Notice of Nondiscriminatory Policy as to Students

Alderson Broaddus University is committed to providing and maintaining a learning and working environment that is free from any form of illegal discrimination or harassment in accordance with federal, state and local law, including Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title VI and Title VII of the Civil Rights Act of 1964, the Americans with Disabilities Act, the Americans with Disabilities Amendments Act, the Age Discrimination in Employment Act, the West Virginia Human Rights Act, and their implementing regulations.

Specifically, the University does not discriminate on the basis of sex, age, race, color, national origin, disability, religion, veteran status, or any other characteristic protected by federal, state and local law in recruitment, admission, educational programs, University activities or employment. There will be no retaliation against any individual who makes a good faith report of discrimination or harassment or participates in or cooperates with any investigation of alleged discrimination or harassment.

The following person has been designated to handle inquiries regarding the University’s nondiscrimination policies:
Matthew Sisk/Title IX Coordinator
101 College Hill Drive
Philippi WV 26416
304-457-6356
siskmr@ab.edu

Additionally, you may contact the United States Department of Education, Office of Civil Rights:
U.S. Department of Education, Office of Civil Rights
Lyndon Baines Johnson Department of Education Building
400 Maryland Avenue, SW

Notice of Disclaimer

Nothing in the catalog or any of Alderson Broaddus University’s written policies, handbooks, or other documents, and nothing stated orally by a representative of the University should be construed to create any contractual obligations on the part of the University. Furthermore, no one at the University is authorized to contractually obligate the University to any student unless the obligation is in writing and is signed by the President of the University or his designee. Recognizing that changes may be necessary, the University reserves the right to change at any time its policies, guidelines, and procedures, including without limitation, the University’s curricula, course offerings, fees, requirements for graduation, and any other matter set forth in the various catalogs, manuals, written policies, and other documents, at the sole discretion of the University.

Alderson Broaddus University provides support for disabled students. If you are qualified for such support, contact the coordinator of your course.

Each student is responsible for and accountable to the information in the School of Nursing Policy & Procedure Manual found on-line on at www.ab.edu.
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May 2016

To the Students and Faculty:

Welcome to Alderson Broaddus University, the College of Health Sciences, and the School of Nursing! We hope that your years here will be exciting and rewarding.

The purpose of publishing such a manual is to ensure that the policies of the School of Nursing are public and accessible.

The School of Nursing policies are nondiscriminatory and are congruent with the mission and goals of the college. The task of educating practitioners, who are prepared to safely practice professional nursing at the generalist level, mandates that certain nursing academic and clinical conduct requirements are more stringently delineated than general university requirements. In the event that a School of Nursing policy differs from the general university policy, communication of that difference occurs via this manual.

The School of Nursing Policy and Procedure Manual is available to all students upon admission to the School of Nursing. The provisions in the Policy and Procedure Manual are NOT to be regarded as an irrevocable contract between the student and the School of Nursing. The School of Nursing reserves the right to make and designate the effective date of curricula policies and other regulations, at any time such changes are considered to be desirable or necessary.

Policies affecting nursing students and/or nursing faculty are developed and/or revised through the action of various School of Nursing committees and finalized by the Nursing Faculty Organization. Revised policies will be reported to students and faculty with discussion as appropriate and revisions made to the document via the university-wide computer system.

Any questions or concerns not covered in this manual should be directed to faculty members or academic advisors.

Updated and Revised: 8/02; 8/03; 5/04; 6/05; 5/06; 7/07; 5/08; 5/09; 8/13; 5/14
INTRODUCTION
Nursing
This major offers a program that leads to a Bachelor of Science degree in Nursing and prepares a nurse generalist with the knowledge, skills, attitudes, behaviors, and values to be safe responsible practitioners of professional nursing. The course of study provides a liberal arts education and a sequence of professional courses.

On graduation from the program, the graduate has completed the educational requirements to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN). The program offered by the School of Nursing is accredited by the Accreditation Commission for Education in Nursing (ACEN), and is approved by the West Virginia Board of Examiners for Registered Professional Nurses (WVBOERN). The School of Nursing is an agency member of the Council of Baccalaureate and Higher Degree Programs of the National League for Nursing.

Accrediting Agencies:
Accreditation Commission for Education in Nursing, Inc. (ACEN)
3343 Peachtree Road NE, Suite 850
Atlanta, Georgia 30326
(404) 975-5000
www.acenursing.org

State of West Virginia Board of Examiners for Registered Professional Nurses (WVBOERN)
101 Dee Drive, Suite 102
Charleston, WV 25311-1620
(304) 558-3596
www.wvrnboard.com

A Licensed Practical Nursing (LPN-BSN) and Registered Nurse (RN-BSN) degree completion program are available for those who qualify. Through the cooperative efforts of the School of Nursing and Department of Education, a School Nurse Certification Option is offered. Graduates who have completed the requirements for this option, and who have passed the NCLEX-RN Exam may apply for the certification from the West Virginia Department of Education through the Division of Education.
School of Nursing Philosophy

The School of Nursing faculty believes in and supports the mission of Alderson Broaddus University. The nursing faculty commits to the university, the community, and society to provide quality baccalaureate nursing education. The philosophy of the School of Nursing is derived from basic beliefs about education and professional nursing. Student achievement is assessed through Student Learning Outcomes (SLOs) and quality-based competency behaviors, which progress from simple to complex related to nursing process, professionalism, and safety. By the final semester, these SLOs culminate in Program Student Learning Outcomes (PSLOs). These Program Student Learning Outcomes and related competency behaviors evolve from ANA Standards of Professional Practice, AACN Essentials, NLN Standards, QSEN Competencies, and the West Virginia Standards for Professional Nursing Practice.

The faculty believes the patient, whether viewed as an individual or collectively as family, group, community, or society, is unique and holistic, meriting safe quality patient-centered care as exemplified in the nurse-patient relationship operationalized by the nursing process. Alderson Broaddus University views nursing as a caring, therapeutic, interpersonal profession that values diversity, and embodies Christian service to holistically address patient health needs in collaboration with the interprofessional health care system.

Knowledge, skills, attitudes, behaviors, and values associated with the practice and profession of nursing are assessed through seven PSLOs including:

1. Create patient-centered, safe, quality evidence-based nursing care with diverse patients across the life span.
2. Design a caring environment for the patient, family and community to promote wellness, prevent disease, and facilitate healing.
3. Generate critical thinking necessary to provide quality patient care.
4. Professionally communicate/collaborate with members of the interprofessional team, the patient family and community to provide and improve patient care.
5. Exemplify leadership in a variety of healthcare settings for diverse patient populations.
6. Synthesize information technology to communicate, manage knowledge, mitigate error and support decision-making.
7. Assimilate professional, ethical and legal guidelines in practice as a baccalaureate-prepared professional nurse.

The faculty believes a baccalaureate nursing education grounded in the liberal arts must provide learners with the opportunity to acquire the knowledge, skills, attitudes, behaviors, and values to become safe,
responsible practitioners of professional nursing. The teaching-learning relationship between faculty and learner is central to education no less so when, despite the student’s valiant investment, remediation needs emerge requiring focused teaching-learning interventions. Throughout, learners are expected to demonstrate integrity and be self-disciplined, self-directed, and accountable for their own learning. The faculty is responsible for creating a caring environment in which knowledge is shared and role development enhanced.

Approved Dec. 15, 2011
Edited: Mar 28, 2012; August 29, 2013

Alderson Broaddus University School of Nursing Purpose and Goals

As an integral part of Alderson Broaddus University, the School of Nursing shares the overall aim of the University, which is to help students respect scholarly endeavor, gain skills in growth and learning, and develop moral and ethical integrity in every phase of life. Building on a liberal arts foundation, students are encouraged to become responsible citizens who regard their vocation as a service to humanity stemming from a basic commitment to God and offered for the benefit of the client.

The purpose of the curriculum leading to the Bachelor of Science in Nursing is to prepare the student to function as a competent beginning professional nurse in any health care setting. Graduates of the program will value scholarly endeavors and become life-long learners.

Congruent with the mission and purpose of the institution, the goals of the nursing program are to prepare graduates:

1. Who possess the knowledge, skills, attitudes, behaviors, and values necessary to assist the client experiencing crisis to meet human needs.
2. Who assume professional nursing roles to provide competent professional nursing care to individuals, families, groups, communities, and society within a rapidly changing environment.
3. Who are eligible to apply for licensure as registered nurses.
4. Who critically think, effective communicate, therapeutically intervene, and faithfully pursue life-long learning.
5. Who are accountable to the ANA Standards of Practice and the Standards for Professional Nursing Practice of the West Virginia State Board of Nursing.

Rationale for Allocation of Credit

Traditional Program

All nursing and laboratory course credits are consistent with university policy. University credit allocations are determined on semester hours as stated in the Alderson Broaddus University Catalog.

Credits are expressed in semester hours. Fifteen regular class sessions of one hour with two hours of preparation per class session or fifteen three- or four-hour laboratory sessions will yield one semester hour of credit. Generally, therefore, a three-credit course will meet in three one hour sessions per week, with an additional three-hour period for final examinations.
Sample Progression Plan: Traditional Program

<table>
<thead>
<tr>
<th>Subject</th>
<th>Credit</th>
<th>Subject</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>MATH [LS]</td>
<td>3</td>
<td>*BIOL-271 (A&amp;P II) [S/LS]</td>
<td>4</td>
</tr>
<tr>
<td>*BIOL-270 (A&amp;P I) [S/LS]</td>
<td>4</td>
<td>*HSCI-100 (Medical Terminology) [S/LS]</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*CHEM-190 [S/LS]</td>
<td>4</td>
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</tbody>
</table>

Level I

Nursing: when pass: pre-requisites with “C”; HESI A2; GPA 2.5

<table>
<thead>
<tr>
<th>Subject</th>
<th>Credit</th>
<th>Subject</th>
<th>Credit</th>
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</thead>
<tbody>
<tr>
<td>NRSG 210 - Intro. To the Art of Prof. Nursing</td>
<td>2</td>
<td>NRSG 280 - Care of the Adult I</td>
<td>5</td>
</tr>
<tr>
<td>NRSG 220 - Care of the Patient Across the Lifespan</td>
<td>6</td>
<td>NRSG 270 - Pharmacology for Nursing</td>
<td>3</td>
</tr>
<tr>
<td>*HSCI-260 (Nutrition) [S]</td>
<td>3</td>
<td>*PHIL-391 (Medical Ethics) [S/LS]</td>
<td>3</td>
</tr>
<tr>
<td>*CSCI-225 (Medical Informatics) [S/LS]</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NRSG 250 - Health Assessment</td>
<td>3</td>
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</table>

Level II

<table>
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<tr>
<th>Subject</th>
<th>Credit</th>
<th>Subject</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRSG 310 - Nursing Research</td>
<td>3</td>
<td>NRSG 350 - Acute Psychosocial Nursing</td>
<td>3</td>
</tr>
<tr>
<td>NRSG 330 - Care of the Childbearing Family &amp; Women’s Health</td>
<td>5</td>
<td>NRSG 370 - Nursing Care of Children</td>
<td>6</td>
</tr>
<tr>
<td>NRSG 340 - Care of the Adult II</td>
<td>5</td>
<td>NRSG 380 - Care of Adults III</td>
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</tbody>
</table>

Level III

<table>
<thead>
<tr>
<th>Subject</th>
<th>Credit</th>
<th>Subject</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRSG 410 - Care of Patient with Complex Health Issues I</td>
<td>5</td>
<td>NRSG 450 - Nurse as Manager</td>
<td>3</td>
</tr>
<tr>
<td>NRSG 420 - Community Mental Health Nursing</td>
<td>4</td>
<td>NRSG 460 - Care of Patient with Complex Health Issues II</td>
<td>5</td>
</tr>
<tr>
<td>NRSG 430 - Improving Critical Thinking through Test Taking Strategies: NCLEX-RN Part I</td>
<td>1</td>
<td>NRSG 470 - Community as Client</td>
<td>3</td>
</tr>
<tr>
<td>NRSG 440 - Community as Client: Clinical Immersion</td>
<td>1</td>
<td>NRSG 480 - Improving Critical Thinking through Test Taking Strategies: NCLEX-RN Part II</td>
<td>1</td>
</tr>
<tr>
<td>MATH 251 (Statistics)(elective)</td>
<td>3</td>
<td>NRSG 495 - Educational Foundations &amp; School Law (elective)</td>
<td>2</td>
</tr>
</tbody>
</table>

*While nursing courses follow in sequence, Advisors work with each student to individualize their progression plan to facilitate choices among liberal studies and elective courses to total the 120 credit hours needed to graduate.

March 7, 2012
Revised: 1/13; 12/14
## LPN-BSN Program

The Alderson Broaddus University School of Nursing developed the LPN-BSN Program to provide licensed practical nurses with a flexible, adult learning based educational opportunity culminating in a Bachelor of Science degree in Nursing. The program format allows students to earn the bachelor’s degree by attending convenient classes that meet one weekend a month plus up to four clinical days per month for 36 months. (Sample progression plan follows).

### Sample Progression Plan: LPN-BSN Program – New Curriculum

<table>
<thead>
<tr>
<th>Summer I</th>
<th>Fall I</th>
<th>Spring I</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject</td>
<td>Credit</td>
<td>Subject</td>
</tr>
<tr>
<td>NRSG 250</td>
<td>3</td>
<td>ECON 211</td>
</tr>
<tr>
<td>NRSG 205</td>
<td>4</td>
<td>NRSG 271</td>
</tr>
<tr>
<td>ENGL 190 or ENGL 180</td>
<td>3</td>
<td>NRSG 280</td>
</tr>
<tr>
<td>CSCI 225</td>
<td>3</td>
<td>DEVL MATH 010</td>
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</table>

<table>
<thead>
<tr>
<th>Summer II</th>
<th>Fall II</th>
<th>Spring II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject</td>
<td>Credit</td>
<td>Subject</td>
</tr>
<tr>
<td>NRSG 370</td>
<td>6</td>
<td>NRSG 310</td>
</tr>
<tr>
<td>COMM 130</td>
<td>3</td>
<td>ART 135</td>
</tr>
<tr>
<td>ENGL 190</td>
<td>3</td>
<td>ENGL 200</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NRSG 350</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Summer III</th>
<th>Fall III</th>
<th>Spring III</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject</td>
<td>Credit</td>
<td>Subject</td>
</tr>
<tr>
<td>NRSG 420</td>
<td>4</td>
<td>NRSG 410</td>
</tr>
<tr>
<td>HIST 150</td>
<td>3</td>
<td>NRSG 430</td>
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<tr>
<td></td>
<td></td>
<td>NRSG 440</td>
</tr>
<tr>
<td>RELG 295</td>
<td>3</td>
<td>NRSG 480</td>
</tr>
<tr>
<td>ENGL 283</td>
<td>3</td>
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</table>

*LPN-BSN new curriculum courses and the Traditional new curriculum courses carry the same credit hours and course descriptions, except:
1. LPN-BSN’s receive escrow credit for NRSG 220 “Care of the Patient Across the Lifespan.” Instead the LPN-BSNs take NRSG 205, “Transition to Professional Nursing.”
2. Program requirements for the LPN-BSN Program include: Computer Science 225, Philosophy 391, and Psychology 220.
RN-BSN Degree Completion Program

Progression within the program will be based on time of enrollment and students program of study decision to proceed as a part-time or full-time student.

Part-time student will be scheduled 3 credit hours per 8 week session.
Full-time student will be scheduled no more 6 credit hours per 8 week session.

Number of electives will depend on students transfer credits received. Students will proceed with taking required nursing courses first (24 credit hours) and then liberal arts electives until the required 120 credits are acquired for graduation.

Nursing 510 is the first required course at Level I following with Nursing 515 and N520 at Level II, Nursing 530, 532, 533 are all Level III courses that can be taken in any sequence and Nursing 550 is the nursing capstone course.

Adult Learning Credit Formula

The LPN-BSN program is considered a non-traditional program. Credit for courses completed at Alderson Broaddus University will be awarded following the adult learning formula: 3 academic credits are awarded for 20 contact hours in a lecture course. Clinical credits are awarded following the established formula of 1 academic credit awarded for 3 contact hours per week.
Policies & Procedures
Policy: II.A

Academic Advising and Registration

Each student, identified as a nursing major, will be assigned a full-time nursing faculty person who is responsible for advising the student related to academic registration and planning and problem resolution toward successful program completion. A formal record of academic advising contacts is retained in the student’s folder.

Rationale:

The academic advising process provides the student in nursing with a consistent nursing faculty advisor to analyze and individualize as possible and necessary, the student’s academic schedule. The faculty advisor serves as consultant, mentor, coordinator, and advocate related to scheduling, registration, academic performance, and program completion. Academic advising includes assisting the student to develop his/her four-year plan and to register each semester. The advisor facilitates the student’s understanding of the general and special requirements for academic progression and retention. The advisor may also counsel the student related to personal issues and opt to refer to other campus support services such as the Academic Center for Educational Success (ACES) and/or Counseling Services.

A record of student contacts for academic advising enhances continuity and proper follow-up should the advisor change. This record also delineates the course of events should a student withdraw or fail to be retained, and documents faculty actions pertinent to risk management or potential legal issues.

Procedure:

I. Advisor/advisee assignment

A. Annually the chairperson of the School of Nursing, in consultation with the Registrar, prepares the nursing faculty advisor/nursing student advisee assignment. Consistency of assignment occurs when possible to facilitate continuity for the student.

B. The Chair updates the assignment per semester to accommodate new students, transfer students, faculty sabbatical, etc.

C. Faculty will avoid signing registration or add/drop forms for students who are not assigned advisees. A student is to seek an appointment with his/her assigned advisor for academic concerns, since the assigned advisor is most knowledgeable of the scope, parameters, and impact of decisions regarding that individual student’s academic plan.

1. In an urgent situation when the advisor is not available, another nursing faculty person will provide assistance and communicate with the assigned advisor regarding actions taken.

2. The assigned advisor will review the decision regarding any impact on academic progression and the need for follow up.

3. In the event of emergency advising, the “temporary” faculty advisor must clearly document resultant changes on the 4-Y card.

II. The four-year plan – The advisor guides the student in the development of a four-year academic plan toward meeting requirements for the baccalaureate degree with a major in nursing.

A. During the designated advance registration period in the spring of the freshman year, each student meets with the advisor to collaborate and plan which courses will be taken per semester, through program completion.

B. The course sequence is mapped on a 4-Y card.

C. The 4-Y plan must fulfill the following criteria:

1. Meet the stipulations of the Liberal Studies program per the official check sheet

2. Meet the designated credit hour requirements for graduation
3. Reflect proper pre-requisites for the nursing major
4. Include all nursing courses in the proper sequence
5. Allow for choices where indicated, e.g., minor, School Nurse Option, etc.
6. Assure that the projected course plan does not conflict with nursing clinical labs.

