



**VERA Z. DWYER COLLEGE
OF HEALTH SCIENCES**

INDIANA UNIVERSITY SOUTH BEND

**School of Nursing
Handbook
2018-2019**

www.iusb.edu/nursing

	Mission Statement	4
	FERPA: Family Education Rights & Privacy Act.....	4
	Welcome from the Dean.....	5
I.	Introduction to School of Nursing.....	7
	Undergraduate Nursing at IUSB.....	8
	Bachelor’s Program Learning Outcomes.....	8
	AACN Essentials of Baccalaureate Education for Professional Nursing Practice	9
	Learning Outcomes and Competencies	10
	BSN Program Clinical Journey (Current Curriculum)	14
	Sophomore Year.....	14
	Junior Year	14
	Senior Year	14
	BSN Program Clinical Journey (Students entering 2020).....	15
	Junior Year.....	15
	Senior Year.....	15
	Simulation	16
	BSN Organizations & Committees.....	17
	Student Nurses’ Association	17
	M.A.N.	17
	Faculty Class Mentors	17
	Academic Advising.....	17
	Graduate Nursing at IUSB.....	18
	Master’s Program Learning Outcomes.....	18
	AACN MSN Essentials for Advanced Practice Nursing.....	19
	MSN Program Learning Outcomes.....	20
	MSN Organizations & Committees.....	27
	CAPNI.....	27
	AANP.....	27
	Graduate Faculty Council.....	28
	BSN & MSN Organizations & Committees.....	29
	Sigma Theta Tau International Honor Society of Nursing	29
	Health and Wellness Center	29
	Admission, Progression, & Graduation Committee.....	29
	Assessment Committee.....	29
	Student Affairs Committee	30
	BLUE: Online student evaluation system	30
	School of Nursing Scholarships	30
II.	School of Nursing Policies.....	31
	Code of Student Rights, Responsibilities, and Conduct.....	33
	Essential Abilities Policy	33
	American Nurses’ Association Code of Ethics for Nurses.....	34
	Confidentiality and Patient Care	35
	Facebook & Social Networking Etiquette.....	35
	Impaired Student Policy.....	36
	Clinical Site Regulatory Requirements	37
	Clinical Site Health and Education Requirement	37
	Immunizations, Testing & Health Records.....	37
	Criminal Background Checks	38
	Student Drug Screening Policy	42
	CPR Requirements.....	42
	RN Licensure.....	43
	Health Insurance.....	43
	Bio-Safety Policy.....	44
	Objectives for the Delivery of Care.....	44
	Guidelines for the Admission and Progression of Students Who are HIV or HBV Positive.....	44
	Guidelines for the Bloodborne Pathogen-Infected Healthcare Worker	45
	HBV Vaccination Policy.....	46
	Post-Exposure Evaluation and Follow-Up.....	46
	Latex Allergies Policy	47
	Blood-borne Pathogens In-Service.....	48
	Immunization Information	48

III.	Progression Policies	51
	Problem Assessments.....	52
	Learning Contracts	53
	Communication Policy	53
	Use of Technology.....	53
	Plagiarism	53
	Attendance and Professional Behavior.....	53
	Dismissal	53
	Withdrawal.....	53
	Reinstatement.....	53
	Critical Behaviors	53
	Volunteering	53
	Confidentiality.....	53
	Writing Expectations.....	53
	Religious Accommodations.....	54
	Sexual Misconduct (Title IX).....	54
IV.	BSN SPECIFIC POLICIES	54
	Attendance and Professionalism.....	55
	Course Attendance.....	55
	Clinical Course Attendance.....	55
	Clinical Etiquette.....	55
	Classroom Etiquette.....	57
	Lab and Simulation Rules.....	58
	Schedules and Nursing Clinical Courses.....	58
	Appearance Code	59
	General Guidelines	60
	Lab Coats.....	60
	Shoes.....	60
	Professional Wear for Volunteer Activities	61
	Picture ID.....	61
	Name Pin	61
	Appearance Other	61
	Performance	62
	Clinical Course Make-Up Policy & Guidelines.....	62
	Summary of Critical Behaviors	63
	Skills Validation Policy	63
	Student Errors in Patient Care Experiences Policy & Procedure	63
	Writing Rubric	64
	Mathematics Competency.....	66
	Group Work Expectations	66
	Evaluation	68
	Grading Scale.....	68
	Calculating GPA	68
	Grade Grievances	69
	Mid-Term Advisory Reports	69
	Test Taking and Make-Up.....	70
	Resuming Progression after Studies and Interrupted	72
	Graduation Related Activities	72
	Review Courses	72
	Commencement.....	73
	Questions Asked by the Indiana State Board of Nursing.....	73
	Indiana State Board of Nursing	73
V.	MSN SPECIFIC POLICIES	74
	Appearance Code.....	75
	Lab Coats.....	75
	Shoes.....	75
	Professional Wear for Volunteer Activities	75
	Picture ID.....	75
	Name Badge	75
	Appearance Other	75
	Graduate Credit-Contact Hour Calculation Policy.....	76
	Travel.....	76

Continuing Nursing Student Responsibilities.....	77
Additional Documentation.....	77
Progression in the MSN Program.....	77
Didactic and Clinical Course Attendance.....	77
Labs and Simulation Rules.....	77
Classroom Etiquette.....	78
Test Taking & Make Up.....	78
Descriptors for cheating and plagiarism.....	80
Grading Scale.....	80
Incomplete.....	80
Course Failure and Program Progression.....	81
Withdrawal in the first 3 semesters.....	81
Formal Complaints.....	81
Good standing.....	82
Maintaining.....	82
Disciplinary Probation.....	82
Academic Probation.....	82
Unsatisfactory Performance by a student.....	82
Out of Progression.....	82
Resuming Progression for out of progression students.....	83
Dismissal.....	83
Reinstatement of a dismissed student.....	83
Testing requirement for program re-entry.....	83
MSN Graduation Requirements.....	84
Completion of Degree requirements	84
Information and Guidelines.....	84
Review Courses.....	84
Clinical Policies.....	86
Clinical Experiences	86
Preceptor Qualifications and Guidelines	86
Clinical Placement	86
Clinical Hours Requirements	87
Clinical Time Policy	87
Clinical Paperwork Checklist.....	88
Definition of Clinical Activities.....	88
Category A.....	88
Category B	88
Typhon Policies.....	89
Program of Study and Course Descriptions	90
VI. Resources.....	93
Campus Resources	94
BSN Equipment & Cost Estimate Table	96
Computer Programs	97
Laptop	97
Examsoft	97
Computer Aided Instruction.....	97
Additional Programs & Access	98
EDGT	98
MSN Equipment and Software: Cost Estimate Table.	99

Mission Statement

Indiana University South Bend School of Nursing prepares holistic, caring, ethical professional nurses who respect the uniqueness of each individual. Graduates of this program provide safe, competent nursing care to meet the healthcare needs of the individual, family, and community.

Our nursing graduates function in cohesive healthcare teams using critically evaluated evidence. The School of Nursing values compassion, moral integrity, respect, inclusivity, and service to others.

Reviewed and revised February 16, 2018

Goals

- *Prepare nurses to competently and professionally deliver nursing care.*
- *Prepare graduates to provide safe, evidence-based, patient-centered care that reflects ethical clinical judgement, and inter-professional collaboration.*
- *Cultivate an intellectual desire for study and life-long learning.*
- *Contribute to the profession of nursing by engaging in leadership, scholarship, and practice activities.*

Created March 9, 2018

FERPA: FAMILY EDUCATION RIGHTS & PRIVACY ACT

What are the basic rules? As a student you and your family need to be informed about this law. For more information about this law please go to: iusb.edu/registrar/ferpa_policy.php



Welcome From the Dean of Vera Z. Dwyer College of Health Sciences:

Let me be one of the first to officially welcome you to our college and to your journey in becoming a health professional.

The Vera Z. Dwyer has a long history and tradition in educating health professionals in the Michiana region. Our graduates serve not only our region, but the rest of the state of Indiana and beyond. The employers are complimentary about our graduates' work performance. Many employers report our graduates are what make them the employers they are. The alumni of Indiana University South Bend are committed to excellence. You have now become a part of this tradition. Congratulations! As a college, we look forward to facilitating your journey of learning, professional development and completion of the program for which you were admitted. You have embarked on a career that will provide you opportunities to grow not only as a student but as an individual and a competent and compassionate health professional.

Upon graduation and passing an examination, you will earn credentials as a health professional. We trust you will value those credentials and serve clients professionally and ethically.

The handbook is provided to you as a resource to answer questions you might have during the time in the program. In addition, there are other services and resources available to you on campus. We encourage you to take advantage of these.

Again, welcome!

Thomas F. Fisher, PhD, OT
Dean, Vera Z. Dwyer College of Health Sciences
Indiana University South Bend

Chapter I

Introduction to School of Nursing

Undergraduate Nursing at Indiana University South Bend

The IU South Bend campus offers the Bachelor of Science in Nursing (BSN), undergraduate program and BSN for Registered Nurses. The Bachelor of Science in Nursing degree program is accredited by the Indiana State Board of Nursing and by the Commission on Collegiate Nursing Education. The School of Nursing is an agency member of the American Association of Colleges of Nursing, the Commission on Collegiate Nursing Education and the Indiana Center for Nursing.

The BSN program strives to offer a creative curriculum for meeting the current and future health needs of society. The curriculum prepares a generalist in professional nursing and serves as a basis for graduate study. The purpose of the bachelor's program is to produce graduates who think critically, are culturally, ethically, and legally competent; are effective, politically aware, communicators and coordinators of community resources; and are competent providers of health care, professional role models, and responsible managers.

The curriculum focuses on health and wellness as well as alterations in states of wellness and viewing persons as part of their environments.

Bachelor's Program Learning Outcomes

Upon successful completion of the program, a graduate of the IU South Bend School of Nursing will be:

1. A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.
2. A culturally sensitive individual who provides holistic individual, family, community, and population-centered nursing care.
3. A knowledgeable care coordinator who facilitates access to resources across the continuum of health care environments in order to meet the evolving health care needs of individuals, families, communities, and populations.
4. An individual who understands and considers the impact of health care policy, finance, and regulatory environments on care delivery.
5. An individual who embodies the professional identity of the nurse and who translates the inherent values of the nursing profession into the ethical and legal practice of nursing.
6. An effective communicator who collaborates with interprofessional team members, patients, and their support systems for improved health outcomes.
7. A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.
8. An accountable leader and manager who applies principles of systems and organizational processes and who balances resources to promote quality care and patient safety.
9. An individual who embraces and employs innovations in information management and technology in the delivery of quality patient care.

American Association of Colleges of Nursing Essentials of Baccalaureate Education for Professional Nursing Practice © 2008

- Essential I: *Liberal Education for Baccalaureate Generalist Nursing Practice***
A solid base in liberal education provides the cornerstone for the practice and education of nurses.
- Essential II: *Basic Organizational Systems Leadership for Quality Care and Patient Safety***
Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.
- Essential III: *Scholarship for Evidence Based Practice***
Professional nursing practice is grounded in the translation of current evidence into one's practice.
- Essential IV: *Information Management and Application of Patient Care Technology*** Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.
- Essential V: *Healthcare Policy, Finance, and Regulatory Environments***
Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.
- Essential VI: *Inter-professional Communication and Collaboration for Improving Patient Health Outcomes***
Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.
- Essential VII: *Clinical Prevention and Population Health***
Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.
- Essential VIII: *Professionalism and Professional Values***
Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.
- Essential IV: *Baccalaureate Generalist Nursing Practice***
The baccalaureate-graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

Learning Outcomes and Competencies

Specifically, the program outcomes have been broken down into leveled competencies that the student is expected to achieve at the end of each academic year:

1. A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.

BSN Essential 1: Liberal Education for Baccalaureate Generalist Nursing Practice

BSN Essential 3: Scholarship for Evidence-Based Practice

Quality and Safety Education for Nurses (QSEN): Evidence-based Practice:

Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

Sophomore	Junior	Senior
The student will demonstrate intellectual engagement and use evidence as a basis for beginning clinical reasoning related to health care issues.	The student will develop critical thinking skills by engaging in learning opportunities and by integrating previous learning and life experience into current practice.	The student will synthesize information from a variety of sources to inform accurate and effective clinical reasoning and decision-making.
The student will understand the components of research and evidence based practice, demonstrate information literacy, and appreciate the application of best clinical evidence to enhance practice.	The student will utilize the results of research, systematic reviews, and evidence based guidelines in clinical reasoning and decision-making.	The student will analyze current professional strengths and weaknesses and develop a plan for future learning and development.
		The student will apply an established EBP process to a nursing sensitive question encountered in the practice setting.

