reports provided by SentryMD will be reviewed and students will be informed of delinquent PRDs via e-mail and/or distribution of notification forms. Failures in e-mail communication and/or distribution of notification forms will not relieve the student from the requirement to maintain updated Practicum Readiness Documents before the first class day. All PRDs must be valid through the entire semester up through the last day of final exams.

Lack of submission of any PRDs will result in the following:

1. A first review will be conducted by the Academic Nursing Advisor one week before the first class day. If PRDs are incomplete, the student will receive an e-mail detailing the missing documentation. The student is responsible for responding to the e-mail notification by uploading supporting documentation of PRD requirements to SentryMD promptly.
2. A second review will be conducted by faculty the first week of classes. If PRDs are incomplete, the student will receive a *Notification Form to Student of Missing Documentation* and a written warning by the faculty will be placed in the student's permanent record.
3. If by the first practicum day, the PRDs remain incomplete, a formal written counseling utilizing the Dishman SON Situation/Incident form will be placed in the student's permanent record. In addition, the student will not be allowed to attend practicum. The absence will be unexcused, and the *Attendance, Absence, and Change of Life Event Policy* will apply.

Students are responsible for keeping copies of all documentation submitted to *StudentCheck/SentryMD*.

Approved by Faculty Association 10/20/2014; Revised by UNS 2/8/2019

LIABILITY INSURANCE

All students must purchase professional liability insurance. Insurance must be renewed on a yearly basis. This insurance will not cover students at work or at times other than supervised practicum courses. Further information will be provided prior to entering the practicum phase nursing courses.

STUDENT HEALTH POLICIES

Purpose

Nursing studies at Lamar University include practicum learning experience, which may present a potential risk of contracting and/or spreading infections. It is imperative that nursing students maintain optimal health. Students must be well informed in methods of safeguarding the health of both patient and self. In addition to protecting the health of students and patients, the student health policies address the requirements as directed by Lamar University, the Texas Department of State Health Services and the Center for Disease Control (CDC). The nursing program requirements are titled Practicum Readiness Documents (PRDs).

Included in this group of documents are the Health Statement Form, current cardiopulmonary resuscitation training (CPR), proof of liability insurance, immunizations, and TB skin testing. The JoAnne Gay Dishman School of Nursing has partnered with StudentCheck/Sentry MD, a PRD tracking service to receive, record, update, and report student's compliance with all practicum readiness requirements.

Policy

1. Cardiopulmonary Resuscitation (CPR)

Nursing students must maintain current CPR certification. The American Heart Association Basic Life Support (BLS) Provider course is the approved CPR course for the Dishman School of Nursing.

2. Health Statement Form

A completed Health Statement Form must be submitted to StudentCheck/Sentry MD, **prior to the deadline given** when entering the nursing program. Thereafter, the Health Statement Form must be submitted annually, one week prior to the first class day as published by the university academic calendar. The required immunizations must be initiated by the date indicated in the admission packet. Pregnant students, if in need of immunizations, are to consult their personal physicians for guidance. In event of identification of potential/actual conditions that may interfere with the student's ability to fulfill curriculum outcomes, the student will be referred to the Director of Undergraduate Nursing Studies.

3. Student Health and Practicum Attendance

a. Minor Contagious Illness

In the event of contracting minor contagious illnesses such as upper respiratory infections with cough and fever, influenza, contagious skin lesions, or other disorders spread by droplets, secretions, or skin contact, the student should seek medical consultation prior to participating in practicum experience.

b. Serious Illness, Injury, Surgery, or Pregnancy

In the event of a serious illness, injury, surgery or pregnancy, the student must obtain a physician's release prior to participating in the practicum experience. In addition, Centers for Disease Control (CDC) guidelines relating to infected health care workers must be adhered to, as applicable (see the Attendance, Absence, and Change of Life Event Policy).

4. Student Injury in Practicum Area

a. Personal injury, non-infectious

In event of accidental personal injury related to patient care, the student must:

- (1) Notify the practicum instructor.
- (2) Seek medical assistance from personal physician or emergency care services, as needed.
- (3) Implement variance/occurrence policy of health care facility, with assistance from practicum instructor.

b. Personal Injury, infectious

In the event of an accidental injury such as a contaminated needle stick, the student must:

- (1) Notify the practicum instructor.
- (2) Notify the infection control nurse employed by the health care facility.
- (3) Seek medical assistance at own expense.
- (4) Follow the current guidelines for immediate and follow-up care as recommended by the CDC.
- (5) Implement variance occurrence/policy of health care facility, with assistance from practicum instructor.

5. Health Care Expenses

Lamar University JoAnne Gay Dishman School of Nursing does not assume financial responsibility for student health care. Expense for all health care, such as physical examinations, immunizations, laboratory and other diagnostic tests, treatment of illnesses and injuries (including those incurred while in the practicum settings) is the responsibility of the student. The student may refer to the Lamar University Comprehensive Catalog regarding availability of student health services.

6. Confidentiality

Student health records shall be maintained in a confidential manner.

Adopted 3/1/03; Revised by Faculty Association 12/7/2022

IMMUNIZATION POLICY

Purpose

This policy was developed to comply with current state (Texas Administrative Code, Rule 97.64) 2010 and federal (Centers for Disease Control) 2015 guidelines regarding immunization of healthcare workers. The law mandates that health care workers (including students) receive a series of **REQUIRED** immunizations (see Immunization Requirements). Documentation of required immunizations or evidence of immunity must be provided, and copies of **actual** immunization records attached.

Policy

1. Students are required to provide a current annual Health Statement Form and proof of immunizations, immunity confirmed by serologic testing, or waiver to *StudentCheck/SentryMD*. All documents must be submitted via email or SentryMD uploader as a PDF attachment.
2. Students are responsible for the cost of the immunizations, as well as the serology (blood test) if needed to verify immunity.
3. Students are required to have documentation of compliance with the Immunization Guidelines. The documentation *must be submitted* by the date published in the admission packet.
4. Any needed immunizations must be completed by the published due date indicated in the admission packet.
5. **Waiver:** Acceptable waivers are written statements from a Primary Care Provider stating the reason for exemption. Waivers are due upon admission to the nursing program.

NOTE 1: Some mild reactions (rash, low-grade temperature or chills) may occur following the administration of any vaccine. Any reaction to vaccines taken during the semester must be reported to the course leader.

NOTE 2: Take all of your immunization records to your Primary Care Provider for a complete evaluation.

Revised by Faculty Association 10/20/2014; 12/7/2016; Revised Faculty Association 12/9/2020

IMMUNIZATION REQUIREMENTS

The following immunizations are **REQUIRED** by the JoAnne Gay Dishman School of Nursing Student Health Policy and **must** be completed one week prior to the first-class day of the semester. According to the Texas Administrative Code (2016), nursing students must submit proof of the following vaccinations before they engage in direct patient contact:

IMMUNIZATION	FREQUENCY	REQUIREMENTS
TUBERCULIN SCREEN	ANNUALLY	a. Either TB skin test <u>OR</u> TB blood test (IGRA: QuantiFERON or T-SPOT) b. Results of TB test: <ul style="list-style-type: none"> • If negative – submit dated report. • If positive – submit dated report and dated statement from your Primary Care Provider concerning your current health status. If a chest x-ray is performed, please submit copy of dated report only once.
POLIO	ON ADMISSION	Not required if older than 18 years of age. a. Date of last oral dose <u>OR</u> b. Exempt by age
TETANUS/ DIPHTHERIA/ PERTUSSIS	ON ADMISSION	An initial series of DTaP required with a Tdap booster documented after the age of 11 or 12 years, then a Td booster every 10 years. a. Proof of initial series <u>AND</u> b. Date of Tdap booster c. Date of last Td
MEASLES	ON ADMISSION	a. Dates of 2 immunizations* *All individuals born on or after January 1, 1957, must show 2 doses of measles vaccine administration on or after their 1st birthday and at least 30 days apart <u>OR</u> b. Confirmed immunity by serologic testing <u>OR</u> c. Confirmation of the disease from healthcare provider or official school records <u>OR</u> d. Written waiver or letter from primary care provider stating medical reason for exemption
MUMPS	ON ADMISSION	a. Dates of 2 immunizations* *All individuals born on or after January 1, 1957, must show 2 doses of measles vaccine administration on or after their 1st birthday and at least 30 days apart <u>OR</u> b. Confirmed immunity by serologic testing <u>OR</u> c. Confirmation of the disease from healthcare provider or official school records <u>OR</u> d. Written waiver or letter from primary care provider stating medical reason for exemption
RUBELLA	ON ADMISSION	a. Date of last immunization <u>OR</u> b. Confirmed immunity by serologic testing <u>OR</u> c. Confirmation of the disease from healthcare provider or official school records <u>OR</u> d. Written waiver or letter from primary care provider stating medical reason for exemption
VARICELLA	ON ADMISSION	a. Dates of 2 immunizations <u>OR</u> b. Confirmed immunity by serologic testing <u>OR</u> c. Confirmation of the disease from healthcare provider or official school records <u>OR</u> d. Written waiver or letter from primary care provider stating medical reason for exemption

IMMUNIZATION	FREQUENCY	REQUIREMENTS
HEPATITIS B	ON ADMISSION	<p>Choose the option which describes your circumstances:</p> <p>Option A: (Has proof of primary series. Must be completed in the order given):</p> <ol style="list-style-type: none"> a. Submit dates of 3 immunizations (usually taken as a child – also called “primary series”). b. Obtain serologic testing or titer (blood test) to determine immunity to Hepatitis B virus. c. Result of serology/titer test: <ol style="list-style-type: none"> 1. Submit dated proof of serology/titer report 2. If result is positive (immune), submit dated proof of serology/titer. 3. If the result is negative (not immune), submit dated proof of result, then student must <u>EITHER</u> submit dated proof of taking one booster dose <u>OR</u> repeat a second series of 3 immunizations (submit dated proof after each immunization). 4. After the above requirements are completed, is not necessary to submit another serology/titer <p>Option B: (Had primary series but cannot locate proof)</p> <ol style="list-style-type: none"> a. Obtain a serology/titer b. If result is positive (immune), submit dated proof of serology/titer. c. If result is negative (not immune), submit dated proof of result, then the student must <u>EITHER</u> submit dated proof of submit dated proof of taking one booster dose <u>OR</u> repeat a second series of 3 immunizations (submit dated proof after each immunization). d. After above requirements are completed, is not necessary to submit another serology/titer. <p>Option C: (Has never received the primary series. Must be completed in order given)</p> <ol style="list-style-type: none"> a. Must complete CDC approved Hepatitis B vaccine series. Follow guidelines below for vaccination series (3 vaccines) (most common). <ol style="list-style-type: none"> 1. Submit dated proof of first immunization by the application deadline. 2. Submit dated proof of second immunization by deadline in current nursing program application (required before providing patient care). Follow the recommendation of the primary care provider, the second immunization must be received no sooner than one month after the first. 3. Submit dated proof of third immunization after date recommended by primary care provider (usually 5 months after receipt of second immunization). b. Submit dated proof of serology/titer after the date recommended by primary care provider (usually 4-6 weeks after third immunization is received.) <p>Option C: (Needs medical exemption) Submit dated waiver or letter from primary care provider stating medical reason for exemption.</p>
INFLUENZA VACCINE	ANNUALLY	Please refer to INFLUENZA VACCINATION POLICY

Reference

Texas Administrative Code (2016, July). Rule 97.64: Required Vaccinations for Students Enrolled in Health-related and Veterinary Courses in Institutions of Higher Education. Retrieved from [https://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=97&rl=64](https://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=97&rl=64)

Adopted by Faculty Association 1996; Revised 5/3/2023, 11/29/2023

INFLUENZA VACCINATION POLICY

All students enrolled in the Dishman SON undergraduate nursing programs are required to submit documentation of having received the influenza vaccination for the current flu season (September through April). The influenza vaccination is required even if a student is not enrolled in a practicum course. The documentation must be submitted to and processed by SentryMD each year. Students must submit documentation to SentryMD at least 5 business days before the due dates described below to allow for processing (weekends and holidays are not considered business days).

- For Fall Start: Submit dated proof of immunization for the *current* flu season by October 15 each Fall semester.
- For Spring Start: Submit dated proof of immunization for the *current* flu season no later than one week before the first day of class. For each subsequent semester, submit dated proof of immunization for the *current* flu season by October 15.

Exemptions for the influenza vaccination may be granted for medical reasons, religious reasons, or other matters of conscience. Students requesting an exemption must present documentation supporting the request to the Associate Director of Undergraduate Nursing Studies by October 1 for students starting in the fall and by the first-class day for students starting in the spring.

Students with an exemption will be required to wear a mask in patient areas during the peak of the flu season or for the length of time required by the practicum facility. Some facilities will not permit students, including students with an exemption, to attend practicum without an influenza vaccination. If another practicum site cannot be secured, students with an influenza exemption will need to withdraw from the related didactic and practicum courses.

Enforcement

Students who are noncompliant with submitting documentation of the influenza vaccination, will not be allowed to attend practicum, will receive an unexcused absence for one missed day, and placed on a contract. A second missed day for this reason would result in violation of the contract, resulting in possible course failure.

Initially adopted by Faculty Association 9/14/2012; Last revised 8/15/2024

CRIMINAL BACKGROUND CHECKS

Practicum sites and school districts require criminal background checks on students before they are permitted into practicum facilities. The requirement is based on the concept of due diligence and competency assessment, including post criminal behavior of all individuals whose assignments bring them into contact with patient and employer. On this basis, the JoAnne Gay Dishman School of Nursing (SON) has implemented a criminal background screening policy for all students.

Criminal Background Checks for Admission to the Nursing Program

All students applying to Lamar University's Nursing Program are required to complete a criminal background check. Verification must be received from the designated company prior to being fully admitted.

Practicum sites and school districts require criminal background checks on students before they are permitted into practicum facilities. The requirement is based on the concept of due diligence and competency assessment, including post criminal behavior of all individuals whose assignments bring them into contact with patient and employer. On this basis, the SON has implemented a criminal background screening policy for all students.

Please see the *Criminal Background Screening Policy*.

Required Reporting of Criminal Activity

The SON requires that students report all criminal activity during their education process at Lamar University. The SON works closely with students in the declaratory process and in providing counseling / information so that students may be eligible to apply for the NCLEX Exam at the conclusion of the nursing program.

Criminal Background Checks for Licensures

HB 2208 (Dec. 2003) stipulates that ALL individuals seeking licensure in the state of Texas by examination must comply with a criminal background check through the Texas Department of Public Safety (DPS) and the Federal Bureau of Investigation (FBI).