III. Advanced registration/registration process
A. Students are to register for the upcoming semester during the designated advanced registration period
B. The advisor meets with the student regarding fulfilling or changing the proposed schedule for the next semester on the 4-Y plan
C. Grades from the preceding semester are entered onto the 4-Y card
D. The advisor or the student can register for classes via WebAdvisor.

IV. Record of advising contacts
A. Advisors will retain a formal record of academic advising contacts in the student’s folder in the locked file room. This record is either hand written or computer generated as appropriate. It includes a copy of the 4-Y plan, follow up on midterm deficiency reports, referrals to campus support services, and intent to take leave of absence/withdraw, etc.

V. Verification of Ability to Progress
A. At the beginning of each semester, the faculty advisor will review each student’s eligibility to progress and initial the 4-Y card
B. Included in this review would be:
   1. Successful completion of all pre-requisite courses (as per Progression Plan)
   2. Achievement of the required cumulative GPA

Initial Date: 2/21/92; 4/14/92
Revised Dates: 5/11/95; 2/4/02; 11/15/04; 10/15/07; 8/29/11; 3/24/14
Policy: II.B-1

School of Nursing Admission Policy

Policy:

In order to be admitted to the School of Nursing a student must first qualify for admission to the University. The students records may be reviewed at the departmental level by one or more of the following: School of Nursing Faculty, Admissions, Missions Committee Chair of the School of Nursing; Director of the RN-BSN Program; Director of the LPN-BSN Program; and when needed by the committee of the whole.

Traditional Program

Rubric: Admission & Placement Criteria – For Entry into the School of Nursing

Traditional Program

Students must be eligible for sophomore standing. Students must successfully complete the prerequisites to be admitted as a student into the School of Nursing. The School of Nursing Faculty, Admission, Mission Committee will determine which students meet the admission criteria as described in the rubric below:

Name:________________________________________

<table>
<thead>
<tr>
<th>Overall GPA:</th>
<th>Student GPA at application into Nursing:</th>
<th>Points Earned:</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.5 – 4.0 = 4 points</td>
<td></td>
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<tr>
<td>3.0 – 3.49 = 3 points</td>
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<td></td>
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<tr>
<td>2.5 – 2.99 = 2 points</td>
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<tr>
<td>Less than 2.50 = 0 points</td>
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<table>
<thead>
<tr>
<th>Core Course* GPA:</th>
<th>Student Core Course GPA:</th>
<th>Points Earned:</th>
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</thead>
<tbody>
<tr>
<td>3.5 – 4.0 = 4 points</td>
<td></td>
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<tr>
<td>3.0 – 3.49 = 3 points</td>
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<td>2.5 – 2.99 = 2 points</td>
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<td>Less than 2.50 = 0 points</td>
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<table>
<thead>
<tr>
<th>ACT Cumulative Score:</th>
<th>Student Cumulative ACT Score:</th>
<th>Points Earned:</th>
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<tbody>
<tr>
<td>25 or greater = 4 points</td>
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<tr>
<td>21 – 24 = 3 points</td>
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<td></td>
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<tr>
<td>18 – 20 = 2 points</td>
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<td></td>
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<tr>
<td>Less than 18 = 0 points</td>
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</table>

<table>
<thead>
<tr>
<th>HESI A2 Admission Assessment with Critical Thinking Cumulative Score:</th>
<th>Student Score on HESI A2:</th>
<th>Points Earned:</th>
</tr>
</thead>
<tbody>
<tr>
<td>90 – 100 = 4 points</td>
<td></td>
<td></td>
</tr>
<tr>
<td>80 – 89 = 3 points</td>
<td></td>
<td></td>
</tr>
<tr>
<td>69 – 79 = 2 points</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 69 = 0 points</td>
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</tbody>
</table>

*Core Courses – Core courses include BIOL 270 and BIOL 271, CHEM 190, Liberal Studies Math Requirement and HSCI 100. All Core Courses will be completed successfully with the grade of “C” or better, but the student’s cumulative GPA must be 2.5 or greater. Students will only have two (2) attempts to successfully complete Core Courses.

Scale for Admission (Range 0-16)

8 – 16 points -- Admission
7 points or less -- Admission denied. Consult with career counselor
The HESI Admission Assessment Exam with Critical Thinking (HESI A2)

- The HESI Admission Assessment Exam Review Book is recommended for purchase to begin preparation upon entering the sciences in the freshman year. ISBN-13: 978-1455703333

- All students will purchase and take the HESI A2 in the spring of the year proceeding the nursing courses (usually post mid-term)

- Students who do not attain the minimum score of 69 will have an opportunity to purchase and take the HESI A2 one month after the initial exam with the second test occurring before May 15th. There must be at least one full month between testing dates.

- Data from the HESI A2 will be used to assess individual learning needs and assist students throughout the curriculum by utilizing their strengths and assisting with their areas of weakness.

LPN-BSN Program

Admission Criteria – each applicant will be required to provide:

1. Current unencumbered license as a licensed practical nurse.
2. Transcript from an approved program in licensed practical nursing.
3. List of nursing practice since graduation.
4. Achievement of at least a 69% cumulative score on the HESI A2 Admission Assessment Exam.
5. The top 24 applicants will be offered admission to the LPN-BSN Program.
6. The last date for submission of all application materials is March 1st of each year.

RN-BSN Program

Admission Criteria – Each applicant will be required to provide:

1. Current unencumbered license as a registered professional nurse.
2. Graduate from an approved associate degree or diploma program in nursing.
3. Transcript from all prior academic work.

Transfer Students

Transfer students to any Nursing Program will be evaluated on a case by case basis by the Chairperson of the School of Nursing and/or The School of Nursing Faculty, Admission, Mission Committee.

Initial Date: 2/13/12;
APC Approval: 2/23/12
Revised Dates: 3/5/12; 8/21/13; 2/23/15
Policy: II.B-2

Progression WITHIN the Nursing Major Policy

Policy:
Starting with all nursing students admitted to the School of Nursing May 2013 and later, progression within that student’s nursing course sequence depends upon the student being able to maintain the following:

1. A cumulative GPA of
   a. 2.5 or higher is required for all nursing students.
   b. Transfer students will have two semesters to attain the required 2.5 GPA.
2. A grade of “C” or better in all courses required within the major (i.e., Biology 270, 271; Chemistry 190; Computer Science 225; Health Science 100, 260; any Math that meets the Math Liberal Studies Requirement and Philosophy 391).
3. Earn an absolute progression grade of 78% or higher on testing in all nursing courses and earn an absolute final grade of 78% or higher. (See Policy II.C Grading Policy)
4. Earn a “Pass” grade for clinical performance in each clinical component of a nursing course.

Rationale:
Minimum academic standards are set for progression within the nursing major to prepare beginning practitioners to meet nurse practice standards and to safeguard the public in the practice of nursing. The content in any course within a particular nursing course sequence is foundational to the next thus building the appropriate knowledge base for practice.

Procedure:
I. Recommended progression plans for the various categories of students in the nursing major are demonstrated in the sample academic plans.

II. Individual consideration for the placement within the progression plan will be evaluated by the School of Nursing Faculty, Admissions, Missions Committee for students transferring course work from another nursing program.

III.  
   a. A nursing student may only repeat one nursing course.
   b. Time is limited in the nursing program to 4 years starting with the first clinical nursing course.
   c. In any semester where more than one nursing course is scheduled, failure of one or more nursing courses that semester will count as one occurrence.
   d. There cannot be more than one semester gap in nursing courses. Any delay in nursing courses of one year or greater will necessitate in a validation of prior nursing competence that will include, but not be limited to, additional HESI testing, Simulation Lab or any other evaluation that may be determined by the Nursing faculty. As a result of this validation, a student may have to repeat a course or a portion of a course for which the student has prior credit. All attempts will be made to individualize the returning student’s academic progression plan. This is not a test-out option for new students or for transfer students, and only applies to students previously enrolled in the Alderson Broaddus University Nursing Program.
IV. In any semester that the nursing student fails to achieve at least a C in a required nursing course, the student will be permitted to re-take the nursing course the first time it is offered even if the overall GPA has fallen below the 2.5 that is required for progression.

The student may opt to take liberal studies courses or nursing courses not tied to the course that was failed during the semester between the failed course and the next offering of that course.

If at the end of the semester in which the student is repeating the failed nursing course the student does not achieve the required 2.5 overall GPA, the student will not be able to continue in the Nursing Program until required 2.5 GPA is achieved.

V. Students may apply for Leave of Absence for non-academic reasons.

VI. Academically at-risk students will be referred to remediation. Examples include but are not limited to: Grades of “D” or “F” in any college course; a grade of <78% on an assignment or test within the nursing major; and/or events that may adversely affect academic performance. The remedial plan may consist of any or all of the following (but is not limited to):

A. Regularly scheduled contact with the course faculty or academic advisor.
B. Referral to the Academic Center for Educational Success (ACES) and/or Director of Counseling Services for structured courses or counseling to manage test anxiety, tutoring, etc.
C. Evaluation of student learning needs to identify appropriate courses to promote academic success (e.g., may consider a logic course to assist with problem solving, etc.)

VII. HESI Standardized Testing is done throughout the program to evaluate student achievement.

A. In all courses where a HESI Specialty Exam is scheduled the HESI practice exam A will be administered unsecured when a HESI practice test is available. The HESI Specialty Exam Version I will be administered in a secured environment at least one week prior to the scheduled HESI Specialty Exam Version II.

B. Shortly after taking the HESI Specialty Exam Version I the student will receive an email from Evolve Reach – HESI. At that time the student will have access to their report of the exam. This report will outline the key terms and concepts that the student missed on the HESI Specialty Version I exam.

C. At the time of the HESI Specialty Exam Version I the student will be given a letter outlining the remediation process. The actual remediation plan is graduated so that the higher the score the less time spent on the remediation process. This letter will also indicate the deadline by which the remediation material is due to the course coordinator. See Appendix C for the Standardized Remediation Plan.

D. For students that score 900 or greater on the HESI Specialty Exam Version I they are strongly encouraged to remediate, but it is not a requirement to take the scheduled HESI Specialty Exam Version II.

E. For students that score 899 or less on the HESI Specialty Exam Version I they will be required to remediate prior to taking the scheduled HESI Specialty Exam Version II.

F. Failure to complete the remediation required by the deadline will result in the student not being able to take the scheduled HESI Specialty Exam Version II. The student will receive a “zero” for that exam.

G. Students that receive a “zero” on the scheduled HESI Specialty Exam Version II will not have
another opportunity to take that HESI Specialty Exam Version II.

H. The HESI Conversion Score is the test grade for the HESI Specialty Exam Version II. This score will be used to determine the student’s grade for HESI Exam section on the nursing course grading sheet.

I. In all courses where a HESI Specialty Exam is scheduled a portion of the overall course grade will be allotted to the HESI Specialty Exam Version II. This portion can be 2.5% to 10%. The determination of the allotted amount for the HESI Specialty Exam Version II will be made by the course coordinator.

J. The grade that the student receives on the HESI Specialty Exam Version II will not be part of the progression grade. Students must pass the testing portion of the course with an absolute 78%. See Policy II-C.

K. For courses where there is not a HESI Specialty Exam Version II, the student will take the HESI Specialty Exam Version I in a secured environment at least 1 week prior to the scheduled final exam in the course. The student will remediate according to the Standardized Remediation Plan located in Appendix C. This remediation must be completed by the day of the final exam in order for the student to receive the HESI Conversion Score on Version I. This score will be used to determine the student’s grade for the HESI Exam section on the course grading sheet. If the student does not complete the remediation as outlined in the Standardized Remediation Plan the student will receive a “zero” in the HESI Exam section on the course grading sheet.

L. Summer courses may also follow Section K above.

VIII. HESI Exit Exam

A. Students that take the HESI Exit Exam are expected to achieve a score of 900 or higher.

B. Students that achieve a score of 899 or less on the HESI Exit Exam are required to re-take the HESI Exit Exam.

C. If a student has to re-take the HESI Exit Exam they cannot do so until they remediate according to the remediation plan.

D. Should the student not achieve a 900 or higher on the second attempt, the student must complete a faculty approved NCLEX Review Course such as, but not limited to, Kaplan. The student must show validation of successful completion to the School of Nursing Chair. The School of Nursing Chair may then clear the student for graduation.

IX. School Nurse Certification has specific GPA requirements established by the Education Department. Please refer to the Education Department for additional information. School nurse certification requirements have no bearing on graduation or licensure eligibility for students in the School of Nursing and therefore no bearing on progression within the nursing major.

Initial Date: 1987
Revised Dates: 5/11/95; 8/97; 4/14/99; 11/6/00, 2/4/02; 5/13/03; 5/11/04; 4/03/06; 1/17/07; 4/23/08; 4/13/09; 12/7/09; 3/1/10; 12/13/12; 5/7/13; 5/7/14; 10/27/14; 2/15/16
Policy: II.C  

School of Nursing Grading Policy

Policy:

Students enrolled as nursing majors will have their academic performance, with respect to all nursing courses, quantified according to the following scale:

A = 91 – 100
B = 83 – 90
C = 78 – 82
D = 67 – 77
F = 66 or below

Grades are based on the evaluation of student work compared with established criteria for the course and/or the assignment by the instructor. Multiple grading options are provided for grade determination in all nursing courses.

Rationale:

In order to be prepared for competent professional practice, a sound knowledge base of sufficient depth and scope is required. Mastery of content throughout each nursing course is required in order to achieve this degree of competency. Grades reflect student performance, knowledge and skills representative of academic achievement and success.

Procedure:

I. Summative Evaluation of Student Performance
   a. For each nursing course, the student must attain a total composite grade of 78% (minimal competency of a “C” grade as defined by this policy) in order to progress to subsequent courses. Each nursing course will use the following criterion for determining course grades:

1. **Testing:** course grade to be derived from written unit examinations and/or quizzes; minimum of 50% of the grade for the course will be derived from tests and/or quizzes. Note: test scores will be used to determine the “Progression Grade” prior to the calculation of all other remaining grades for the course. After achieving the absolute 78% on testing (progression grade), written assignments and attendance/participation (as defined by the syllabus) will be calculated to determine the final course grade.

2. **Course Exams:** Students must be present for unit exams as scheduled. Students who are not present at the time the exam is scheduled will be given an alternate form of the exam. If an alternate exam is given, the maximum grade that can be achieved is 78%. Alternate exams will only be offered within the first 7 days after the scheduled exam. Students who are not present for a scheduled exam because of their involvement in a college related activity will either take the exam earlier than the scheduled date or will receive the grade earned on the alternate form only if it is taken within the first 2 days following their return to campus.
3. **Writing Assignments**: course grade to be derived from writing assignments such as (but not limited to) case studies, care plans, professional papers or other written works as deemed by the faculty and/or defined by the course syllabus.

4. **Attendance/participation**: course grade derived from attendance and participation criteria as determined by the faculty and published in the course syllabus.

   b. **Clinical Performance** (minimal competency is defined as “Pass” in a Pass/Fail Evaluation)

   1. Clinical performance competencies are established for each nursing course that includes a clinical component.
   
   2. In order to earn a “pass” for clinical performance in a nursing course containing a clinical component, the student must achieve and demonstrate satisfactory performance in all critical competencies for that course as defined in the course syllabus.
   
   3. Students who do not successfully meet the above criteria will earn a “fail” and will not progress in the major; a grade of “F” will be reported for the course.

II. **Formative Evaluation of Student Performance**

   A. Faculty designates assignments in each nursing course that provide on-going formative evaluation of student progress. These assignments include, but are not limited to, classroom exercises and quizzes; out-of-class and pre-class assignments; and assignments associated with clinical experiences (both pre-clinical and post-clinical work).

   B. Faculty reserves the right to not accept late written work (with the student earning a “0”); to impose late penalties on graded assignments; or to record a grade of zero (“0”) on any in-class written work when the student is absent.

III. **Grade Reporting and Grade Appeal** (see Grading Policies and Procedures in current AB University Catalog)
Policy: II.E

Classroom and Clinical Attendance Policy

Policy:

Students enrolled as nursing majors are expected to be regular in attendance for all academic experiences, including classroom sessions and clinical experiences. Children of nursing students are not permitted to attend classroom sessions, testing sessions, formal meeting of the class, and/or clinical experiences.

Rationale:

The School of Nursing, along with AB University (see current university catalog), operates on the principle that attendance and participation in classroom sessions and clinical experiences are essential for optimal learning and is reflective of the student’s maturity, responsibility, and motivation. In addition, interaction with instructors and fellow students during classroom and clinical experiences is an essential part of achieving performance competency in an interactive profession such as nursing. Absences impair the student’s ability to complete the required assignments and meet course objectives. The presence of children in the classroom and/or clinical experiences is distracting to all and potentially creates unsafe conditions relative to the health of the child and clients.

Procedure:

Specific attendance policies and procedures, as well as consequences of violation of those policies are outlined in the syllabus of each nursing course. This policy and procedure provide the general expectations and guidelines for the School of Nursing.

I. Classroom and Clinical Attendance
   A. Attendance will be monitored for all classroom and clinical sessions.
   B. Clinical sessions are defined as any scheduled learning opportunity associated with clinical application of knowledge and skills (e.g., on or off-campus clinical experiences or similar learning opportunities).
   C. Students are responsible for all content missed due to absence and are expected to take the initiative to communicate with instructors to plan the best approach to access this content.
   D. Under usual circumstances make-up clinical experiences will not be scheduled.
   E. Any graded classroom assignment missed due to absence will not be made up and a grade of “0” will be recorded.
   F. Students must be present for unit exams as scheduled. Students who are not present at the time the exam is scheduled will be given an alternate form of the exam. If an alternate exam is given the maximum grade that can be achieved by the student is 78%. Alternate exams will only be offered within the first 7 days after the scheduled exam. Students who are not present for a scheduled exam because of their involvement in a college related activity will either take the exam earlier than the scheduled date or will receive the grade earned on the alternate form only if it is taken within the first 7 days following the scheduled exam.
   G. If a student is late for an exam, the student may take that exam if no student has left the testing area. If a student is late for an exam and a class member has left the testing area, the late student forfeits that testing opportunity. (Please see Policy II.C)

II. Report of Absences
   A. Classroom Absence – Pursuant to and consistent with the AB University policy on class attendance (see current AB University Student Handbook) the nursing student is asked to notify the School of
Nursing via email of their absence.

B. Clinical Absence – When an illness or emergency interferes with attendance at a clinical experience, the student is required to contact the clinical instructor prior to the experience. If the instructor cannot be reached, the student will notify the agency and leave a message for the instructor, which includes a name and call-back phone number. The student will also proceed with reporting to the School of Nursing as outlined above.