2. A culturally sensitive individual who provides holistic, individual, family, community, and population-centered nursing care.

QSEN: Patient-centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.

Sophomore	Junior	Senior
The student will respond sensitively to cultural differences in others, using a holistic nursing approach during interactions with individuals, families, and communities	The student will provide culturally sensitive, holistic nursing care to individuals, families and communities in a variety patient care settings across a spectrum of ages and life stages.	The student will provide culturally sensitive, holistic nursing care to vulnerable individuals, families, and communities in complex care settings.

3. A knowledgeable care coordinator who facilitates access to resources across the continuum of health care environments in order to meet the evolving health care needs of individuals, families, communities, and populations.

BSN Essential 7: Clinical Prevention and Population Health

QSEN: Patient-centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.

Sophomore	Junior	Senior
The student will develop an understanding of the health care system and the resources available to assist individuals, families, and communities to meet evolving health care needs.	The student will assist with care coordination and incorporate an understanding of the health care system and available resources when providing care to the meet the evolving health care needs of individuals, families, communities and populations.	The student will effectively coordinate care by engaging with the health care team to identify and facilitate access to resources to meet the evolving health care needs of individuals, families, communities and populations.

4. An individual who understands and considers the impact of health care policy, finance, and regulatory environments on care delivery.

BSN Essential 5: Healthcare Policy, Finance, and Regulatory Environments

Sophomore	Junior	Senior
The student will examine how professional nursing roles are influenced by healthcare policies, regulations, and finances.	The student will apply knowledge of health care policy, regulations, and finance in the patient care delivery environment.	The student will generate resolutions to challenges in the provision of health care that result from health care policy, regulations, and finance.

5. An individual who embodies the professional identity of the nurse and who translates the inherent values of the nursing profession into the ethical and legal practice of nursing.

BSN Essential 8: Professionalism and Professional Values

Sophomore	Junior	Senior
The student will describe legal/ethical boundaries and professional characteristics of nursing.	The student will demonstrate accountable, professional, ethical and legal care of patients and families.	The student will internalize the values of the profession of nursing and advocate for ethical and legal practice.
The student will exhibit accountable and professional behavior while engaging in the learning community.		

6. An effective communicator who collaborates with inter professional team members, patients, and their support systems for improved health outcomes.

BSN Essentials 6: Inter professional Communication and Collaboration for Improving Patient Health Outcomes

OSEN: Teamwork and collaboration: Function effectively within nursing and inter- professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

Sophomore	Junior	Senior
The student will communicate professionally with others using effective verbal, non-verbal, and written communication techniques, informed by a process of reflection and self-awareness.	The student will use effective communication techniques with individuals, families, communities, and health team members in order to achieve optimal health care outcomes.	The student will use effective communication skills to collaborate with inter professional health team members, individuals, families and communities, to achieve optimal health outcomes in challenging situations

7. A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.

BSN Essential 9: Baccalaureate Generalist Nursing Practice

OSEN: Safety: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

Evidence-based Practice: Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

Patient-centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.

Sophomore	Junior	Senior
The student will provide safe, effective, compassionate care and promote the health of individuals and families consistent with a beginning level of knowledge and skills	The student will provide safe, effective, compassionate care and promote the health of individuals and families consistent with an intermediate level of knowledge and skills	The student will provide safe, effective, compassionate care to promote the health of individuals, families, and communities with complex health care needs.

8. An accountable leader and manager who applies principles of systems and organizational processes and balances resources to promote quality care and patient safety.

BSN Essentials 8: Basic Organizational and Systems Leadership for Quality Care and Patient Safety

QSEN: Quality Improvement: Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

Safety: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

Sophomore	Junior	Senior
The student will identify nursing's role in leading/ managing organizational processes and resources to promote safe and effective patient care.	The student will provide safe and effective patient care based on organizational policies and procedures and finite resources.	The student will synthesize effective leadership and management principles to promote quality and safety in complex organizations.

9. An individual who embraces and employs innovations in information management and technology in the delivery of quality patient care.

BSN Essential 4: Information Management and Application of Patient Care Technology

QSEN: Informatics: Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

Sophomore	Junior	Senior
The student will demonstrate the ability to navigate the patient care record to retrieve and enter pertinent patient information.	The student will employ the electronic health record and other technologies to coordinate patient care.	The student will use information management to trend outcomes of patient care processes in selected patient care populations in order to improve quality of care.
The student will describe the basic principles and uses of quality improvement for advancing patient care outcomes.	The student will implement best practices in quality improvement across a variety of patient care settings.	The student will design, implement, and evaluate a quality improvement study that will benefit unit-based organizational processes.

BSN Program Clinical Journey (CURRENT CURRICULUM 2018-19, 2019-2020)

SOPHOMORE YEAR

Students are admitted to the clinical program in the “fourth” semester. Clinical experiences first focus on health assessments with individuals in well settings. Clinical hours start with simulation and lab practice on campus. Short clinical experiences take place in long term care settings. Physical assessment skills are taught and practiced in the lab on mannequins. Limited patient care responsibility begins under supervision and students begin to administer oral and parenteral medications, insert catheters, etc., as well as adapt newly learned physical assessment skills and nursing history taking skills to patients who are not completely well. This year looks at the health of the well individual and communities, and has a strong emphasis on life span issues and in particular the geriatric client.

Outside activities in this semester may include health fairs (examples include assisting the flu shot programs at IU South Bend and other sites, and blood pressure and health risk screenings in the community).

JUNIOR YEAR

This year focuses on care of patients with alterations in health who are housed in acute care settings. The “fifth” semester introduces students to the general care of patients, addressing areas that are common to many patients. Students care for patients on post-surgical or acute medical care units. Students spend 1 or 2 days a week in this setting over 7-10 weeks. All students rotate to surgery to observe the perioperative process. Students have a rotation to behavioral health or psychiatric settings during this semester. Typically this rotation is the second day of clinical or split over 5 to 7 weeks using two day rotations.

In the “sixth” semester, the student rotates through three areas; acute pediatrics, more advanced care of acutely ill adults on step-down or high complex care areas and obstetric related areas (mother-baby care and labor and delivery). These experiences are set up in 5 or 7 week rotations with two days a week of patient care in the hospital. The lecture content for these topics is concurrent throughout the semester.

Outside activities can be numerous as students are invited to attend professional organizations, and explore political issues relevant to nursing and healthcare. Every effort is made to have students attend an educational program in the community or region. Students have attended national conferences, research programs and local clinical programs. These opportunities involve nominal registration costs and travel costs. Students are encouraged to be involved in community health programs.

SENIOR YEAR

The “seventh” semester includes critical care and community health nursing clinical experiences. Critical care clinical experiences extend the basic adult care skills learned to date. Several areas, including the emergency department and rehabilitation units, are areas in which students spend one or more days. Community health experiences vary greatly with numerous sites from which to select. These include school health nursing, hospice, home health care, public health departments, occupational health areas and home health care. Students have assigned nurse preceptors who are experts in the field. Students travel quite a bit to their agencies and to fellow students’ agencies.

Communities are assessed and health issues examined. Students have opportunities to impact the health of a community as well as the individual. These experiences can extend to a six county area.

The final or “eighth” semester is truly exciting as the student can request an area of interest and focus on it. The semester begins with leadership clinical experiences working with nurse managers and leaders, and on projects which assist nursing units to run or be evaluated (patient care, quality care). Students attend workshops and seminars to learn basic management and leadership skills.

All classroom work is consolidated into the first ten weeks to allow the student to move into the capstone portion of the semester. Here a student is placed with a preceptor providing direct and complete patient care in his or her area of interest (or for those who are unsure, a compatible area). Students work various hours including weekends, evenings and nights. Faculty members assist students in meeting educational and experiential goals and are available to the student and preceptors. This is an exciting bridge to independent professional practice.

This semester can have many outside obligations as the student’s professional responsibilities grow. These are individualized to personal interest and the opportunities available. NCLEX preparation and review are important in this semester and students are assisted through the licensure, graduation/job selection process.

Attending professional organization meetings is an expectation of the professional student nurse.

BSN PROGRAM CLINICAL JOURNEY (Students entering 2020)

JUNIOR YEAR

Students are admitted to the clinical program in the fifth semester. Clinical experiences first focus on health assessments with individuals in well settings. Clinical hours start with simulation and lab practice on campus. Physical assessment skills are taught and practiced in the lab on mannequins. Limited patient care responsibilities begins under supervision and students begin to administer oral and parenteral medications, insert catheters, etc., as well as adapt newly learned physical assessment skills and nursing history taking skills to patients who are not completely well. Additionally, the health of well individuals and communities with a strong emphasis on life span issues is explored.

The second half of the junior year focuses on care of patients with alterations in health who are housed in acute care settings introducing students to the general care of patients, addressing areas that are common to many patients. Students care for patients on post-surgical or acute medical care units. Students spend 1 day a week in this setting over the semester. All students rotate to surgery to observe the perioperative process. Students have a rotation to behavioral health or psychiatric settings during this year. Additionally, the second half of the junior year focuses on acute pediatrics, more advanced care of acutely ill adults on step-down or high complex care areas and obstetric related areas (mother-baby care and labor and delivery). The lecture content for these topics is concurrent throughout the semester.

Outside activities can be numerous as students are invited to attend professional organizations, and explore political issues relevant to nursing and healthcare. Every effort is made to have students attend an educational program in the community or region. Students have attended national conferences, research programs and local clinical programs. These opportunities involve nominal registration costs and travel costs. Students are encouraged to be involved in community health programs.

SENIOR YEAR

The seventh semester includes restorative care, pediatric care and community health nursing clinical experiences. Restorative care clinical experiences extend the basic adult care skills learned to date and include restorative care sites. Pediatric experiences occur in acute care and community care settings providing students opportunities to work with children with acute and chronic conditions. Students will use Erikson’s Stages of Psychosocial Development model when assessing and providing care for children in the pediatric clinical settings. Community health experiences vary greatly with numerous sites such as hospice, home health care, outpatient clinics and public school nursing. Students have assigned nurse preceptors who are experts in the field. Students travel quite a bit to their agencies where they assess and examine health issues found in community settings to make an impact on the health of the individuals. These experiences can extend

to a six county area.

The final semester is truly exciting as the student can request an area of interest and focus on it. The semester begins with leadership clinical experiences working with nurse managers and leaders, and on projects which assist nursing units to run or be evaluated (Patient care, quality care). Students attend workshops and seminars to learn basic management and leadership skills. All classroom work is consolidated into the first ten weeks to allow the student to move into the capstone portion of the semester.

Students in the capstone portion are placed with a preceptor providing direct and complete patient care in his or her area of interest (or for those who are unsure, a compatible area). Students work various hours including weekends, evenings and nights. Faculty members assist students in meeting educational and experiential goals and are available to the student and preceptors. This is an exciting bridge to independent professional practice.

This semester can have many outside obligations as the student's professional responsibilities grow. These are individualized to personal interest and the opportunities available. NCLEX preparation and review are important in this semester and students are assisted through the licensure, graduation/job selection process.