1. Do not wait until submitting the NCLEX-RN application for the exam to disclose any eligibility issues to the Texas Board of Nursing. Please inform the Associate Director of Undergraduate Nursing Studies early in the program of any issues for eligibility for licensure.
2. Each student must have a valid criminal background report to become a candidate to take the NCLEX-RN examination.

Eligibility issues for Licensure as a Registered Nurse may arise from:

1. **Criminal Convictions (Misdemeanor, Felony)**
2. **Addiction to/Treatment for Chemical Dependency**
3. **Diagnosis, Treatment, or Hospitalization for Mental Illness**

If any of the three circumstances apply to you please see the “petition for declaratory order” information at the Texas Board of Nursing website (www.bon.state.tx.us/olv)

Eligibility for Licensure as a Registered Nurse for: (1) Persons with Criminal Convictions (misdemeanor, felony) (2) Addiction to/Treatment for Chemical Dependency, Diagnosis, Treatment or Hospitalization for Mental Illness.

If any of the circumstances listed above apply to you, read the current information on the Texas Board of Nursing website to identify how your past history can affect the possibility of becoming a registered nurse or practicing nursing. Actions you can take also are identified that may increase the chances that you can pursue becoming a Registered Nurse and practicing nursing. (See petition for declaratory order at the Board of Nursing website: (www.bon.state.tx.us/olv/pdfs/DOapp.pdf))

Texas' licensing board for Registered Nurses, the Board of Nursing (BON), is directed by state statute to handle the licensing, education and discipline of registered nurses within Texas. The state statute is titled the *Texas Nursing Practice Act* (NPA) and the BON is authorized to uphold and administrate the NPA as well as adopt and enforce Rules regarding the practice of professional nursing.

Under its Rules concerning criminal conviction, chemical dependency, and mental illness, the BON may refuse to approve persons to take the licensure examination, may refuse to issue or renew a license or certificate of registration, or may refuse to issue a temporary permit to any individual that has been:

- Convicted of a felony, a misdemeanor involving moral turpitude, or engaged in conduct resulting in revocation of probation imposed pursuant to such conviction (*Rules §213.28. Licensure of Individuals with Criminal Convictions*).
- Addicted to or treated for use of alcohol or any other drug within the past five years (*Rules §213.29(d)(1-3) Substance Use Disorders and Abuse/Misuse of Alcohol or Drugs*).
- Diagnosed with, treated or hospitalized for mental illness within the past five years (*Rules §213.29(e)(1-3) Mental Health Conditions and Diminished Capacity*).

Actions to Consider Taking

Since each individual's time and circumstances of a conviction, dependency, or mental illness are unique, an opportunity to sit for the licensing exam is available. *Section 301.257. Declaratory Order of License Eligibility* of the NPA provides, for individuals who have reason to believe they may be ineligible for licensure, a process to request the BON to make a determination of that issue. This option is best pursued in order to avoid investing 2-to-4 years in nursing education only to find out as you near graduation that you are not eligible for licensure. It is also an ineffective use of a school's resources to educate a person not eligible for licensure. *BON Rules §213.30* addresses declaratory order in more detail.

If your goal is to become a registered nurse, you need to determine whether your past or present circumstances present any obstacles. If there are, you should consider taking these actions:

1. Call the Texas Board of Nursing (512-305-6809) and talk with a staff member about the issues specific to your situation as well as the process, timelines and fee(s) involved in filing a *Declaratory Order* petition.
2. Success in providing your rehabilitation, recovery and fitness to practice now or in the future, depends on what you have done with your life since conviction, dependency, or illness and what you are doing now. You are required to submit a completed, original "Petition for Declaratory Order". The document is available from the BON; a photocopy or facsimile is not acceptable. The petition must be accompanied with the appropriate fee, photograph, all written documentation, reports, and letters requested by the BON. Additional letters may be advantageous attesting to (a) your positive progress in rehabilitation/recovery, (b) concerning your potential as a nurse from a nursing school instructor or health care employer, or (c) your success as a good, contributing citizen in the community. Understand that once you have initiated a request to obtain a license, note that failure to respond within 60-days to further BON requests for information or notification of denial of eligibility can result in your "eligibility file" being closed.

Revised UNS 11/18/2016, Revised Faculty Association 8/15/2024

CRIMINAL BACKGROUND SCREENING POLICY

Purpose

The Lamar University (LU) JoAnne Gay Dishman School of Nursing adheres to the policies of all practicum facilities with which the School of Nursing is affiliated for student practicum learning experiences. Many practicum facilities and school districts require criminal background screening of all students.

Practicum agencies used by the LU JoAnne Gay Dishman School of Nursing (LU SON) stipulate in the practicum affiliation agreements that students' criminal background be prescreened before they are permitted into the practicum facility. This prescreening requirement is the same as that required of employees of public and private practicum agencies. The rationale for this requirement for practicum students is based on the

concept of due diligence and competency assessment of all individuals whose assignments bring them in contact with patients and employees. Competency assessment extends beyond technical skills to include an individual's past behavior as indicated by their criminal history. This approach ensures uniform compliance with Joint Commission standards pertaining to human resource management. Moreover, the public is demanding greater diligence in light of the national reports of deaths resulting from medical errors. Successful completion of a background check does not guarantee eligibility to take the NCLEX-RN examination, licensure or employment after graduation. Full acceptance into the nursing program is contingent upon satisfactory results of the Criminal Background check.

Policy Timing

After the application deadline, the Dishman School of Nursing will submit all applicants' names to the Texas Board of Nursing (TBON) for the required Criminal Background check (CBC). Applicants who need to be fingerprinted will receive an email from IdentoGO with instructions for making an appointment. Applicants who have recently completed a TBON CBC will not receive an email from IdentoGO to make an appointment because their previous fingerprints will be used for the CBC. All applicants with a clear criminal background will receive a Blue Card in the mail. All Applicants with a positive CBC will be notified by TBON and given instructions to complete the required Declaratory Order. **The Blue Card (or if applicable, the Declaratory Order outcome letter) is a mandatory requirement in order to obtain full acceptance into the nursing program** The Blue Card, or the Declaratory Outcome letter, must be received by LU SON 10 days prior to the first-class day of the nursing program. Please refer to "**Process**" section below for further information regarding the Declaratory Order. The results will be accepted for the duration of the student's enrollment in the nursing program if the participating student has not had a break in the nursing program and if the student has had no qualifying legal incidents or convictions while enrolled. A break in enrollment is defined as nonattendance of one full semester or more. Attendance must be verifiable through the university.

Process

The LU SON accepts criminal background screenings completed by the Texas Board of Nursing. The screening will include the student's complete criminal history, including the cities and counties of all known residences. The student is responsible for any cost associated with the criminal background screening.

A student does not qualify for the blue card/clear report anytime there is a record of criminal activity located or they are self-disclosing an incident not yet reported to DPS/FBI. The TX BON provides a process by which minor infractions can be handled in a timely manner. More serious findings will take more time and may lead to a delay in qualifying for admission.

In general, based on Texas Board of Nursing guidelines, the following histories will disqualify an individual from consideration for admission in the nursing program:

1. Misdemeanor convictions/deferred adjudication or felony convictions/deferred adjudications involving crimes against persons;
2. Misdemeanor convictions/deferred adjudication related to moral turpitude;
3. Misdemeanor/felony convictions/deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances;
4. Registered sex offenders.

Individuals with any of the above histories will not be eligible to enroll in the nursing program, and if the history is discovered or a conviction occurs after enrollment, the student, will be required to withdraw from the program. A student who is convicted of a criminal offense while enrolled in the program must report the conviction to the Associate Director of Undergraduate Nursing Studies within three days of the conviction. The term conviction for these purposes includes probated sentences and deferred adjudications.

A student may be considered for admission to the program if the TX BON issues a Declaratory Order stating the individual is eligible for initial licensure or license renewal.

Notes

1. The student should be aware that the disqualifications listed above are used for employment eligibility by most hospitals in Texas.

2. Completion of a specific program will be determined by the student's ability to successfully complete the required practicum rotations.
3. Practicum rotations are completed at sites specified by and contracted with Lamar University. Lamar University will not locate or provide alternative sites for practicum rotations for student ineligible to attend practicum rotations at the specified sites.

Compliance and Record Keeping

1. The Texas Board of Nursing will notify Lamar University (JoAnne Gay Dishman School of Nursing) of all individuals who fail a criminal background check.
2. Verification sent by the TX BON to LU will include only the student's name and social security number. Details of the criminal record will not be included in the report.
3. The LU JoAnne Gay Dishman School of Nursing will send verification on adherence to the policy to the practicum affiliate prior to the practicum rotation start date. Verification is accomplished by sending a letter from the JoAnne Gay Dishman School of Nursing on letterhead stating that these standards have been met by the student, listing the student's full name and practicum rotation start date. If more than one student is attending a practicum rotation, a comprehensive list with all of the student's names may be submitted.

Note:

Verification information will be filed in a secured area to ensure confidentiality. In the event that the student feels that an error has been made in the results of the criminal background check, it is the responsibility of the student to contact the external vendor for a verification check and the student is responsible for any cost associated with this check. Other than error relative to identify, there will be no appeal of this policy.

Revised by UNS 1/24/2014, Revised Faculty Association 8/15/2024

COMMUNITY-BASED SERVICE LEARNING

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COMMUNITY BASED SERVICE LEARNING

Background:

Nursing education has always utilized an experiential based learning model. Didactic, practicum, and lab activities produce both cognitive and psychomotor skills essential to nursing practice. Community Based Service Learning (CBSL) at Lamar University's JoAnne Gay Dishman School of Nursing (SON) is defined as

“a philosophy of education which emphasizes active, engaged learning with the goal of social responsibility...it is reciprocal learning, dynamic and interactive...which suggests mutuality in learning between the student and the community with whom he or she is actively engaged” (J. C. Kendall, 1990, *Combining Service and Learning*, pp 22-23).

CBSL instructional methodology integrates community service with academic instruction and focuses on critical, reflective thinking, and civic responsibility. Service activities involve students in organized community service that addresses local to global needs while developing their academic skills, sense of civic responsibility, and commitment to both the community and the nursing profession. Students, community, faculty, and the nursing profession all ultimately benefit from community-based service learning.

Nursing students are expected to be professional, accountable, adult learners, capable of functioning within the scope and boundaries of community service volunteerism. As adult learners, they are expected to make appropriate, independent decisions without direct faculty supervision.

Goal and Objectives:

At completion of the nursing program at Lamar University, the graduate is expected to be a competent, caring nurse who demonstrates professional integrity, effective communication, active inquiry, and *service to the community*. (JoAnne Gay Dishman School of Nursing, *Philosophy*)

Community Based Service-Learning Outcomes:

	DEC Practicum Judgments and Behaviors	LEVEL I LEARNING OUTCOMES	CBSL Hours	Course
1	MOP C3c, 6b 3d, 4, 6b PCC B2, B5, B6, B1A, B8, C2, E8, G1a, G2a, G7 PSA B1,6b, C1a MOT A1a, 1a, 2c, 3b, 3c	Demonstrate the unique worth of service-learning activities as it applies to civic pride and respect for diversity.	30 hours	NURS 3221
		LEVEL II LEARNING OUTCOMES		
2-1	MOP C 3a, b, c, 4, 6a, 6b PCC B9, B12, B6, B8 PSA B2, 6b MOT A1a, B1a, B1b, 2a, 2b, 3abc, 4b, 5b, 5c, C1abc, 2b, 2c, 3a, 3b	Compare the value of reciprocity/mutuality between the service learner and the person (s) being served.	30 hours	NURS 4261
2-2	MOP 2a, 3a, 3b, 3c, 3a, 3d PCC 2a, 2b, 2c, B6, B7, B11, B12, B10, C1a, 3a- b, 4a-b, 6, C4, D1a, 2a, 2d, 3a-b, 3c, E1a, 1b, 1c, E12, E12a, 12b, F2, G1a, 3b, 2a, 2b, 5a, 5b, 5c, 6a, 6b PSA A5a, 5b, B2, 3a, 3b, 3c, 4, 1, C1a, C1d, 1e, 2 a-b, 2a-b, 3a-b MOT A1a 1b, A2a, 3, 4, 2a-b, 3a-c, 4a-b, 5a-c, B2b C1a-b	Interpret a meaning of the service learning experience as it relates to the concept of caring, the role of the professional nurse, and the global health needs of humanity.	10 hours	NURS 4381

CBSL Journal

Each student must maintain a CBSL Journal which will be evaluated each semester to determine if the student is meeting the component learning outcome and hour requirement. The CBSL Journal is central to evaluating student's achievement of CBSL Learning Outcomes.

The CBSL Journal will:

- be word processed
- be in narrative format
- include name of agency (agencies) utilized, contact person(s), and phone number(s)
- address the CBSL learning outcome listed in the practicum course syllabus. Specifically, the narrative should discuss the nature of the activity in relation to the course specific learning outcome, what service was performed by the student, how the service met a community need, and how the activity assisted the student to achieve the learning outcome. enhanced content presented in class.

CBSL Journals are to be submitted by the date listed in the CBSL LU Learn course.

Intent Forms

An INTENT FORM should be completed before the student **BEGINS** any CBSL activity in a non-previously approved agency. This form serves as written notification to the agency that the student intends to perform community service at the agency. All sections of the INTENT FORM must be completed, and the form signed by both the student and the agency. The student should submit the INTENT FORM to the CBSL Coordinator at least 1 week prior to the date service is anticipated. Approval will be noted in the LU Learn gradebook.

CBSL Policies and Procedures

University, college, and SON policy all preclude the student from missing any regularly scheduled class, lab, practicum, or exam for the purpose of completing CBSL hours.

Students engaging in CBSL are required to provide a 24-hour notice to the appropriate agency personnel if the student is unable to attend a CBSL activity in which he or she agreed to participate.

CBSL Service Guidelines

Three types of service-learning activities are recognized by the JoAnne Gay Dishman School of Nursing: (1) service to the community at large, (2) service to the university, and (3) service to the profession.

Students are encouraged to select activities or programs which will enhance rather than duplicate the traditional instructor-led practicum experiences. Students should select areas of their own interest, but the activities must provide opportunities for students to strengthen their foundation in nursing practice and must also relate to the learning outcomes of the nursing curriculum at Lamar University. Students are strongly encouraged to select activities that have been "pre-approved". Students may request approval for CBSL activities that are not pre-approved by utilizing the Letter of Intent process.