III. Inclement Weather

A. Class Cancellation will be at the discretion of the instructor or the University. Class cancellation will be posted on the Learning Management System.

B. Clinical –

1. Clinical experiences may be canceled or delayed due to weather conditions in accordance with the actions of the Barbour County School System or the school system in the county where the clinical agency is located. When the public school system cancels school in Barbour County or the county in which the clinical agency is located, clinical experiences are on an automatic two-hour delay.

2. When the public school system reports a delay in Barbour County or the county in which the clinical agency is located, clinical experiences are delayed for the AB School of Nursing. When the delay is due only to cold temperatures, clinical will NOT be delayed.

3. Students who reside in and therefore must travel through counties other than Barbour or the county in which the clinical agency is located are expected to evaluate road conditions and make a personal decision about safe travel. If the student determines that it is unsafe to travel to clinical from home when clinical has not been canceled, they must follow the appropriate procedures to notify the clinical instructor.

3. Regarding clinical experiences that begin in the afternoon. Since weather and road conditions may change significantly by afternoon of any day that a school cancellation has occurred, clinical faculty will make the final decision to either cancel or hold afternoon clinical experiences. This decision will be made and students notified in a timely manner.

4. Faculty has the authority to cancel a lab at anytime due to severe weather or unsafe road conditions.
Policy: II.F

Selection & Evaluation of Agencies for Clinical Experience

Policy:
A variety of clinical agencies and community venues in both rural and urban settings are selected by the School of Nursing to provide clinical practice in primary, secondary, and tertiary settings. Sites for clinical experiences are chosen according to specific criteria to promote student learning, safety, and professionalism. The relationship between the University and the clinical agency may be formalized through a contract or letter of agreement.

Rationale:
Clinical learning is affected not only by direct clinical instruction, but also by the setting, climate, philosophy, client population, and receptiveness of the agency to accommodate nursing students. To facilitate faculty in maintaining control of the learning experience, the School of Nursing determines suitability of the clinical site by using designated criteria for initial selection and on-going evaluation of the sites.

Procedure:
I. Selection criteria – Potential clinical sites must meet the following criteria:
   A. The agency must be accredited or approved by the appropriate body.
   B. The Philosophy of the agency must be consistent with the philosophy of the nursing program.
   C. The agency must foster an atmosphere for student learning.
   D. The agency has staff that are qualified to serve as role models.
   E. The service offered, and population served, must be adequate to enable the fulfillment of course objectives.
   F. The agency must recognize and accept the fact that the student is in the role of the learner and the faculty is in the role of facilitator of that learning.
   G. There are resources available for adequate and safe utilization of the agency (e.g., a place for essential belongings such as coats and day-to-day reference/teaching materials, a place to park school vehicles, and procedure and policy manuals).
   H. The agency must be accessible in terms of travel, distance, and time.

II. Contracts – Formalization of the university/agency relationship pertinent to the clinical learning experience occurs through written contract or letter of agreement
   A. A contract between the university and the agency is renewed annually, each summer. The School of Nursing chairperson oversees this process.
   B. Faculty in each course evaluates each agency for on-going suitability.
   C. If the status of an agency changes regarding suitability for student learning, that site will no longer be used. Faculty will deliberate and choose an alternate site, which meets criteria.

III. On-Going Evaluation – Evaluation of each agency’s continued suitability for clinical experience will be completed each semester
   A. The course coordinator is responsible for implementing the evaluation process of all agencies utilized for the course.
   B. The “Agency Evaluation by Clinical Faculty” form is completed by the faculty member(s) utilizing the agency at the end of the semester.
   C. The “Agency Evaluation by Students” form is completed by the students at the end of the semester in which they are in that agency for clinical experience.
D. Evaluation forms, along with course, team, and student recommendations regarding continued use of the agency, will be submitted to the Evaluation Committee at the end of the semester in the following manner:
- students and faculty submit completed forms to the course coordinator who submits them to the Chair of the School of Nursing. Finally the Chair will submit the forms to the Evaluation Committee.
E. If more than one faculty utilizes a given agency, each should submit the evaluation form as it relates to his/her unit and experiences with students.
Policy: II.G

Evaluation of Nursing Program by Clinical Agencies

Policy:
Clinical agencies utilized by the Alderson Broaddus University School of Nursing evaluate the effectiveness of the clinical experiences and the relationship of the department faculty and students with agency personnel.

Rationale:
In order to gain insight into the effectiveness of the clinical instruction in a given agency, it is necessary to have feedback from the agency personnel who work with and observe the activities of the AB students and faculty.

Procedure:
I. At the end of each semester, clinical faculty for that agency identifies the nursing administrator who is in the best position to provide information relative to the students and faculty utilizing the agency. The clinical faculty will then provide the “Evaluation by Clinical Agency” form to the appropriate administrator.

II. The completed “Evaluation by Clinical Agency” form is returned to the Chair of the School of Nursing who submits it to the Evaluation and/or Curriculum Committee for consideration and dissemination as necessary.

Initial Date: 4/4/00
Approved: 5/1/00
Reviewed: 2/16/04; 3/19/07; 10/28/09; 10/17/12; 11/16/15
Policy: II.H

Form and Documentation of School Of Nursing Papers Policy

Policy:
The School of Nursing upholds the University policies regarding academic integrity. The School of Nursing has chosen the *Publication Manual of the American Psychological Association*, current edition as the format by which all papers submitted in partial fulfillment of course requirements will be written. (See also AB University Student Handbook and Faculty Handbook)

Rationale:
The *Publication Manual of the American Psychological Association* is the accepted style and form for the preparation of manuscripts submitted to professional publications. The faculty has selected this style in an effort to assist students to develop proficiency in preparation of professional papers.

Procedures:

I. A copy of the *Publication Manual of the American Psychological Association* can be found in the campus library. Assistance on APA style can be found in the Academic Center for Educational Support. The University Bookstore keeps copies of this manual available for purchase.

II. Academic dishonesty – please refer to ABU Policy on Academic dishonesty.

Initial Date: 5/11/95
Revised: 11/6/00; 4/13/09; 9/22/14
Reviewed: 9/17/07; 1/30/12
Policy II.I

Personal Conduct Regarding Professionalism Policy

Policy:
Students enrolled in the School of Nursing are expected to demonstrate compliance with the Alderson Broaddus University School of Nursing Standards of Professional Conduct, the West Virginia Code and Legislative Rules, the American Nurses Association Standards of Practice, and the American Nurses Association Code for Nurses. Failure to comply with these standards will be cause for disciplinary action, which may include dismissal from the program.

Rationale:
Professional registered nurses must adhere to the mandates of the West Virginia Code and Legislative Rules for Nurses, the American Nurses Association Standards of Practice, and the American Nurses Association Code for Nurses. Students are held to the same standards as they develop the behaviors, knowledge and skills necessary to assume their place within the profession. It is critical that these mandates and standards be maintained while students are in any clinical setting. In addition, the faculty believes that these same standards and mandates should guide behavior and interactions in the classroom and during other departmental activities. The Alderson Broaddus University School of Nursing Standards of Professional Conduct provides specific guidelines in this regard.

Procedure:
1. All students enrolled in nursing will receive a copy of the Alderson Broaddus University School of Nursing Policy and Procedure Manual at the beginning of their tenure in the department. This manual can also be found online at www.ab.edu. For each year the student will be required to sign a statement that he or she has read and understands the School of Nursing Policy and Procedure Manual. This statement will be maintained in the student’s file.

2. Students will be reminded of The Standards of Professional Conduct at the beginning of all nursing courses and during the annual mandatory department meeting each fall semester. These Standards can also be found in nursing course syllabi and in the School of Nursing Policy and Procedure Manual.

3. Violations of these Standards will result in disciplinary action as follows:
   A. The faculty member who observes a violation will discuss the incident with the student immediately. The faculty member will document details of the violation and the subsequent discussion with the student. This documentation will be given to the School of Nursing chair and a copy provided to the student. If the violation involves unsafe clinical practice, the instructor may require the student to leave the clinical site for the remainder of the experience, pending further action.
   B. The School of Nursing chair will consult with the faculty member and the student. At the discretion of the chair and faculty member, an oral or written reprimand or a formal review of the violation with recommended disciplinary and/or remedial action may be issued.
C. Dismissal from the program may result from, but is not limited to, the following cases:
   1. Breach of confidentiality of patient information (HIPAA violation);
   2. Clinical practice that is unsafe;
   3. Falsifying documentation of patient care;
   4. Acting in a manner that is a threat to the safety of the student or others;
   5. Failure to comply with the policies of the agency in which the student is placed for clinical experience;
   6. Other violations as defined by WV CSR 19.3.14, Professional Misconduct (www.wvrnboard.com).

A. All disciplinary actions taken will be documented and filed in a confidential file in the School of Nursing Chairperson’s office.

4. The student may appeal dismissal from the program as provided for in Policy II.M. (Grievance Policy for Nursing Students) and the Alderson Broaddus University Student Handbook. During the appeals process, the student will be permitted to continue attending lecture classes. If the appeal is successful and the student’s dismissal is overturned, provision will be made for the student to complete clinical learning activities missed during the suspension. This will be completed to allow the student to progress without further disruption.
STANDARDS OF PROFESSIONAL CONDUCT

While enrolled in the School of Nursing, students are expected to adhere to the following standards of professional conduct:

1. Students will comply with all established institutional, ethical, and legal parameters regarding confidentiality of patient information.
2. Students will adhere to the policies of Alderson Broaddus University as well as the policies of affiliated clinical agencies regarding drug and alcohol use.
3. Students will comply with all established School of Nursing policies and all established policies of clinical agencies during clinical affiliations.
4. Students will demonstrate respect and courtesy toward patients and their families, peers, faculty, and staff members. This applies in the clinical setting, within the AB School of Nursing, and in the university as a whole. Respect will be demonstrated regardless of race, religion, national origin, ethnicity, gender, sexual preference, age, health status, or diagnosis.
5. Students will demonstrate honesty and integrity in all classroom and clinical situations. Students will, at all times, refrain from cheating in all forms, including falsification and/or misrepresentation of information regarding self, health status, abilities, limitations or any other personal information pertinent to nursing role performance.
6. Students will provide for the safety of themselves, their patients, and others through consistent use of standard and pathogen transmission precautions in the clinical setting.
7. Students will ensure safe and appropriate nursing care to each assigned patient by demonstrating the application of previously learned clinical competencies. In addition, students will seek guidance and assistance of clinical faculty at any time they are unsure about their competence in providing care.
8. Students will promptly report any error to the appropriate faculty member and to any other appropriate clinical agency personnel.
9. Students will comply with all appropriate provisions of the School of Nursing clinical attire policy.
10. Students will promptly report to a faculty member the incompetent, unethical, illegal, or impaired practice of another person who is providing health care.
11. Students will maintain appropriate professional role boundaries.
12. Students will promptly report to the School of Nursing chair, any conviction of a felony and any conviction of a misdemeanor that occur while a student in the School of Nursing.
13. Students will follow the recommendations of the National Student Nurses’ Association, Inc., for Social Media Usage and Maintaining Privacy, Confidentiality and Professionalism, which is located in Appendix D.

Initial Date: 1/14/94
Revised Dates: 5/11/95, 4/23/97, 5/6/97, 11/6/00, 4/03/06; 4/16/08;
Reviewed Date: 4/04; 2/22/10; 10/17/12; 10/15/13; 11/16/15
Policy: II.J 

Clinical Attire and Professional Demeanor Policy

Policy:

The Alderson Broaddus University School of Nursing requires students involved in clinical nursing courses to dress in a manner consistent with the professional role. Faculty has the authority to dismiss a student should clinical attire and/or professional demeanor be deemed inappropriate. At all times while involved in clinical experiences, students will wear a name pin which includes full first and last name, and the title, “Alderson Broaddus University Nursing Student” or “RN-BSN Program Student”, or “LPN-BSN Program Student”.

Rationale:

This policy assures compliance with standards of professionalism and cleanliness. In settings requiring uniforms, this policy endeavors to reduce or prevent the spread of disease and to protect the student from infectious material. The professional attire helps identify the wearer as a student of the Alderson Broaddus University School of Nursing and a representative of the profession of nursing. In psychiatric-community mental health and community nursing settings, nursing attire is geared towards normalization. Attire must be clean, modest, promote flexibility of movement, and be free of items that could cause injury to self or others.

Procedure:

I. Full Uniform/Acute Care*

   A. The uniform will be clean, neat, and pressed.

      1. Female students are to wear a white tunic trimmed in navy and navy pants or navy skirt. White hose will be worn with the dress uniform and white crew socks or white hose will be worn with pants. Uniforms must fit appropriately with hem of uniform skirt no shorter than the bottom of the knee. Pant leg hems are to be at the top of the shoe heel.

      2. Male students are to wear a white tunic trimmed in navy, navy pants, and white crew socks. A plain white crew neck tee shirt, without any design, must be worn under the tunic. Pant hems should be at the top of the shoe heel.

      3. The AB School of Nursing emblem will be embroidered on the uniform by the manufacturer.

      4. Both male and female students wear a white lab coat over the uniform anytime he/she is in uniform and not on the acute care unit.

*Uniforms are ordered via an official representative. Ordering details will be provided to students when they are accepted into the Nursing Program.

   B. Shoes are to be white leather or simulated leather nursing shoes with white or light grey colored soles. Shoes must have a complete back; clogs or crocs are not permitted. Running type tennis shoes may be worn but must be white leather or simulated leather without mesh inserts. A totally white shoe is preferred, but light colored insignias or logos are permitted and must be no larger than two inches in any dimension. Soles of shoes must be white or light grey. Tennis type shoes with visible shocks are not permitted. Shoes are to be kept polished and clean with clean shoelaces.
C. A clean, pressed white warm-up jacket with the A B School of Nursing emblem may be worn for extra warmth. No other type jacket or sweater may be worn. Students may wear crew neck, long-sleeve white tee shirts under tunics for warmth.

D. Hair must be no longer than touching collar in back. Hair must be clean, neatly arranged, and secured away from the face and eyes. Hair must be of a natural human color. Females may wear headbands to keep their hair in place. Headbands must be plain, without design, can be either plastic or fabric with elastic and must not be larger than one inch wide. The headband must match the student’s hair color. For example, students with light hair should select a light colored headband; students with dark hair should select a dark colored headband. White headbands are not permitted. Males with mustaches and/or beards must keep facial hair neatly groomed and conservative in length.

E. Jewelry must be minimal; a watch with a second-hand is to be worn. Only wedding bands free of stones and single-pair stud earrings (gold, silver, or pearl; no more than ¼ inch in diameter) may be worn. A single-pair of earrings is considered to be one earring in each earlobe.

F. In order to maintain a professional image, and in relation to infection control, fingernails are to be kept short, well groomed and trimmed to the fingertip. Females – only clear polish in good repair may be worn on fingernails. Acrylic or gel nails are prohibited. Fragrances and colognes (including aftershaves) are prohibited. Make-up should be used sparingly.

G. Maternity uniform. Students who are pregnant may wear a plain white maternity uniform with the AB School of Nursing emblem sewn on the left sleeve.

H. In order to maintain a professional image, and in relation to infection control concerns, the School of Nursing highly discourages body piercing and tattooing. If the student already has a tattoo or body piercing, the student will, as much as possible, keep the tattooed body part covered and remove all jewelry not permitted (see Section F), while in the clinical setting. Spacers are not permitted.

II. Full Uniform – Maternal/Child Health, School, Community and On-Campus Skills Laboratory Experiences

A. Female and male uniform shall consist of navy scrubs purchased from the official uniform representative. Female and male students must wear a plain white crew neck tee shirt, without design under the scrub top. Students may wear dark street shoes or boots with socks or hosiery as described in I.B above. Canvas shoes, open-toe shoes, sandals, clogs, crocs or sling-backs are not permitted to be worn during Maternal/Child Health, School, Community or On-Campus experiences. Clinical nursing shoes may be worn during on-campus skills laboratory experiences.

B. See I.B above for shoe requirements for Maternal/Child Health Clinical experiences.

C. A lab coat must be worn over the uniform to all clinical laboratory experiences.

D. Jewelry, hair, fingernail, body piercing and tattoo requirements are the same as described in I.E., F., and H. above.

III. Psychiatric, Community Mental Health, and Selected Community Nursing Clinical Experiences

A. Conservative street clothes (dresses, blouses, skirts, dress shirt, and pants are appropriate). No decorative scarves, short, tight clothes, or exposed midriffs are prohibited. Do not wear clothing that cannot withstand being stained or getting broken per your liability.

B. No open-toe shoes, clogs, sandals, or sling-backs. Clean athletic shoes may be worn if appropriate to attire.

C. Shoes, jewelry, hair, fingernail body piercing and tattoo requirements are the same as those listed in I.E, F and G above.
IV. Demeanor while in Uniform
   A. Uniforms may be worn on campus to meals directly before or immediately after nursing clinical. The lab coat must be worn over the uniform.
   B. Uniforms are to be worn only during educational clinical laboratory experiences and at other occasions as requested by the School of Nursing.
   C. While in uniform, students are expected to maintain a professional demeanor.
   D. An appropriate lab coat must be worn over the uniform when traveling to and from the clinical setting and anytime exiting the building of the clinical setting.

Initial Date: 1945
Revised Date: 5/11/95, 5/5/99, 11/6/00, 5/7/03; 1/26/04; 2/16/04; 4/6/09; 9/23/13
Reviewed: 9/15/14
Policy: II.L

Incident Reporting Policy

Policy:
Any student/client/instructor incident occurring in a clinical or academic setting will be reported to the team coordinator and School of Nursing chair and will be documented using the Alderson Broaddus University School of Nursing Incident Report form and Post Exposure Follow-up Waiver (if necessary). (See Appendix A).

Rationale:
An incident is any unplanned event, which may cause actual or potential risk of harm, jeopardize safety, health, welfare, or cause injury to a student, instructor, or client. A completed incident form provides a timely, accurate summary of the unusual event for risk management purposes, for use in follow-up interventions, and for problem solving to prevent similar incidents.

Procedure:
II. Occurrence of the incident
A. Seek/provide immediate follow-up care in event of injury. (The person needing services, such as emergency room visit, x-ray, lab work, etc. is liable for those costs.)
B. The Alderson Broaddus University student and/or instructor actually witnessing or involved in the event must complete and sign the incident report, e.g., direct, primary witnesses.
C. Description and sequence of events should be reported as soon as possible following the incident to enhance accuracy. Complete the actual form upon return to campus.
D. The incident form needs to be completed with an accurate, thorough sequencing of the event including description (not diagnosis) of visible injury or damage.
E. When indicated, follow the agency policy regarding reporting when an incident occurs in the clinical setting.