SIMULATION

High fidelity (realistic) patient care simulations are offered throughout the program. These simulated patient experiences are treated like actual clinical ones; appropriate behavior and attire are expected. IU South Bend School of Nursing is fortunate to have state of the art simulation models and labs. Students have an opportunity to solve real life problems in a safe environment where they can learn and experience common clinical situations which do not always arise during actual patient care. Experience as being a part of an interdisciplinary team is also explored. These experiences are very popular with the students, truly enhancing learning and problem solving, especially regarding how to deal with emergencies and complications.

BSN Organizations and Committees

STUDENT NURSES' ASSOCIATION

The Student Nurses' Association (SNA) is the only group dedicated to students enrolled in pre-nursing, traditional and RN to BSN nursing courses. The SNA is an excellent way for students who are in all phases of the nursing program to network with others. By attending meetings, students can learn about many topics of interest to students and Registered Nurses. By becoming professionally involved in the SNA, students have the opportunity to shape their future as nurses. SNA dues are very reasonable, a very good value. Contact the SNA for further information either through Student Services or through the club e-mail at iusbsna@yahoo.com. The SNA also uses Titan Atlas, the campus site for student organizations.

M.A.N.

M.A.N. is the Michiana Alliance of Men in Nursing, a chapter of the national organization American Assembly for Men in Nursing. It is a regional organization for men in nursing. The purpose of this organization is to provide the opportunity for nurses to meet, discuss, and positively influence factors which affect men as nurses. We encourage men of all ages to become nurses and join together with all nurses in strengthening and humanizing health care, support men who are nurses to grow professionally and demonstrate to each other and to society the increasing contributions made by men within the nursing profession, advocate for continued research, education and dissemination of information about men's health issues, men in nursing, and nursing knowledge at the local and national levels, and support members' full participation in the nursing profession and its organizations. Membership in the Chapter is open to Registered Nurses, Licensed Practical/Vocational Nurses, nursing students in entry-level programs, and anyone the Board of the Chapter deems worthy of membership. Meetings are held monthly on days and times determined by the group in August each year. There are no membership dues. Faculty mentor/contact person is Barb White (whitebk@iusb.edu).

FACULTY CLASS MENTORS

Each admitted class cohort is assigned a faculty member to serve as a mentor and resource for students as they progress through the program. This faculty member is available to meet with students to discuss career goals, and to provide general support and encouragement. This individual is introduced at Clinical Orientation and maintains communication throughout the program.

ACADEMIC ADVISING

Academic Advising and the Student Success Center located on the fourth floor at Northside Hall is dedicated to assisting our growing body of pre- and admitted undergraduate nursing students, as well as all students within the Dwyer College of Health Sciences. The advisors and staff are knowledgeable and skilled in their abilities to counsel students throughout their journey at IU South Bend. Whether it is a question regarding the admission process, course planning, or academic and graduation process, the staff and advisors are available, able and willing to assist students.

The goal of the MSN program is to prepare graduates for leadership roles in advanced nursing practice as Family Nurse Practitioners. Graduates of this program are eligible to take the national certification examination for Family Nurse Practitioners offered by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). All graduates are expected to meet the MSN program outcomes detailed below.

Students are expected to complete their degree requirements within 27 months. However, if there are extenuating circumstances, all degree requirements must be met within six years of initial enrollment. Degree requirements can be met through a combination of distance accessible and on campus learning opportunities.

Master's Program Learning Outcomes

The purpose of the Master of Science in nursing program is to prepare registered nurses for advanced practice as a Family Nurse Practitioner. The graduate of the master's degree program will be able to do the following:

1. Model excellence in nursing leadership to improve nursing practice within a complex healthcare system.
2. Perform advanced nursing practice within ethical/legal guidelines, professional policies and regulations, and standards of practice associated with a specialty area of practice.
3. Synthesize knowledge from nursing as well as biological, behavioral, social, administrative, educational, and communication sciences for application to a chosen domain of advanced practice nursing.
4. Demonstrate scholarly inquiry and reflection that exemplifies critical, creative, and systems thinking to advance the practice of nursing.
5. Frame problems, design interventions, specify outcomes and measure outcome achievement while balancing human, fiscal, and material resources to achieve quality health outcomes.
6. Use information technology and knowledge based resources to manage and transform data that informs clinical practice.
7. Systemically apply knowledge from research findings and best evidence to answer clinical questions, solve clinical problems and develop innovative nursing interventions and health policies for selected patient populations.
8. Demonstrate collaborative practice and interpret nursing science within an interdisciplinary context.
9. Articulate the effects of culture, diversity, values, and globalization in the design, delivery, and evaluation of health services.
10. Engage in life-long learning activities that contribute to professional development as well as the advancement of nursing.

AACN MSN Essentials for Advanced Practice Nursing (March 21, 2011)

The dynamic nature of the healthcare delivery system underscores the need for the nursing profession to look at the future and anticipate the healthcare needs for which nurses must be prepared to address. The complexities of health and nursing care today make expanded nursing knowledge a necessity in contemporary care settings. The transformation of healthcare and nursing practice requires a new conceptualization of master's education. Master's education must prepare the graduate to:

- Lead change to improve quality outcomes
- Advance a culture of excellence through lifelong learning
- Build and lead collaborative interprofessional care teams
- Navigate and integrate care services across the healthcare system
- Design innovative nursing practices
- Translate evidence into practice

The nine Essentials addressed below delineate the knowledge and skills that all nurses prepared in master's nursing programs acquire. These Essentials guide the preparation of graduates for diverse areas of practice in any healthcare setting.

Essential 1: Background for Practice from Sciences and Humanities	Recognizes that the master's prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.
Essential 2: Organizational and Systems Leadership	Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.
Essential 3: Quality Improvement and Safety	Recognizes that a master's prepared nurse must articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.
Essential 4: Translating and Integrating Scholarship into Practice	Recognizes that the master's prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.

Essential 5: Informatics and Healthcare Technologies	Recognizes that the master's prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.
Essential 6: Health Policy and Advocacy	Recognizes that the master's prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and healthcare.
Essential 7: Interprofessional Collaboration for Improving Patient and Population Health Outcomes	Recognizes that the master's prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.
Essential 8: Clinical Prevention and Population Health for Improving Health	Recognizes that the master's prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregate/identified populations.
Essential 9: Master's Level Nursing Practice	Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention and influences healthcare outcomes for individuals, populations, or systems. Master's level nursing graduates must have an advanced level of understanding of nursing and relevant services as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.

In addition to the foundational essential content required of all master's education, the purpose or outcome of the advanced practice nursing curriculum is to prepare a graduate to assume responsibility and accountability for the health promotion, assessment, diagnosis, and management of client problems including the prescription of pharmacologic agents within clinical practice. A strong emphasis must be placed on developing sound clinical decision-making skills including diagnostic reasoning throughout the entire advanced practice curriculum. The essential core advanced practice courses include advanced health assessment, advanced physiology/pathophysiology and advanced pharmacology.

ESSENTIAL ABILITIES

1. MSN applicants accepted into the program will be required to sign a letter of agreement that specifies the Essential Abilities criteria. This agreement states the applicant has read and understands that adherence to the Essential Abilities is mandatory. Students questioning their ability to meet the Essential Abilities criteria are encouraged to discuss their concerns with the Graduate Program Director.
2. Faculty has the responsibility to determine whether a student has demonstrated these Essential Abilities. Faculty has the right to request consultation from recognized experts as deemed appropriate.

3. Students failing to meet the Essential Abilities, as determined by faculty, at any point in their academic program may have their progress interrupted until they have demonstrated their ability to meet these Essential Abilities within negotiated time frames.
4. Students will be dismissed from their program of study if faculty determines they are unable to meet these Essential Abilities even if reasonable accommodations are made.

MSN Program Learning Outcomes Aligned with MSN Essentials and NP Competencies

MSN Program Learning Outcomes	MSN Essentials	NP Core Competencies	Population FNP Competencies
1. Model excellence in nursing leadership to improve nursing practice within a complex health care system	II. Organizational and Systems Leadership	2. Leadership Competencies <ol style="list-style-type: none"> 1. Assumes complex and advanced leadership roles to initiate and guide change. 2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care. 3. Demonstrates leadership that uses critical and reflective thinking. 4. Advocates for improved access, quality and cost effective health care. 5. Advances practice through the development and implementation of innovations incorporating principles of change. 6. Communicates practice knowledge effectively, both orally and in writing. 7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus. 	<ol style="list-style-type: none"> 1. Works with individuals of other professions to maintain a climate of mutual respect and shared values. 2. Assumes leadership in inter-professional groups to facilitate the development, implementation and evaluation of care provided in complex systems.
2. Conduct advanced nursing practice within ethical-legal guidelines, professional policies and regulations, and standards of practice associated with a specialty area of practice	II. Organizational and Systems Leadership VI. Health Policy and Advocacy	6. Policy Competencies <ol style="list-style-type: none"> 1. Demonstrates an understanding of the interdependence of policy and practice. 2. Advocates for ethical policies that promote access, equity, quality, and cost. 3. Analyzes ethical, legal, and social factors influencing policy development. 	

		<p>4. Contributes in the development of health policy.</p> <p>5. Analyzes the implications of health policy across disciplines.</p> <p>6. Evaluates the impact of globalization on health care policy development.</p> <p>8. Ethics Competencies</p> <p>1. Integrates ethical principles in decision making.</p> <p>2. Evaluates the ethical consequences of decisions.</p> <p>3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.</p>	
<p>3. Synthesize knowledge from nursing as well as biological, behavioral, social, administrative, educational, and communication science from application to a chosen domain of advanced practice nursing</p>	<p>I. Background for Practice from Sciences and Humanities</p>	<p>1. Scientific Foundation Competencies</p> <p>1. Critically analyzes data and evidence for improving advanced nursing practice.</p> <p>2. Integrates knowledge from the humanities and sciences within the context of nursing science.</p> <p>3. Translates research and other forms of knowledge to improve practice processes and outcomes.</p> <p>4. Develops new practice approaches based on the integration of research, theory, and practice knowledge.</p>	
<p>4. Demonstrate scholarly inquiry and reflection that exemplifies critical, creative, and systems thinking to advance the practice of nursing</p>	<p>IV. Translating and Integrating Scholarship into Practice</p>	<p>4. Practice Inquiry Competencies</p> <p>1. Provides leadership in the translation of new knowledge into practice.</p> <p>2. Generates knowledge from clinical practice to improve practice and patient outcomes.</p> <p>3. Applies clinical investigative skills to improve health outcomes.</p> <p>4. Leads practice inquiry, individually or in partnership with others.</p> <p>5. Disseminates evidence from inquiry to diverse audiences using multiple modalities.</p> <p>6. Analyzes clinical guidelines for individualized application into practice</p>	

<p>5. Frame problems, design interventions, specify outcomes, and measure achievement of outcomes while balancing human, fiscal, and material resources to achieve quality health outcomes</p>	<p>III. Quality Improvement and Safety</p>	<p>3.Quality Competencies</p> <ol style="list-style-type: none"> 1. Uses best available evidence to continuously improve quality of clinical practice. 2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care. 3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care. 4. Applies skills in peer review to promote a culture of excellence. 5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality. 	
		<p>7.Health Delivery System Competencies</p> <ol style="list-style-type: none"> 1. Applies knowledge of organizational practices and complex systems to improve health care delivery. 2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering. 3. Minimizes risk to patients and providers at the individual and systems level. 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders. 5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment. 6. Analyzes organizational structure, functions and resources to improve the delivery of care. 7. Collaborates in planning for transitions across the continuum of care. 	