Students may complete service hours at an agency where they are employed, but they may not complete those hours in the department where they normally work, nor may they complete service hours performing tasks or providing services they normally do as part of their employment. A Letter of Intent must be submitted into the CBSL LU Learn course and permission from the CBSL Coordinator is required prior to the service experience. Remunerated service is not community service!

Students may complete required hours at one agency or at as many as desired. A reasonable amount of preparation and training time required by an agency will count as CBSL hours. However, when the CBSL activity occurs at an agency requiring extensive training or orientation, actual service hours will be required. The CBSL coordinator or designee, will determine and assign the extent of those additional hours.

BSN students must complete at least 50 hours of service in the community setting. The remaining 20 hours may be earned in any of the three service categories (e. g., community, profession, university).

CBSL Service Scholar

Lamar University Joanne Gay Dishman School of Nursing recognizes the importance of and values nursing students engaging in service activities. While the Dishman SON requires the achievement of 70 CBSL hours, students may elect to participate in service hours that exceed the minimal requirement. Choosing to complete more than the minimum requirement demonstrates a commitment to civic responsibility, the nursing profession, and exemplifies the SON Motto: ***A Spirit of Caring, A Vision of Excellence***. Therefore, students who achieve 90 or more CBSL hours will be recognized as a *CBSL Service Scholar* and awarded with certificate from the CBSL Coordinator. *CBSL Service Scholars* are encouraged to include this designation on resumes when applying for a nursing position upon graduation.

CBSL Activity Selection

A current list of approved agencies, services, and programs is located in the CBSL LU Learn course (Blackboard). *Examples of pre-approved agencies and programs include:*

1. Antioch Missionary Baptist Church Beaumont – Community Service
2. Arboretum of Winnie Nursing and Rehabilitation Center
3. Arden Place of Beaumont
4. Baptist Hospitals, Faith Community Nursing Survey
5. BMT and Houston Food Banks
6. Cardinal CARE Projects – Faith Community Nurse based through Dr. Elizabeth Long
7. Compassion Hospice
8. Destiny Church Orange – Community Service to Expecting Mothers
9. Fellowship of the Nations – Baytown – Community Service
10. First Baptist Church Vidor – (Health Fair)
11. Helena Park Elementary School Nederland – Children’s Education Activity
12. Helping Hands of America
13. Hope Women’s Resource Center
14. Intrepid USA Healthcare Services
15. JoAnne Dishman School of Nursing special activities
16. Lamar University – Peer Mentoring Students and Peer Facilitators
17. Legend Oaks Health Care Rehabilitation
18. Magnolia Manor
19. Medcomplete Healthcare
20. North End Baptist Church Beaumont
21. Northpoint Community Church – Community Service
22. Nutrition Services Meals on Wheels
23. Oak Grove Nursing Home
24. Red Cross – Four different community activities
 - STAND DOWN – Veterans Assistance and Health Fair
 - Neches Festival
 - YMBL South Texas State Fair
 - YMBL South Texas State Fair Prayer Station
25. Riceland Hospice
26. Soup Kitchen in Orange
27. Southeast Texas Chapter of American Association of Men in Nursing and Kappa Kapp Chapter of Sigma Theta Tau and Shiloh Missionary Baptist Church - Feeding the Homeless
28. Southeast Texas Food Bank
29. Southeast Texas Hospice
30. Stable Spirit
31. The Rape and Suicide Crisis Center of Southeast Teas
32. Toys for Tots

Service is also allowed at support organizations such as Alzheimer Association, American Heart, etc., but is limited to health promotion, health education, and screening activities at those agencies. CBSL credit will not be given for clerical/office work.

CBSL Activity Logs

ACTIVITY LOGS are the student's record of service hours and should be rigorously and honestly maintained. ACTIVITY LOGS are a JoAnne Gay Dishman School of Nursing document/record and falsifying an ACTIVITY LOG is an example of falsifying a record and is subject to disciplinary proceedings (see Academic Honesty Policy).

ACTIVITY LOGS should be maintained in accordance with legal documentation guidelines. Changes should be made with a single strikeout line and initialed by the agency representative.

CBSL Hour Requirements:

Each student enrolled in the Baccalaureate Degree Nursing (BSN) program must complete 70 service contact hours in the identified courses below. Earned CBSL hours are enduring from semester to semester accumulating towards the required 70 CBSL hours. The student must accrue minimum service hours according to the following schedule:

Course	CBSL Learning Outcome	Hours Required	Due Date
NURS 3221	Level 1	30	Specified by CBSL Coordinator
NURS 4261	Level 2 - 1	30	Specified by CBSL Coordinator
NURS 4381	Level 2 – 2	10	As specified in the course syllabus

If CBSL hours have been completed during a semester prior to the above listed due dates, **submission must occur by the due date**. Failure to submit fully acquired CBSL hours in a timely manner will result in non-acceptance of the completed CBSL hours and the student will need to earn replacement hours.

CBSL hours may not be accrued when the University is officially closed for Winter Break.

In general, CBSL:

- activities occur at not-for-profit health and human services focused agencies and programs.
- should enhance rather than duplicate traditional instructor-led practicum experiences.
- may be completed at one agency or at as many as desired. A reasonable amount of preparation and training time required by an agency will count toward CBSL hours but must be identified on the INTENT FORM. However, when the service activity occurs at an agency requiring extensive training or orientation, additional hours of actual service to clients will be required. If additional hours are required, the CBSL Coordinator, or designee, will determine and assign the extent of those hours.
- activities which are not pre-approved may be approved using the INTENT FORM process.
- activities should include teaching, guiding, assisting, interacting with people, but must **NOT** include invasive procedures or medication administration.
- CBSL hours may only be earned when the University is in academic session; no hours may be earned when the University is closed for winter break.

Students who neither reside in Texas nor live on campus may be allowed to complete CBSL hours locally where they reside; however, all activities must be approved prior to beginning service. Students should select activities/programs that are equivalent to those on the pre-approved list.

Failure to Meet Requirements: A student failing to meet either CBSL log or journal requirements will receive an “I” in the practicum course and be ineligible to progress in the nursing program.

CBSL Activities Restrictions

CBSL hours will not be awarded for service:

- performed at “for-profit” agencies or businesses
- provided at the student’s place of employment in the area normally work
- provided at agencies that are family owned, operated, or managed
- provided for family members
- that is fund raising in nature
- that is clerical or office work in nature
- following (shadowing) a school nurse

CBSL Dress Code

Dishman SON faculty have approved the following dress code for nursing students engaging in CBSL activities:

- a. Lamar University JoAnne Gay Dishman School of Nursing monogrammed red polo
- b. Khaki or black skirt/ankle length slacks fitted at the waist (leggings are prohibited)
- c. Appropriate shoes with closed toes and heels, no sandals or flip-flops
- d. Official student name badge, Lamar University JoAnne Gay School of Nursing
- e. Exceptions to the dress code may be necessary at some CBSL agencies with the approval from the CBSL Coordinator

ANY exceptions to this dress code must be approved by the CBSL Coordinator. Failure to honor the dress code may result in the student not receiving CBSL credit for the activity in which the dress code was not observed.

Program Evaluation and Reporting

Periodic program evaluations will be conducted and will include input from both students and community agencies. Evaluation summaries will be presented at the Faculty Association meetings and forwarded to the Chairs of the Curriculum and the Evaluation Committees, as well as the Director, JoAnne Gay Dishman School of Nursing.

Midterm CBSL Hour Review

- A. Establish early communication with students in jeopardy of being delinquent with CBSL required forms and hours.
 1. Review student awareness of required materials
 2. Establish the importance of planning ahead with local agencies
 3. Provide encouragement and suggestions for those in jeopardy
 4. Promote Letter of Intent
- B. Provide suggestions early on for those in jeopardy.
 1. Review available agencies for students to achieve CBSL hours
 2. Provide time for students to give verbal feedback of understanding of both the required materials and forms to submit
 3. Assist students who are having difficulty working, attending nursing school, and achieving CBSL hours
- C. Midterm CBSL Submission
 1. Students will enter earned CBSL hours for the first half of the semester on the required date in the Midterm submission section in the CBSL LU Learn course.

2. Course Leaders will be provided with a report of students in jeopardy of not accomplishing their required CBSL hours
 3. Students will continue with one submission at the end of the semester of the Student Self Log of Hours, Agency Verification Form, along with the Student Journal
- D. CBSL Hour Minimum at Midterm per Cohort:
1. NURS 3221 Practicum: Care of Adults: Students should accomplish 15 CBSL hours by Midterm.
 2. NURS 4261 Practicum: Paren -Child: Students should accomplish *5 additional Hours* by Midterm.
 3. NURS 4381: There will not be a Midterm for this Cohort

The Extension Request Form

- A. The *CBSL Extension Request Form* is a different implementation than the *Plan* as it can only be granted after the student has met with the CBSL Coordinator.
- B. During the meeting, the CBSL Coordinator will provide the *CBSL Extension Request Form* for the student to write their request for an Extension along with a date for completion of required CBSL hours.
- C. The student will also need to provide strategies to achieve the required CBSL hours on the *CBSL Extension Request Form*.
- D. Once these two pieces of information are written by the student, he or she must obtain all the required signatures and return the form to the CBSL Coordinator within one week.
- E. The *CBSL Extension Request Form* will be entered into the student's permanent file providing more weight for this process of extending their CBSL hours into the next semester
- F. Signatures required for the *CBSL Extension Request Form*:
 1. Student
 2. Course Leader
 3. CBSL Coordinator
 4. Associate Director of Undergraduate Studies
 5. Director, Dishman School of Nursing

Once all signatures are obtained by the student, the form must be returned to the CBSL Coordinator.
- G. Goal: To bring awareness to the students concerning the importance of selecting, planning, and achieving their CBSL hours.

Final CBSL Submission for the Semester

- A. Students will continue with one submission at the end of the semester of the following:
 1. Student Self Log of Hours
 2. Agency Verification Form
 3. The Student Journal
- B. Faculty will be informed of student's earned CBSL hours prior to the end of the semester.

Adopted by Faculty Association 1/18/08; Revised Faculty Association 8/15/2024

CLASS ORGANIZATION GUIDELINES

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CLASS ORGANIZATIONS GUIDELINES

1. Upon admission, each class will be assigned two faculty class advisors.
2. Class advisors guide the decision-making process for governing the activities of the class organization to meet the university and Dishman School of Nursing (SON) regulations.
3. Class advisors are encouraged to be involved in all class communication platforms (e. g., GroupMe, social media, group chats, group e-mails). All students in the cohort must be included in all class communication platforms.
4. Advisors facilitate the election of class officers at the beginning of the second semester of the nursing program. Class Officers must attend Student Faculty Council meetings. Any issues that the class wishes to bring up must be submitted to advisor for approval before the faculty council meeting. Issues pertaining to particular courses should be communicated through the appropriate Chain of Command. Class officers shall be: President, Vice President, Secretary, Treasurer, LUTNSA representative, Student Government Association (SGA) representative and two Class Historians.
 - a. President – a student elected to represent the interests of the class. This student will preside over class meetings and will lead and assist in organization of class activities.
 - b. Vice President – assumes the duties of the President as needed. Student will also assist with the organization of class meetings and activities.
 - c. Secretary – keeps a record of current class members, all class meetings (including attendance and minutes) and activities. Notifies class and advisors of meeting information.
 - d. Treasurer – Keeps all financial records of class, collects class dues (if any), prepares any budgetary needs for class activities, makes or approves all deposits and withdrawals from class funds.
 - e. LUTNSA Representative – is a current member of LUTNSA, represents the class interests during LUTNSA meetings
 - f. Student Government Association (SGA) Representative – represents the interests of the class at all Student Government Association meetings. Relays relevant information from SGA meetings to the members of the class.
 - g. Historians – Two students will be responsible for taking pictures or otherwise documenting class activities. Organizes class slideshow to be presented at pinning ceremony.
5. Advisor(s) meet with the class officers (Board) to discuss issues that are presented to the class for decisions and voting at a later date.
6. Decisions are ruled by majority vote.
7. No meetings and no decisions are to be made without a faculty advisor present.
8. If an office is vacated and needs to be filled after the initial vote, a special election will be held to fill the office. Anyone wishing to run should notify the class faculty advisor(s) to be placed on the ballot. Students interested in running for Officer Positions should follow the policy and procedures outlined in Lamar University's Guidelines for Organizations.
9. Reports from each officer should be given to the class at regular intervals.
10. A representative of the class (officers or selected alternate) should attend Student Government Association (SGA) meetings. If meetings occur on practicum days, then alternate among officers so each officer would leave practicum only once or twice a semester. Class representatives and LUTNSA representatives also attend Undergraduate Nursing Student-Faculty Council meetings.
11. The class needs to register as an organization with the LU Student Organizations Office. Students should register their class according to the semester they will graduate for example, BSN Class of May 2023.
12. Registered Student Organizations that do not hold a 501c3 status (A recognized status by the federal government) must have a bank account with the Office of Student Organization Services. The Student Club

Account is a free banking service provided to Registered Student Organizations. Checks, bank statements, and mail service are provided free of charge.

13. If class advisor(s) are unsure of a potential fund-raising event, they should seek advice from the Director of the Dishman School of Nursing. Soliciting funds from donors needs to be approved by the Director of the Dishman School of Nursing and the Lamar University Advancement Office prior to contacting any individuals.

14. A picture of the graduating class should be given to Director of the Dishman School of Nursing to be displayed in the nursing building. Framing of the picture will be handled by the Dishman SON. The picture needs to have the name of the class (BSN) and year on the picture.

15. Dishman School of Nursing Student-Faculty Council Committee

- Class officers and advisors should attend Dishman SON Faculty-Student Council meetings, typically scheduled each semester.
- The Student-Faculty Council provides a shared governance forum for communication between undergraduate students and the faculty of the undergraduate nursing program.
- Class officers and advisors should submit agenda items in advance of the scheduled meeting
- Class advisors must review agenda items prior to submission.
- Topics for discussion include curriculum and program issues. Issues related to individual courses and/or faculty should follow the Lines of Communication Policy.