III. Follow-Up
A. Note (on form as soon as possible), immediate follow-up actions (emergency care, etc.) with date, time, site, caregiver, and resolution.
B. Incidents are to be reported as soon as possible to the course coordinator and School of Nursing chair; no later than 24 hours post-event. (Weekends and University Holidays excluded)
C. The School of Nursing chair in consulting with nursing faculty (and with university administration as indicated) will designate the primary persons for further follow-up action regarding the incident, e.g., team member, course coordinator, chair, etc.
D. Incidents amenable to follow-up actions towards prevention of further occurrences will be the focus of problem solving per the next nursing department meeting.
E. Incident reports/Post Exposure Follow-Up Waivers are filed in a confidential file in the School of Nursing Chairperson’s office.
Policy: II.M

Grievance Policy for Nursing Students

Policy:
The Alderson Broaddus University School of Nursing has a grievance procedure through which nursing students can channel grievances and concerns of a departmental nature. Grievance is defined as a perceived violation to the student contract (course requirements as stated in the nursing course syllabus); to a student policy (School of Nursing Policy and Procedure Manual); or a perceived injustice in nursing class or clinical.

Rationale:
This policy allows for following the chain of authority within the University Administration toward resolution of student differences or concerns of a departmental nature to begin at the lowest administration level possible. The intention of this policy is to ensure the resolution of student concerns quickly, efficiently, and with the least number of people involved.

It is noted that students can appeal final grades according to the University’s “Appeal of Final Grade” policy. (AB University Student Handbook) and can process harassment concerns through the University’s “Social Responsibility” policies (AB University Student Handbook). There is also a “Process for Addressing Concerns Regarding Instructional or Evaluation Practices Arising During a Course” found in the AB University Student Handbook for concerns about quality of instruction issues.

Procedure:
This procedure adheres to an administrative hierarchy. A student is to access the grievance procedure through the following chain of authority:

- The individual instructor
- The course coordinator (if course is team taught)
- The team faculty as a group (if course is team taught)
- The School of Nursing chair
- The College of Health Sciences Dean
- The Vice President for Academic Affairs
- The President of the University

I. Grievance involving an individual instructor
A. Instructor - The student will discuss the grievance in an appropriate place at appropriate time with the involved instructor. The instructor will document the student concern and proposed resolution at this time. This will be placed in the student folder to provide for continuity.
B. Coordinator (if course is team taught) – The student will discuss the matter with the course coordinator if the student believes that satisfactory resolution was not obtained on the previously described level only. The Coordinator may access the Instructor comments regarding the grievance.
c. Team (if course is team taught)  
   1. If the student believes that satisfactory resolution has not been achieved with the individual instructor and course coordinator, a team meeting may be called at the request of the student. This meeting will include the student presenting the grievance, the course faculty, and at the discretion of the team, course student representatives.  
   2. Presentation of the grievance at the team meetings  
      a. A grievance is to be written in detail by the student and made available to the team members at the meeting.  
      b. The student presenting the grievance at this level will also provide written documentation of conference/discussion with the involved instructor and the team coordinator.  
   d. Procedures for taking the grievance beyond the individual instructor, Coordinator and team are described in Section III.  

II. Grievances involving more than one student and a level instructor  
A. These concerns may be taken to the class representative.  
B. The class representative will present the grievance to the team members and coordinator at the scheduled team meeting  
C. If the matter cannot legitimately wait until that meeting, the class representative should notify the coordinator. A special meeting will be called at the discretion of the coordinator.  
D. At the discretion of the team, class members other than the elected representatives may attend the meeting.  
E. Following discussion by the team, the team with student input will make a decision.  
F. Procedures for taking the grievance beyond the team level are described in Section III.  

III. Grievances not satisfactorily resolved at the above levels  
A. If the student believes the grievance is not satisfactorily resolved or appropriate action has not been taken to resolve the grievance, an appointment can be made with the School of Nursing Chair.  
B. Presentation of grievance  
   1. The student will present in writing all details including how chain of authority was followed. All facts relative to the grievance must be presented at this time to the School of Nursing Chair.  
   2. The School of Nursing Chair will respond in writing to all concerned parties within 2 business days of the meeting the decision reached regarding the grievance.  
C. Grievances not resolved satisfactorily within the School of Nursing  
   1. If the student believes that the grievance is not resolved after following the above chain of authority, or appropriate action has not been taken to resolve the grievance, an appointment can be made with the College of Health Science Dean.  
   2. Presentation of grievance:  
      a. The written complaint will be forwarded to the College of Health Science Dean  
      b. Written notification is to be sent to the Chair of the School of Nursing stating that an appointment is being sought with the College of Health
Science Dean

c. The student will present in writing all details including how chain of authority was followed. All facts relative to the grievance must be presented at this time to the Dean of the College of Health Sciences.
d. The Dean of the College of Health Science may convene a meeting of all involved parties to discuss the grievance
e. The Dean of the College of Health Science will respond in writing to all concerned parties within 2 business days of the meeting the decision reached regarding the grievance.

D. Grievances not resolved satisfactorily within the College of Health Science

1. If the grievance is not resolved after following the above chain of authority, or appropriate action has not been taken to resolve the grievance, an appointment can be made with the Vice President for Academic Affairs

   a. The written complaint will be forwarded to the Vice President for Academic Affairs.

   b. Written notification is to be sent to the Chair of the School of Nursing and the Dean of the College of Health Science stating that an appointment is being sought with the Vice President for Academic Affairs

   c. The student will present in writing all details including how chain of authority was followed. All facts relative to the grievance must be presented at this time to the Vice President for Academic Affairs.

   d. The Vice President for Academic Affairs may convene a meeting of all involved parties to discuss the grievance

   e. Vice President for Academic Affairs will respond in writing to all concerned parties within 2 business days of the meeting the decision reached regarding the grievance.

   f. The Vice President of Academic Affairs has final authority in all academic matters

Initial Date: 5/86
Revised Dates: 5/12/95; 2/4/02; 11/15/04; 9/22/14
Reviewed: 10/15/07
Policy: II.O

Physical Examination Policy for Nursing Students

Policy:
Nursing students are required to provide evidence that they are healthy and fit for the nursing profession. To meet this requirement, each nursing student must provide documentation that he/she has had a history and physical examination performed by a primary healthcare provider within the last year. Nursing students must provide evidence of this required history and physical examination through the submission (via upload or fax) of the School of Nursing “Student Annual Physical Examination/Report of Health Status Form” to the students’ certifiedprofile.com account, that students are required to purchase and maintain a certifiedprofile.com account through School of Nursing external vendor (certifiedbackground.com). Once the School of Nursing “Student Annual Physical Examination/Report of Health Status Form” is submitted, reviewed and approved by School’s Clinical Compliance Officer, an annual renewal date will be set in the students’ certifiedprofile.com account. (The renewal date is based on the date that the primary healthcare provider signed the students’ “Student Annual Physical Examination/Report of Health Status Form.”)

In addition to the required “Student Annual Physical Exam/Report of Health Status Form,” nursing students must also submit a completed School of Nursing “Pre-clinical Record of Certifications & Immunizations Form” to their certifiedprofile.com account. (THIS IS A ONE-TIME SUBMISSION AND MUST BE DONE NO LATER THAN THE STUDENTS’ FIRST NURSING CLINICAL). Students who are medically unable to receive any of the required immunizations must have their primary healthcare provider complete a “Medical Exemption Form” that students must submit to their certifiedprofile.com WITH the required “Pre-clinical Record of Certifications & Immunizations Form”. Students who are in the process of completing any of the required immunization series must have their primary healthcare provider complete the School of Nursing “Negative-Equivocal Titer Form.” (A separate form must be completed for each immunization series that is in process). Additionally, when students are in the process of completing any of the required immunization series, they must complete and submit a “Release of Liability Form for Non-Immune Students” to their certifiedprofile.com account. (This form must be signed by the student and an adult witness). Any nursing student who has not completed all of required immunization series must have at least the 1st dose in each of the required immunization series completed. (All School of Nursing health forms are provided in Appendix C).

Nursing students must provide evidence that they have received the following titers:
1. Measles IgG Titer
2. Mumps IgG Titer
3. Rubella IgG Titer
4. Varicella IgG Titer
5. Anti-HBs (Hepatitis B) Titer.

(Copies of the actual titers/lab results must be submitted WITH the students’ “Pre-clinical Record of Certifications & Immunizations Form”. If any of titers are “negative” or “equivocal” for immunity, then a separate “Negative/Equivocal Titer Form” must be completed by the students’ primary healthcare provider (a separate form is required for EACH negative or equivocal titer/lab result) and submitted WITH the “Pre-clinical Record of Certifications & Immunizations Form”. Further, if the student is in the process of completing any of the required immunization series for the first time, or is repeating the immunization series or titers, then follow-up alerts are generated in the students’ certifiedprofile.com account. The purpose of these follow-up alerts is twofold: 1) to remind students when their next immunization in the applicable immunization series is due; and 2) to provide a means for students to upload verification (documentation) to their certifiedprofile.com accounts as they complete the remaining immunizations in the series and/or the associated titer(s). These automated alerts continue to
populate in the students’ certifiedprofile.com account until students have successfully completed and uploaded all of the required immunization verification documents for the applicable immunization series and/or their associated titer(s).

Rationale:
Nursing is a rigorous profession requiring health practitioners to ensure safe and competent practice. In addition, the School of Nursing is legally bound by contracts with community and hospital agencies. These agencies require evidence that the nursing students are healthy, fit and properly immunized prior to starting their clinical experience in their institutions.

Procedure:

I. Traditional sophomore and newly admitted LPN-BSN students must submit the School of Nursing “Pre-clinical Record of Certifications & Immunizations Form” and the “Physical Examination/Student Annual Report of Health Status Form” to their certifiedprofile.com account NO LATER THAN THEIR FIRST NURSING CLINICAL. (RN-BSN students see Section IV below. INP students see Section V below.)

II. Transfer students transferring directly into a nursing course must also complete and submit the School of Nursing “Pre-clinical Record of Certifications & Immunizations Form” and the “Student Annual Physical Examination/Report of Health Status Form” to the students’ certifiedprofile.com account NO LATER THAN THE FRIDAY OF THE SECOND WEEK OF NURSING CLASSES.

III. The students’ failure to electronically submit the appropriate health forms to their certifiedprofile.com account by the due dates stated above will result in the students not being allowed to attend nursing classes or clinicals. Failure to attend nursing classes or clinicals may result in failure of the nursing course or courses. See Policy II.E – Classroom and Clinical Attendance Policy.

IV. Students enrolled in the RN-BSN Program must submit the “Pre-Clinical Record of Certifications & Immunizations Form” and “Student Annual Report of Health Status Form” to their certifiedprofile.com account prior to the beginning of their first nursing course.

V. INP students entering the program the summer of their senior year will purchase a certifiedprofile.com account and submit the “Pre-clinical Record of Certification & Immunizations Form” and the “Student Annual Report of Health Status Form” to their certifiedprofile.com account prior to their first day of clinical.

Initial Date: 2/10/95
Revised Date: 5/12/95; 11/6/00; 10/15/01; 12/16/10; 5/12/11; 1/26/15
Reviewed Date: 4/04; 10/15/07
Policy II.P

CPR Certification Policy

Policy:
Students who are enrolled in clinical nursing courses are required to maintain current certification from the American Heart Association BLS Health Care Provider training course.

Rationale:
Nursing students are often exposed to emergency situations and must be qualified to render aid if necessary. Clinical agencies used by the School of Nursing require all persons, including nursing students, who perform nursing care in these institutions to have current CPR certification.

Maintaining safe skills is an element of professional nursing. Neither the American Heart Association (AHA) Heart Saver certification, Pediatric Basic Life Support certification, nor the American Red Cross Community certification consistently provides the required skills. For the above stated reason, the American Heart Association Health Care Provider CPR course for infant, child, and adult is required.

Procedure:
I. A copy of a current AHA BLS Health Care Provider CPR card must be submitted to the students’ certifiedprofile.com account prior to the students’ first nursing class and upon re-certification thereafter.

II. If a student has completed certification and the CPR card has not been issued by the student’s first nursing class must obtain documentation of completion from the CPR instructor and submit this letter to their certifiedprofile.com account as proof of appropriate CPR certification. This documentation by the CPR instructor must include: date of completion, name of the CPR instructor, level of instructor certification and instructor number.

Initial Date: 2/10/95
Revised Dates: 5/11/95, 9/1/99, 11/6/00, 4/15/02; 10/28/13; 1/26/15
Reviewed: 11/15/04; 1/28/08
Policy: II.Q

Blood Borne Pathogen Exposure Policy

Policy:
Students receive educational preparation in prevention of exposure to blood borne pathogens through the School of Nursing curriculum and additional educational programs as required at each of the clinical agencies.

Rationale:
Instruction in aseptic technique and exposure prevention reduces the student’s risk of exposure to Hepatitis B virus, human immunodeficiency virus, and other blood borne pathogens. Limiting exposure is critical since exposure could result in the transmission of blood borne pathogens and could lead to disease or death.

Procedure:
I. Several steps are taken by the School of Nursing to facilitate prevention of blood borne pathogen exposure.

A. Traditional sophomore, RN-BSN and newly admitted LPN-BSN students must submit proof of a completed Hepatitis vaccine series, series in progress, or submit a “Medical Exemption Form” to their certifiedprofile.com account NO LATER THAN THE STUDENTS’ FIRST NURSING CLINICAL. Transfer students must submit evidence of completed Hepatitis vaccination series, series in progress, or submit a “Medical Exemption Form” NO LATER THAN THE FRIDAY OF THE SECOND WEEK OF NURSING CLASSES.

B. Students receive instruction in exposure prevention prior to participating in activities in the clinical areas.

C. Knowledge reinforcement of exposure prevention, including OSHA guidelines are also provided at clinical agency sites during orientation to the facility.

D. Clinical supervision is continued throughout the nursing courses to stress skills in exposure control and prevention.

II. Post-exposure follow-up

A. A variety of agencies are utilized to provide students with learning experiences. Each agency has its own policies and procedures relating to post-exposure follow-up. Students will adhere to the follow-up policy of the agency in which the exposure occurred, however the following is considered to be a minimum process:
   -- an agency incident report describing the exposure must be completed as soon as possible
   -- a blood sample should be drawn to test for HBV and HIV titers
   -- follow-up testing usually occurs at 3 months, 6 months, and 1 year using the Elisa and/or the Western Blot
   -- agency nursing administration pursues a follow-up of the client testing for HBV, HCV and HIV.
B. Post-exposure follow-up costs are the responsibility of the student. Students have the right to request a waiver of follow-up treatment. Request for waiver must be submitted to the course coordinator and the Chair of the School of Nursing. The student must then sign a waiver and thereby accept responsibility for consequences resulting from failure to follow-up exposure.

C. The Chair of the School of Nursing must be notified within 24 hours of the incident. The Clinical Instructor and student must also file a departmental “Incident Report” describing the incident and delineating follow-up care.

Initial Date: 3/4/94
Revised Dates: 5/12/95, 11/6/00; 4/6/09; 1/26/15
Reviewed Date: 5/13/03; 4/03/06; 9/15/14
Policy: II.R

Accounts for Computer Access Policy

Policy:
All nursing students are required to have an University account providing them access to the Alderson Broaddus University Battler Portal.

Rationale:
The University learning management system provides students and faculty with a platform to communicate essential University information, which may include, but is not limited to, class assignments, registration, library access, University alerts and email.

Procedure:
I. All students must use their University computer account, which is free.

Initial Date: 2/21/92
Revised Dates: 5/12/95, 4/15/02; 11/15/04; 10/28/13
Reviewed: 1/28/08
Policy: II.S

School of Nursing Comprehensive Examination Policy

Policy:
The School of Nursing requires that seniors take a comprehensive nursing examination during their senior year. This applies to both the traditional and LPN-BSN students. Any student who earns less than a passing score, as designated by the selected exam, is required to meet with a School of Nursing faculty member to develop an action plan for remediation. A student will not be cleared for graduation until a passing score is obtained or designated remediation is completed.

Rationale:
Based on correlation of scores for the department comprehensive examination and passage of the NCLEX-RN for graduates, attainment of a designated score is a reliable predictor of success on the NCLEX-RN.

Procedure:
I. A comprehensive nursing exam will be given by the School of Nursing during the senior year.
II. A student who receives a score of less than the established passing score for the designated examination will be required to participate in a specified action plan for remediation.
III. Re-testing, if necessary, will be conducted according to the student’s remediation plan.
IV. A student will not be cleared for graduation until a passing score is obtained or designated remediation is completed.

Initial Date: 12/8/95
Revised Dates: 8/19/96, 5/6/97, 8/99, 4/15/02; 5/20/08; 2/23/09; 5/7/14
Policy: II.T

Students with Disabilities
Admission & Progression Policy

Policy:
The Alderson Broaddus University School of Nursing complies with the University’s admission and progression policy in response to the Americans with Disabilities Act of 1990. Students admitted to the nursing major are expected to be able to complete curriculum requirements which include physical, cognitive, and behavioral skills that are essential to the function of the entry level professional nurse. Reasonable accommodations will be made in order that nursing students with disabilities can successfully complete the nursing program; however, the successful candidate for graduation is expected to perform in a reasonably independent manner.

Rationale:
In order to ensure client safety, the practicing nurse must be able to meet certain Core Performance Standards. These standards have been defined by the Southern Council on Collegiate Education for Nursing. (See following page for list of Core Performance Standards for Admission and Progression.)

Procedure:
I. Any student or candidate for admission who believes he/she cannot meet the Core Performance Standards as described in this policy should seek assistance by first contacting the School of Nursing chair and/or their academic advisor. *

II. The student will provide evidence/documentation regarding the specific disability involved and request assistance to meet the Core Performance Standards.

III. The Chair of the School of Nursing will then seek consultation and guidance from the nursing faculty, Student Activities office, Academic Resource Center, and/or the University Administration to determine the availability of reasonable accommodations. The need to have a graduate nurse who can meet the Core Performance Standards in a reasonably independent manner will be the guiding factor in all decisions.