<p>6. Use information technology and knowledge- based resources to manage and transform data that inform clinical practice</p>	<p>V. Informatics and Healthcare Technologies</p>	<p>5. Technology and Information Literacy Competencies</p> <ol style="list-style-type: none"> 1. Integrates appropriate technologies for knowledge management to improve health care. 2. Translates technical and scientific health information appropriate for various users' needs. <ol style="list-style-type: none"> 2.a Assesses the patient's and caregiver's educational needs to provide effective, personalized health care. 2.b Coaches the patient and caregiver for positive behavioral change. 3. Demonstrates information literacy skills in complex decision making. 4. Contributes to the design of clinical information systems that promote safe, quality and cost effective care. 5. Uses technology systems that capture data on variables for the evaluation of nursing care. 	
<p>7. Systematically apply evidence from research findings to answer clinical questions, solve clinical problems, and develop innovative nursing interventions and health policies for selected patient populations</p>	<p>IX. Master's-Level Nursing Practice</p>	<p>3. Quality Competencies</p> <ol style="list-style-type: none"> 1. Uses best available evidence to continuously improve quality of clinical practice. 2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care. 3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care. 4. Applies skills in peer review to promote a culture of excellence. 5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality. 	
		<p>4. Practice Inquiry Competencies</p> <ol style="list-style-type: none"> 1. Provides leadership in the translation of new knowledge into practice. 2. Generates knowledge from clinical practice to improve practice and patient outcomes. 3. Applies clinical investigative skills to improve health outcomes. 4. Leads practice inquiry, individually or in partnership with others. 5. Disseminates evidence from inquiry to diverse audiences using multiple modalities 6. Analyzes clinical guidelines for individualized application into practice 	

<p>8. Demonstrate collaborative practice and interpret nursing science within an interdisciplinary context</p>	<p>VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes</p> <p>IX. Master's-Level Nursing Practice</p>	<p>2. Leadership Competencies</p> <ol style="list-style-type: none"> 1. Assumes complex and advanced leadership roles to initiate and guide change. 2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care. 3. Demonstrates leadership that uses critical and reflective thinking. 4. Advocates for improved access, quality and cost effective health care. 5. Advances practice through the development and implementation of innovations incorporating principles of change. 6. Communicates practice knowledge effectively, both orally and in writing. <p>9.Independent Practice Competencies</p> <ol style="list-style-type: none"> 1. Functions as a licensed independent practitioner. 2. Demonstrates the highest level of accountability for professional practice. 3. Practices independently managing previously diagnosed and undiagnosed patients. <ol style="list-style-type: none"> 3.a Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. 3.b Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. 3.c Employs screening and diagnostic strategies in the development of diagnoses. 3.d Prescribes medications within scope of practice. 3.e Manages the health/illness status of patients and families over time. 4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making. <ol style="list-style-type: none"> 4a.Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration. 4b.Creates a climate of patient- centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect. 4c.Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care. 4d.Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care. 	<ol style="list-style-type: none"> 1. Engages diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs. 2. Engages in continuous professional and interprofessional development to enhance team performance. <ol style="list-style-type: none"> 1. Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed. 2. Performs and accurately documents appropriate comprehensive or symptom-focused physical examinations on patients of all ages (including developmental and behavioral screening, physical exam and mental health evaluations). 3. Identifies health and psychosocial risk factors of patients of all ages and families in all stages of the family life cycle. 4. Identifies and plans interventions to promote health with families at risk. 5. Assesses the impact of an acute and/or chronic illness or common injuries on the family as a whole. 6. Distinguishes between normal and abnormal change across the lifespan. 7. Assesses decision-making ability and consults and refers, appropriately. 8. Synthesizes data from a variety of sources to make clinical decisions regarding appropriate management, consultation, or referral. 9. Plans diagnostic strategies and makes appropriate use of diagnostic tools for screening and prevention, with consideration of the costs, risks, and benefits to individuals. 10. Formulates comprehensive differential diagnoses. 11. Manages common acute and chronic physical and mental illnesses, including acute exacerbations and injuries across the lifespan to minimize the development of complications and promote function and
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		<p>quality of living.</p> <p>12. Prescribes medications with knowledge of altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults.</p> <p>13. Prescribes therapeutic devices.</p> <p>14. Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, co-morbidities, psychosocial, and financial issues.</p> <p>15. Assesses and promotes self-care in patients with disabilities.</p> <p>16. Plans and orders palliative care and end-of-life care, as appropriate.</p> <p>17. Performs primary care procedures.</p> <p>18. Uses knowledge of family theories and development stages to individualize care provided to individuals and families.</p> <p>19. Facilitates family decision-making about health.</p> <p>20. Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy and numeracy on the ability and readiness to learn and tailor interventions accordingly.</p> <p>21. Demonstrates knowledge of the similarities and differences in roles of various health professionals providing mental health services, e.g., psychotherapists, psychologist, psychiatric social worker, psychiatrist, and advanced practice psychiatric nurse.</p> <p>22. Evaluates the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities).</p> <p>23. Applies principles of self-efficacy/empowerment in promoting behavior change.</p> <p>24. Develops patient-appropriate educational materials that address the language and cultural beliefs of the patient.</p> <p>25. Monitors specialized care coordination to enhance effectiveness of outcomes for individuals and families.</p>
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<p>9. Articulate the effects of culture, diversity, values, and globalization in the design, delivery, and evaluation of health services</p>	<p>VIII. Clinical Prevention and Population Health for Improving Health</p>	<p>7. Health Delivery System Competencies</p> <ol style="list-style-type: none"> 1. Applies knowledge of organizational practices and complex systems to improve health care delivery. 2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering. 3. Minimizes risk to patients and providers at the individual and systems level. 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders. 5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment. 6. Analyzes organizational structure, functions and resources to improve the delivery of care. <p>8. Ethics Competencies</p> <ol style="list-style-type: none"> 1. Integrates ethical principles in decision making. 2. Evaluates the ethical consequences of decisions. 3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care. 	
<p>10. Engage in life-long learning activities that contribute to professional development as well as the advancement of nursing.</p>	<p>IX: Master's-Level Nursing Practice</p>	<p>2. Leadership Competencies</p> <ol style="list-style-type: none"> 1. Assumes complex and advanced leadership roles to initiate and guide change. 2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care. 3. Demonstrates leadership that uses critical and reflective thinking. 4. Advocates for improved access, quality and cost effective health care. 5. Advances practice through the development and implementation of innovations incorporating principles of change. 6. Communicates practice knowledge effectively both orally and in writing. <p>Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus.</p>	<p>IV. Professional Role</p> <ol style="list-style-type: none"> 1. Demonstrates in practice a commitment to care of the whole family. 2. Recognizes the importance of participating in community and professional organizations that influence the health of families and supports the role of the family nurse practitioner. 3. Interprets the family nurse practitioner role in primary and specialty health care to other health care providers and the public. <p>Serves as a resource in the design and development of family community-based health services.</p>

MSN Organizations and Committees

CAPNI

CAPNI is a professional organization with the purpose of promoting the practice of APRNs that includes Nurse Practitioners, Certified Nurse Midwives, and Clinical Nurse Specialists in the state of Indiana. Learn more at www.capni.org

“Our objective is to serve our peers by providing the following

Collaboration:

- Among APRNs
- With other health care professionals

Advancement of the APRN role:

- Increased public and professional awareness
- Enhanced utilization of APRNs

Education:

- Develop, participate in, and sponsor educational activities for APRNs
- Provide opportunities to support the education of APRN students

Legislation:

- Protect the role of the APRNs as defined by law
- Initiate, facilitate, support legislation favorable to APRNs “

AANP

On January 1, 2013, the American Academy of Nurse Practitioners (founded in 1985) and the American College of Nurse Practitioners (founded in 1995) came together to form the American Association of Nurse Practitioners® (AANP), the largest full-service national professional membership organization for NPs of all specialties.

As The Voice of the Nurse Practitioner®, AANP represents the interests of more than 248,000 NPs around the country, advocating for the active role of NPs as providers of high-quality, cost-effective, and comprehensive, patient-centered health care.

The mission of AANP is to empower all nurse practitioners to advance quality health care through practice, education, advocacy, research and leadership. Learn more at www.aanp.org.

GRADUATE FACULTY COUNCIL

The Graduate Faculty Council is comprised of full-time faculty who have teaching responsibilities in the graduate program. A current student serves on this council as the liaison for graduate students. The Assistant Dean of the School of Nursing is an ex-officio member of the Council.

COUNCIL FUNCTION

To enact the policies and procedures of IU South Bend School of Nursing and IU South Bend graduate studies program regarding:

1. Admission, Graduation and Progression (APG) of students enrolled or enrolling in the MSN program including recommendations for changes in MSN policies and procedures in regards to APG issues.
2. Develop, enact, and oversee the IU South Bend School of Nursing’s campus blueprint for Assessment; to serve as a liaison to administration in the planning for gathering of assessment data; and to review the valuation data and share analysis with the Master’s faculty.
3. The evaluation and the making of recommendations on the Master’s program curricular issues; to oversee and maintain the integrity of the Master’s curriculum; to assist in planning curricular changes; and, to communicate all significant implementation and evaluation changes to the administration.

BSN & MSN Organizations and Committees

SIGMA THETA TAU INTERNATIONAL HONOR SOCIETY OF NURSING

The nursing program at IU South Bend proudly supports the Sigma Theta Tau international Honor Society of Nursing through participation in the Alpha Chapter. Sigma Theta Tau was founded in 1922 by six nursing students at what is now Indiana University in Indianapolis. In 1936, Sigma Theta Tau was the first organization in the U.S. to fund nursing research. All Indiana University campuses combine to be part of the Alpha chapter-at-large. The Alpha Chapter is the original chapter that was founded by the six nursing students, so it is especially noteworthy to be a member of this chapter.

The Vision of Sigma Theta Tau

Create a global community of nurses who lead in using scholarship, knowledge and technology to improve the health of the world's people.

The Mission of Sigma Theta Tau

Support the learning, knowledge, and professional development of nurses committed to make a difference in health worldwide.

Registered Nurses with a BSN may become members as nurse leaders. More information about Sigma Theta Tau can be found at www.nursingsociety.org and information on the Alpha Chapter at www.iupui.edu/~ssta.

BSN students must meet specific grade point criteria to be eligible to apply for admission. If you meet the criteria in your senior year, (7th or 8th semester or RN who has completed half of the nursing courses), you will be contacted by the faculty advisor Cyndi Sofhauser, csofhaus@iusb.edu.

For further information contact Cyndi Sofhauser, Faculty Advisor, at csofhaus@iusb.edu.

HEALTH AND WELLNESS CENTER

IU South Bend Health and Wellness Center, located in Vera Z. Dwyer Hall (formerly Riverside Hall), 1960 Northside Boulevard, offers free or reduced rate services to IU South Bend students, faculty and staff. Services for a nominal fee include physical exams, assessment of minor injuries and illness, routine health monitoring such as taking blood pressure and answering health related questions.

For a reasonable fee, lab services including pap smears and cholesterol testing are offered. Hours vary by semester. Watch IU South Bend mass email or the Bulletin Board for announcements of health and wellness activities offered by the center or check the website <http://www.iusb.edu/~iusbwell>.

COLLEGE OF HEALTH SCIENCES ADMISSION, PROGRESSION & GRADUATION (APG) COMMITTEE

<https://healthscience.iusb.edu/docs/policies/APG%20Appeals%20Policy.pdf> Comprised of nursing faculty, the Admission, Progression, and Graduation (APG) Committee addresses student concerns and issues related to admission, progression through, and graduation from the programs offered by the School of Nursing.

ASSESSMENT COMMITTEE OF THE IU SOUTH BEND NURSING FACULTY

The Assessment Committee in the School of Nursing is a standing committee of the South Bend Nursing Faculty Council. The members are comprised of three to four faculty members and a student representative. The purpose of the committee is to oversee the evaluation of the nursing program with a goal of improving the nursing program and student outcomes. In order to carry out these purposes the committee plans, evaluates and revises assessment activities and reports the results to the faculty, administration and other interested parties (such as the Office of Information Technologies and the Library).