Revised 12/17/2019; Revised Faculty Association 8/15/2024

PINNING CEREMONY GUIDELINES

1. The class and its officers will be responsible for planning the pinning ceremony.
2. The pinning ceremony is generally held the week before graduation.
3. The class and officers shall determine the method of fund raising desired. All fund raisers must be discussed with and approved by the class faculty advisor and the Director of the Dishman School of Nursing.
4. The class will be responsible for the printing and distribution of invitations and programs. These documents should be approved by the class faculty advisor before printing.
5. All plans for the pinning ceremony must be reviewed by the Associate Director of Undergraduate Nursing Studies six weeks prior to the ceremony.
6. The pinning ceremony traditionally follows these guidelines:
 - a. Introduction of class
 - b. Opening remarks by class President or designated class member
 - c. Brief (10-15 minutes max) speech by person chosen by class and approved by the class faculty advisor
 - d. Introduction of Faculty
 - e. Pinning of graduates – the students will select the persons they wish to pin them. During the actual pinning, one or two faculty members chosen by the class will read the message provided by the student.
 - f. Concluding remarks by the class President or designated class member
 - g. Some classes may wish to have a presentation using pictures taken during their nursing program. This presentation should be limited to no more than 10 minutes.
7. The graduating class will be responsible for selecting the place to hold the pinning ceremony. If it is on the Lamar campus (Mary and John Gray Library, Event Center), Chartwells catering must be used. Bear in mind that the site chosen will impact the number of guests that each graduate may invite. The Pinning Ceremony may not be held in a religious facility.
8. Refreshments, if served, should be limited to finger foods and beverages (paid by the class). The pinning ceremony is not appropriate for a meal.

Revised 11/18/2016; Revised FA 8/15/2024

GRADUATION STOLE

COLLEGE OF ARTS AND SCIENCE COMMENCEMENT

Lamar University holds graduations three (3) times per year in May, August, and December. (Times/dates to be determined).

All students that have met Lamar University and the JoAnne Gay Dishman School of Nursing BSN program requirements **must** apply for graduation but are **not** required to attend a ceremony.

Students will receive an email through their **LAMAR email account** with instructions on how to apply and where to pay graduation fees. Students **CANNOT** apply for graduation until they receive an email from the university granting them permission to apply. *

Students attending graduation ceremonies will be required to purchase a cap, gown, and stole through the Lamar Book Store. (<https://www.lamar.edu/students/commencement/index.html>)

1. In addition, female students can purchase the optional “white collar” to wear with their required attire.
2. All attire worn by graduates of the nursing program while attending university ceremonies must be clean, ironed, and in good repair.

For more information about Lamar University’s graduation ceremonies please visit the commencement web page <http://students.lamar.edu/commencement/index.html>.

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APPENDICES

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COMPUTER/TECHNOLOGY REQUIREMENTS

1. Students need regular access to Windows, Apple laptop, or Apple desktop with a broadband internet connection. *Note: There are known limitations with Blackboard and other programs on mobile devices, tablets, or computers running IOS, Android, or Chrome OS. Students are strongly discouraged from using those type of devices.*
2. The minimum computer requirements are:
 - a. Current version of Chrome and Firefox required. (*Note: Blackboard may not support Internet Explorer, Edge, or Safari.*)
 - b. 8 GB RAM or more preferred
 - c. Broadband connection (cable modem, DSL, or other high speed) required. Some courses are video intensive.
 - d. 1024 x 768 or higher resolution
 - e. Webcam and speakers (headset with microphone may be used instead of speakers. Example: Plantronics Audio 628 USB headset)
3. Microsoft Office 365 is essential and available to all LU students. (*Go to <https://luconnect.lamar.edu/> and click on "Office 365". Students have access to 5 downloads to home devices.*)
4. Additional free software for enhanced web browsing is needed. *Note: Be certain to download the free versions of the software.*
 - a. Firefox (<http://www.mozilla.org>)
 - b. Google Chrome (<https://www.google.com/chrome/>)
 - c. Adobe Reader (<https://get.adobe.com/reader/>)
 - d. QuickTime (<https://www.apple.com/quicktime/download/>)
5. Current anti-virus software must be installed and kept up to date.
6. Most home computers purchased within the last 3-4 years meet or surpass these requirements.

APPROXIMATE COST OF ITEMS REQUIRED IN THE UNDERGRADUATE NURSING PROGRAM

Students are responsible for expenses incurred during transportation to practicum facilities and community agencies. While not an all-inclusive list, the costs listed below are common expenses students incur during the prelicensure program.

APPROXIMATE COSTS WHEN ENTERING THE PROGRAM

Books and course resources (approximate).....	\$1,000.00
Uniform (1 set first semester).....	\$60.00
Lab Coat.....	\$30.00
School of Nursing insignia patches x 2.....	\$8.00
Identification Badge x 1	\$6.00
White duty shoes (See Uniform Policy)	\$60.00
White hosiery or trouser socks (\$5.00 per pair x 2).....	\$10.00
Bandage scissors	\$8.00
Watch with sweep second hand	\$20.00
Stethoscope with bell & diaphragm	\$50.00
CPR Pocket Mask.....	\$6.00
Goggles / or your Glasses	\$5.00
Physical Examination: \$60 each year (approximate)	\$60.00
Liability Insurance: \$15 each year	\$15.00
Immunization series/serology	\$150.00 – \$300.00
CBSL Polo shirt (recommend 2).....	\$60.00
	\$1548.00-1698.00

APPROXIMATE ADDITIONAL COSTS DURING PROGRAM

Books and course resources (approximate).....	\$1,500
Additional Uniform(s) (1-2 sets, if needed)	\$60.00
School of Nursing insignia patches (2, for additional uniforms purchased if needed)	\$8.00
White hosiery or trouser socks (\$5.00 per pair x 2).....	\$10.00
White duty shoes (If replacement needed. See Uniform Policy).....	\$60.00
Physical Examination: \$60 each year (approximate)	\$60.00
Liability Insurance: \$15 each year	\$15.00
	\$1713.00

APPROXIMATE COSTS ASSOCIATED WITH GRADUATION

Texas Board of Nursing Application for initial licensure	\$75.00
NCLEX-RN® Review (HURST, external to Lamar University, approximate)	\$350.00
HURST Elevate® Capstone Course.....	\$99.00
NCLEX-RN® Exam Registration Fee	\$200.00
Jurisprudence Exam	\$25.00
LU Diploma/Graduation Fee	\$25.00
Graduation Cap & Gown	\$55.00
Graduation Stole (required)	\$30.00
Pin (JoAnne Gay Dishman School of Nursing) *	\$25.00 – \$70.00
Class picture	\$25.00
	\$909.00-954.00

***Nursing School Pin** – The Lamar University-Beaumont JoAnne Gay Dishman School of Nursing has designed and accepted its own distinct pin. Graduates may choose to wear the pin while on duty to identify their alma mater. It is the responsibility of the student to purchase the pin. Students will receive the pin as part of the graduation process. The pin is a representation of the diploma of the Lamar University-Beaumont nursing programs and can be changed only by School of Nursing consent.

Revised Faculty Association 10/16/2020, 1/4/2023

TEXAS BOARD OF NURSING ELIGIBILITY

The Texas Board of Nursing (BON) has identified certain circumstances that may require a potential candidate ineligible for licensure as a registered nurse in the State of Texas. The Board provides individuals the opportunity to petition the Board for a Declaratory Order as to their eligibility in accordance with Article 301.257 of the Nursing Practice Act.

If you are required to answer “**Yes**” to any of the following questions, please see the BON Website for instructions on filing a *Declaratory Order Petition* (www.bon.state.tx.us). **Processing your Petition may take 6 to 12 months, or longer, after you provide all required documentation and depending on your circumstance.** Once all requested documents have been received, you will be notified that the Petition has been transferred to the Enforcement Department for review.

1. Have you ever had any disciplinary action on a nursing license or a privilege to practice in any state, country, or province?
2. Do you have an investigation or complaint pending on a nursing license or a privilege to practice in any state, country, or province?
3. Have you, in the last 5 years*, been addicted to and/or treated for the use of alcohol or any other drug?
4. *For any criminal offense, including those pending appeal, have you:
 - a. been arrested and have a pending criminal charge?
 - b. been convicted of a misdemeanor?
 - c. been convicted of a felony?
 - d. pled nolo contendere, no contest, or guilty?
 - e. received deferred adjudication?
 - f. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
 - g. been sentenced to serve jail time, prison time, or court-ordered confinement?
 - h. been granted pre-trial diversion?
 - i. been cited or charged with any violation of the law?
 - j. been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

(You may only exclude Class C misdemeanor traffic violations or offenses previously disclosed to the Texas Board of Nursing on an initial licensure or renewal application.)

NOTE: Expunged and Sealed Offenses: While expunged or sealed offense, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Non-disclosure of relevant offenses raises questions related to truthfulness and character. (See 22 TAC §213.27)

NOTE: Orders of Non-Disclosure: Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character and fitness.

5. Have you ever had any licensing (other than a nursing license) or regulatory authority in any state, jurisdiction, country, or province revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew or otherwise discipline any other professional or occupational license, certificate, nurse aide registration or multistate privilege to practice that you held?
6. Are you currently suffering from any condition for which you are not being appropriately treated that impairs your judgment or that would otherwise adversely affect your ability to practice nursing in a competent, ethical, and professional manner?
7. *Are you currently the target or subject of a grand jury or governmental agency investigation?
8. *Are you currently a participant in an alternative to discipline, diversion, or a peer assistance program? (This includes all confidential programs)

NOTE: Any positive response will remain confidential and not subject to public disclosure unless required by law.

9. Have you ever been granted the authority to practice nursing in any country, state, province, or territory?

NOTE: This does not apply to any nursing license(s) issued by another US state or territory, excluding Puerto Rico. If you were licensed in Puerto Rico, you should be answering yes.

* Pursuant to the Texas Occupations Code §301.207, information, including diagnosis and treatment, regarding an individual's physical or mental condition, intemperate use of drugs or alcohol, or chemical dependency and information regarding an individual's criminal history is confidential to the same extent that information collected as part of an investigation is confidential under the Texas Occupations Code §301.466.

NURSING CURRICULA STANDARDS: DIFFERENTIATED ESSENTIAL COMPETENCIES (DECS)

Lamar University JoAnne Gay Dishman School of Nursing undergraduate curriculum design addresses university, state, and national standards. Some specific standards are referred to in each course syllabus. A brief explanation of these is given.

Texas Board of Nursing – Differentiated Essential Competencies (DECs) of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments and Behaviors.

Nursing practice in Texas by licensed nurses flows along a scope of practice continuum based upon educational preparation from the Licensed Vocational Nurse (LVN) to the doctorally prepared Registered Nurse (RN). While selected aspects of nursing care may be assigned or delegated by licensed practicing nurses to ancillary persons such as nursing assistants or aides, LVNs and RNs currently form the core in the roles identified as members of the profession, providers of patient- centered care, patient safety advocates, and members of the health care team.

Basic educational preparation for the LVN examination is provided at the vocational level in Texas Board of Nursing (BON or Board) approved programs in community colleges, hospitals, career schools, and the military. Educational preparation for RN licensure examination may be obtained through Texas BON approved diploma, associate degree, and baccalaureate degree programs (including generic master's degree programs). Each of these programs provides the necessary preparation for practice as a registered professional nurse. The curricula of each of the nursing programs differ and the outcomes of the educational levels dictate a differentiated set of essential competencies of graduates. The competency statements describe progression in expected behaviors across the types of programs from vocational nursing (VN) to diploma and associate degree nursing (ADN) to baccalaureate degree nursing (BSN). The competencies of each educational level build upon the previous level.

The competencies are written for nursing programs to meet the approval criteria established by the Texas Board of Nursing. For more details, see the Texas Board of Nursing website at https://www.bon.texas.gov/pdfs/publication_pdfs/Differentiated%20Essential%20Competencies%202021.pdf.

AMERICAN NURSES' ASSOCIATION CODE FOR NURSES

The **Code for Nurses** was originally adopted by the American Nurses Association in 1950 and has been revised periodically (American Nurses Association [ANA], 2015). It serves to inform both the nurse and society of the profession's expectations and requirements in ethical matters. The code and the interpretive statements together provide a framework within which nurses can make ethical decisions and discharge their responsibilities to the public, to other members of the health team, and to the profession.

The Code for Nurses provisional statements:

Provision 1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

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

Provision 3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

Provision 4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

Provision 5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

Provision 6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.

Provision 7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

Provision 8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

Provision 9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy (ANA, 2015, p.1-2).

Reference

American Nurses Association [ANA] (2015). *Revision of the code of ethics for nurses with interpretive statements panel*. Retrieved from <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/>

AMERICAN HOSPITAL ASSOCIATION Patient Care Partnership

In 1973, the American Hospital Association (AHA) adopted a “The Patient’s Bill of Rights” to address the expectations of the patient for quality care and medical treatment with revisions to that bill in 1992. In 2001, the AHA replaced the Patient Bill of Rights with the Patient Care Partnership with the focus on “a straightforward, plain language statement that clearly outlines what patients should expect during their hospital visit” (American Hospital Association [AHA], 2003, p.1)

Overall, the Patient Care Partnership describes the expectations, rights, and responsibilities during a hospital stay in regard to:

1. High quality hospital care.
2. A clean and safe environment.
3. Involvement in your care.
4. Protection of your privacy.
5. Help when leaving the hospital.
6. Help with your claims.

Reference

American Hospital Association [AHA] (2003). *The patient care partnership: Understanding expectations, rights and responsibilities*. Retrieved from <https://www.aha.org/system/files/2018-01/aha-patient-care-partnership.pdf>

Approved Faculty Association 12/4/2015

PROFESSIONAL ORGANIZATIONS

NSNA – National Student Nurses Association

The National Student Nurses Association and its constituents in states and districts are student operated organizations. Membership gives students opportunities to expand their knowledge and skill in community health projects and legislative activities, influence curricula, increase their interest in nursing organizations, and develop skill in organizational affairs. The National organization offers scholarship opportunities to its members.

NSNA believes there is tremendous need for Registered Nurses to work together on common concerns so that a positive impact can be made on nurses, students, and the public in relation to nursing and health care.

TNSA – Texas Nursing Students Association (State Level)

The state level organization reflects the functions of NSNA and promotes the student with many opportunities to be an active participant. This level also offers scholarship opportunities to members. TNSA and NSNA are related to The Texas Nurses Association and The American Nurses Association.

L.U.T.N.S.A. - Lamar University Texas Nursing Student Association is the local chapter of the Texas Nursing Student Association.

The purposes of the organization are to:

1. Assume the responsibility for contributing to nursing education in order to provide the highest quality of health care.
2. Provide programs representative of fundamental and current professional interest and concerns.
3. Aid in the development of the whole person, his/her responsibility for the health care of people in all walks of life, and his/her professional role.

Membership and meeting information available in the JoAnne Gay Dishman School of Nursing. Students are encouraged to belong to LUTNSA and attend meetings.