* Alderson Broaddus University also provides support for disabled students through the “504 Coordinator” at Extension 6274.
### Core Performance Standards for Admissions & Progression

<table>
<thead>
<tr>
<th>ISSUE</th>
<th>STANDARD</th>
<th>SOME EXAMPLES of NECESSARY ACTIVITIES (not all inclusive)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Thinking</td>
<td>Critical thinking ability sufficient for clinical judgment</td>
<td>Identify cause-effect relationships in clinical situations, develop nursing care plan.</td>
</tr>
<tr>
<td>Interpersonal</td>
<td>Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.</td>
<td>Establish rapport with patients/clients and colleagues.</td>
</tr>
<tr>
<td>Communication</td>
<td>Communication abilities sufficient for interaction with others in verbal and written form.</td>
<td>Explain treatment procedures, initiate health-teaching, document, and interpret nursing actions, and patient/client responses.</td>
</tr>
<tr>
<td>Mobility</td>
<td>Physical abilities sufficient to move from room to room and maneuver in small places.</td>
<td>Moves around in patient’s rooms, workspaces, and treatment areas, administer cardio-pulmonary procedures.</td>
</tr>
<tr>
<td>Motor Skills</td>
<td>Gross and fine motor abilities sufficient to provide safe and effective nursing care.</td>
<td>Calibrate and use equipment; position patients/clients.</td>
</tr>
<tr>
<td>Hearing</td>
<td>Auditory ability sufficient to monitor and assess health needs.</td>
<td>Hears monitor alarm, emergency signals, auscultatory sounds, cries for help.</td>
</tr>
<tr>
<td>Tactile</td>
<td>Tactile ability sufficient for physical assessment.</td>
<td>Perform palpation, functions of physical examination and/or those related to therapeutic intervention, e.g., insertion of a catheter.</td>
</tr>
</tbody>
</table>

(Southern Council on Collegiate Education for Nursing)
Policy: II.U

Policy on Background Checks

Policy:
Alderson Broaddus University nursing students will undergo background checks conducted by a designated external vendor prior to admission to the first clinical course in nursing.

Rationale:
The practice of professional nursing requires that the highest moral, ethical, and legal standards be maintained by all practitioners. Some clinical agencies require documentation that students do not have a criminal record prior to practice in the agency. In addition, the WV Board of Registered Professional Nurses requires that an individual be of “good moral character” (WV Code 30-7-6) as a criteria of eligibility to obtain a license to practice registered professional nursing.

Procedure:

I. The one-time background checks will be conducted by certifiedbackground.com (the School’s designated external vendor).

II. Costs associated with the individual background check are the responsibility of the student.

III. Records of all background checks are maintained in the students’ certifiedprofile.com account by the Clinical Compliance Officer. Access to these records will be limited to the Clinical Compliance Officer, and the Chair of the School of Nursing.

IV. Verification that students have successfully cleared a background check is made in writing by the Chair of the School of Nursing or the Clinical Compliance Officer to those clinical agencies that require such documentation. Verification does not include copies of any individual’s file.

V. Results of a student’s background check may be reported to the WV Board of Examiners for Registered Professional Nurses by the Chair of the School of Nursing if he/she deems it necessary, or if requested by that regulatory agency for consideration of eligibility for licensure.

NOTE: Students’ juvenile records would not be included in these background checks since they are closed once the person reaches adulthood; however, that individual would need to self-report any felony convictions occurring as a juvenile to the WVBOERN when applying for licensure.

Initial Date: 4/10/00
Reviewed: 4/04; 9/17/07; 2/23/09; 2/22/10; 10/17/12; 1/26/15; 2/15/16
Policy: II.W  

Policy on Policies

Policy:

Development, revision, distribution, and evaluation of School of Nursing policies are the responsibility of the nursing faculty. A mechanism is in place that permits students input as needed and assures that policies are communicated to faculty and students in a timely and effective manner.

Rationale:

The task of educating practitioners, who are prepared to safely practice professional nursing at the generalist level, mandates that certain nursing academic and clinical conduct requirements be stringently delineated. It is the responsibility of the nursing faculty to develop and revise the policies and procedures that direct these academic and clinical requirements. Since these policies and procedures directly impact the student, provision must be made to solicit student input.

Procedure:

I. Initiating New Policies or Revising Current Policies
   
   A. Faculty initiated:
      1. Faculty determines need for new policy or revision of existing policy.
      2. Proposal is submitted to Students, Student Development, Educational Policies and Resources if student input is needed or if review of language and structure of procedure is needed. Students, Student Development, Educational Policies and Resources submits final proposal to the Nursing Faculty Organization for approval.
      3. Proposal is refined and approved by Nursing Faculty Organization without referral to the Students, Student Development, Educational Policies and Resources if it has been determined that their input is not required and language and structure are acceptable as proposed.

   B. Committee initiated:
      1. A School of Nursing Committee determines that a new policy or revision of an existing policy is needed.
      2. Proposal is submitted to Students, Student Development, Educational Policies and Resources for consideration.
      3. Students, Student Development, Educational Policies and Resources submits final version of proposal to the Nursing Faculty Organization for approval.

   C. Student initiated:
      1. Individual student or group of students determine that new policy or revision of existing policy is needed.
      3. Students, Student Development, Educational Policies and Resources submits final version of proposal to Nursing Faculty Organization for approval.
D. Initiated by External Group
   1. A group or organization external to the School of Nursing (within the University, accreditation agencies, clinical agencies, etc.) develops or revises their policies or procedures in a manner that impacts the policies of the School of Nursing.
   2. Matter is referred to the Students, Student Development, Educational Policies and Resources for consideration and development or revision of policies.
   3. Final version is submitted by the Students, Student Development, Educational Policies and Resources to the Nursing Faculty Organization for approval.

II. Policy Distribution
   A. Following approval by the Nursing Faculty Organization, a new or revised policy will be dated and posted in the on-line School of Nursing Policy & Procedure Manual.
   B. The School of Nursing secretary will work with the Chair of the Students, Student Development, Educational Policies and Resources to assure that needed changes are posted on-line and appropriate announcements to students are made.
   C. Students will be reminded in the orientation session of each course of policy changes which may be especially pertinent to that course.

III. Systematic Review of Policies
   A. School of Nursing policies are reviewed in a systematic fashion. The plan for review is developed and conducted on a 3-year rotational basis by the Students, Student Development, Educational Policies and Resources and/or as practices within the School of Nursing or the nursing profession change and there is a potential for a policy and procedure to be impacted by this change.

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<th>Three-Year Plan for Review of Educational Policies</th>
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_initial Date: 5/6/97;
_Revised Date: 7/00; 12/02/02; 4/03/06; 4/13/09; 4/26/10; 1/26/15
Reviewed: 9/19/11_
Policy II.Y

Confidentiality of Student Educational Records

Policy:
Student records within the School of Nursing are maintained in a manner that protects student information and maintains confidentiality.

Rationale:
Personal and identifying information is contained within the educational records of students enrolled in the School of Nursing. In order to protect this information, records must be secured at all times.

Procedure:

I. Files of students enrolled in the School of Nursing will be kept in a locked file room within the School of Nursing Chairperson’s office suite. Access to this room is limited to nursing faculty and staff.

II. Faculty advisors may keep student records within their offices during designated registration/advising time frames. As advising and registration functions are completed, files are returned to the locked file room. Faculty offices will be locked when files are unattended.

Initial Date: 5/11/04
Reviewed: 4/05; 1/28/08; 3/24/14
Policy II.Z

Credits by Escrow

Students enrolled in the LPN-BSN Program and the RN-BSN Program will be eligible to receive credits by escrow upon demonstration of specific competencies as defined by this policy.

LPN-BSN Program Credits by Escrow: Upon successful completion of 12 credits in the nursing major and a grade point average of 2.5 (on a 4.0 scale), the student will receive 20 hours of credit toward the required 120 credits necessary for graduation.

RN-BSN Program - Upon completion of 10 semester credit hours at Alderson Broaddus University in the Nursing major and a GPA of 2.5, the student may receive up to 40 semester hours of credit toward the required 120 credits necessary for graduation.

Rationale:

Escrow credits are held in trust until the student demonstrates their academic competency as defined in the policy. These credits are granted for a block of coursework commensurate with the student’s prior education and licensure.

Procedure:

A. Each student’s academic transcript will be evaluated by the Registrar, in consultation with the Chair of the School of Nursing, for the following:
   A. Original degree granting institution and/or other higher education institution where nursing classes are identifiable as “nursing” on the transcript
   B. A record of transcripts from nursing and support courses and applicable credits where a passing grade of “C” or better was obtained. No nursing credits will be accepted from courses where a grade of “D” or “F” was earned.
   C. Calculate the total number of transferable academic credits from nursing and support courses.

II. LPN-BSN Program

A. Credits are determined by comparing coursework completed during the practical nursing program against the following courses offered at Alderson Broaddus University:
   i. Biology 270, Anatomy and Physiology I, 4 semester hours
   ii. Biology 271, Anatomy and Physiology II, 4 semester hours
   iii. Chemistry 190, Introduction to Chemistry, 4 semester hours
   iv. Health Sciences 100, Health Care Terminology, 2 semester hours
   v. Health Sciences 260, Nutrition, 3 semester hours
   vi. Nursing 220, Fundamental of Nursing, 3 semester hours

B. Students receive 20 semester hours of elective credit based on this analysis and upon completion of 12 credits at Alderson Broaddus University with a cumulative grade point average of 2.5 or higher.
Policy II.AA

Policy on Testing Responsibilities and Practices

Policy:

Students in the School of Nursing are required to uphold and abide by the Alderson Broaddus University standards of academic integrity as well as professional nursing standards and conduct by refraining from cheating in all testing situations.

Rationale:

According to the Alderson Broaddus University School of Nursing - Policy II.I, Professional Conduct Regarding Professionalism and the Standards of Professional Conduct statement 5: “Students will demonstrate honesty and integrity in all classroom and clinical situations. Students will, at all times, refrain from cheating in all forms...” Students are held to the same standard as those currently in the profession as they develop the behaviors, knowledge and skills necessary to assume their place within the profession.

Procedures:

During testing situations within the School of Nursing, the following procedures and expectations will be in place:

I. Students and instructors will be in the assigned room by the start of class time. Any student arriving after the first student has completed the test and left the room will forfeit the opportunity to complete the test.

II. Unless requested by the instructor, students shall not have any materials or equipment upon or within which information could be available. This includes books, notebooks, blank or marked pieces of paper, cell phones, pagers, digital or tape recorders, watches and calculators with memory function, and any other information storage/retrieval devices.

III. All books, notebooks, book bags and any other belongings, including food and drink, shall be placed away from student seating and out of easy view, i.e., items shall be placed at sides, back and front of room. These items may be accessed only after turning in the test.

IV. Billed or rimmed head coverings will not be worn during examinations or quizzes. Clothing with pockets where papers may be concealed are discouraged.

V. Expanded seating will be provided to create as much space between students as possible.

VI. Students will have pen and/or pencil and other equipment as authorized to complete examinations.

VII. Once class has been convened, there will be no talking or other communication between or among students until authorized by the instructor.

VIII. There will be no “looking around” during the examination.

IX. Each student will shield his or her examination paper, answer sheet, or other work from other students.

X. Except in unusual circumstances, students will not leave the room until completing the examination.

XI. No duplication, replication, or distribution of quiz or examination questions is permitted.

Initial Date: 2004; 4/3/06
Reviewed: 5/20/08; 9/19/11; 2/23/15
Revised: 4/13/09
Policy: II.CC

Smoking in Uniform Policy

Policy:

Nursing students at Alderson Broaddus University are not to use any kind of tobacco products when acting as a representative of the School of Nursing. This includes, but is not limited to, any clinical function, any time the student is in an Alderson Broaddus University School of Nursing uniform, or any time the nursing student is attending a function required by the School of Nursing. The odor of smoke on hair, skin, and clothing may be offensive to clients.

Rationale:

Professional nurses are expected to be role models of good health practices.

Procedure:

In the event the instructor detects the odor of tobacco products and/or the patient or family complains that the smell of tobacco products is offensive, the instructor maintains the right to dismiss the student from clinical. This will be an unexcused absence.

Initial Date: 4/9/07
Reviewed Date: 2/22/10; 10/17/12; 11/16/15
Policy: II.DD

Drug Testing Policy

Policy:
Alderson Broaddus University nursing students are required to undergo drug testing conducted by a School of Nursing designated external vendor prior to admission into the first clinical course in nursing.

Rationale:
Alderson Broaddus University School of Nursing adheres to the policies of all clinical agencies with which the School of Nursing is affiliated. Many clinical agencies stipulate in clinical affiliation agreements that drug testing of nursing students be performed before students are permitted into the clinical facilities. This testing requirement is the same as that required of employees of the clinical agencies.

Procedure:
I. Drug testing will be conducted by an external vendor selected by the School of Nursing. The Nursing Department will not accept results from any other company or agency.

II. Costs associated with the drug testing will be the responsibility of the student. The cost is non-refundable.

III. Drug testing results must be received by the Clinical Compliance Officer prior to admission to the first clinical course in nursing.

IV. Records of drug testing results will be kept as confidential as possible. Access to these records is limited to the Clinical Compliance Officer, the Chair of the School of Nursing and other University officials on a need-to-know basis. Further, the University will report positive test results to the appropriate licensing boards when required to do so. Additionally, the University may disclose test results in administrative or court proceedings to the extent required and/or permitted by law.

V. Although most nursing students are generally only required to submit to one drug test, additional testing may be required under certain circumstances. By way of example, nursing students may be required to undergo additional testing in order to meet clinical facility requirements, because of a break in enrollment in the nursing program or for any other reason in the School of Nursing’s sole discretion. The School of Nursing reserves the right to request random drug testing at any time. The student will be responsible for all costs associated with any drug testing.

VI. Prior to testing, students will be given the opportunity to list all prescription and non-prescription drugs and controlled substances they have used, and to explain the circumstances surrounding their use.
VII. If the student receives a positive test result, the student will be given the opportunity to explain the reason(s) for the positive test result with the Chair of the School of Nursing. This information may be reviewed with the Medical Review Officer of the vendor which administered the drug test.

VIII. If a student has a positive drug test result that has not been resolved through discussions with the Chair of the School of Nursing pursuant to Section VII, above, or if a student refuses to undergo a required drug test, the student will not be eligible to enroll in nursing classes.

IX. Any student in the nursing program with a positive drug test that is not successfully resolved pursuant to Section VII, above, shall be suspended for a minimum of one calendar year from all coursework in the nursing program. If the student completes an appropriate treatment program, which is pre-approved by the University, the student may be readmitted to the nursing program only upon the approval of the Chair of the School of Nursing following the suspension. In order to be considered for readmission to the nursing program, the student must show adequate proof of successful completion of the treatment program and must successfully pass any required drug testing by the University. If the student has a positive drug test prior to readmission to the nursing program, the student will be permanently ineligible for readmission into the nursing program. The decision of whether to readmit the student is within the sole discretion of the Chair of the School of Nursing.

If the student is readmitted, the student must submit to random drug screening as requested by the Chair of the School of Nursing. Any positive drug screen after readmission will result in permanent dismissal and permanent ineligibility for readmission into the nursing program.

The student will be responsible for all costs associated with any treatment program and any drug testing.
Policy: II.EE

**Tuberculosis Testing Policy**

Policy:

Traditional sophomores, RN-BSN and newly admitted LPN-BSN students who are enrolled in nursing courses are required to have a negative Tb skin test. The Tb skin test must have been completed within the last year. The Tb skin test results must be submitted to the students’ certifiedprofile.com account NO LATER THAN THE FIRST DAY OF THE NURSING CLINICAL. Transfer students must submit this documentation to their certifiedprofile.com account (NO LATER THAN THE FRIDAY OF THE SECOND WEEK OF THE NURSING CLASS). If the Tb skin test is positive OR the nursing student is unable to receive a Tb skin test due to a past positive reaction, the nursing student will not be allowed in the clinical setting until the procedure described below is followed.

Rationale:

Nursing is a rigorous profession requiring health practitioners to ensure safe and competent practice. In addition, the School of Nursing is legally bound by contracts with community and hospital agencies. These agencies require verification of completed history and physical forms for each student doing a clinical experience in their institution. AB University School of Nursing assures our clinical agencies that our students are healthy and fit for duty.

Procedure:

I. All required Tb skin testing results from a health care provider must be reported to the Clinical Compliance Officer at Alderson Broaddus University. The student is responsible for providing these results to the Clinical Compliance Officer via submission to his or her certifiedprofile.com account (NO LATER THAN THE STUDENTS FIRST NURSING CLASS). When a single Tb test is required, this means a one-time Tb skin test. When a 2-step Tb test is required, this is a Tb skin test followed by a second Tb skin test 1 to 3 weeks after the first test. All results must be negative. (See the School of Nursing “Student Annual TB Report Form” in Appendix C.)

II. If any of the Tb skin tests are positive or the student is unable to receive the Tb skin test due to past positive reaction to the Tb skin test, the students must:

A. Follow up with their health care provider for a Tb assessment and provide documentation of this assessment must be uploaded by the student to his or her certifiedprofile.com account when all other health forms per program requirements are due yearly to continue clinical rotation.

B. Complete a Qft gold (Quantiferon gold) blood test Or T.SPOT.TB blood test. Test results from a health care provider must be uploaded by the student to his or her certifiedbackground.com account when all other health forms per program requirements are due.

C. Complete a chest x-ray. Results of the chest x-ray from a health care provider must be uploaded by the student to his or her certifiedprofile.com account when all other health forms per program requirements are due and yearly to continue clinical rotation.

III. If the Qft gold Or T.SPOT.TB and x-ray are negative, and the health care providers Tb assessment is negative for Tb; the student will be cleared for clinical rotation.
IV. If the Qft gold or T.SPOT.TB is positive but the x-ray and health care providers Tb assessment are negative for active Tb; the student can be cleared for clinical rotation by:
   A. The student uploading Qft gold or T.SPOT.TB, x-ray and health care provider Tb assessment results to his or her certifiedprofile.com account (via certifiedbackground.com)
   B. The student uploading the written treatment plan prescribed by the health care provider to his or her certifiedbackground.com account. Monthly written verification of continued treatment from a health care provider must also be uploaded by the student to his or her certifiedbackground.com account. Upon completion of the prescribed treatment plan, the health care provider’s discharge summary must be uploaded by the student to his or her certifiedbackground.com account.

V. If the Qft gold or T.SPOT.TB and the x-ray are both positive, and the health care provider’s Tb assessment is positive for active Tb; the student will be prohibited from clinical rotation until completion of a health care provider prescribed treatment plan.

VI. Any student completing a prescribed Tb treatment plan (for active or latent Tb) must provide written verification from the prescribing health care provider of completion of the treatment as well as a discharge summary. This written verification must be uploaded by the student to his or certifiedbackground.com account. This student must then submit to yearly chest x-rays and have a negative Tb assessment by a health care provider in order to continue clinical rotations.

VII. Upon yearly renewal of the Student Annual TB Report, one of the following is required: 1 step Skin Test or if positive results, a TB Questionnaire. This must be uploaded by the student to his or her certifiedbackground.com account.