Several of the activities included in the evaluation plan rely on student input. Examples of

such activities include:

- Clinical placement evaluations
- Mid-curriculum assessment and survey
- Exit survey, NCLEX-RN assessment activities (BSN), and post graduate certification exams (MSN).
- Random collection of selected student work
- Faculty and course evaluation data

Each of the activities is aimed at looking at students as an aggregate and not as individuals. Students are not asked to identify themselves on any surveys. The data received from the NCLEX- RN activity are reported in the aggregate. It is essential that students take these assessment activities very seriously. Student input is invaluable in our efforts to improve our program.

Since the assessment plan does undergo revision, the plan may change. However, the purpose of the activities remains the same, as does the committee interest in a “big” picture and not the evaluation of an individual student or faculty. Students who have concerns about the assessment process may bring them to the attention of the chairperson of the committee.

STUDENT AFFAIRS COMMITTEE

The School of Nursing Student Affairs Committee is comprised of nursing faculty, Faculty Support, and a nursing student representative. The committee is responsible for coordinating activities and decision making related to student services in the IU South Bend School of Nursing. These duties include pinning, scholarships and awards, maintenance of the BSN Student Policy Handbook, and consideration of non-academic policies.

BLUE: ONLINE STUDENT EVALUATION SYSTEM

Students are invited and encouraged to complete teacher and course evaluations for each course enrolled in. This information is confidentially compiled and reported. This feedback is used to improve course instruction. Your participation is highly valued.

SCHOOL OF NURSING SCHOLARSHIPS

The School of Nursing is fortunate to have received monies from several generous donors to fund scholarships for our students. On the IU South Bend campus, the William and Kathryn Shields Scholarships, the Raymond and Frances Grandorf Scholarships, the John O'Connor Scholarships, Vera Z. Dwyer Scholarship in Healthcare and the Dodd Scholarships are available annually to reward students for their academic and clinical achievements, and to help meet their financial needs. Other scholarship monies are available from the Indianapolis campus of the Indiana University School of Nursing.

The office of Student Services maintains IU South Bend School of Nursing scholarship information on-line at www.iusb.edu/nursing. Students are strongly encouraged to check the website for scholarship opportunities. An IU South Bend School of Nursing Scholarship flyer is posted typically in early March. Complete the Free Application for Federal Student Aid (FAFSA). Please note that IU South Bend's Federal School Code is 001816. The FAFSA or renewal FAFSA should be submitted annually by April 15. Late filers will not be considered for aid from the Indiana Commission of Higher Education. <https://students.iusb.edu/financial-aid/apply.html>

Chapter II

School of Nursing Policies

Indiana University Code of Student Rights, Responsibilities, and Conduct

Each student is provided with a copy of the Indiana University Code of Student Rights, Responsibilities, and Conduct (formerly Indiana University Code of Ethics) upon admission or transfer to the School of Nursing as a pre-nursing or nursing student. This document, which applies to all Indiana University students, contains the following sections: I. Student Rights and Responsibilities, II. Student Complaint Procedures, III. Student Misconduct, IV. Student Disciplinary Procedures, V. General Provisions, VI. Adoption Provisions, and VII. Appendix. It is available online at <http://studentcode.iu.edu/>

Essential Abilities Policy

The School of Nursing faculty has specified essential abilities (technical standards) critical to the success of students in any IU nursing program. Students must demonstrate these essential abilities to succeed in their program of study. Qualified applicants are expected to meet all admission criteria and matriculating students are expected to meet all progression criteria, as well as these essential abilities (technical standards) with or without reasonable accommodations.

Essential judgment skills to include: ability to identify, assess, and comprehend conditions surrounding patient situations for the purpose of problem-solving around patient conditions and coming to appropriate conclusions and/or course of actions.

Essential physical/neurological functions to include: ability to use the senses of seeing, hearing, touch, and smell to make correct judgments regarding patient conditions and meet physical expectations to perform required interventions for the purpose of demonstrating competence to safely engage in the practice of nursing. Behaviors that demonstrate essential neurological and physical functions include, but are not limited to observation, listening, understanding relationships, writing, and psychomotor abilities consistent with course and program expectations.

Essential communication skills to include: ability to communicate effectively with fellow students, faculty, patients, and all members of the healthcare team. Skills include verbal, written, and nonverbal abilities as well as information technology skills consistent with effective communication.

Essential emotional coping skills: ability to demonstrate the mental health necessary to safely engage in the practice of nursing as determined by professional standards of practice.

Essential intellectual/conceptual skills to include: ability to measure, calculate, analyze, synthesize, and evaluate to engage competently in the safe practice of nursing.

Other essential behavioral attributes: ability to engage in activities consistent with safe nursing practice without demonstrated behaviors of addiction to, abuse of, dependence on alcohol or other drugs that may impair behavior or judgment. The student must demonstrate responsibility and accountability for actions as a student in the School of Nursing and as a developing professional nurse consistent with accepted standards of practice

Procedure

1. The essential abilities criteria is published in the IU South Bend *Bulletin* and incorporated into informational packets given to those demonstrating an interest in nursing.
2. Applicants accepting admission in the BSN/MSN program will be required to sign a letter of agreement that specifies the essential abilities criteria. This agreement states they have read and understand that they will be expected to meet the essential abilities. Students questioning their ability to meet these essential abilities criteria will be encouraged to address their inquiries to Student Services.
3. Faculty has the responsibility to determine whether a student has demonstrated these essential abilities. Faculty has the right to request consultation from recognized experts as deemed appropriate.
4. Students failing to meet these essential abilities, as determined by faculty, at any point in their academic program may have their progress interrupted until they have demonstrated their ability to meet these essential abilities within negotiated time frames.
5. Students will be dismissed from their program of study if faculty determines that they are unable to meet these essential abilities even if reasonable accommodations are made.
6. Students failing to demonstrate these essential abilities criteria, as determined by the faculty, may appeal this adverse determination in accordance with Indiana University's appeal procedures.

American Nurses' Association Code of Ethics for Nurses

Students who are preparing to enter the profession of nursing are expected to follow the Code of Ethics for Nurses. Each person, upon entering the profession, inherits a measure of responsibility and trust in the profession and the corresponding obligation to adhere to standards of ethical practice and conduct set by the profession. The code was adopted by the American Nurses' Association in 1950 and revised in 1960, 1968, 1976, 1985, 2001, and 2015. The code and interpretive statements can be found at:

<http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html>

Provisions of the Code of Ethics for Nurses

Provision 1	The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
Provision 2	The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
Provision 3	The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
Provision 4	The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

Provision 5	The nurse owes same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, and maintain competence, and continue personal and professional growth.
Provision 6	The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
Provision 7	The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
Provision 8	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
Provision 9	The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

The Indiana University South Bend School of Nursing strictly adheres to the American Nurses' Association's Code for Nurses. Each student is expected to consistently uphold these standards.

Confidentiality and Patient Care Policy

healthscience.iusb.edu/docs/policies/Confidentiality%20Policy.pdf

<https://expand.iu.edu/browse/e-training/courses/hipaa-students>

Facebook and Social Networking Etiquette

<https://healthscience.iusb.edu/docs/policies/Social%20Networking%20Policy.pdf>

Often social networking sites are used to share personal thoughts, images, opinions, experiences and frustrations. The line between what is socially and professionally acceptable can be thin. It is considered unprofessional to share patient experiences with any specificity. Keep in mind what you might post about a patient, experience, agency, including the School of Nursing, and staff can be deemed inappropriate with unexpected consequences. Sometimes, even innocent remarks that label patients, groups or experiences can be considered derogatory and offensive. Nursing students have obligations to behave professionally at all times in the public's eye and social networking sites are public. Comments and images can be readily shared and the offense quickly spread. Please keep this in mind at all times. Students who post comments or photographs that violate patient or classroom confidentiality or are deemed as unprofessional may face disciplinary action by the University.

The faculty has decided that they may not engage in social media activities with current students.

Therefore, if you are "unfriended" by a faculty member, please do not be offended. After you graduate, the social media friendship may resume. Please refer to the National Council of State Boards of Nursing website <https://www.ncsbn.org/347.htm> for professional standards related to social media. Guidelines and an important video can be found here. This resource for professional responsibility is invaluable.

The ANA Principles for Social Networking are taken verbatim from American Nurses Association (2011, September). *Principles for social networking and the nurse*. Silver Spring, MD: Author.

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm patient's privacy, rights or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

6 Tips to Avoid Problems:

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers, or co-workers even if they are not identified.
5. Do not take photos or videos of patients on personal devices including cell phones.
6. Promptly report a breach of confidentiality or privacy.

The IU South Bend Office of Communications web page has related guidelines which should be reviewed at: <https://www.iusb.edu/ocm/docs/OCM%20Social%20Media%20Policy.pdf>

The School of Nursing maintains a Facebook page—please search for and like “IUSB School of Nursing.” Events, news, issues and relevant links are shared here.

Impaired Student Policy

<https://healthscience.iusb.edu/docs/policies/Impaired%20Student%20Policy.pdf>

IU South Bend School of Nursing policy regarding Impaired Students states:

1. The Statement of Adherence of Clinical Facility Policies and Procedures Form will be signed by the student upon admission and will remain in effect while the student is matriculating in the School of Nursing. RN to BSN students, MSN students will sign the form upon entry into clinical placements. A completed and signed form is required prior to any clinical placement.
2. The faculty or staff member who suspects impairment will request that the student

- immediately leave the clinical area while ensuring the student's safety.
3. The faculty member will determine the most appropriate testing location. The student is responsible for receiving immediate testing and bears the costs involved in the testing. If the testing location is not on site, the student will bear the cost of public transportation to the site.
 4. The student will be suspended from all clinical activities until the investigation into the situation is complete.
 5. The IU South Bend School of Nursing enforces a zero tolerance for alcohol and/or drug use.
 6. Results must be submitted to the Director of the appropriate program by the testing facility.

The Statement of Adherence to Clinical Facilities form is completed upon admission and annually. While the impaired practitioner is highlighted here, students are expected to conform to all agency policies and practices.

Clinical Site Regulatory Requirements State/Federal Policies

CLINICAL SITE HEALTH AND EDUCATION REQUIREMENT POLICY

<https://healthscience.iusb.edu/docs/policies/Clinical%20Site%20Health%20Requirement%20Policy.pdf>

IMMUNIZATIONS, TESTING AND HEALTH RECORDS

<https://healthscience.iusb.edu/docs/policies/Immunizations%20Policy.pdf>

Annual TB screening, up-to-date immunization status and a health evaluation (history and physical examination) are required. This policy is necessary so that we are in compliance with hospital and community health agency policies.

The School of Nursing must provide the clinical agencies with proof that each student assigned to their agency for clinical experience has completed all immunizations (including Hepatitis B series, DT booster, MMR, and Varicella), and annual TB screening. It is the student's responsibility to update their health records and have all documentation submitted to the Health and Wellness Center as outlined below. Documentation is due no later than December 1st prior to enrolling in clinical nursing courses for the spring semester, and no later than August 1st prior to enrolling in clinical nursing courses for the fall semester

Newly Admitted to the Nursing Program

When a nursing student is first admitted to the clinical nursing courses, the student receives information regarding the need for proper immunization verification (including Hepatitis B series, Tdap booster, MMR, and Varicella), a health evaluation (history and physical examination) completed by a primary care provider, current professional-level CPR certification and TB (PPD or X-ray) screening. Every student must provide written verification of a history of chicken pox, or a Varicella Zoster Titer before entering clinicals. Newly admitted nursing students must provide written documentation of the above stated items in advance of beginning their clinicals. For students who are enrolled in clinical nursing courses in the fall semester, the above materials must be filed with the School of Nursing Student Services office by July 15. For students who will begin their clinical nursing courses in the spring semester, the above materials must be filed by October 15. Zachary checks are also performed on all new BSN students.