Kappa Kappa Chapter of Sigma Theta Tau

The Lamar University Professional Nursing Honor Society was established in the Spring of 1985, and was chartered on April 24, 1988, as the Kappa Kappa Chapter of Sigma Theta Tau International Honor Society of Nursing, Inc. The purposes of this Society shall be to:

1. recognize superior achievement
2. recognize the development of leadership qualities
3. foster high professional standards
4. encourage creative work
5. strengthen commitment to the ideals and purposes of the profession

Membership in the organization is composed of students in the baccalaureate and master's programs in nursing, and registered professional nurses.

The undergraduate student candidate must have completed at least one-half of the nursing component of the curriculum, shall not rank lower than the highest 35% of the class in scholarship, and have a GPA of at least 3.0 on a 4.0 scale. Students in the master's program must have completed a minimum of one quarter of the required graduate curriculum, have demonstrated ability in nursing, and must have achieved a grade point average of at least 3.5 on a 4.0 scale. The candidate shall have demonstrated superior academic achievement, academic integrity, and professional leadership potential. A nurse leader, who is a registered nurse, legally recognized to practice in his/her country with a minimum of a baccalaureate degree or the equivalent in any field, and who has demonstrated achievement in nursing, shall be eligible for membership.

Membership in the organization is an honor bestowed upon individuals who have demonstrated the achievement of the criteria established. That being so, membership is by invitation, and those who accept assume the purposes of the society and the responsibility to participate in achieving its goals.

GLOSSARY

Academic Engagement – Active participation by a student in an instructional activity related to the student's course of study that is defined by the institution in accordance with any applicable requirements of its state or accrediting agency.

1. Includes, but is not limited to:
 - a. Attending a synchronous class, lecture, recitation, or field or laboratory activity, physically or online, where there is an opportunity for interaction between the instructor and students;
 - b. Submitting an academic assignment;
 - c. Taking an assessment or an examination;
 - d. Participating in an interactive tutorial, webinar, or other interactive computer-assisted instruction;
 - e. Participating in a study group, group project, or an online discussion that is assigned by the institution; or
 - f. Interacting with an instructor about academic matters.
2. Does not include, for example:
 - a. Living in institutional housing;
 - b. Participating in the institution's meal plan;
 - c. Logging into an online class or tutorial without any further participation; or
 - d. Participating in academic counseling or advisement (ACEN, June 2021).

Academic Partnerships (AP) - A marketing organization whose mission is to help increase enrollment and revenue through online delivery of high-quality instruction. AP helps faculty members convert their on-campus courses and programs into an online format, recruits qualified students for those programs and helps retain enrolled students through graduation.

Academic Progression Models – Models for the delivery of nursing education programs that facilitate progression from one level of nursing education and/or practice to a higher level of nursing education and/or practice. May include articulation agreements or partnerships among colleges/universities, including, but not limited to, concurrent or dual enrollment programs. Certificates or degrees offered by an ACEN-accredited program must be awarded to students who complete the ACEN-accredited program of study, regardless of whether they complete the additional requirements specified in a concurrent or dual-enrollment agreement. (ACEN, June 2021).

Accountability - is the state of being able to answer for one's actions. The professional nurse answers to the self, the client, the profession, the employing institution and society for the effectiveness of nursing care performed.

Active inquiry - takes place when students are actively involved and genuinely engaged in meaningful learning. The focus is on developing students' intellectual capabilities as independent, critical thinkers. Active inquiry is a basis for lifelong learning as well as personal and professional growth.

Adaptation - is a dynamic, ongoing, life-sustaining process whereby living things continually adjust to environmental changes. Social adaptation implies the adjustment and adaptation of humans to other individuals and community groups in the social environment.

Administrative capacity - is the actual capabilities and resources available to the governing organization and nursing education unit that directly support the mission and purpose of the governing organization and the mission and purpose of a nursing education unit in the achievement of a nursing program's end of program student learning outcomes and program outcomes (ACEN, June 2021).

Advocate - is one who pleads the cause for clients' rights or the rights of other persons, provide information needed to make informed decisions, supporting their decisions with acceptance and respect.

Advanced Practice Registered Nurse (APRN) – Licensure classification for nurses who have advanced education, knowledge, and skills in one of four practice roles: clinical nurse specialist, nurse practitioner, certified registered nurse anesthetist, or certified nurse midwife. (ACEN, June 2021).

Alternative methods of delivery - Methods of delivering a nursing program, a nursing program option, and/or a nursing course that differ from traditional in-person/in-a-classroom instructional methods, including a variety of non-traditional means of student-faculty interaction, length required for a nursing program of study, and/or varying intervals of class and/or practicum schedules. Examples include, but are not limited to, instructional television (ITV), DVD/podcast learning packages, and online delivery (ACEN, June 2021).

Alternative therapies - are used as a substitute for traditional western medications and treatments.

Annual Report – Information an ACEN-accredited program is required to submit to the ACEN on an annual basis. (ACEN, June 2021).

Articulation - is a planned process providing opportunities for multiple-entry and exit points, expecting graduates to demonstrate the competencies (inherent in clinical reasoning, knowledge, judgment, and skills) of the preceding levels of education.

Area Needing Development (AND) – Peer evaluators determined based on their professional judgment that evidence demonstrates a nursing program is in compliance with an Accreditation Standard; however, evidence also demonstrates that an opportunity for improvement is available to enhance the quality of the nursing program. (ACEN, June 2021).

Assessment of a student - is the process of gathering and judging evidence in order to decide whether a student has achieved a standard or outcome. The goal of assessment is to collect objective evidence that represents the truth about student performance (www.southbank.edu.au/site/tools/glossary.html. retrieved 12/12/08).

Asynchronous Learning – Learning and instruction that do not occur in the same place or at the same time. (ACEN, June 2021).

Baccalaureate degree graduate - functions across the life continuum from prenatal- to post- mortem care of clients synthesizing information from various disciplines, thinking logically and critically, utilizing technology, and implementing evidenced-based findings. The baccalaureate graduate provides nursing care to individuals, families, aggregates, communities, and/or societies in structured, unstructured, or evolving health care settings.

Basic primary care skills - are skills which facilitate health promoting and health protecting behaviors. Health promoting behaviors increase the level of well- being and actualize health potentials of individuals, families, communities, and society. Health protecting behaviors are directed towards decreasing the probability of specific illnesses or dysfunctions in individuals, families, communities and society. Basic primary care skills are grounded in the recognition and valuing of the individual's role in the health care enterprise. The ultimate goals are empowerment of the client for self-determination and self-management to attain health promotion and health protection.

Best practice - is quality nursing care which is considered optimal based on a prevailing standard or point of view which is based on current evidence (Nelson, 2014).

Case management - is the practice of coordinating comprehensive health care services, after an illness or injury, to achieve optimum quality care delivered in a cost-effective manner. This process integrates assessment, planning, implementation, and evaluation (American Association of Occupational Health Nurses, 2015).

Caring - is a concept that implies a special concern, interest, or feeling capable of fostering a therapeutic helping, trusting relationship between the client and nurse based on faith and hope. It is being sensitive to oneself and others in promoting and accepting the expression of both positive and negative feelings and emotions. It is an expression of or an action of an informed, competent professional nurse that stems from the ability to utilize scientific problem-solving process. Caring promotes than transpersonal teaching-learning, attends to supportive, protective, and/or corrective mental, physical, societal, and spiritual environments. It assists wholeness that allows for being open to existential-phenomenological and spiritual dimensions of caring that cannot be scientifically explained (Kelly, J.H. and Johnson, B. (2002) *Theory of Transpersonal Caring* Jean Watson in J. B. George, 2002, *Nursing Theories, the Base for Professional Nursing Practice*, p. 410).

Civility – respectful verbal, non-verbal, written, or digital communication fostering an environment conducive to learning.

Clinical/Practicum Learning Experiences/ Preceptorship - Direct, hands-on, planned learning activities with patients across the lifespan, interaction with the interprofessional team, and interaction with the patient's family and friends that are sufficient and appropriate to achieve the end-of-program student learning outcomes, program outcomes, and/or role-specific professional competencies, and are overseen by qualified faculty who provide feedback to students in support of their learning. Clinical/practicum learning experiences must be consistent with the level of academic preparation and post-graduation scope of practice; and are required for all nursing students enrolled in any undergraduate or graduate program, including all students enrolled in post-licensure undergraduate programs, graduate programs, all program options in any undergraduate and graduate programs, and/or certificate program options.(ACEN, June 2021),

Clinical Judgement - is defined as the observed outcome of critical thinking and decision-making. It is an interactive process that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions in order to deliver safe client care (NCLEX Next generation project).

Clinical reasoning - is the ability to reason as a clinical situation changes, taking into account the context and concerns of the patient and family (Benner, Sutphen, Leonard-Kahn, & Day, 2008) (DECs 2010).

Cohort attrition rates - are the number and percent of nursing students that do not progress to next level of the nursing curriculum with their cohort.

Communication - is a relationship skill which involves verbal and nonverbal exchange of information and ideas. A complex process that refers to not only content but also feelings and emotions, which may be conveyed in a relationship.

- *From ANA & NCSBN Joint Statement on Delegation: Communicates directions to the delegate including any unique patient requirements and characteristics as well as clear expectations regarding what to do, what to report, and when to ask for assistance.*
- **TeamSTEPPs 2.0:** Communication is defined as the transfer or exchange of information from a sender to a receiver. More specifically, communication is a process whereby information is clearly and accurately conveyed to another person using a method that is known and recognized by all involved. It includes the ability to ask questions, seek clarification, and acknowledge the message was received and understood. One critical result of effective communication is a shared understanding, between the sender and receiver(s) of the information conveyed.

Communities of interest - A group of people that influence nursing program processes, decision-making of a nursing education unit, the end-of-program student learning outcomes, and the program outcomes of a nursing program. Examples included, but are not limited to, students, graduates, health care employer representatives, governing organization representatives, state regulatory agency representatives, and members of the public. (ACEN, June 2021)

Community - includes the physical topographical characteristics of the setting, the view of community held by its inhabitants, the nature of community groups and their characteristic interaction patterns, and the dynamic interplay of dominant community forces (DELC, 2002)

Community Based Service Learning (CBSL) - is "a philosophy of education which emphasizes active, engaged learning with the goal of social responsibility...it is reciprocal learning, dynamic and interactive...which suggests mutuality in learning between the student and the community with whom he or she is actively engaged" (J.C. Kendall, 1990, *Combining Service and Learning*, p. 22-23). Reflection is another critical element of CBSL as it assists students in development of critical thinking and social awareness as they reflect on their experiential learning with community partners (Brown & Schmidt, 2016).

Community focus skills - is a combination of both psychomotor and relationship skills used to facilitate partnering and collaboration in the community. These skills include awareness of populations, knowledge of epidemiological determinants of health, knowledge of traditional practices, shifting demographics, and economic factors that impact the health of groups. Application of these knowledge-based skills allows the nurse to deliver culturally competent, effective care to entire populations.

Community service - is participation in community-sponsored activities by the faculty for the betterment of the local area. Such activities include but are not limited to participation on the board of directors for area wide not for profit agencies, volunteering to help community agencies meet the needs of the population at large, and/or participating in community and professional organizations within the area.

Companion Course - is a course that is academically contingent upon the successful completion of another course in the same semester. The two or three academically contingent courses must be completed simultaneously. If a student is unsuccessful in one of the companion courses, then both or all three of the companion courses must be repeated.

Competency - is an expected level of performance that integrates knowledge, skills, abilities, and judgment (American Nurses Association, 2008) (DECS 2010).

Competence - is having the necessary and sufficient ability, knowledge, skill, and experience to do something successfully and/or achieve a purpose (ACEN, August 2016)

Competent – having the necessary and sufficient ability, knowledge, skill, and experience to do something successfully and/or achieve a purpose (ACEN, June 2021)

Complaint / grievance - is a formal allegation against a nursing program, typically expressed as a written, signed statement. A grievance is a wrong or hardship suffered that is the grounds for a complaint; the formal expression of a grievance is a complaint. A nursing education unit's record of student complaints must include all complaints filed since initial accreditation or reaccreditation, whichever was the last accreditation site visit (ACEN, June 2021)

Complementary therapies - refer to healing practices and products that work in conjunction with traditional medicine.

Complex adaptive systems - are dynamical systems, building on positive feedback, which are highly sensitive to small changes, are self-organizing, and can be controlled with chaos. These systems change, but changes in outcomes appear to have no relationship to the changes in system input.

Compliance – Peer evaluators determined based on their professional judgment that evidence demonstrates a nursing program is in compliance with an Accreditation Standard. (ACEN, June 2021)

Continuing Accreditation – The cyclical peer review process for an accredited nursing program to maintain accreditation with the ACEN. (ACEN, June 2021)

Consumers - are individuals, groups, families, organizations, groups, or communities who utilize health care services.

Corequisite courses - are courses in the curriculum that are best completed in the same semester.

Contemporary nursing practice - is professional nursing knowledge, skills, and behaviors that are based on current research and professional standards of the present time (ACEN, June 2021)

Course Measurable Student Learning Outcomes - are statements of learner- oriented expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the course. Course student learning outcomes/course outcomes must be consistent with standards of contemporary nursing practice. Course student learning outcomes/course outcomes

- must be aligned and linked to the end of program student learning outcomes;
- should have a single, measurable action;
- support students' achievement of the end of program student learning outcomes and program outcomes;
- typically progress from "simple" to "complex" as students advance through the nursing program of study; and
- organize, guide, and direct course curricular matters such as, but not limited to, the inclusion of content, learning activities, selection of practice learning experiences, evaluation methodologies, selection of practice learning environments, etc. (ACEN, August 2016).