Initial Date 5/12/11  
Revised 5/7/14; 1/26/15
Policy: II.FF

Annual Influenza Vaccination Policy

Policy:

Students who are enrolled in clinical nursing courses are required to submit annual verification that they have received the current-seasonal influenza vaccination to protect against circulating influenza strains, and to reduce the chances of developing flu related complications. Students who do not provide annual influenza vaccine verification may be required to wear masks at all times, if mandated by the clinical affiliate, with the only exceptions of breaks/meals or while within a single occupancy private office. Further, meals and breaks must be taken in areas appropriately designated for those purposes. However, a mask must be worn while in an elevator or walking to the designated break area or cafeteria. A new mask will be needed whenever the mask becomes moistened, soiled or torn. If masks are not immediately available in the students’ assigned unit, students are to see their clinical instructor who will coordinate the procurement of a new mask.

Rationale:

The seasonal influenza vaccination protects against circulating influenza strains and reduces the chances of developing influenza-related complications. Masks are intended to prevent staff-to-patient and staff-to-staff transmission, and to reduce the chances of developing influenza-related complications. Nursing is a rigorous profession requiring health practitioners to ensure safe and competent practice. In addition, the School of Nursing is legally bound by contracts with community and hospital agencies. Some of these agencies require verification of completed influenza vaccinations annually for each student doing clinical experiences in their institution.

Procedure:

I. Students must annually submit verification from a health care provider that they have received the seasonal influenza vaccination. This verification must be submitted annually (uploaded or faxed) to the students’ certifiedprofile.com account by October 31th. (See “Student Annual Report of Influenza Vaccination Form” in Appendix C). Students may submit alternative documentation to verify they have received this annual vaccine, but the documentation must include the date of administration, the lot number, and the name and credentials of the person who administered the vaccine.

Initial Date 01/26/2015
Reviewed: 11/16/15
Appendix A
Forms
Agency Evaluation by Level I Student

Course #: ____________  Agency: __________________  Unit: _____  Date: _________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never  2 = Less than average  3 = About average  4 = More than usual  5 = Almost always

1. At this agency I was able to provide patient-centered, quality, safe, evidence-based nursing care to diverse patients across the lifespan.

   1  2  3  4  5

   Comments:

2. At this agency, I was able to provide a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.

   1  2  3  4  5

   Comments:

3. At this agency, I was able to make judgments using critical thinking necessary to provide quality patient care.

   1  2  3  4  5

   Comments:

4. At this agency, I was able to therapeutically communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.

   1  2  3  4  5

   Comments:

5. At this agency, I was able to demonstrate leadership in a variety of healthcare settings for diverse patient population.

   1  2  3  4  5

   Comments:

6. At this agency, I was able to evaluate information technology to communicate, manage knowledge, mitigate error support decision-making.

   1  2  3  4  5

   Comments:
7. At this agency, I was able to incorporate professional, ethical, and legal guidelines in practice as a professional nurse.
   1  2  3  4  5
   Comments:

8. Logistical problems related to student safety (e.g. transportation, parking, personal belongings, personal safety, etc.) are appropriately communicated and resolved.
   1  2  3  4  5
   Comments:

9. Interpersonal problems encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.
   1  2  3  4  5
   Comments:

10. Future use of this agency is recommended.
    1  2  3  4  5
    Comments:

Agency Evaluation by Level II Student

Course #: ____________ Agency: __________________ Unit: _____ Date: ________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never  2 = Less than average  3 = About average  4 = More than Usual  5 = Almost always

1. At this agency I was able to provide patient-centered, quality, safe, evidence-based nursing care to diverse patients across the lifespan.
   1  2  3  4  5
   Comments:

2. At this agency, I was able to provide a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.
   1  2  3  4  5
   Comments:

3. At this agency, I was able to make judgment using critical thinking necessary to provide quality patient care.
   1  2  3  4  5
   Comments:

4. At this agency, I was able to demonstrate leadership in a variety of healthcare settings for diverse patient populations.
   1  2  3  4  5
   Comments:

5. At this agency, I was able to therapeutically communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.
   1  2  3  4  5
   Comments:

6. At this agency, I was able to evaluate information technology to communicate, manage knowledge, mitigate error support decision-making.
   1  2  3  4  5
   Comments:
7. At this agency I was able to incorporate professional, ethical, and legal guidelines in practice as a professional nurse.

   1   2   3   4   5

   Comments:

8. Logistical problems related to student safety (e.g., transportation, parking, personal belongings, personal safety, etc.) are appropriately communicated and resolved.

   1   2   3   4   5

   Comments:

9. Interpersonal problems encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

   1   2   3   4   5

   Comments:

10. Future use of this agency is recommended.

    1   2   3   4   5

    Comments:

Agency Evaluation by Level III Student

Course #: ____________ Agency: __________________ Unit: _______ Date: _________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never    2 = Less than average    3 = About average    4 = More than usual    5 = Almost always

1. At this agency I was able to create patient-centered, quality, safe, evidence-based nursing care to diverse patients across the lifespan.
   1  2  3  4  5
   Comments:

2. At this agency, I was able to design a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.
   1  2  3  4  5
   Comments:

5. At this agency, I was able to generate critical thinking necessary to provide quality patient care.
   1  2  3  4  1
   Comments:

4. At this agency, I was able to professionally communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.
   1  2  3  4  5
   Comments:

5. At this agency, I was able to exemplify leadership in a variety of healthcare settings for diverse patient populations.
   1  2  3  4  5
   Comments:
6. At this agency, I was able to synthesize information technology to communicate management knowledge, mitigate error and support decision-making.

1  2  3  4  5

Comments:

7. At this agency, I was able to assimilate professional, ethical, and legal guidelines in practice as a professional nurse.

1  2  3  4  5

Comments:

8. Interpersonal problems, encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

1  2  3  4  5

Comments:

9. Interpersonal problems encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

1  2  3  4  5

Comments:

10. Future use of this agency is recommended.

1  2  3  4  5

Comments:
Agency Evaluation by Clinical Faculty for Level I

Course #: ____________ Agency: __________________ Unit: _______ Date: _________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never   2 = Less than average   3 = About average   4 = More than usual   5 = Almost always

2. At this agency students were able to provide patient-centered, quality, safe, evidence-based nursing care to diverse patients across the lifespan.
   1  2  3  4  5
   Comments:

2. At this agency, students were able to provide a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.
   1  2  3  4  5
   Comments:

3. At this agency, students were able to make judgments using critical thinking necessary to provide quality patient care.
   1  2  3  4  5
   Comments:

5. At this agency, students were able to therapeutically communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.
   1  2  3  4  5
   Comments:

5. At this agency, students were able to demonstrate leadership in a variety of healthcare settings for diverse patient population.
   1  2  3  4  5
   Comments:
6. At this agency, students were able to evaluate information technology to communicate, manage knowledge, mitigate error support decision-making.

1  2  3  4  5

Comments:

7. At this agency, students were able to incorporate professional, ethical, and legal guidelines in practice as a professional nurse.

1  2  3  4  5

Comments:

8. Logistical problems related to student safety (e.g. transportation, parking, personal belongings, personal safety, etc.) are appropriately communicated and resolved.

1  2  3  4  5

Comments:

9. Interpersonal problems encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

1  2  3  4  5

Comments:

10. Future use of this agency is recommended.

1  2  3  4  5

Comments:

________________________________________
Faculty’s Signature

Agency Evaluation by Clinical Faculty for Level II

Course #: ____________ Agency: __________________ Unit: _______ Date: ________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never  2 = Less than average  3 = About average  4 = More than Usual  5 = Almost always

1. At this agency students were able to provide patient-centered, quality, safe, evidence-based nursing.
   1  2  3  4  5
   Comments:

2. At this agency, students were able to provide a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.
   1  2  3  4  5
   Comments:

3. At this agency, students were able to make judgment using critical thinking necessary to provide quality patient care.
   1  2  3  4  5
   Comments:

4. At this agency, students were able to therapeutically communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.
   1  2  3  4  5
   Comments:

5. At this agency, students were able to demonstrate leadership in a variety of healthcare settings for diverse patient populations.
   1  2  3  4  5
   Comments:
6. At this agency, students were able to evaluate information technology to communicate, manage knowledge, mitigate error support decision-making.

1  2  3  4  5
Comments:

7. At this agency students were able to incorporate professional, ethical, and legal guidelines in practice as a professional nurse.

1  2  3  4  5
Comments:

8. Logistical problems related to student safety (e.g., transportation, parking, personal belongings, personal safety, etc.) are appropriately communicated and resolved.

1  2  3  4  5
Comments:

9. Interpersonal problems encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

1  2  3  4  5
Comments:

___________________________
Faculty’s Signature

Agency Evaluation by Clinical Faculty for Level III

Course #: ____________  Agency: __________________  Unit: _______  Date: _________

Please indicate your opinion in relation to each statement and provide additional comments.

1 = Almost never  2 = Less than average  3 = About average  4 = More than usual  5 = Almost always

1. At this agency students were able to create patient-centered, quality, safe, evidence-based nursing care to diverse patients across the lifespan.
   1  2  3  4  5
   Comments:

2. At this agency, students were able to design a caring environment for patients, families, and communities to promote wellness, prevent disease, and facilitate healing.
   1  2  3  4  5
   Comments:

3. At this agency, students are able to generate critical thinking necessary to provide quality patient care.
   1  2  3  4  1
   Comments:

4. At this agency, students were able to professionally communicate/collaborate with members of the interprofessional team, the patient and families to provide and improve patient care.
   1  2  3  4  5
   Comments:

5. At this agency, students were able to exemplify leadership in a variety of healthcare settings for diverse patient populations.
   1  2  3  4  5
   Comments:
6. At this agency, students were able to synthesize information technology to communicate manage knowledge, mitigate error and support decision-making.

Comments:

7. At this agency, students were able to assimilate professional, ethical, and legal guidelines in practice as a professional nurse.

Comments:

8. Interpersonal problems, encountered (e.g., relationships with staff, availability of patients, conflicts with other schools, etc.) are appropriately communicated and resolved.

Comments:

___________________________
Faculty’s Signature

Evaluation by Clinical Agency

Thank you for enabling Alderson Broaddus University nursing students to gain clinical experience in your agency. You are asked to complete the following evaluation and return it to the Chair of the School of Nursing.

Agency: _______________________________ Unit: ______________________

Level of Student _______________________ Semester Date: _____________________

Clinical Instructor(s) ___________________________ ____________________________

Circle the number that best describes your opinion for each item.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly disagree</td>
<td>Disagree</td>
<td>Agree</td>
<td>Strongly agree</td>
<td>Not applicable</td>
</tr>
<tr>
<td>(SD)</td>
<td>(D)</td>
<td>(A)</td>
<td>(SA)</td>
<td>(NA)</td>
</tr>
</tbody>
</table>

Please explain your response with specific suggestions so that your input can be utilized to make positive changes. You may include additional pages or write on the back of the form if needed.

1. Student learning goals specific to the clinical experience were made explicit.

   1 (SD)  2 (D)  3 (A)  4 (SA)  5 (NA)

2. Open communication was maintained:
   Between AB University and agency administration.

   1 (SD)  2 (D)  3 (A)  4 (SA)  5 (NA)

   Between the AB University instructor and agency staff.

   1 (SD)  2 (D)  3 (A)  4 (SA)  5 (NA)

   Between A-B students and agency staff.

   1 (SD)  2 (D)  3 (A)  4 (SA)  5 (NA)
3. Instructors and students complied with Agency policy and procedures.

   1  2  3  4  5  
   (SD) (D) (A) (SA) (NA)

4. A safe level of supervision of students was maintained by the AB instructor.

   1  2  3  4  5  
   (SD) (D) (A) (SA) (NA)

5. A safe level of nursing care of assigned clients was maintained by the AB students.

   1  2  3  4  5  
   (SD) (D) (A) (SA) (NA)

6. Students and faculty were professional in interactions and behaviors.

   1  2  3  4  5  
   (SD) (D) (A) (SA) (NA)

7. Additional comments:

   Signature (optional): ______________________
   Position (optional): ______________________
   Date: _________________

Revised: 5/00
Incident Report

_________________________________                         _________________________
Student                                                                    Date/Time

Type of Incident:

Explanation of Incident:

Report by: ________________________________

Follow-up Date/Time: ______________

Follow-up by: ________________________________
    Instructor/Coordinator

    ________________________________
    School of Nursing Chairperson

Approved: Jan. 14, 1994
Reviewed: 10/15/01; 9/17/07; 1/26/15; 11/16/15
Alderson Broaddus University
School of Nursing
Policy & Procedure Manual
2016-2017

Alderson Broaddus University
School of Nursing

Waiver for Post-Exposure Follow Up Treatment

I acknowledge that during a clinical experience as part of my nursing education in the Alderson Broaddus University School of Nursing, I was involved in a situation whereby I was exposed to a potential blood borne pathogen. I also acknowledge, that I have been offered treatment as part of the post-exposure follow up. I am refusing follow-up care and by my signature below, accept responsibility for the consequences resulting from failure to follow-up exposure to a blood borne pathogen.

Student Name (Printed)____________________________________________________________

Student Signature______________________________________________Date:_______________

Initial Date: 10/1/10
Revised: 11/13/13; 1/26/15
Reviewed: 11/16/15
Alderson Broaddus University
School of Nursing
Policy & Procedure Manual
2016-2017

Alderson Broaddus University
School of Nursing

Checklist of Document Submission Requirements for Newly Admitted Students
This checklist is for your use only and is not to be returned to the School or uploaded or faxed to your Certified Profile Account

☐ Background Check (Only through certifiedbackground.com)

☐ Drug Screen (Only through certifiedbackground.com)

☐ Health Insurance Card or Verification of Current Health Insurance Coverage

☐ Student Annual TB Report Form (Required annually)

☐ Measles (Rubeola) Immunization Dates
☐ Measles (Rubeola) IgG Titer Date

☐ Mumps Immunization Dates
☐ Mumps IgG Titer Date

☐ Rubella (German Measles) Immunization Dates
☐ Rubella (German Measles) IgG Titer Date

☐ Diphtheria, Pertussis, Tetanus (DPT) Immunization Dates
(Tdap must be since 2005 but not older than 10 years)

☐ Varicella (Chicken Pox) Disease/Immunization Dates
☐ Varicella (Chicken Pox) IgG Titer Date

☐ Hepatitis B Immunization Dates
☐ Anti-Hepatitis B Titer Date

☐ Student Annual Physical Examination/Report of Health Status Form (Required annually)

☐ Additional Forms (See Negative/Equivocal Titer Form; Release of Liability Form for Non-Immune Students; Medical Exemption Form, if applicable)*

☐ Student Annual Report of Influenza Vaccination Form (Required annually in Fall by October 31)

*If you have any negative or equivocal titers/lab results, your primary healthcare provider must complete a separate “Negative/Equivocal Titer Form” for each negative or equivocal titer/lab report. Additionally, you will need to complete a “Release of Liability Form for Non-Immune Students” and include the name(s) of each titer for which you have a negative or equivocal titer/lab result. If you were/are medically unable to receive any of the required immunizations or titers, or if you have any incomplete or missing immunizations and your primary healthcare provider does not recommend that you receive any additional immunizations, please have your primary healthcare provider complete, sign, and date a “Medical Exemption Form.”

Initial date: 11/22/13
Revised: 1/26/15
TO THE MEDICAL PROVIDER: Following your examination of the person indicated above, please read each statement below, and initial inside the boxes beside each of the statements to indicate your agreement with the statements.

1. I have performed a medical history and physical examination on the above named student and verify the student is free from medical conditions which would endanger the health and well being of patients and/or other students.

2. There are no circumstances, conditions, or evidence of conditions which impair intellectual function, ability to measure, calculate, reason, analyze, synthesize and apply information in the process of problem solving.

3. There is not historical, physical or laboratory evidence which indicates the student is unable to perform in clinical rotations as part of their education process.

Medical Provider: __________________________________________ (Please type or print legibly)

Address: __________________________________________________

Telephone: (____) - _____ - _____  Fax: (____) - _____ - _____

Medical Provider Signature: ___________________________ Date: ___________________________

- Medical Provider must include credentials
- Medical Provider must be person legally authorized to clear student for clinical (For example, CRNP, APRN, MD, DO, PA-C).

Initial Date: 10/1/10
Revised: 11/13/13; 1/26/15
Student's Name (Please print legibly) ____________________________________________________________

PLEASE CHECK ONE: _____ Newly Admitted Student _____ Returning Student

Two-Step Mantoux Tuberculin Skin Test (TST). Two separate tests received 1-3 weeks apart. Required once-in-a-lifetime.

<table>
<thead>
<tr>
<th>#1</th>
<th>Date 1st TST Placed</th>
<th>Date Read</th>
<th>Result mm</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>#2</th>
<th>Date 2nd TST Placed</th>
<th>Date Read</th>
<th>Result mm</th>
</tr>
</thead>
</table>

One-Step (Single) Mantoux Tuberculin Skin Test (TST). Required annually while you are a student.

<table>
<thead>
<tr>
<th>#1</th>
<th>Date 1st TST Placed</th>
<th>Date Read</th>
<th>Result mm</th>
</tr>
</thead>
</table>

Tuberculosis Screening Instructions/Requirements for Newly Admitted Students:
Please provide evidence/results of a “once-in-a-lifetime” Two-Step Mantoux Tuberculin Skin Test (TST) in the first table above. If you received the two-step TST over one year ago and your results were negative, then evidence/results of a One-Step (Single) Mantoux Tuberculin Skin Test (TST) received within the last year must also be documented in the second table above. If the results of any previous two-step or one-step TST is/was positive. OR if you were/are unable to receive either a one-step or two-step TST, the following THREE documents must be submitted/uploaded: (1) a chest X-ray received within the past year, unless you have a history of completing INH therapy (or other TB Treatment therapy); (2) the results of either a Qft Gold (QuantiFERON gold) blood test (lab report required) OR a T-SPOT.tb blood test (lab report required); and 3) a TB questionnaire/assessment (performed by your medical provider within the last year). If the chest x-ray is abnormal, if your past or recent Quantiferon Gold Blood Test OR T-SPOT.TB blood test is positive, or if your current TB questionnaire/assessment indicates possible pulmonary tuberculosis or contagion, then you must provide/upload written documentation from a health care provider defining treatment and release to attend clinical activities or clinical rotations.

Tuberculosis Screening Instructions/Requirements for Returning Students:
If you are a returning student, please provide evidence/results of a One-Step (single) Mantoux Tuberculin Skin Test (TST) received within 12 months of your last Two-Step” or One-Step” Mantoux Tuberculin Skin Test (TST). The dates and results of this test must be documented in the spaces provided in the second table above, OR for past or recent positive TST results, past or recent positive TB blood tests, or a past or recent abnormal X-ray, then a current TB questionnaire/assessment (performed by your medical provider within the last year) must be submitted/uploaded annually with this form.