Failure to submit all required health documentation by the appropriate deadline will result in administrative withdrawal from all nursing courses and the student will be considered out-of-progression in the nursing degree program.

Students who are admitted late to the nursing program will be handled on a case-by-case basis. However, those applicants who are on a “waiting list” or “alternate list” are encouraged to begin gathering the necessary documentation so as to avoid delays. Even students who are admitted late must have all documentation on file with the School of Nursing prior to beginning the clinical nursing courses. Failure to do so will result in the student being automatically withdrawn from all clinical nursing courses for which they are registered.

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Continuing Nursing Students

Nursing students are responsible for making sure they receive annual TB screening (PPD or X-ray) and current professional-level CPR re-certification. In addition, immunization status must be updated as necessary. It is the student’s responsibility to monitor the status of these and to submit proper documentation to the School of Nursing in a timely manner.

Documentation of annual TB screening and current professional-level CPR re-certification needs to be submitted to the School of Nursing, Student Services office no later than one week prior to the date they expire each year.

Heart saver certification is inadequate. Students will be notified of upcoming expiration, but it is the student’s sole responsibility to provide documentation of updates prior to expiration. Clinical instructors will be notified, and students will be prohibited from attending clinicals if these vital documents are not submitted. These unexcused absences could lead to course failure in clinical courses.

Some community agencies require more recent verification of TB screening before they will allow our students to see clients. Therefore, students may be required to submit this documentation just prior to beginning a semester even if it is not yet expired. Students will be informed if this is required.

For students enrolled in clinical nursing courses during the summer sessions, TB screening, immunizations, and CPR certification must be valid through the final day of the summer session in which the student is enrolled.

For students who are finishing an “Incomplete” grade in a nursing course with a clinical component, the CPR re-certification, immunizations, and TB screening must be valid until the course requirements are completed.

Documentation of annual TB screening and current professional-level CPR recertification needs to be submitted to the appropriate locations no later than one week prior to the date they expire each year. Heart saver certification is inadequate. Students will be notified of upcoming expiration, but it is the student’s sole responsibility to provide documentation of updates prior to expiration. Clinical instructors will be notified, and students will be prohibited from attending clinical if these vital documents are not submitted. These unexcused absences could lead to course failure in clinical courses.

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Additional Documentation

Due to frequent changes in the national standards and recommendations for adult immunizations, it may be necessary for the School of Nursing to request additional documentation beyond what is listed here prior to clinical admission. Criminal background checks may be conducted at any time in the program depending upon a clinical site’s requirements or due cause. Students will be notified if they are affected.

CRIMINAL BACKGROUND CHECKS

<https://healthscience.iusb.edu/docs/policies/Criminal%20Background%20Checks%20Policy.pdf>

Criminal Background Check for Licensure

A new Indiana Bill will be in effect starting in 2011 which will require all applicants (and those renewing) for RN licensure to submit a national criminal history background check and the results are to be shared with the Indiana Professional Licensing Agency (IPLA). Based on findings the IPLA will be able to suspend, deny or revoke a license if the applicant or licensee has been convicted of certain offenses. This will add \$6 to the application fee to cover the cost for the Indiana State Police to conduct this review.

Students with potential concerns (any criminal offense with resulting charges, fines or convictions must be reported to the Board) should see the Assistant Dean of Nursing or Graduate Program Director for assistance with writing your explanation on your application for licensure.

Criminal History Information Sheet (General Guidelines Used by the School of Nursing)

The following offenses will prohibit admittance & continuation in the nursing program:

- Felony that involves the intent to cause death or serious impairment of a bodily function, that result in death or serious impairment of the bodily function that involves the use of force or violence or that involves the threat or the use of force or violence. This includes:
 - Homicide
 - Assault and infliction of serious injury
 - Assault with intent to commit murder
 - Assault with intent to do great bodily harm less than murder
 - Assault with intent to maim
 - Attempt to murder
- Felony involving cruelty or torture.
- Felony of crime committed against “vulnerable adults” who because of age, developmental disability, mental illness or physical disability, require supervision or personal care or lack the personal and social skills required to live independently.
- Felony involving criminal sexual conduct.
- Felony involving abuse or neglect generally related to vulnerable adults or children which typically results in serious physical or mental harm to the vulnerable adult.
- Felony involving the use of a firearm or dangerous weapon.
- Felony involving the diversion or adulteration of a prescription drug or other medications.
- Misdemeanor involving the use of a firearm or dangerous weapon with the intent to injure, the use of a firearm or dangerous weapon that results in a personal injury, or a misdemeanor involving the use of force or violence or the threat of the use of force or violence.
- Misdemeanor crime committed against “vulnerable adults”.
- Misdemeanor involving criminal sexual conduct which involve instances of sexual contact with another

person that does not involve sexual penetration and are typically known as “fourth degree criminal sexual conduct.”

- Misdemeanor involving cruelty or torture (usually first conviction regarding animals).
- Misdemeanor involving abuse or neglect in the third or fourth degree if the caregiver intentionally or recklessly causes “physical harm” to a vulnerable adult.
- Third Driving Under the Influence (DUI) conviction.

In order to be granted clinical privileges at any of the covered facilities, 5 years must have lapsed since the individual completed all the terms and conditions of sentencing, parole and probation for conviction of the following offenses:

- Misdemeanor involving cruelty if committed by an individual who is less than 16 years of age, including cruel treatment of animals.
- Misdemeanor involving home invasion that typically is described as “breaking and entering into another person’s home.
- Misdemeanor involving embezzlement which is a person who has taken money from another person who had entrusted the money with the wrongdoer, e.g. a store cashier.
- Misdemeanor involving negligent homicide which is committed when a person engages in careless or reckless driving that causes death.
- Misdemeanor involving larceny which is legally describes as the act of stealing but it does not include shoplifting. An example would be a theft from a building of an item that is not offered for sale.
- Misdemeanor or retail fraud in the second degree which involves shoplifting property from a store that is offered for sale at a price of \$200 or more but less than \$1,000 or less than \$200 if the person has been previously convicted of any crime or theft.
- Any other misdemeanor involving assault, fraud, theft, or the possession or delivery of a controlled substance unless otherwise provided for under other subsections.
- Misdemeanor for assault which is defined as the individual attempting or threatening to hurt another.
- Misdemeanor of retail fraud in the third degree which involved shoplifting property from a store that is offered for sale at a price of less than \$200.
- Misdemeanor involving the creation, delivery or possession with intent to manufacture or deliver a controlled substance.

Indiana State Board of Nursing monitors nurses for DUI (driving while impaired)/OWI (operating while impaired) charges. Please refer to the following article regarding nurses and OWI’s. Indiana State Board of Nursing FOCUS. January 2015, Vol 6 #23 “DUI’s: A Common Mistake to Avoid” R. Riebsomer. Pp. 12-13.

<http://epubs.democratprinting.com/article/DUI%E2%80%99S%3A+A+Common+Mistake+to+Avo+id/1901063/0/article.html>

The Criminal History Disclosure form is completed upon admission and annually. While the impaired practitioner is highlighted here, students are expected to conform to all agency policies and practices.

Procedure for Submitting the Criminal Background Check

Indiana University South Bend School of nursing requires that each student purchase a background check through **Backgroundchecks.com**.

Backgroundchecks.com is an external website offered in coordination with the university – to complete this process for oneself.

<http://www.backgroundchecks.com/Affiliates/indianauniversity.html>

1. You will first have to create your user account.
 - The company name, industry and promotional code fields should be kept as the default, prefilled information.
 - The phone and address field will be that of the volunteer/student.
 - Once you create an account successfully you should receive a “Welcome to backgroundchecks.com” notification
 2. You will then be asked to acknowledge bgc.com and IU's terms and conditions.
 3. The intended purpose can be filled in as "Employment-no resale"
 4. You will be asked to acknowledge the Fair Credit Reporting Act information.
 5. The next screen will ask for specific information such as name, social security number, and other personal attributes.
 6. After filling out personal information, you will be asked to confirm your order and purchase.
 - The IU package should already be set, with a base rate of \$18.00*
 - The counties from which records will be pulled are also displayed.
 - Please note some counties charge additional fees to process a check. Any questions relating to the fees in which counties are charged or those charges should be directed to backgroundchecks.com. The contact information is located at the bottom of the registration page.
1. By accepting the terms and conditions and selecting “purchase”, you will be asked for your credit card information to complete the check.
 2. Background checks normally take a couple of days to process, but may take longer depending on how fast counties respond.

Note: You will NOT be notified when the check is complete, you will need to log back in and check the status of the check. Backgroundchecks.com may or may not send you any notifications or a notice of completion after your background check submission.

 - You should monitor you check until the check is assigned a grade according to the categories below. In order to log back in to check on the status go to <http://www.backgroundchecks.com>
 - “Meets IU PIC policy criteria” - This grade indicates a volunteer/student has been approved to work with IU programs and activities that involve children.
 - “Does not meet IU PIC policy criteria” - This grade indicates a volunteer/student has not been approved to work with any IU programs and activities that involve children.
 - "In Process" or "Pending" indicates that the check is still being processed. Checks are not considered complete until they receive one of the two previously mentioned grades.
 - Once a check is complete, you will be able to print a certificate from bgc.com indicating their grade. These certificates should be provided to the department/program in which you will plan to participate.

- If a department/unit will be using the background check for purposes other than programs involving children, a copy of the background check report may also be requested by that department/unit. Or if the requester is using the background check outside of the University, they can request a copy for themselves.

If a person intends to use the report for any other purpose, including nursing students and for student teaching, they will have access to the actual report in which they can share with third parties. The third party can review that information to ensure it meets their standards.

Positive reports will be reviewed by the program director and discussed with the student for implications for progression in the program and RN licensure as well as any impact on clinical placements. If acceptable for progression the student record is noted as 'passed.'

Certain agencies require the School of Nursing to report the findings of a positive criminal background check. The agency has the right to refuse the placement of a student at that agency and this may impair progression through the program. All communications from the School of Nursing to the agency are treated as confidential and any restrictions or changes in clinical placements will be directly communicated to the student by the program director.

STUDENT DRUG SCREENING POLICY

<https://healthscience.iusb.edu/docs/policies/Student%20Drug%20Screening%20Policy.pdf>

CARDIOPULMONARY RESUSCITATION (CPR) REQUIREMENTS

<https://healthscience.iusb.edu/docs/policies/CPR%20Policy.pdf>

All students must have professional-level CPR certification (**Healthcare Provider CPR** through the American Heart Association, or **CPR/AED for the Professional Rescuer** through the American Red Cross) before they will be allowed to participate in clinical experiences. The professional level includes: one- and two man CPR; adult, child and infant CPR; adult, child and infant choking; and use of the AED (automatic external defibrillator). **Heart saver certification is inadequate.**

Courses fill up fast so find and register for a course early. If you have to cancel please notify them (they have a lot of problems with students who register by phone and do not show up— this is considered unprofessional behavior).

Re-certification is required prior to expiration. The American Heart Association certification is valid for a two-year period. However, failure to re-certify prior to the expiration requires that the student complete the entire certification course. A re-certification course will only be accepted if completed prior to the expiration date.

The IU South Bend School of Nursing faculty strongly encourages students to obtain their CPR certification or re-certification through the American Heart Association. It is possible for individuals previously certified through the American Red Cross to be re-certified through the American Heart Association. The American Heart Association

CPR certification is valid for a two-year period.

BLS Healthcare Provider Online Renewal Course

The online BLS Renewal Course provides a review for healthcare professionals who have prior CPR training. This program recognizes that healthcare professionals have knowledge and skills acquired from prior CPR training and years of patient care. ***Be careful, there are online programs which appear to be American Heart but are not—they do not require skills validation. Skills validation by an AHA instructor is required.***

Once you have completed the online portion of the course, you go to an authorized American Heart Association Training Center for the skills validation portion. After you have completed both sections of the course, you will be issued an American Heart Association BLS - Healthcare Provider card.