Critical Behaviors – if student receives a "U" in any of the identified critical areas at the end of the semester; the student will receive a grade of "unsatisfactory" in the practicum course. These critical behaviors can be identified and discussed at any time during the practicum experience. Critical behaviors are identified by a # on the evaluation form. A student who continues to practice the behaviors listed below will receive a practicum grade of "Unsatisfactory":

- Provides unsafe care despite interventions to improve performance.
- Demonstrates a pattern of lack of understanding of their limitations.
- Fails to anticipate consequences of actions or lack of actions.
- Fails to maintain appropriate communication with faculty and staff about patient/client care despite counseling.
- Fails to demonstrate appropriate legal, ethical, and professional conduct. **Credentialing** (ACEN, June 2021)
 - **Accredited** – The status of public recognition that a nationally recognized accrediting agency grants to an institution or educational program that meets the agency's established requirements.
 - **Accreditation** – The voluntary, self-regulatory process by which non-governmental associations recognize educational institutions or programs that have been found to meet or exceed standards and criteria for educational quality. Accreditation also assists in the further improvement of the institutions or programs as related to resources invested, processes followed, and results achieved.
 - **Approval** – The term generally referred to by most state regulatory agencies for nursing to describe authorization of nursing education programs meeting minimal standards as defined in the state nurse practice act and/or rules and regulations.
 - **Certification** – The process by which an organization, association, voluntary agency, or state regulatory agency grants recognition that an individual possesses predetermined knowledge and/or skills specified for practice in an area of specialization.
 - **Licensure** – The process by which a governmental agency gives affirmation to the public that the individuals engaged in an occupation or profession have minimal education, qualifications, and competence necessary to practice in a safe manner.
 - **Criteria** – Statements which identify the elements that need to be examined in evaluation of a standard. (ACEN, June 2021)

Critical pathway - is a trajectory of the client's clinical course detailing interventions, referral patterns, and outcomes on a daily basis from pre-admission into the health care system through post-discharge follow-up.

Critical thinking - refers to an intellectual process that involves developing a rational, justifiable response to questions for situations where there are no definitive answers and for which all the relevant

information may not be available. It involves the ability to analyze arguments, construct meaning, use knowledge as context, and critically reflect on one's thoughts and actions. Critical thinking requires knowledge, but it is more than the acquisition and regurgitation of known facts, concepts, and theories. It is the ability to use that knowledge in situations of ambiguity and risk.

Cue Recognition - Filtering information from different sources (e.g., signs, symptoms, medical history). Organizing and linking the recognized cues from previous step to the client's clinical presentation. Candidates should establish probable client needs, concerns, or problems (NCLEX Next Gen Project)

Culturally competent care - uses a framework of the client's worldview, values, norms, and beliefs about health and illness in care delivery. To the greatest extent possible, the process will reflect sensitivity to the client's cultural perspective, and where appropriate, the nurse and client will negotiate and facilitate a change in behaviors.

Culture of safety - are "Health care practices that identify, understand and respect the biophysical, economic, psychosocial, spiritual and cultural characteristics of the patient, the patient's family, the environment and the patient's community. Safety occurs within a process of respectful collaboration to reach agreed-upon health goals, to individualize health education to the individual patient and patient population, and to select and provide health care. Culturally safe practices by the nurse protect patients against devaluation or obliteration of their cultural histories, cultural expressions and cultural experiences." (Expert Panel on Global Nursing & Health, 2010).

Curriculum integrity - is the demonstration of the soundness of a nursing program of study that develops from the mission/philosophy in an organized manner across a sequence of courses. The mission/philosophy and selected professional standards, guidelines, and competencies result in the faculty identifying end of program student learning outcomes that are specific and measurable and progress throughout the curriculum. The end of program student learning outcomes organize the curriculum, guide the delivery of instruction, direct learning activities, and are used to evaluate students (ACEN, June 2021).

Curriculum Rigor – Demonstration there is progression of knowledge, skills, and behaviors throughout a curriculum and that the curriculum is appropriately challenging for the level of contemporary nursing practice for which the program is preparing graduates. (ACEN, June 2021)

Cybersecurity - the art of protecting networks, devices, and data from unauthorized access or criminal use and the practice of ensuring confidentiality, integrity, and availability of information. Refers to the body of technologies, processes, and practices designed to protect networks, devices, programs, and data from attack, damage, or unauthorized access. Cyber security may also be referred to as information technology security. (Information Technology Laboratory, 2021)

Debriefing -this session encourages participant to explore emotions, question, reflect and provide feedback to each other. Purpose is to move toward assimilation of theory, practice and research in order to influence future actions (INACSL, 2011). Debriefing follows a simulation experience and is facilitated by a faculty member who has teaching responsibilities for the group. The International Nursing Association for Clinical Simulation Learning (INACSL) Simulation Standards encourage the use of reflective thinking and feedback regarding the participants' performance during this time of discussion. Participants are encouraged to reflect on their own feelings, emotions, and actions as well as provide feedback to other participants. The overall goal of debriefing is to facilitate the application of clinical knowledge and transfer the learning to future situations (Meakim, Boese, Decker, Franklin, Gloe, Lioce, Sando, & Borum, 2013).

Default rate - The percentage of student borrowers at each governing organization who fail to remain current with repayment of their Federal financial aid student loans during the reporting period specified by the United States Department of Education. (ACEN, June 2021)

Delivery Formats – Methods used to transfer knowledge, skills, and behavior from an instructor to a student. (ACEN, June 2021)

Direct Evaluation- Students orally, by written assignment, or by action show/demonstrate achievement of the course measurable student learning outcome (SLO) or end of program SLO.

Distance education - is an educational process in which the majority of the instruction occurs when a student and instructor are not in the same place. Instruction may be synchronous or asynchronous. Distance education may employ audio, video, and/or computer technologies and includes technology that is used to support regular and substantive interactions between the instructor and the students (ACEN, August 2016).

Distance technology - are instructional methods that may include one-way or two-way transmissions, audio, video, the Internet, and/or computer technologies (ACEN, June 2021)

Diversity - is the concept of diversity encompasses acceptance and respect. It means understanding that each individual is unique and recognizing our individual differences. These can be along the dimensions of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs,

political beliefs, or other ideologies. It is the exploration of these differences in a safe, positive, and nurturing environment. It is about understanding each other and moving beyond simple tolerance to embracing and celebrating the rich dimensions of diversity contained within each individual.

Diversity Concepts – Knowledge about persons, communities, regions, countries, cultures, and ethnicities other than one’s own. (ACEN, June 2021)

Due process - is a disciplined, analytical decision-making procedure in which relevant standards are applied by a properly constituted and authorized body using a method that is based on published rules of procedure and is free of improper influence (ACEN, June 2021).

Educational Record – Includes information recorded in any way including, but not limited to, handwriting, print, computer media, video or audio tape, film, microfilm and microfiche that is directly related to a student and contains personally identifiable information including, but not limited to:

- Name of the student or student’s parent;
- Address;
- Person identified such as a SSN, student number, or biometric record;
- Indirect identifiers such as date/place of birth and mother’s maiden name; or
- Other information that alone or in combination is linked or linkable to a specific student.
- Does not include information that is not recorded such as personal knowledge.

Any information that alone or in combination is linked or linkable to a specific student may be subject to state or federal privacy laws and as applicable, measures must be taken to protect the student’s privacy. (ACEN, June 2021).

End of Program Student Learning Outcomes - are statements of learner-oriented expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the nursing program regardless of the nursing program option. End of program student learning outcomes must be consistent with standards of contemporary nursing practice. End of program student learning outcomes

- are driven by established professional standards, guidelines, and competencies
- provide the framework for all curricular matters
- represent the point of transition from being a student to being an entry-level practitioner for the chosen level of nursing education (AACN 2021).

Evaluation - is a value judgment that attaches meaning to the data obtained by measurement and gathered through assessment. Evaluation compares student performance with a standard and makes a decision based on that comparison (McDonald, 2007).

Evidence-based practice - is a process of finding, appraising, and applying scientific evidence in the management of health for individuals, families, groups, aggregates and/or communities. Evidence-based practice includes the conscientious application of current evidence as a foundation for decisions about patient care. This problem-solving approach integrates a systematic search for and critical appraisal, and application of the most relevant evidence, along with patient preferences and values, and the clinical expertise and experience of the nurse.

Evolve Reach Powered by HESI (Health Education Systems Incorporated) - is a United States company that provides examinations and other educational material designed to prepare student nurses for professional licensure and predict their likely success in national qualifying tests. The exams are computerized and administered online.

Evolving health care setting - is a geographical and/or situational environment (could be structured or unstructured health care delivery setting) which is undergoing significant changes in response to internal and/or external pressures. There are not sufficient resources to assist and support the full scope of nursing expertise, therefore requiring independent nursing decisions.

Expected level of achievement - A measurable index identified by the faculty that reflects a desired outcome. An ELA should be high enough as to be genuine and encourage continuous improvement, but not so high as to be idealistic and, thus, unachievable. (ACEN, June 2021).

Facilitated learning (FL) - is a collaboration between a nursing student and an educator that focuses on a specific didactic content area the student finds challenging. The nursing student is expected to be prepared and actively participate in the FL session. The goal of facilitated learning is to promote independent active learning throughout nursing school and throughout life.

Faculty, nursing - are nurses who teach and evaluate nursing students, are academically qualified, and have experience in the content areas in which they teach. See definition of Nurse Administrator and Nursing Program Coordinator.

Full-time faculty - are persons who teach and/or evaluate nursing students, have a full-time faculty employment status at the governing organization, and whose current primary workload responsibilities are teaching and/or evaluating students in a nursing program.

Part-time faculty - are persons who teach and/or evaluate nursing students, have a faculty appointment that is less than a full-time status at the governing organization, and whose current primary workload responsibilities are teaching and/or evaluating students in a nursing program (ACEN, June 2021).

Faculty Development - are activities that facilitate faculty maintenance or enhancement of expertise. Examples include, but are not limited to, certification, continuing education, formal advanced education, clinical practice, research, publications, and other scholarly activities (ACEN, June 2021).

Faculty Scholarship - are leading edge scholarship activities conducted by faculty. These activities include quality, quantity and impact of scholarly and creative activities as indicated by appropriate measures such as publications in high quality scholarly presses and journals, citation rates, creative presentations and performances in important venues, and recognition of faculty for their academic and creative contributions to their respective disciplines. (Lamar University Mission Statement, 2015)

Faculty Workload - are percentages of time that reflect the manner in which the governing organization and/or nursing education unit characterizes, structures, and documents the nature of faculty members' teaching and non-teaching responsibilities. Workload duties include, but are not limited to, teaching, advisement, administration, committee activity, service, practice, research, and other scholarly activities (ACEN, June 2021).

Family - is two or more people who may share a residence, who possess common emotional bond and perform/engage in interrelated social positions, roles and tasks (DECS, 2010).

Graduate Degree – A master's degree or doctoral degree.

Graduate Degree with a Major in Nursing: The nurse administrator holds:

1. A master's degree with a major in nursing (e.g., MSN, MA in Nursing); or
2. A doctoral degree with a major in nursing (e.g., DNP, DNS, PhD in Nursing); or
3. A master's in a non-nursing discipline (e.g., MBA) with a doctoral degree with a major in nursing (e.g., DNP, DNS, PhD in Nursing); or
4. A master's in a non-nursing discipline (e.g., MBA) with a post-master's certificate in nursing; or
5. A master's in a non-nursing discipline (e.g., MBA) and a doctoral degree in a non-nursing discipline (EdD Educational Administration) with a post-master's certificate in nursing.

Note: Other combinations may be possible. (ACEN, June 2021)

Global health- *collaborative trans-national research and action for promoting health for all.* An area for study, research, and practice that places a priority on improving health and achieving health equity for all people worldwide.

Global pandemic – A pandemic is a global disease outbreak. It differs from an outbreak or epidemic because it affects a wider geographical area, often worldwide. infects a greater number of people than an epidemic. is often caused by a new virus or a strain of virus that has not circulated among people for a long time.

Health Disparities – **preventable differences in the burden of disease, injury, violence, or opportunities** to achieve optimal health that are experienced by socially disadvantaged populations (CDC, Healthy People 2020)

Health Education Systems Incorporated (HESI) standardized tests - are exams to determine admission criteria benchmarks to the undergraduate program, assess retention of information throughout the undergraduate program, and predict probability of competency on the National Council Licensure Examination (NCLEX.)

Health - is a measurable state along a wellness-illness continuum that each person ultimately defines for themselves. It is a composite of physical, psychological, emotional, social and spiritual functioning (Adapted: Smeltzer & Bare, 1996).

Health care delivery system - is the totality of services offered by all health disciplines that contribute to safe, quality, cost effective health care that is divided into three subsystems:

1. Preventative and primary care help clients acquire healthier lifestyles and achieve a decent standard of living. The focus of health promotion is to keep people healthy through personal hygiene, good nutrition, clean living environments, regular exercise, rest, and the adoption of positive health attitudes.
2. Secondary and tertiary care includes the diagnosis and treatment of illnesses. Planning and coordination of the highest quality of care possible so clients can be discharged early but safely to

the home or extended care facility that can adequately manage remaining health care needs is a central tenet of secondary and tertiary care.

3. Restorative care assists clients who are recovering from acute illnesses, chronic illnesses, or disabilities to regain maximal functional status, thereby enhancing the individual's quality of life. The intent is to promote client independence and self-care. (Potter, P. A. and Perry, A. G. (2003). *Basic Nursing Essentials for Practice*, p. 19-22).

Health care outcomes - is the end product of any health care process, indicating to what extent the purposes of the process are being achieved. The output or results of the process (i.e., change resolution, improvement, or deterioration).

Holistic - emphasizes the importance of the interrelationships of the bio-psycho-social-spiritual-cultural dimensions of the person in mutual process with the environment while recognizing that the whole is greater than the sum of its parts (DECS, 2010).

Holistic health needs - are ongoing state of wellness needs that involve taking care of the physical self, expressing emotions appropriately and effectively, using the mind constructively, being creatively involved with others, and becoming aware of higher levels of consciousness. The client is aware of the physical and emotional dimensions of the wellness-illness continuum and the client actively participates in their own state of wellness (Adapted: Potter, 1997).

Humanity - consists of unique holistic beings of intrinsic worth and dignity that have the right to self-determination, well-being, and equity. Humans are adaptive in nature, constantly interacting with changing environments and society in progressing toward fulfillment of innate potential for growth, development, and maturation throughout the life span.

Hybrid/Blended nursing course - A nursing course whose content is delivered both in person/in a classroom and via distance education; 1% to 49% of the traditional in-person/in-a-classroom time is replaced with work via distance education, typically delivered asynchronously. The component delivered via distance education includes learning activities that reduce the time traditionally spent in the in-person/in-a- classroom component (ACEN, August 2016).

iClicker- is a portable, handheld device that allows students to vote by "clicking" on the appropriate button for his/her choice. Each instructor uses a receiver that collects votes sent by students' clickers.

Indirect Evaluation- assesses opinions or thoughts about student knowledge, skills, attitudes, learning experiences, and perceptions. Examples of indirect measures are student surveys; focus groups; alumni surveys; employer surveys.

Informatics - is a specialty that integrates nursing science, computer science, and information science to manage and communicate data, information, and knowledge in nursing practice. Nursing informatics facilitates the integration of data, information and knowledge to support patients, nurses and other providers in their decision-making in all roles and settings. This support is accomplished through the use of information structures, information processes, and information technology (ANA Scope and Standards of Nursing Informatics Practice, 2001, p. vii).