TO BE COMPLETED BY YOUR MEDICAL PROVIDER, IF APPLICABLE

| Chest x-ray (Please submit/upload a copy of the X-ray with this completed form) | □ Normal | □ Abnormal | Date:___/___/___ |
| Qft Gold (Quantiferon gold) blood test (Please submit/upload lab report results with this form) | □ Positive □ Neg □ Indeterminate | Date:___/___/___ |
| T.SPOT.tb blood test (Please submit/upload lab report results with this form) | □ Positive □ Neg | Date:___/___/___ |

TB treatment currently in process or previously completed? □ Yes □ No

If you have previously completed a prescribed TB treatment for active or latent TB, then you are submit/upload a copy of the treatment plan and discharge/treatment completion summary with this form. If you are currently completing a prescribed TB treatment plan for active or latent TB, you must submit/upload written documentation from the health care provider defining treatment and release to attend clinical activities or clinical rotations.

Name of Drug(s)

| Started Date:___/___/___ | Stopped: Date:___/___/___ | #Months of Treatment___ |

TB Treatment Provider Name:
Medical Provider Name: __________________________________________
(Please type or print legibly – Please include credentials*)

*Medical provider must be a person legally authorized to interpret results (for example, CRNP, APRN, MD, DO, PA-C, RN, LPN)

Medical Provider Address: __________________________________________

Medical Provider Signature: ___________________________ Date: ________________

Initial Date: 11/20/13
Revised: 1/26/15
Alderson Broaddus University  
School of Nursing  
MEDICAL EXEMPTION FORM

If you are medically unable to receive required immunizations, or if you have any incomplete or missing immunizations and your primary medical care provider does not recommend that you receive any additional immunizations, then please have your primary medical care provider complete and sign this form. Please be aware that while this form meets Alderson Broaddus University’s medical requirements, it may not meet each clinical rotation site’s requirements. Final approval for clinical rotation lies with the clinical site.

The following student: ________________________________is medically unable to receive the following required immunizations:

__________________________________________________________________

OR

In my medical opinion, the student______________________________ should not receive any additional immunizations for______________________________ for the following reason(s):

_____________________________________________________________________________________

Medical Provider Printed Name*: (Please include credentials):

____________________________________________________________________________________

*Medical Provider must be person legally authorized to medically clear student for clinical (For example, CRNP, APRN, MD, DO; PA-C)

Medical Provider’s Signature: (Please include credentials):

____________________________________________________________________________________

Medical Provider Address: ________________________________

Medical Provider Office Phone Number: ________________________________

Date: __________________________________________________________________________________

Initial Date: 11/20/13  
Revised: 1/26/15
Student Annual Report of Influenza Vaccination Form

Student’s Name: ____________________________________________

To the Medical Provider: This form provides documentation that the above listed student has received an influenza vaccination for the ______________ season. (For example: the 2014-2015 influenza season).

NOTE: Some facilities are now requiring a flu vaccine as part of clinical requirements.

REQUIRED ANNUALLY EACH FALL BY OCTOBER 31ST.

<table>
<thead>
<tr>
<th>Influenza Vaccination</th>
<th>Date Received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Month</td>
</tr>
</tbody>
</table>

Allergy Documentation:
If this student is unable to receive the vaccine please list the reason(s) here:
___________________________________________________

Refusal of flu vaccine:
Your signature below indicates that you have refused the flu vaccine this year:
Student Signature: ______________________________________

Rationale for refusal: (Please note that refusal of the vaccine may negatively affect ability to attend certain clinical experiences).
__________________________________________________________________________________

Medical Provider*:
(Please type or print legibly)
Medical Provider Signature: _______________________________ Date: _____________________

*Must include credentials: (For example: CRNP/APRN, MD, DO; PAC, Registered Pharmacist, RN, LPN)

Medical Provider Address:
__________________________________________________________________________________

Telephone: (____) - _____ - ______  Fax: (_____)- _____ - _____

Initial Date: 11/20/13  Revised: 1/26/15
Pre-Clinical Record of Certifications and Immunizations Form

Student: __________________________________________________________
(Please type or print legibly)

Please indicate when the various requirements below have been met and initial. **ALL COLUMNS MUST BE COMPLETE TO BE ACCEPTED.** If you were/are medically unable to receive any of the required immunizations, or if you have any incomplete or missing immunizations and your primary medical care provider does not recommend that you receive any additional immunizations, please have your primary medical care provider complete a “Medical Exemption Form” WITH this form. If you are in the process of completing any immunizations, you will need to have your primary medical care provider complete one or more “Negative-Equivocal Titer Form(s),” and you will need to complete a “Release of Liability Form for Non-Immune Students.”

**PLEASE NOTE:** Five (5) lab tests (titers) need to be ordered by your primary healthcare provider. These five (5) tests (titers) are:

1. Measles IgG Titer
2. Mumps IgG Titer
3. Rubella IgG Titer
4. Varicella IgG Titer
5. Anti-HBs (Hepatitis B) Titer

Titers (lab results) must be submitted with BOTH pages of this form. If you are in the process of completing any immunizations or titers, and/or if any of your titers are “negative” or “equivocal,” then a separate “Negative/Equivocal Titer Form” will need to be completed and signed by your primary healthcare provider for EACH negative or equivocal titer/lab result. Your Negative/Equivocal Titer Form(s) must be accompanied by a “Release of Liability Form for Non-Immune Students” that you are to complete and sign, and must be signed by any adult witness. Both of these completed forms are to be submitted WITH this form.

### Measles, Mumps and Rubella (MMR)

<table>
<thead>
<tr>
<th></th>
<th>Date (month, day, year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; MMR</td>
<td>(must have been given after 1&lt;sup&gt;st&lt;/sup&gt; birthday)</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; MMR</td>
<td>(given at least 4 weeks after 1&lt;sup&gt;st&lt;/sup&gt; dose)</td>
</tr>
<tr>
<td>*Measles IgG Titer</td>
<td>*titer results must be attached (lab result required)</td>
</tr>
<tr>
<td>*Mumps IgG Titer</td>
<td>*titer results must be attached (lab result required)</td>
</tr>
<tr>
<td>*Rubella IgG Titer</td>
<td>*titer results must be attached (lab result required)</td>
</tr>
</tbody>
</table>

### Diphtheria, Pertussis, Tetanus (DPT)

<table>
<thead>
<tr>
<th></th>
<th>Date (month, day, year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; DPT</td>
<td></td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; DPT</td>
<td></td>
</tr>
<tr>
<td>3&lt;sup&gt;rd&lt;/sup&gt; DPT</td>
<td></td>
</tr>
<tr>
<td>4&lt;sup&gt;th&lt;/sup&gt; DPT</td>
<td>(childhood only)</td>
</tr>
<tr>
<td>Tdap (Example: Adacel, Boostrix) Booster</td>
<td>(must be within past ten years)</td>
</tr>
</tbody>
</table>
# Varicella (Chicken Pox)

<table>
<thead>
<tr>
<th>History of disease</th>
<th>Date (month, day, year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(titer still required)</td>
<td></td>
</tr>
<tr>
<td><strong>or</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Vaccine</strong></td>
<td></td>
</tr>
<tr>
<td>(only if no history of disease – titer still required after vaccinations)</td>
<td></td>
</tr>
<tr>
<td><strong>1st Varicella</strong></td>
<td></td>
</tr>
<tr>
<td><strong>2nd Varicella</strong></td>
<td></td>
</tr>
<tr>
<td>*Varicella IgG Titer</td>
<td>* titer results must be attached (lab results required)</td>
</tr>
</tbody>
</table>

## Hepatitis B

<table>
<thead>
<tr>
<th>Date (month, day, year)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Hepatitis B</strong></td>
</tr>
<tr>
<td><strong>2nd Hepatitis B</strong></td>
</tr>
<tr>
<td><strong>3rd Hepatitis B</strong></td>
</tr>
<tr>
<td>*Anti-HBs Titer</td>
</tr>
</tbody>
</table>

## Any additional vaccinations received

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Date (month, day, year)</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

# Certification of Results

I certify that the information herein is complete and correct to the best of my knowledge.

Printed Name of Health Care Provider

Title

Signature of Health Care Provider

Name of Agency or Institution

Date

Address

(______) ________-________

Telephone Number

(______) ________-________

Fax Number

Initial Date: 10/1/10

Revised: 11/13/13; 1/26/15
NEGATIVE-EQUIVOCAL TITER FORM

If you have completed all required immunizations and titers and have been notified of or have results of a negative (non-reactive) or equivocal (inconclusive results), you must have the following form completed, signed and dated by your primary healthcare provider for each negative titer. This form must be accompanied by a “Release of Liability Form for Non-Immune Students, which is to be signed by you and an adult witness.

The following student: __________________________ has received the following immunization or immunization series:

________________ on the following dates: _____/_____/_____ and _____/_____/_____ and _____/_____/_____

A negative (non-immune) or equivocal (inconclusive) titer result for the above mentioned immunization was received on the following date: _____/_____/_____.

This student is: (Please check only one of the following choices):

(____) Receiving a second immunization or immunization series on the following dates: _____/_____/_____ and _____/_____/_____ and _____/_____/_____ and will have a repeat titer drawn on the following date_____/_____/_____.

OR

(____) Has already received this immunization or immunization series a second time with a second negative titer result and is believed to be a non-converter who will remain non-immune to the above mentioned disease; thus, further immunization with the above mentioned vaccine is medically contraindicated.

Primary Medical Care Provider Signature*: ________________________________

Primary Medical Care Provider Printed Name: ________________________________

Phone: ________________________ Date: ________________________________

*The Primary Medical Care Provider must be a person legally authorized to medically clear students for student clinical rotations (For example, a CRNP, APRN, MD, DO; PA-C).
Alderson Broaddus University
School of Nursing

Release of Liability Form for Non-Immune Students
(This form must accompany any “Negative-Equivocal Titer Forms, when/if applicable)

I understand that I am not or may not be immune to the following: Please list all that apply; for example, Measles, Mumps, Rubella, Hepatitis B, and Varicella (Chicken Pox) ____________________________________________________________.

I understand that it is my responsibility to take all necessary protective action, should I come in contact with a patient having the above noted illness.

I understand that I may contract the above noted illness due to my non-immune status.

I hereby release Alderson Broaddus University, its Faculty and Staff, and any clinical site at which I may have practiced from any and all legal liability, should I contact the above named disease.

Student Name (Please print) ________________________________

Student Signature: ______________________________________

Date ______________________________

Adult Witness Name (Please print) __________________________

Adult Witness Signature: _________________________________

Date ______________________________

Initial Date: 10/1/10
Revised: 11/13/13; 1/26/15
Appendix B

Alpha Beta Nu By-Laws
ABN BY-LAWS

ARTICLE I. NAME OF ORGANIZATION.
Section 1. The name of this organization shall be the Alpha Beta Nu (Alderson Broaddus University) Student Nurses Association.

ARTICLE II. PURPOSE & FUNCTION.
Section 1. Purpose.
A. To assume responsibility for contributing to nursing education in order to provide for the highest quality of health care.
B. To provide programs representative of fundamental interests and concerns to nursing students.
C. To aid in the development of the whole person, his/her professional role, his/her responsibility for health care of the people in all walks of life.

Section 2. Function.
A. To have direct input into standards of nursing education and influence the education process.
B. To influence health care, nursing education, and practice through legislative activities as appropriate.
C. To promote and encourage participation in community affairs and activities towards health care and the resolution of related social issues.
D. To represent nursing students to the consumer, to institutions, and other organizations.
E. To promote and encourage students’ participation in interdisciplinary activities.
F. To promote and encourage recruitment efforts, participation in student activities, and educational opportunities regardless of a person’s race, color, creed, sex, lifestyle, national origin, age, or economic status.
G. To promote and encourage collaborative relationships with nursing and health related organizations.

ARTICLE III. MEMBERS.
Section 1. School Constituent.
A. ABN membership is composed of active or associate members who are members of the National Student Nurses Association (hereafter, NSNA) and the West Virginia Student Nurses Association (hereafter, WVSNA).
B. ABN shall be composed of at least 10 members from Alderson Broaddus University or the total school enrollment is less than 10. There shall be only one NSNA chapter on this school campus.
C. For yearly recognition as a NSNA constituent, an officer of ABN shall submit annually the Official Application for NSNA Constituency Status which shall include the following areas of conformity: purpose and functions, membership, dues, and representation.
D. A constituent association which fails to comply with the bylaws and policies of NSNA shall have its status as a constituent revoked by a 2/3 vote of the NSNA Board of Directors, provided that written notice of the proposed revocation has been given at least two months prior to the vote and the constituent association is given an opportunity to be heard.
E. ABN is an entity separate and apart from NSNA and its administration of activities, with NSNA and WVSNA exercising no supervision or control over these immediate daily and regular activities. NSNA and WVSNA have no liability for any loss, damages, or injuries sustained by third parties as a result of negligence or acts of ABN or the members thereof. In the event any legal proceedings are brought against NSNA and WVSNA, ABN will indemnify and hold harmless the NSNA and WVSNA from any liability.
Section 2. Categories of Constituent Membership. Members of the constituent associations shall be:

A. Active members:
   1. All students enrolled at Alderson Broaddus University in the School of Nursing shall hold membership in the professional student nurses association (i.e., NSNA [National Student Nurses Association], WVSNA [West Virginia Student Nurses Association], and ABN [Alpha Beta Nu]. The student’s academic program shall lead to a baccalaureate degree with a major in nursing, culminating with licensure as a registered professional nurse.
   2. All active members shall have all the privileges of membership.

B. Individual members: Individual membership shall be open at the national level to any eligible student when membership in a constituent association is not available. Individual members shall have the privileges of membership as prescribed in NSNA bylaws.

C. Active membership shall be renewable annually.

Section 3. Active and associate NSNA membership may be extended six (6) months beyond graduation from a student’s program in nursing, providing membership was renewed while the student was enrolled in a nursing program.

ARTICLE IV. DUES.

Section 1.
A. The annual dues for active members shall be $40.00 per member, ($20.00 for NSNA, $12.00 for WVSNA, and $8.00 for ABN), payable for the appropriate dues year. The dues year for membership shall be a period of twelve (12) consecutive months, October 1 through September 30.
B. The ABN Executive Board shall have the authority to set membership dues for the local chapter.
C. Students may choose to decline active membership. Any member who declines to pay current NSNA, WVSNA and ABN dues shall forfeit all privileges of membership.

ARTICLE V. EXECUTIVE BOARD.

Section 1. Composition.
A. The Executive Board will consist of: President, Vice President, Secretary, Treasurer, Chaplain, Historian/Parliamentarian, and Newsletter Correspondent.

Section 2. Responsibilities.
A. The Executive Board shall be responsible for:
   1. Transacting business of the association between membership meetings and shall report such transactions at the next regularly scheduled membership meeting.
   2. Filling vacancies in any office by two-thirds (2/3) majority vote of the Executive Board except the office of the President.
   3. Reviewing monetary disbursements, acquisitions and fund raising activities and shall be responsible for procuring persons for audit of all accounts on an annual basis.
   4. Attending the School of Nursing Faculty Organization meetings as non-member student representatives without voting privileges.

Section 3. Quorum. A quorum for the board meetings shall be the president, vice president, three other board members, and one faculty advisor.
Section 4. Duties of the Executive Board shall consist of:

A. President.
1. Shall preside at all meetings of this association, appoint special committee as needed, perform all other duties pertaining to the office and represent this association in all matters to the local state nurses association, the local league for nursing, state nursing student association, National Student Nurses’ Association, and other professional and student organizations.
2. Shall serve as chairperson of the Executive Board.
3. Shall represent ABN on the Nursing Faculty Organization Student Development Committee.

B. Vice President.
1. Shall assume responsibility of the office of President in the event of the vacancy occurring in the office until the next regular election.
2. Shall preside at meetings in the absence of the President.
3. Shall assist the President as delegated and act as advisor to the President.
4. Shall serve as chairperson of Membership and Recruitment Committee.

C. Secretary.
1. Shall record and distribute the minutes of all meetings of this association as directed by the President.
2. Shall keep on file as a permanent record all reports, papers and documents submitted to the Secretary.
3. Refer to dully appointed committees the necessary records for the completion of business.
4. Forward minutes to the state nursing student association board as well as the names and addresses of all officers and committee chairpersons after their election or appointment.
5. Deliver to the newly elected Secretary all association papers.

D. Treasurer.
1. Shall serve as chairperson of the Projects Committee.
2. Submit financial reports to the membership as directed by President.
3. Prepare financial reports submitted at the monthly Executive Board Meeting.
4. Keep a permanent record of all dues received from members and any other income and disbursements.

E. Chaplain.
1. Responsible for organizing and coordinating all religious aspects of formal ABN events (i.e., Sophomore Convocation, Junior Recognition, Senior Convocation).
2. Opens all ABN meetings with prayer.

F. Historian/Parliamentarian.
1. Keeps a scrapbook of ABN events.
2. Assists the president in enforcing all regulations found in the bylaws.

G. Newsletter Correspondent.
1. Submit articles to the WVSNA newsletter.
2. Submit articles to NSNA News according to publication deadline.
3. Submit association activities to school yearbook.
4. Chair the Public Relations Committee.
5. Prepare a school newsletter as directed by the Executive Board.
Section 5. Absences.
A. Members of the Executive Board who have missed more than two regularly scheduled meetings of any current term year without prior notification to the Executive Board and who offer no valid reason for such absences may be removed from office by a plurality vote of the current membership present at the next scheduled meeting. The officer in question will be notified in advance of the meeting.
B. An officer may also be removed from office by a plurality vote of the members of the Executive Board present at a meeting called for that purpose if that officer is deemed negligent in the functions of that office as stated in these bylaws.
C. Prior notification of two weeks shall be given to the individual in question and a special Executive Board meeting shall be held to review the circumstances.

ARTICLE VI. ELECTIONS.
Section 1. Election of Executive Board.
A. Elections shall be held the third week in March.
B. All elections shall be by secret ballot.
C. A plurality vote of the members in good standing and entitled to vote and voting shall constitute an official election.
D. In the event of a tie, a re-vote shall be held.
E. All nominations shall be made from the Nominating Committee.

ARTICLE VII. MEETINGS.
Section 1. Membership Meetings.
A. Meeting dates, location and time shall be set by the Executive Board and Advisory Council.
B. The President shall have the authority to convene a special meeting as such time as is deemed necessary and shall notify the general membership of such meeting, location, and time.

ARTICLE VIII. COMMITTEES.
Section 1. Appointments.
A. Committee chair appointments shall be made by the Executive Board and shall be deemed standing committees unless otherwise stated at the time of appointment.
B. Committee members shall be appointed from a group of volunteers by the committee chairperson in cooperation with the Executive Board.
C. Committee members shall be appointed from a group of volunteers by the Executive Board to represent ABN on the following Nursing Faculty Organization Committees: Curriculum Committee, Student Development Committee, and Students, Student Development, Educational Policies and Resources; one representative from each level shall be appointed annually.