<http://www.onlineaha.org/>

See page 64 for additional information.

It is your responsibility to locate local programs for CPR Courses/Skills Validation

RN LICENSURE (FOR BSN STUDENTS WHO HOLD A LICENSE)

- A copy of a current RN license is to be on file to enroll in any nursing class
- All RN's must complete and have on file the RN Licensure Affidavit form
- An Indiana RN license is required for any clinical or practicum experience conducted in the State of Indiana.

RN's are held to all regulatory requirements outlined above.

HEALTH INSURANCE

<https://healthscience.iusb.edu/docs/policies/Health%20Insurance%20Policy.pdf>

Indiana University has initiated the following policy for students who are in health related clinical and internship assignments:

Undergraduate and graduate students are responsible for all financial costs of health/medical care related to or resulting from injury or accidents while engaged in course related experiences. These experiences may occur in the classroom, learning laboratory, or practice setting. Therefore, all undergraduate and graduate students are required to carry health insurance while they are enrolled in courses in your major or discipline or study track. Students will not be allowed to participate in major course experience without adequate documentation of current health insurance.

All clinical/internship students are therefore required to submit to the Dwyer College of Health Sciences Advising Office, (NS 416), a copy of your insurance card, detailing current coverage will be collected annually along with other required health documentation and upon admission to the programs.

If you do not currently have health insurance please go to <http://www.healthcare.gov> or go to Indiana's health insurance web site for a list of health care providers <https://www.healthinsurance.org/indiana/>

If you have any questions or concerns please contact the Advising and Student Success Center Office Manager.

BIO-SAFETY POLICY FOR THE VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

(January 16, 2002; Revised April 21, 2003, May 2010)

<https://healthscience.iusb.edu/docs/policies/Bio%20Safety%20Policy.pdf>

Health care workers (HCW) have both a professional and legal obligation to render treatment utilizing the highest standards of infection control available. Strict adherence to the principles and practices of infection control will ensure the standard of care and practice expected by both practitioner and patient.

The Indiana University South Bend Exposure/Infection Control policies and procedures are based on the concept of Standard Precautions and are in compliance with the current recommendations of the United States Public Health Service and Occupational Safety and Health Administration. Standard Precautions refers to an approach to infection control that assumes all human blood and other potentially infectious materials (OPIM's) of all patients are potentially infectious with HIV, HBV, or other bloodborne pathogens. Standard Precautions are intended to prevent healthcare workers from parenteral, mucous membrane and non-intact skin exposure to bloodborne pathogens while carrying out the tasks associated with their occupation.

SECTION I: Objectives for the Delivery of Care

Infectious Diseases: The College of Health Sciences has the obligation to maintain standards of healthcare and professionalism that are consistent with the public's expectations of the health professions. The following principles should be reflected in the education, research, and patient care divisions for all healthcare workers, students, faculty and staff:

1. All healthcare workers are ethically obligated to provide competent patient care with compassion and respect for human dignity.
2. No healthcare workers may ethically refuse to treat a patient whose condition is within their realm of competence solely because the patient is at risk of contracting, or has, an infectious disease, such as human immunodeficiency virus (HIV) infection, acquired immunodeficiency syndrome (AIDS), hepatitis B infection, or other similar diseases. These patients must not be subjected to discrimination.
3. All healthcare workers are ethically obligated to respect the rights of privacy and confidentiality of patients with infectious diseases.

Healthcare workers who pose a risk of transmitting an infectious agent should consult with appropriate healthcare professionals to determine whether continuing to provide professional services represents any material risk to the patient, and if so, should not engage in any professional activity that would create a risk of transmission of the disease to others.

SECTION II: Guidelines for the admission and progression of students who are HIV or HBV positive

Policy:

Qualified individuals will not be denied admission into courses in the College of Health Sciences on the basis of HIV or HBV status.

Guidelines

1. Upon voluntary report of HIV or HBV infection by a student to any faculty member, administrator, or dean, efforts will be made to:
 - a. Maintain confidentiality of the infection information.
 - b. Advise the student to receive appropriate treatment and counseling from a qualified healthcare professional.
 - c. Reinforce the consistent use of Standard Precautions in clinical practice.
 - d. Assign responsibilities to the infected student that do not require the performance of exposure- prone invasive procedures (as outlined by the affiliated agency or office).
2. Any modifications in clinical activity will be determined by a Bloodborne Pathogen (BBP) Expert Review Panel who will take into account the nature of the clinical activity, the technical expertise of the infected student, the risks imposed by HIV or HBV carriage, functional disabilities, and the transmissibility of simultaneously carried infectious agents.
3. Refusal for admission to a clinical course will occur only after attempts to make reasonable accommodations result in undue hardship to the College of Health Sciences.

SECTION III: Guidelines for the Bloodborne Pathogen-Infected Healthcare Worker

Currently available data provide no basis for recommendations to restrict the practice of healthcare workers infected with HIV or HBV who perform invasive procedures not identified as exposure- prone, provided that Standard Precautions are adhered to in practice.

In order to reduce, to the greatest extent currently possible, the potential for transmission of bloodborne pathogens from the BBP-infected HCW to a patient, and to support the HCW's efforts to practice safely, the College of Health Sciences has adopted the following guidelines.

1. All activities related to patient care by students of Indiana University South Bend will be carried out in accordance with the College's **Bio-safety Policies**. The policies and procedures in this document are based upon Standard Precautions currently practiced by the faculty, staff and students in the Indiana University South Bend College of Health Sciences and are consistent with United States Public Health Service, Indiana State Department of Health and the Indiana Occupational Health and Safety regulations.
2. All HCW's who provide direct patient care (including faculty, staff and students) are encouraged to undergo voluntary HIV testing and to know their hepatitis B virus (HBV) immune status. HIV testing is not mandatory.
3. Any HCW involved in clinical practice that believes that he/she may be at risk of HIV or HBV infection should be voluntarily tested for confirmation.
4. Upon voluntary report of HIV or HBV infection by students, faculty or staff to their unit director or Dean of the College of Health Sciences, efforts will be made to:
 - a. Maintain infection information confidential.
 - b. Advise the student to receive appropriate treatment and counseling from a qualified healthcare professional.
 - c. Reinforce the consistent use of Standard Precautions in clinical practice.
 - d. Assign responsibilities to the infected student that do not require the performance of exposure-prone invasive procedures.
5. When a HCW who provides direct patient care is infected with a BBP and informs the administration, the Dean of the College of Health Sciences may refer the case to the BBP Expert Review Panel for review and recommendation.

The BBP Expert Panel has the responsibility to:

- Review each case of a BBP-infected HCW and determine if he/she may represent an increased risk for transmission of BBP infection to a patient.
- Make a recommendation to the Dean regarding the suitability of any BBP-infected HWC to continue to fulfill his/her clinical responsibilities or requirements in a complete

- modified fashion or to have his/her clinical privileges suspended.
- Develop guidelines for use in determining the needs for both temporary and permanent administrative acts including guidelines on patient notification.

The review panel should include experts who represent a balanced perspective. Such experts might include all of the following: a) the HCW's personal physician(s), b) an infectious disease specialist with expertise in the epidemiology of HIV and HBV transmission, c) a health professional with expertise in the procedures performed by the HCW, and d) state or local public health officials(s). If the HCW's practice is institutionally based, the expert review panel might also include a member of the infection- control committee, preferably a hospital epidemiologist.

6. The Dean of the College of Health Sciences will, within a reasonable period of time, consider the above-mentioned recommendation and take appropriate action. This may include continuation of clinical responsibilities at the current level, modification of those responsibilities or suspension of clinical privileges.
7. Prior to receiving the Panel's individual recommendations, the Dean may temporarily suspend or modify privileges based on guidelines developed by the Panel.
8. This protocol is subject to annual review and modification as new knowledge and recommendations from appropriate agencies become available.

SECTION IV: HBV Vaccination Policy

Policy:

Prior to registration in any clinical course and at the student's expense, every full-time or part-time, graduate or undergraduate student of the College of Health Sciences must undergo HBV vaccination and vaccine response evaluation unless the student is shown to be immune, the vaccine is contraindicated for medical reasons, or a declination is signed.

Procedures:

Evidence of receipt of the HBV vaccination and vaccine response, immunity to HBV, or declination will be filed with the student's program director/dean prior to registration in a clinical course. When the vaccine is contraindicated for medical reasons, a declination form must be signed.

Evidence of the receipt of the HBV vaccination series including vaccine response should be in the form of a signed statement from the student's healthcare professional (HCP) and evidence of declination can be submitted on the College of Health Sciences form. Evidence of immunity to HBV, medical risk from the vaccine, or receipt of a booster(s) should be in the form of a signed statement from the healthcare provider.

Students who have completed the HBV series prior to entry into any clinical course are governed by the CDC guideline on vaccine response evaluation.

CDC Guidelines for Nonresponders

HCW should be tested for antibody to HBsAg (anti-HB's) 1 to 2 months after completion of the 3-dose vaccination series (CDC Immunization 1997).

Persons who do not respond to the primary vaccine series should complete a second 3-dose vaccine series or be evaluated to determine if they are HBsAg-positive. Revaccinated persons should be retested at the completion of the second vaccine series. People who prove to be HBsAg-positive should be counseled regarding how to prevent HBV transmission to others and regarding the need for medical evaluation. Nonresponders to vaccination who are HBsAg negative should be considered susceptible to HBV infection and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probably parenteral exposure to HBsAg positive blood.

Declination Form should be stated as follows (source: FR Doc. 91-28886, December 6, 1991):

I understand that, due to my occupational exposure to blood or other potentially infectious materials as a student in a healthcare program, I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with the hepatitis B vaccine at my own expense. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupation exposures to blood or other potentially infectious materials and I want to be vaccinated with the hepatitis B vaccine, I can receive the vaccination series at my own expense.

SECTION V: Post-exposure Evaluation and Follow-up

Policy:

Any student occupationally exposed to blood or other potentially infectious material while performing in the healthcare program, will be counseled by a HCP as soon as possible after exposure and provided preventive treatment and counseling, as appropriate, at the student's expense.

Procedures:

1. Immediate Procedures
 - a. Cleanse the wound with soap and water, and apply protective covering.
 - b. Flush mucous membranes with water.
 - c. Report incident to supervisor.
2. When there is an occupational exposure to blood or other potentially infectious material while performing as a healthcare program student, the student should be counseled to be evaluated by a HCP as soon as possible after exposure and no later than within the first 24 hours after exposure.

HCP should be provided an incident report, past information on student's hepatitis B vaccination and any past exposure incidents.

3. The HCP will determine whether treatment is indicated and develop plans for post-exposure follow-up, if indicated.
 - a. Evaluation and treatment information will be discussed by the HCP with the exposed student.
 - b. A record of this evaluation and treatment information will be retained by the HCP and is confidential unless written permission is granted by the exposed student for release of the information.
 - c. Expenses for post-exposure evaluation and follow-up for the exposed student will be the responsibility of the student.

SECTION VI: Latex Allergies Policy

Policy:

Students with latex allergies must have documentation from a primary care provider in order to be provided accommodations. Those who experience symptoms that may indicate a latex allergy should complete an accident/exposure report form of the affiliated agency/program.

Procedures:

- Students with latex sensitivity will have documentation of the sensitivity placed on file with the student's program director/dean prior to registration in a clinical course. Documentation of the sensitivity should be in the form of a signed statement from the student's healthcare professional (HCP).
- Students should notify each clinical faculty for accommodations. Students will be asked to follow the specific guidelines/procedures of the clinical agency where they are assigned.