Initial demonstration of skills procedures - is a process verifying students can demonstrate skill procedures according to guidelines.

Instructional Associate- is a qualified, experienced Registered Nurse who assists an Instructor of Record with an online course. An IA is a highly organized and self-motivated assistant who monitors student engagement in collaboration with the Instructor of Record in online courses, grades assignments as directed by the Instructor of Record according to specified criteria, facilitates course discussions, provides online student support, and frequently collaborates with the Instructor of Record.

Instructional technology - are the method(s) and delivery system(s) used by faculty to convey course content to students (ACEN, June 2021).

Interprofessional - is sharing of information among two (2) or more healthcare professionals working together as a team with a common purpose and mutual respect (ACEN, June 2021).

Job placement rate - Percentage of graduates, typically within one year of graduation, who are employed in a position for which a nursing program prepared them. The expected level of achievement (ELA) for job placement rate is determined by the faculty based on program demographics, such as the characteristics of the nursing education unit and the region where the nursing education unit is located. Program demographic considerations include, but are not limited to program type, local hiring practices, historical job placement rate, the governing organization's job placement rate for students in other health science programs, state job placement rate for similar programs, group of peer programs, or ACEN data, etc. (ACEN, June 2021).

Laboratory Personnel – Person without teaching or evaluation responsibilities who works in a skills/simulation laboratory with specified expertise that supports and/or facilitates student learning experiences.

Laboratory personnel who support/facilitate student learning experiences in a skills/simulation laboratory must hold educational and experiential qualifications as required by the governing organization, the state, and the governing organization's accrediting agency, and must be qualified for assigned responsibilities. In the absence of requirements set by the state and/or the governing organization's accrediting agency, the governing organization must set appropriate educational and experiential qualifications for assigned responsibilities in the skills/simulation laboratory. (ACEN, June 2021).

Just culture - refers to a system of shared accountability in which organizations are accountable for the systems they have designed and for responding to the behaviors of their employees in a fair and just manner.

Learning - is a life-long process of change in which the individual acquires knowledge, attitudes, values, and skills through practice, experience, and study.

LU (Lamar University) Connect/ Blackboard- is a tool that allows faculty to add resources for students to access online. Power point, video, audio, animation, and other applications are created outside of Blackboard and added into Blackboard courses for students to enhance teaching and learning efforts.

Lippincott NCLEX-RN PassPoint (Powered by PrepU) - is a personalized and comprehensive learning system designed to help students fully prepare for the NCLEX-RN. *PassPoint* provides students with multiple outlets for individualized review, quizzing, and practice, helping to pinpoint areas requiring additional focus.

Managed care - is a health delivery system that integrates financing, insurance and care delivery by means of (a) contracts with selected health care providers that furnish a comprehensive set of services to enrolled members, (b) utilization and quality controls, (c) financial incentives for members to use contracted providers, and (d) financial risk-sharing between the system and the providers. It may include PPOs, HMOs, and point of service HMOs (Adapted: Iglehart, 1992).

Members of the Health Care Team - include a range of health care workers - e.g., physicians, physician extenders, nurses, medical assistants—and those providing ancillary and diagnostic services - e.g., radiology and lab technologists, physical therapists, nutritionists, psychotherapists, massage therapists - who provide diagnostic and therapeutic procedures on a patient.

Member of the Profession - are members of the profession governed by codes of ethics, and profess commitment to competence, integrity and morality, altruism, and the promotion of the public good within their expert domain. A profession is a disciplined group of individuals who adhere to ethical standards.

Methods of Delivery – The methods used by faculty to deliver instruction of a nursing course.

Traditional Education – An educational method of delivery of nursing courses in which instruction occurs when a student and instructor are physically in the same place at the same time (e.g., face-to-face). This method of delivery may be web-enhanced/supported.

Distance Education – An educational method of delivery of nursing courses in which instruction occurs when a student and instructor are not physically in the same place. Instruction may be synchronous or asynchronous. Distance education uses one or more distance technology to support regular and substantive interactions between the instructor and students. See ACEN definition of academic engagement, distance technology, and regular and substantive in this Glossary.

Hybrid Education – An educational method of delivery of nursing courses in which instruction occurs using both distance and traditional education methods of delivery. Hybrid education, regardless of the percentage of the traditional education time it replaces, is considered a form of distance education by the ACEN. (ACEN, June 2021)

Mentored – A formal or informal process through which a more experienced individual advises, guides, and/or coaches another individual who is less experienced or is transitioning to a new position or employment setting (ACEN, June 2021)

Mission/Philosophy - is the governing organization and/or nursing education unit statement that designates fundamental beliefs and characteristics and provides guidance and direction for a nursing program(s) and services offered (ACEN, June 2021).

Modeling - “is the process used by the nurse to develop an empathetic understanding of the client's present situation based on the world as the client perceives it. The model of a person's world is the representation of the unique aggregation of the way the individual perceives life and all its aspects and components; feels, believes, and behaves; and the underlying motivation and rationale for beliefs and behaviors.” (Erickson, H. C., Tomlin, E. M., and Swain, M. A. (2002). *The Modeling and Role Nursing Theories, the Base for Professional Nursing Practice*, p. 466).

Moral Agency – is an individual's ability to make moral judgments based on a belief of right and wrong and to be held accountable for these actions. A moral agent is a person who is capable of acting with reference to right and wrong.

Nursing education - is the process learners use to acquire and apply knowledge from varied experiences to identify and solve problems with clients with creativity and flexibility in the real world.

Nurse administrator - is the individual with responsibility and authority for the administrative and instructional activities of a nursing education unit and nursing program(s) within the governing organization (e.g., dean, chairperson, director). The ACEN does not consider the nurse administrator a faculty member regardless of the teaching responsibilities or classification by the governing organization (ACEN, June 2021).

1. must have continuous, active, daily, and direct responsibility and authority at all locations for the nursing program.
2. must continually have adequate time and resources on a daily basis at all locations to administer the nursing program.
3. must oversee the daily governing organization, nursing education unit, and nursing program matters such as, but not limited to, personnel matters, student matters, curricular matters, and resources matters.

Nursing process - is a clinical decision-making method that involves assessing, planning, implementing, and evaluating client care. Assessment of client problems results in formulating a nursing diagnosis (Adapted: Stanhope, 1996).

Nursing program length - is the total number of credit/quarter/clock hours required to complete the defined nursing program of study allocated over a specific number of academic terms (semester/trimester/quarter); the nursing program of study is inclusive of all prerequisite courses, general education courses, and nursing courses required (ACEN, June 2021).

Nursing program type - is the clinical doctorate, master's and post-master's, baccalaureate, associate, diploma, and practical curriculum offered by a governing organization that leads to the awarding of a degree, diploma, or certificate (ACEN, June 2021).

Online/Internet nursing course - is a form of distance education whereby 50% to 100% of the nursing course content is delivered primarily online and asynchronously (ACEN, August 2016).

Online nursing program - is a form of distance education whereby 50% to 100% of the credit hours or 50% to 100% of the clock hours of the nursing courses are delivered primarily online and asynchronously (ACEN, August 2016).

Outcome – A statement that reflects the achievement of an identified goal. (ACEN , 2021)

Course Student Learning Outcomes/Course Objectives – Statements of learner-oriented expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the course. Course student learning outcomes/course objectives must be consistent with standards of contemporary nursing practice. Course student learning outcomes/course objectives:

1. must be aligned with and linked to the end-of-program student learning outcomes;
2. should have a single, measurable action;
4. support students' achievement of the end-of-program student learning outcomes and program outcomes;
5. typically progress from simple to complex as students advance through the nursing program of study; and
6. organize, guide, and direct course curricular matters such as, but not limited to, the inclusion of content, learning activities, selection of practice learning experiences, evaluation methodologies, selection of practice learning environments, etc.

Program Outcomes – Measurable indicators that reflect the extent to which the purposes of the nursing program are achieved and by which nursing program effectiveness is documented. The ACEN specifies and requires the assessment of the following nursing program outcomes:

1. Undergraduate programs:
 - a. licensure examination pass rate;
 - b. program completion rate; and
 - c. job placement rate.
2. Graduate programs:
 - a. licensure examination pass rate and/or certification examination pass rate;
 - b. program completion rate; and
 - c. job placement rate.
3. The assessment of additional program outcomes is the choice of the governing organization and nursing education unit.

End-of-Program Student Learning Outcomes – Statements of learner-oriented, practice-ready expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the nursing program, regardless of the nursing program option. End-of-program student learning outcomes must be consistent with standards of contemporary nursing practice and must be different for each program type (e.g., the end-of-program student learning outcomes for an associate degree and a baccalaureate degree offered by the same governing organization should be unique to each program). End-of-program student learning outcomes:

1. are driven by established professional standards, guidelines, and competencies
2. provide the framework for all curricular matters
3. represent the point of transition from being a student to being an entry-level practitioner for the chosen level of nursing education

Outcomes Assessment Method (ACEN, June 2021)

Direct – objective measures in which student performance and/or the products of student work during the program are evaluated by faculty to determine achievement of end-of-program student learning outcomes and program outcomes. Examples include but are not limited to examinations (e.g., standardized or faculty-developed), portfolio evaluations, clinical evaluations, rubrics, and assignments.

Indirect – subjective measures that indicate the perspectives (e.g., opinions or thoughts) about student’s achievement, learning experiences, skills, and knowledge regarding end-of-program student learning outcomes and program outcomes. Examples include but are not limited to surveys, self-assessments, focus groups, interviews, and student peer review.

Partnership - is “An agreement (formal relationship) between a nursing education unit / governing organization and an outside agent / agency to accomplish specific outcomes and goals over a period of time”. This does not include practicum agreements for student learning experiences required by the nursing program (ACEN, June 2021).

Pass Rates (ACEN, June 2021)

Certification Examination Pass Rates - Annual performance on the certification examination for all first-time test-takers during the same 12-month period.

Licensure Examination Pass Rates - Annual performance on the licensure examination for all first-time test-takers during the same 12-month period.

Patient/Client centered care - includes actions to identify, respect and care about patients’/clients’ differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients/clients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (IOM, 2003).

Patient Safety Advocate - is an Individual who uses a multifaceted approach to assist patients in safely navigating the healthcare system while working to improve system-level problems which lead to patient safety concerns (Gilkey & Earp, 2009).

Persistence rates (undergraduate) - are graduation of students admitted to the nursing program (not time limited). According to THECB (2008), “The rate at which students persist in high education, often as measured by the percentage of students who continue in higher education from one year to the succeeding year” (p. 52).

Persistence rates (graduate, full-time) - are percentage of admitted students on a full-time MSN curriculum plan, who enroll full-time for two semesters during the academic year if admitted in the fall semester, and one semester if admitted in the Spring semester.

Persistence rates (graduate, part-time) - are percentage of admitted students on a part-time MSN curriculum plan, who enroll in at least one semester during an academic year.

Person – is a unique individual with biological, psychological, socio-cultural and spiritual dimensions that are constantly interacting with a changing environment.

Population-focused practice - is care provided to individuals, families and community based populations in order to enhance the health of the aggregate, community, or society. The scope of practice extends from a one-to-one nursing intervention to a global perspective of world health. Emphasis is placed on health promotion and disease prevention (Adapted: Stanhope and Clark, 1996).

Post-Master’s Certificate (PMC) – A selected series of courses that are a subset of courses within a master’s program specific to one area of practice (e.g., certificates in nursing administration, certificates in nursing education, certificate as a family nurse practitioner) that are taken after an individual is already credentialed with a master’s degree in nursing in a different specialty.(ACEN, June 2021)

Patient/client - is a recipient of care which may include individuals, families, populations, and communities (DECS 2010).

Practice learning environments - are settings that facilitate students' application of knowledge, skills, and behaviors in the care of patients and support the end of program student learning outcomes and program outcomes. Settings include, but are not limited to, acute-care and specialty hospitals, long-term care facilities, ambulatory care centers, physician offices, community and home health care, and on-campus laboratory with low- fidelity, moderate-fidelity, and high-fidelity simulation (ACEN, June 2021).

Practice learning experiences - are commonly known as "clinical/practicum" and held in settings that facilitate students' applying knowledge, skills, and behaviors in the care of patients and support the end of program student learning outcomes and program outcomes consistent with the scope of practice for which the nursing program is preparing graduates (ACEN, June 2021).

Practice Measurable Student Learning Outcome - are statements of learner- oriented expectations written in measurable terms that express the knowledge for skills that the students should be able to demonstrate with repetition of selected skills upon completion of a course with a laboratory component. Practice measurable student learning outcomes must be consistent with standards of contemporary nursing practice.

Practicum/ Clinical learning experiences - this is direct hands-on, planned learning activities with patients across the lifespan, interaction with the interprofessional team, and interaction with the patient's family and friends that are sufficient and appropriate to achieve end of program student learning outcomes, program outcomes, and /or role specific professional competencies, and are overseen by qualified faculty who provided feedback to students in support of learning (ACEN, August 2016)

Practicum Evaluation Tool (PET) – an Evaluation document that is used to track attainment of Practicum Measurable Student Learning Outcomes at each level within the Bachelor of Science Nursing (BSN) Program practicums. Each Practicum Measurable Student Learning Outcome has assigned areas to be evaluated and Critical Behaviors that must be met to meet designated Practicum Measurable Student Learning Outcomes.

Practicum Measurable Student Learning Outcome - are statements of learner- oriented expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of practicum. Practicum student learning outcomes/practicum outcomes must be consistent with standards of contemporary nursing practice. Practicum student learning outcomes/course outcomes

- must be aligned and linked to the end of program student learning outcomes;
- should have a single, measurable action;
- support students' achievement of the end of program student learning outcomes and program outcomes;
- typically progress from "simple" to "complex" as students advance through the nursing program of study; and
- organize, guide, and direct course curricular matters such as, but not limited to, the inclusion of content, learning activities, selection of practice learning experiences, evaluation methodologies, selection of practice learning environments, etc.