Section 2. Responsibility.
A. All committees shall be responsible to the Executive Board for reporting committee activities on a regular basis and shall report same to the general membership.

Section 3. Standing Committees.
A. Membership and Recruitment Committee.
1. Chaired by the Vice President.
2. Responsible for recruiting new members into the National Student Nurses Association and ABN.
3. Responsible for membership retention.
4. Committee membership shall be composed of four volunteers from each of the classes (Freshman, Sophomore, Junior and Senior).

B. Projects Committee.
1. Chaired by the Treasurer.
2. Plan and procure funds for ABN.
3. Report on fund raising activity to the general membership and the Executive Board.
4. Committee membership shall be composed of four volunteers from each of the classes (Freshman, Sophomore, Junior and Senior).

C. Nominating Committee.
1. Organize a slate of candidates for election to the offices of ABN.
2. Serve as a board of tellers in all elections.
3. Membership shall be composed of four seniors who are members in good standing of ABN and one faculty advisor.
4. Members shall be appointed by the Executive Board.

D. Advisory Council.
1. Chaired by a volunteer of the committee.
2. Committee membership shall be composed of eight volunteers (two representatives from each of the classes (Freshman, Sophomore, Junior and Senior)).
3. Responsible for advising the Executive Board in regard to planning, preparing, and implementing programs governed by the interests of the organization.

E. Public Relations Committee.
1. Chaired by the Newsletter Correspondent.
2. Announce and publicize all organizational meetings and ABN events in cooperation with the Projects Committee.
3. Plan and prepare monthly bulletin boards in conjunction with the respective organizational programs.
4. Committee membership shall be composed of four volunteers from each of the classes (Freshman, Sophomore, Junior and Senior).
ARTICLE IX. DELEGATES.
Section 1. Purpose and Function.
A. To serve as spokesperson for this association at the annual state and national conventions.
B. Present to the state and national organizations all proposed resolutions or amendments to bylaws or policies proposed by this association.
C. Keep informed as to all current and proposed resolutions at the state and national levels and report information to this association’s membership at regularly scheduled membership meetings.
D. Make available to members updates, explanations, and copies of current and proposed state and national resolutions.

Section 2. Qualifications and Appointment.
A. Any member maintaining a grade level of C or above, who is active in ABN projects and is nominated by current membership at a regularly scheduled meeting is eligible to hold the position of delegate.
B. Appointment shall be for one (1) year and shall be made by nomination of those members eligible and voted on by the current membership eligible to vote and voting. The nominee receiving the majority votes cast shall be awarded the position.

Section 3. Delegate Representation.
A. ABN.
1. ABN shall be entitled to one voting delegate and alternate at the NSNA House of Delegates, and in addition, shall be entitled to one voting delegate and alternate for every 50 members.
2. The ABN delegate(s) and alternate shall be member(s) in good standing and/or elected by members of ABN at a proper meeting according to chapter bylaws. ABN may designate an alternate delegate for each delegate by one of the following mechanisms:
   a) Selection and/or election by members of the ABN chapter according to chapter bylaws; or
   b) Written authorization to the WVSNA Board of Directors requesting them to appoint
      a member of the state board of directors to act as a state appointed alternate for their school chapter.
      1. The ABN chapter shall approve the appointment.
      2. The WVSNA Board of Directors shall verify that any state appointed alternate is a member in good standing of the NSNA and the WVSNA.
      3. ABN must have a selected and/or elected delegate present at the NSNA Convention in order to have a state-appointed alternate seated in the House of Delegates.
      4. All alternates, whether ABN selected or state-appointed, shall have the same privileges as an elected delegate when seated in the House of Delegates.
3. ABN shall be entitled to delegates according to the number of members in good standing in NSNA. Delegates shall be computed on the basis of the number of members in each constituent as evidenced by the annual dues received by NSNA on a date eight weeks prior to the annual meeting.

ARTICLE X. AMENDMENTS.
Amendments to the bylaws may be made with a 2/3 vote of those present and voting at a membership meeting provided that notice of proposed amendments has been sent to members at least two (2) weeks prior to the meeting. Only proper amendments submitted in writing and carrying the proponent’s signature will be considered.
ARTICLE XI. PARLIAMENTARY AUTHORITY.
All meetings of this association shall be conducted according to the parliamentary law as set forth in Robert’s Rules of Order Newly Revised where the rules apply and are not in conflict with these bylaws.

Adopted:   September 24, 1997
Amended/Adopted: April 26, 1999
Amended/Adopted: December 1, 2008
Appendix C
Standardized HESI Remediation Plan
Standardized HESI Remediation Plan

If you scored 899 or below you need to do the following:

1. To begin your remediation you must respond to the Evolve/HESI email that you received. Follow the instructions in the e-mail to register, Login to the Evolve web site.

2. Once you have logged into “My Evolve” then you should click on “Exam results and review material,” You may view the results of your HESI exam online.

3. You need to review the material that you had difficulty with on the HESI exam. You are REQUIRED to use the resources that are available on Evolve for the time period specified below. It is also recommended that you use your course textbooks, the Point, etc.

4. You must review the topic and subtopic areas of questions you missed as listed on the last page of your HESI report and utilize the appropriate resources mentioned above. A log page is attached and must be completed and submitted by the student to the course coordinator by the due date. Due dates will be determined by the course coordinator.

5. Time expectations for your review are individualized according to your HESI score as follows:
   a. 850-899 – at least 2 hours*
   b. 800-849 – at least 3 hours*
   c. 750-799 – at least 4 hours*
   d. 700-749 – at least 5 hours*
   e. 650-699 – at least 6 hours*
   f. 649 and below – at least 8 hours*

   * This is the total amount of time that you should spend reviewing the material that you missed on the HESI Exam.

6. For seniors taking the HESI exit exam, in addition to the above expectations you MUST complete test bank questions from an approved NCLEX preparation book. The student’s faculty facilitator will approve NCLEX preparation books.
   a. 850-899 – at least 100 questions
   b. 800-849 – at least 150 questions
   c. 750-799 – at least 200 questions
   d. 700-749 – at least 250 questions
   e. 650-699 – at least 300 questions
   f. 649 and below – at least 350 questions

Turn in a copy of your time log from your review by ____________________.
It is suggested that you keep a copy of your time log.
If you have any questions please contact the course coordinator.

Initial Date: 12/7/2009
Reviewed: 12/8/14
Appendix D
NSNA Policy Statement on Social Media
Recommendations For:
Social Media Usage and Maintaining Privacy, Confidentiality and Professionalism

Introduction
Student nurses have a responsibility to understand the benefits and consequences of participating in social media; NSNA recommendations encompass personal and professional social media use. Healthcare organizations and Universities that utilize electronic and social media typically have policies in place to govern employee or student use of such media in the workplace. The policies often do not address the nurses’ use of social media outside of the workplace, or outside of the clinical setting. It is in this context that the nurse or student nurse may face potentially serious consequences for inappropriate use of social media.

Definitions
Social media in this context is defined as web-based and mobile platforms for user generated content that create interactive and highly accessible, and often public, dialogues.

Types of Social Media
Social media platforms may include (but are not limited to) the following:
- Blogging – Blogger, LiveJournal, Xanga
- Microblogging – Dailybooth, Foursquare, Google Buzz, Posterous, Tumblr, Twitter
- Postcasting - Blubrry
- Social networking – Bebo, Facebook, Google+, LinkedIn, MySpace, Orkut
- Social news sharing – Digg, Reddit
- Social bookmarking/social tagging – Delicious, Diigo, Google Reader, StumbleUpon
- Video hosting – Vimeo, YouTube

Image of Nursing and Social Media
As student nurses and student leaders, we maintain the awareness that we are contributing to the global image of nursing, as we are always representing NSNA and the nursing profession through intended or unintended outcomes of our social media usage. Photographs, videos and any other digital media, whether created by NSNA constituent school chapters, state associations, individual NSNA members, or any third party, should demonstrate individual professionalism and be consistent with NSNA’s mission and values.

Privacy and Confidentiality
Elected/appointed officials or others in leadership positions in NSNA constituent school chapters and state associations at all times should maintain strict adherence to standards of professionalism. Student nurses all carry the responsibility of adhering to privacy and confidentiality standards and should be familiar with the Health Insurance Portability and Accountability Act (HIPAA), including, but not limited to, the HIPAA Privacy Rule (45 CFR Part 160 and Subparts A and E of Part 164). HIPAA regulations protect patient privacy by establishing how individually identifiable information may be used, including any information relating to the physical or mental health of an individual, or any information that may be used to identify an individual.
Student nurses have a responsibility to promptly report an identified breach of confidentiality or privacy to a school authority—including, but not limited to, an instructor, staff person, or dean.

Examples of Confidentiality/Privacy Breach
Inadvertently or intentionally breaching patient confidentiality/privacy can occur through a variety of situations and circumstances. Student nurses and nurses breach confidentiality or privacy by posting information through social media tools, such as: commenting on someone else’s post that displays any information that may identify a patient; referring to patients or their care; or posting videos or photos of patients or anything that may identify a patient.

The following scenarios are case examples excerpted with permission from the August 2011 white paper, *A Nurse’s Guide to the Use of Social Media* by the National Council of State Boards of Nursing. These are based on reported events to Boards of Nursing, and depict inappropriate usage of electronic and social media. The outcomes varied from jurisdiction to jurisdiction.

Scenario 1
Bob, a licensed practical/vocational (LPN/VN) nurse with 20 years of experience used his cell phone to take pictures of a resident in the group home where he worked. Prior to taking the photo, Bob asked the resident’s brother if it was okay for him to take the photo. The brother agreed. The resident was unable to give consent due to her mental and physical condition. That evening, Bob saw a former employee of the group home at a local bar and showed him the photo, as well as discussed the resident’s current condition. The administrator of the group home learned of Bob’s actions and terminated his employment; the matter was also reported to the Board of Nursing. Bob told the Board of Nursing that he thought his behavior was acceptable, because he has consent from the resident’s brother prior to taking the photo. He also thought it was acceptable to discuss the resident’s condition with the former employee because that person is now employed at another facility within the same company, and has previously worked with this resident. The nurse acknowledged that he had no legitimate purpose for taking or showing the photo, or for discussing the resident’s condition. The Board of Nursing imposed disciplinary action on Bob’s nursing license requiring him to complete continuing education on patient privacy and confidentiality, ethics, and professional boundaries.

This case demonstrates the need to obtain valid consent before taking client photographs; the impropriety of using a personal device to take a patient’s photo; and that confidential information should not be disclosed to persons no longer involved with the care of the patient.

Scenario 2
A Board of Nursing received a complaint that a nurse had blogged on a local newspaper’s online chat room. The complaint notes that the nurse bragged about taking care of her “little handicapper,” and because they lived in a small town, the complainant could actually identify the nurse and the client. The complainant stated that the nurse violated “privacy laws” of the child and his family. It was also discovered that there appeared to be a debate between the complainant and the nurse on the blog over local issues. These debates and disagreements resulted in the other blogger filing a complaint against the nurse.

A check of the newspaper website confirmed that the nurse appeared to write affectionately about the handicapped child to whom she provided care. In addition to making notes about her “little handicapper,” there were also comments about a wheelchair and about the child’s age. The comments were not meant to be offensive, but did provide personal information about the client. There was no specific identifying information
about the client on the blog, but if you knew the nurse, the client, or the client’s family, it would be possible to identify who was being discussed.

The board investigator contacted the nurse about the issue. The nurse admitted that she is a frequent blogger on the site; she explained that she does not have a television and blogging is what she does for entertainment. The investigator discussed that as a nurse, she must be careful not to provide any information about her home care patients in a public forum.

The Board of Nursing could have taken disciplinary action for the nurse failing to maintain confidentiality when posting on blogs, discussion boards, etc. The site used by the nurse was not specifically associated with her, like a personal blog; nonetheless the nurse posted sufficient information to identify herself and the client.

Scenario 3
Nursing students at a local college had organized a group on Facebook that allowed the student nurses’ association to post announcements and where students could frequently blog, sharing day to day tips and arranging study groups. A student-related clinical error occurred in a local facility and the student was dismissed from clinical that day, pending an evaluation of the error. That evening, the students in the program blogged and posted about the error, perceived fairness and unfairness of the discipline, and began to speculate on the student’s future. The clinical error was described, and since the college only used two facilities for clinical experiences, it was easy to discern where the error took place. The page and blog could be accessed by friends of the student, as well as by the general public.

The students in this scenario could face possible expulsion and discipline. These pages can be accessed by the public, and patients identified because this is a small community. It is a myth that the information can only be accessed by a small group; once data is posted online, it is forever embedded into that server and can be retrieved. Someone could also have taken a screenshot of the situation and posted it on a public site. This is a violation of employee/university policies.

Developing Social Media Guidelines
NSNA constituent school chapters and state associations are encouraged to adopt a social media policy for its own members. When developing policies or guidelines, elected leaders should working with their faculty advisor to first reference the rules and regulations of their college/university, as well as the school of nursing, which may have additional policies. To further develop the guidelines, they should then consider utilizing the American Nurses Association and National Council State Boards of Nursing social media resources and recommendations.

Consequences
NSNA constituent school chapters and state associations are encouraged to adopt a social media policy for its own members and educate student nurses about potential consequences of a breach of privacy/confidentiality. For consequences and/or disciplinary actions regarding the potential breach of any social media policy adopted by NSNA constituent school chapters and state associations, NSNA recommends looking to school regulations or state boards of nursing regulations/policies for guidance, as well as the NSNA Bill of Student Rights and Responsibilities, and the NSNA Code of Ethics.
Suggestions

It is important to acknowledge that inappropriate social media behavior occurs. The following suggestions are intended to minimize the risks of using social media:

- Student nurses should be cognizant of the potential impact of each post made, with the understanding that patients, classmates, instructors, employers, and other personal or professional contacts may view an individual’s online activity as a reflection of the individual’s career as well as the nursing profession in general.

- Student nurses should stay informed about the privacy settings of the social media sites they utilize, as privacy settings often change.
  - For example, Facebook previously offered a privacy setting that restricted anyone (even friends) from viewing photos that you are tagged in. This was discontinued.

- Student nurses who utilize social networking sites should actively maintain an awareness of how their professionalism may be affected by friends’ and peers’ usage of the same sites.
  - For example, Jane posts photos from a weekend party and tags Dave in several of them. Dave immediately untags himself to maintain his professionalism. However, Jane has set her privacy settings for the photo album so that “friends of friends” may view them. Even though Dave is no longer tagged, all of Jane’s friends—and everyone connected to each friend of Jane—can view photos of Dave that Jane uploaded.

- Student nurses who are elected/appointed officers should restrict their personal activity to family and friends, and maintain a second option for their “public face” for colleagues, classmates and peers while in office. This is also recommended for student nurses who want to maintain a separation of their personal lives from their professional lives.
  - Example: AschoolpresidentcreatesapublicFacebookpagethatfollowerscan“like”tomaintain professional networking and communications with the school chapter Board.
  - Alternate example: After thoroughly reviewing the privacy setting options, a student chooses a customized setting so that anyone in their “Restricted” group may only view their profile photo and contact information. When a new professional contact requests friendship, the student adds the new contact to their “Restricted” group and accepts the request. If the student would like to post a healthcare related article, she/he may change the settings for that particular post so that all friends can view it.

- Student nurses should not share, post, or otherwise disseminate any information, that can identify a patient, or in any way violate a patient’s rights or privacy. Limiting access through privacy setting is not sufficient to ensure privacy of patients.

- Student nurses should never refer to anyone in a disparaging manner, even if the person cannot be identified with the information stated.

- Student nurses should not make threatening, harassing, sexually explicit, or derogatory statements regarding any person’s race, ethnicity, gender, age, citizenship, national origin, sexual orientation, disability, religious beliefs, political views, or educational choices.

- Student nurses should not make disparaging remarks about any college, university, or school of nursing, including the students, faculty members and staff.
• Student nurses should not post content or otherwise speak on behalf of any college, university, school of nursing, or other student nurses association unless authorized to do so.

• NSNA constituent school chapters, state associations and individual members should refrain from social media usage that individually represents—or attempts to represent—the voice of NSNA, or create any reasonable impression of official representation of NSNA. An example of inappropriate representation would be a website, social media website, or other social media tool that utilizes the NSNA logo or FNSNA logo. These logos may not be used by anyone, including members of school or state chapters. The name National Student Nurses’ Association, Inc. (NSNA)© may be used only by official NSNA school and state constituents with the following wording: “[insert name of school or state association] is an official constituent of the National Student Nurses’ Association, Inc.©”

Common Issues

Drawing the lines:
• “I prefer to accept friendship requests from only close family members and friends. After networking at a conference, a professional contact requests me as a friend on Facebook. I am reluctant to accept because I want to keep my account personal and private, but I do not want to squander my chances of maintaining a professional relationship with this person. Should I accept?”
  ○ Possible solution: Create a LinkedIn account (if one has not already been created). Respond to the initial request, thanking the person for initiating a connection. State that your personal preference is to keep Facebook limited to family and that you would very much like to connect with them through LinkedIn.

Blurring the Lines
• “My personal life is my personal life. It bears no reflection on my competence in providing the best possible patient care that I know I am capable of. So why should I be held accountable in my professional life for something I do or say in my personal life?”
  ○ The reality is: Facebook, Twitter, and other social media sites are public forums. Those who use these forums privately for personal purposes may not realize the degree to which their activities are visible to the general public. It is advised to refrain from making any statement on social media sites that you would not be comfortable saying out loud in public.
  ○ The reality is: Employers and recruiters are looking for social media activity when reviewing résumés for job opportunities.

Benefits of Social Media
Social media allows student nurses to interact with colleagues when separated by geography or other factors. Student nurses can build on relationships, and develop a professional presence online. Social media can benefit NSNA in a variety of ways, including fostering professional connections, promoting timely communication between peers, and educating and informing NSNA members and future members about the role of NSNA as the only professional nursing organization for nursing students.
Examples of Benefiting from Social Media Use

- Social media provides an outlet for professional networking, building new relationships and fostering existing relationships.
- Social media can be an excellent tool for exchanging knowledge among peers and classmates.
- New dialogues and the sharing of nursing or healthcare information, including research and best practices, can be more fluid through social media platforms.
- Social media use is an efficient way to bring nursing and healthcare issues to individuals who are not familiar with current nursing and healthcare trends.
- Social media presents an opportunity to fine tune one’s online professional presence, while contributing to a continued positive image of the nursing profession.

Conclusion

Because social networking offers the potential for both positive and negative consequences, nurses and student nurses should consider a number of principles when functioning within the virtual world of social media in order to maintain their own reputation, and that of nursing as the most trusted profession.

References/Resources

http://ana.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/NursingStandards/ANAPrinciples.aspx
https://www.ncsbn.org/Social_Media.pdf