Practicum/ Clinical Preceptor - is a licensed Registered Nurse (RN) who meets the minimum requirements in Rule 215.10(j) Texas Board of Nursing 3.8.3.a. Education Guideline Preceptor Clinical/Practicum Learning Experiences. This registered nurse is not employed as a faculty member by the nursing program, and directly supervises practicum learning experiences for no more than two students. The preceptor contributes to the evaluation of the student during the experiences and assists in adapting the student to the nurse's role. The clinical/practicum preceptor facilitates student learning as prescribed by a signed written agreement between the educational institution, preceptor, and affiliating agency (Texas Board of Nursing, 2013). A preceptor is an academically and experientially qualified person who has received formal training to function as a resource and role model for nursing students. When specified, preceptors must meet the stated requirements for the level of nursing education offered. Examples include, but are not limited to, requirements set by a state regulatory agency for nursing or requirements set by the governing organization/nursing education unit (ACEN, June 2021).

Practicum Readiness Documents (PRDs) – Documents that are required for a student to complete and on file before they are allowed to attend practice. These include but are not limited to the following: Tuberculosis testing results, required Immunization documentation, and History and Physical completed by health care provider.

Pre-briefing - is an information session given prior to the start of a simulation activity. It sets the stage for the activity and assists students in achieving scenario outcomes (INACSL, 2011).

Prerequisite course – is a course/courses students must complete before students are able to enroll in other courses. Prerequisite courses to NURS courses require a grade of “C” or better prior to admission into the LU School of Nursing. Pre-admission course/courses are courses required to be completed prior to admission to the nursing program.

Professional integrity - is demonstrated by the acceptance of accountability and responsibility for one’s actions; is the management of all situations in a truthful and honest manner that demonstrates respect and dignity for self and others; and is the presentation of oneself in a professional manner through proper dress, communication, and demeanor. It is the integration of professional behaviors and the socialization process that prepares graduates for entry into the practice of professional nursing.

Professional practice skills - includes continuing development of leadership abilities, adhering to professional standards, assuming responsibility and accountability for own actions as well as delegated tasks.

Professional roles - are provider of patient/client-centered care, member of the profession, patient safety advocate and member of the health care team (DECS, 2010).

Professional standards/guidelines for nursing practice - are a set of guidelines approved by a nationally recognized nursing organization for use in the development and evaluation of a nursing curriculum. The most recent version/edition of the standards/guidelines must be used. The standards/guidelines include, but are not limited to (ACEN, June 2021):

- Consensus Model for APRN Regulation (APRN Consensus Work Group & the National Council of State Boards of Nursing APRN Advisory Group)
- Core Competencies for Interprofessional Collaborative Practice© (Interprofessional Education Collaborative)
- Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education)
- Essentials of Baccalaureate, Master’s, and Doctoral Education (American Association of Colleges of Nursing)
- Health Professions Education: A Bridge to Quality© (Institute of Medicine)
- NLN Competencies for Graduates of Nursing Education Programs© (National League for Nursing)
- Nurse Practice Standards for the Licensed Practical/Vocational Nurse (National Federation of Licensed Practical Nurses)
- Nursing: Scope and Standards of Practice© (American Nurses Association)
- Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs (National Association for Practical Nurse Education and Services)
- Statement on Clinical Nurse Specialist Practice and Education© (National Association of Clinical Nurse Specialists)
- Quality and Safety Education for Nurses (QSEN) Competencies

Program Completion Rate – Program completion rate calculation for students who complete the program of study on time begins with calculating enrollment on the first day of the first nursing course and ends with completion of course required for conferral of a certificate, diploma, or degree. Must be reported in aggregate for program as a whole. Per Criterion 6.3, data must be disaggregated by date of program completion and if applicable, program option and location. Program determines when it is appropriate to disaggregate data for program decision-making.

Program Outcomes - are the measurable indicators that reflect the extent to which the purposes of the nursing program are achieved and by which nursing program effectiveness is documented. “The ACEN specifies and requires the assessment of the following nursing program outcomes: licensure examination pass rate, program completion rate, and job placement rate for undergraduate programs, and licensure examination pass rate and/or certification examination pass rate, program completion rate, and job placement rate for graduate programs. The assessment of additional program outcomes is the choice of the governing organization and nursing education unit. .

Provider of Patient-Centered Care - is an individual who exhibits skills of listening to, informing and involving patients in their care. The IOM (Institute of Medicine, 2003) defines patient-centered care as: “Providing care that is respectful of, and responsive to, individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions.”

Public - is any individual or group with an interest in but no direct responsibility for the development or delivery of a nursing program (e.g., clients/patients, non-nursing students, non- nursing faculty, healthcare providers, and citizens) (ACEN, June 2021).

Published documents - are all written forms of communication distributed by a nursing program and/or governing organization, including paper and electronic sources intended to inform the public (ACEN, June 2021).

Qualified, academically - is documented current or recent direct engagement in a significant manner in the teaching of nursing and/or research in nursing; faculty members and nurse administrators must hold all educational qualifications required by the governing organization, the state, and the governing organization's accrediting agency; nurse administrators must hold all educational qualifications required by the governing organization, the state, the governing organization's accrediting agency, and the ACEN (ACEN, June 2021).

Qualified, experientially - is documented current or recent direct engagement in a significant manner in clinical nursing experiences for those whose role includes teaching; for those engaged in administration, documented current or recent direct engagement in a significant manner in administrative functions in nursing education; faculty members and nurse administrators must hold all experiential qualifications required by the governing organization, the state, and the governing organization's accrediting agency (ACEN, June 2021).

Qualified, to Teach – The maintenance of current knowledge and expertise in the teaching modality (e.g., face-to-face or alternative methods of delivery) and the assigned classroom, laboratory, and/or clinical teaching responsibilities. Maintaining currency may include, but is not limited to, focused continuing education; clinical practice (paid or unpaid); and applicable professional development.

Reflective Practice - is considered an essential component of experiential learning, it promotes the discovery of new knowledge with the intent of applying this knowledge to future situations. Has the potential to decrease the gap between theory and practice (INACSL, 2011).

Relationship skills - enhance the connection between the nurse and hierarchies of interactions with other persons: clients, families, communities, members of the health care team, and the environment in which these interactions occur. Involves accountability, primacy of duties directed at beneficence, scientific and technical competence, and leadership. Aimed at maintaining the therapeutic benefit of the interaction, evaluation of problem and goals toward therapeutic progress, facilitating wellness and implementing care with unconditional positive regard for the client's progress.

Resources, fiscal - are financial support required for securing the personnel, supplies, materials, equipment, and services necessary to ensure the achievement of the end of program student learning outcomes and program outcomes (ACEN, August 2016).

Resources, learning - are materials, activities, and technologies that facilitate the development of students' knowledge, skills, and behaviors necessary to ensure the achievement of the end of program student learning outcomes and program outcomes (ACEN, August 2016).

Role Modeling - "is the facilitation of the client in attaining, maintaining, or promoting health through purposeful individualized interventions based on the client's perceptions of the world as well as the theoretical base for the practice of nursing." (Erickson, H. C., Tomlin, E. M., and Swain, M. A. (2002). *The Modeling and Role Modeling Theory* in J. B. George, 2002, *Nursing Theories, the Base for Professional Nursing Practice*, pg. 466).

Role-Specific Professional Competencies (Graduate Programs Only) – Expected, measurable levels of graduate level nursing performance that integrate knowledge, skills, and behaviors in the specialty area. Competencies may include (but are not limited to) specific knowledge areas, clinical judgments, and behaviors based upon the role and/or scope of practice of the master's- or doctoral-prepared nurse. (ACEN, June 2021).

Safety for health care team - the avoidance or reduction to acceptable limits of actual or potential harm from health care management or the environment in which health care is delivered (NHIPPC 2017)

Scholarship – Activities that facilitate the enhancement of a nursing faculty member's expertise and support the achievement of the end-of-program student learning outcomes and program outcomes. These include, but are not limited to, application of knowledge, teaching, service, practice, and research. (ACEN, June 2021).

Scientific problem solving - is a vital ability for nursing practice which involves both problem solving and decision making. A dynamic process which utilizes the nursing process, decision making strategies, critical thinking skills, critical pathways, and independent/collaborative problem-solving as methods employed to solve problems related to care delivery. Involves problem identification, gathering and analyzing data, developing solutions, implementing the best, most cost-effective solution(s), and evaluating client outcomes. The nurses' ability to recognize and identify the problem is considered the most vital step (Adapted: Yoder-Wise, 1995).

Self-care - the ability of individuals, families and communities to promote health, prevent disease, maintain health, and to cope with illness and disability with or without the support of a healthcare provider.

Service Excellence- refers to the ability of service providers to consistently meet and occasionally even exceed customers' expectations.

Service learning - "is a philosophy of education which emphasizes active, engaged learning with the goal of social responsibility...it is reciprocal learning, dynamic and interactive...which suggests mutuality in learning between the student and the community with whom he or she is actively engaged." (J. C. Kendall, 1990, *Combining Service and Learning*, pg. 22-23). Participation in meaningful activities within the community which allow the individual to grow personally and professionally outside the classroom experience.

Shadow Health- A teaching strategy that utilizes educational software web-based Digital Clinical Experiences™ and is designed to augment health courses for nursing students.

Simulation, high fidelity - is creating a realistic client care environment and situation in which students participate in care, utilize problem-solving and practicum judgment skills. Integrates student cognitive, affective, and psychomotor domains in creating a client care situation as close to reality as possible, oftentimes utilizing high-tech mannequins which breathe, talk, and have realistic pulmonary, cardiac and gastric sounds. This teaching/learning strategy promotes synthesis of knowledge and the integration of multiple concepts into care of clients across the lifespan within a safe nonthreatening learning environment. Experiences using full scale computerized patient simulators, virtual reality or standardized patients that are extremely realistic and provide a high level of interactivity and realism for the learner (NLN-SIRC, 2013).

Simulation Laboratory - is an on-campus setting that is designed to look, feel, and/or function as a real-world practice learning environment, offering real-world practice learning experiences, which may include the use of low- fidelity, moderate-fidelity, and/or high-fidelity simulation equipment (ACEN, August 2016).

Simulation, low fidelity - utilizes static mannequins and task trainers to create a realistic situation in which students practice problem solving and psychomotor skills. This teaching/learning strategy allows for peer review, self-assessment, and student demonstration of skill acquisition as well as faculty evaluation of students' performance within a safe nonthreatening learning environment. Experiences such as case studies, role-playing, using partial task trainers or static mannequins to immerse students or professionals in a practicum situation or practice of a specific skill (NLN-SIRC, 2013).

Simulated/Standardized Patient - is a person trained to consistently portray a patient or other individual in a scripted scenario for the purposes of instruction, practice, or evaluation (Robinson-Smith, Bradley, & Meakim, 2009). (ASPE Standards, SSH dictionary)

Skill - is the proficiency, competency and /or mastery of set(s) of tasks, abilities and/or behavior(s) that are hierarchically acquired over time as a consequence of learning, practice and experience.

Skill Development - is the process along a continuum of growth in knowledge, skills, and attitudes as a result of educational or other experiences (Meakim, Boese, Decker, Franklin, Gloe, Lioce, Sando, & Borum, 2013).

Society - is the scope of humanity: individuals, cultures, families and communities forming complex adaptive systems.

Social determinants of health- are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Spirituality - the quality of being concerned with the human spirit or soul as opposed to material or physical things.

Staff - are non-faculty personnel who facilitate the attainment of the goals and outcomes of a nursing education unit, including clerical and other support persons (ACEN, June 2021).

Structured setting - is a "geographical or situational environment where the policies, procedures, and protocols for provision of health care are established. In the structured setting, there is recourse to assistance and support from the full scope of nursing expertise." (Finkelman & Kenner, 2014, p. 85). Finkelman, A. & Kenner, C. (2014). *Professional nursing concepts: Competencies for Quality Leadership* (3rd ed.). Burlington, MA: Jones & Bartlett Learning.

Sufficient Full-Time Faculty – Typically reflected by: (ACEN, June 2021)

1. The ratio of the total number of full-time faculty (per the ACEN definition of full-time faculty) to the total number of full-time and part-time nursing students enrolled in all the nursing courses required for a nursing program or programs; The required workload for full-time faculty;
2. The number of full-time faculty on required or voluntary overload and amount of required and voluntary overload for each full-time faculty member; and
3. Required and voluntary non-teaching responsibilities required by the governing organization and/or nursing education unit.

Sustainability of Resources – The capacity of the governing organization to continue financial, human, and physical resources at the current level.(ACEN, June 2021)

Synchronous learning - is learning and instruction that occur at the same time and in the same place (ACEN, August 2016)

Systematic Plan for Program Evaluation (SPPE) - is a document reflecting ongoing assessment, analysis and evaluation. The SPPE encompasses both the Undergraduate and Graduate Programs and is continually updated by faculty to reflect the most current Accreditation Commission for Education in Nursing (ACEN) standards.

Teaching-Learning - is a collaborative problem-solving relationship between learner and teacher emphasizing self-direction and self-determination of goals leading to increased independence on the part of the learner.

Technical/Psychomotor skills - are the use of knowledge and dexterity to manipulate the ever changing and advanced technical, computerized equipment to provide client care, e.g., using diagnostic equipment to gather assessment data, computerized client information to plan outcomes, mechanical pumps and respirators to maintain life, computer software to document, evaluate and conduct research on client outcomes, and information superhighway for communication and information gathering.

Therapeutic interventions - are actions designed to assist a client in moving from present level of health to that described in the expected outcome. These actions may be direct and indirect which include nurse initiated, physician initiated, and collaborative interventions.

Title IV Gatekeeper - is a person or agency that is responsible for monitoring an institution's compliance with the Higher Education Reauthorization Act Title IV (ACEN, August 2016).

Unstructured setting - is a "geographical or a situational environment that may not have established policies, procedures, and protocols and has the potential for variations requiring independent nursing decisions" (Finkelman & Kenner, 2014, p. 85). (Finkelman, A. & Kenner, C. (2014). *Professional nursing concepts: Competencies for Quality Leadership* (3rd ed.). Burlington, MA: Jones & Bartlett Learning.

Web-Enhanced - refers to the inclusion of a world-wide-web based resource for course delivery for the purpose of improving teaching/learning. Specifically, web-enhanced courses are delivered on campus and have an on-line component. The use of a vehicle such as Blackboard to provide framework for course materials, discussion, real-time chat, email, assignment drop boxes, and computer-based testing and grade book features is common.

Welfare of faculty and staff - are policies affecting faculty and staff promulgated by the governing organization and nursing education unit, including, but not limited to, those related to non-discrimination, appointment, rank, grievance, promotion, rights and responsibilities, salaries/benefits, and workload (ACEN, June 2021).

Workplace violence – is a recognized hazard in the healthcare industry. WPV is any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site. It can affect and involve workers, clients, customers and visitors.

Workplace civility – are behaviors that help to preserve the norms for mutual respect in the workplace; **civility** reflects concern for others.