Information: Latex allergies involve any physical reaction from the exposure to latex products (including rubber products). The symptoms may range from localized skin reactions to non-localized reactions. Symptoms may include any of the follow:

- Contact dermatitis (skin reactions) including dry, crusting, thickening, or peeling skin, scabbing sores, swelling and raised areas of skin that may be pink or blanched (white).
- Non-localized reactions such as the development of hives over parts of the body that did not come into contact with the latex, tearing, itchy eyes, swelling of the eyelids, lips or face, runny nose, cough, or wheezing.
- Increased symptoms of a non-localized reaction may include nausea, abdominal cramps, difficulty breathing, rapid heart rate, sudden decrease in blood pressure, and shock.

Anyone has the potential to be latex sensitive. However, the following seem to have an increased risk of being latex sensitive:

- Anyone who is frequently exposed to latex products, such as healthcare workers or persons with a history of several surgical or urological procedures.
- Persons with chronic conditions requiring continuous or intermittent catheterization.
- Persons with Myelomeningocele or Meningocele.
- Persons with a history of allergies, asthma or allergies to avocados, bananas, chestnuts, kiwi, and other tropical fruits are at particularly high risk for a latex allergy.
- Persons with a history of reactions to latex products (balloons, condoms, gloves).
- Those who are female gender--75% with allergy are female.

Many people believe that they are allergic to powder because they have experienced problems (coughing, wheezing, skin reactions) when they are around powdered latex gloves. It is actually the latex proteins carried by the powder through the air that cause reactions in most people. Once a person has developed a latex sensitivity of any form, it is impossible to predict if the allergy will continue to produce only localized symptoms or if a more serious reaction may occur at a later date.

Bloodborne Pathogens In-Service: Annual In-Service Training and Education On Bloodborne Pathogens: Requirement For Nursing Students

<https://healthscience.iusb.edu/docs/policies/Bloodborne%20Pathogen%20Policy.pdf>

<https://expand.iu.edu/browse/e-training/ehs/courses/bloodborne-pathogens-2019>

Immunization Information

<https://healthscience.iusb.edu/docs/policies/Immunizations%20Policy.pdf>

It is imperative that students have required immunizations prior to entering the clinical portion of the program because of direct patient contact during the clinical experiences. IU South Bend School of Nursing adheres to the CDC recommended adult immunizations for all healthcare workers. Due to epidemiological changes, requirements may change abruptly and those involved in clinical will need to meet the requirements. The student's primary care provider on the immunization record form must properly record the appropriate information. Students will not be allowed in the clinical areas unless all information is up-to-date and on file with the School of Nursing. **Due dates for all immunization and criminal check information are October 15, for students admitted to the Fall semester (will begin clinical in Spring); and July 15, for students admitted Spring semester (and will begin clinical in Fall).** Students are requested to make a copy of all submitted documentation for their personal files.

THE SCHOOL OF NURSING WILL NOT PROVIDE COPIES FOR PERSONAL OR EMPLOYER REQUESTS.

The following immunizations/tests are required for entrance into clinical sites:

Tetanus Diphtheria (Tetanus/Diphtheria/Acellular Pertussis Tdap)

All students must be immunized. Immunizations must be current within the past 10 years. If it is more than 10 years it is recommended that you receive Tdap for adults. In fall of 2005, FDA approved Tdap for adults due recent increases in pertussis outbreak among adults. The updated Tetanus/Pertussis policy states the following:

- The Advisory Committee on Immunization Practices (ACIP) has issued guidelines for tetanus toxoid, reduced diphtheria toxoid and acellular pertussis (Tdap) vaccine (Adacel) for adults. ACIP voted to recommend routine use of Tdap among adults aged 19-64 years.
- Healthcare personnel who have direct patient contact working in hospitals or ambulatory care settings should receive a single dose of Tdap as soon as possible if they have not previously received Tdap. The guidelines recommend an interval as short as 2 years from the last dose of Tdap, but shorter intervals may be used.

Nursing students shall receive this new booster vaccine prior to entering the 6th semester (or 8th semester students working with children, especially infants) if they have been immunized in the last two years. These students may receive this booster even if they had a tetanus booster less than two years ago. It is recommended that all nursing students have their tetanus updated with this booster as soon as possible.

Measles Mumps Rubella

CDC for healthcare workers is 2 doses of MMR for all healthcare workers unless born prior to 1957 (June 1, 2006).

Rubella (3 days)

2 doses of MMR or 2 doses of ProQuad or Rubella titer of 1.10 is required.

Rubeloa (Measles 10 days)

2 doses of MMR after their first birthday or 2 doses of ProQuad or Rubeola titer of 1.11 is required.

Mumps

2 doses of MMR or 2 doses of ProQuad or Mumps titer of 1.10 is required.

Varicella (Chicken Pox)

Those who have had the disease may submit a written statement. If a student has not had the disease but requires vaccines will need 2 doses of varicella or 2 doses of ProQuad or Varicella titer of 1.10.

Tuberculosis

All students must have a tuberculin skin test (TST) upon admission (a PPD tuberculin skin test; a Tine or Heaf test are not acceptable) to determine if they have been infected with M. tuberculosis.

Testing will also be required upon exposure or travel to high risk areas. Some community health placements and area agencies may require more frequent PPD documentation – you will be notified if you are affected.

If you have a newly positive reaction to the skin test (called a conversion), a chest x-ray is required and results recorded on the immunization care. Your patient care provider should indicate what treatment, if any, has been prescribed for you as a result of a positive skin test or chest x-ray.

Students with a history of conversion or a positive skin test and a recent negative for TB chest x-ray should be evaluated and may be able to complete the TB Questionnaire instead of a PPD Documentation of evaluation from the health care provider is required.

Any **international student or student** whose country of origin where TB is considered endemic must be tested at the IU South Bend Health and Wellness Center. Those testing positive will be required to have a blood test confirming their TB status.

Anyone testing positive for tuberculosis will require treatment.

IU South Bend School of Nursing generally follows ACHA guidelines:

ACHA is pleased to announce and release its most recent updated ACHA Guidelines, "Tuberculosis Screening and Targeted Testing of College and University Students." The Guidelines Statement can be found at

<http://www.acha.org/topics/tb.cfm>

These updated Guidelines include TB Screening and Risk Assessment Appendices. Accordingly, those changes have been incorporated into another of our ACHA Guidelines, "Recommendations for Institutional Pre-matriculation Immunizations" (RIPI) under Part II. K, of the Sample Immunization Record. The updated RIPI can be found at the above link.

ACHA provides several other position statements and recommendations. All are available to download in pdf format at http://www.acha.org/Publications/Guidelines_WhitePapers.cfm

Hepatitis B Immunization

All healthcare providers with regular exposure to blood products are required by the Occupational Safety and Health Administration, Department of Labor to have the Hepatitis B vaccinations. Consistent with this requirement, the Hepatitis B vaccination is required for students in the Indiana University School of Nursing. The series must be initiated by the immunization deadline. Evidence of the first vaccination must be in your record in the School of Nursing by that time. The second vaccination is due 1-2 months after the first vaccination. The third vaccination is due 4-6 months after the first vaccination.

Students who currently work in a health care setting may want to contact their employer regarding arrangements to receive their vaccination. You may also contact the St. Joseph County Health Department for vaccination information. The IUSB Health & Wellness Center also offers the vaccines at a reasonable cost.

Flu Shots

The CDC has identified Healthcare Workers in the high risk category in prioritizing who should receive the vaccine; therefore the School of Nursing requires all students receive their annual immunization against the flu. Many clinical agencies require this of their employees to reduce the spread of this illness. If an unvaccinated student nurse is exposed to a patient with the flu, the student may be removed from clinicals and required to begin treatment against the flu. The absence must be made up according to the make-up policy. The student is responsible for the costs related to the treatment against the flu.

Additions

Due to frequent changes in the national standards and recommendations for adult immunizations, it may be necessary for the Vera Z. Dwyer College of Health Sciences to request additional documentation beyond what is listed here prior to clinical admission. Students will be notified if they are affected, and it is the responsibility of the student to provide this information prior to the deadline.

Chapter IV

Progression Policies

PROBLEM ASSESSMENTS AND LEARNING CONTRACTS

<https://healthscience.iusb.edu/docs/policies/Problem%20Assessments%20and%20Learning%20Contracts.pdf>

Faculty members use the Problem Area Assessment Form to identify specific problems a student may be facing in their course(s).

IUSB School of Nursing—Problem Area Assessment Form

Student Name _____ Course _____ Sem./Yr. _____

Problem Areas		Comments
Behavior		
Accountability		
Late Assignments		
Tardiness		
Absenteeism		
Incomplete assignments		
Professional Behavior		
Attitude		
Language		
Lack of preparation		
Difficulty following appropriate chain of command		
Inappropriate dress		
Failure to follow uniform policy		
Difficulty functioning independently		
Difficulty controlling anxiety		
Difficulty accepting constructive criticism		
Communication		
Inappropriate interaction		
Lacks assertiveness		
Difficulty expressing self		
Inappropriate/incomplete documentation		
Difficulty with written work		
Difficulty following directions		
Critical Thinking		
Difficulty applying previously learned knowledge and skills		
Difficulty problem solving		
Difficulty assessing client needs		
Difficulty evaluating self realistically		
Difficulty demonstrating logical thought processes		
Difficulty evaluating consequences of own actions		

Faculty signature _____ Date _____

I have read and understand the identified problem areas. I also understand that this information will be placed in a confidential file for the purpose of tracking my progress throughout the remainder of the program.

Repeated receipt of this form by a student may lead to a learning contract or other consequences.

Student signature _____ Date _____

LEARNING CONTRACTS

<https://healthscience.iusb.edu/docs/policies/Problem%20Assessments%20and%20Learning%20Contracts.pdf>

Learning contracts are designed to help students succeed in a course when the student has been experiencing difficulties. It is not intended to be punitive but it is a serious effort to identify ways to avoid failure in a clinical. A learning contract will include competencies not being achieved, description of problem behaviors, goals to achieve in order to be successful in the course, and a mutually developed plan. This plan will include deadlines by which these goals must be achieved. The student is expected to fully participate in developing and implementing the plan for improvement, and to communicate the plan to all relevant faculty members as long as the contract is in effect. If a student is unable to meet the terms of their learning contract, it may become grounds for failure of the course or dismissal from the program.

COMMUNICATION

<https://healthscience.iusb.edu/docs/policies/Communication%20Policy%20Draft.pdf>

USE OF TECHNOLOGY

<https://healthscience.iusb.edu/docs/policies/Technology%20Policy%20Draft.pdf>

PLAGIARISM

<https://healthscience.iusb.edu/docs/policies/Plagiarism%20Policy.pdf>

ATTENDANCE AND PROFESSIONAL BEHAVIOR

<https://healthscience.iusb.edu/docs/policies/Attendance%20and%20Professional%20Behavior%20Policy-2.pdf>

DIMISSAL

<https://healthscience.iusb.edu/docs/policies/Dismissal%20Policy.pdf>

WITHDRAWAL

<https://healthscience.iusb.edu/docs/policies/Withdrawal%20and%20Late%20Withdrawal%20Appeal%20Policy.pdf>

REINSTATEMENT

<https://healthscience.iusb.edu/docs/policies/Reinstatement%20Process.pdf>

54

CRITICAL BEHAVIORS

<https://healthscience.iusb.edu/docs/policies/Critical%20Behaviors%20Policy.pdf>

VOLUNTEERING

<https://healthscience.iusb.edu/docs/policies/Volunteering%20as%20a%20Representative%20of%20IU%20South%20Bend%20College%20of%20Health%20Sciences.pdf>

CONFIDENTIALITY

<https://healthscience.iusb.edu/docs/policies/Confidentiality%20Policy.pdf>

WRITING EXPECTATIONS

<https://healthscience.iusb.edu/docs/policies/Writing%20Expectations%20Policy%20Draft.pdf>

RELIGIOUS ACCOMMODATION

<https://healthscience.iusb.edu/docs/policies/Religious%20Accomodations%20Policy.pdf>

SEXUAL MISCONDUCT (TITLE IX)

What you should know about sexual misconduct: IU South Bend does not tolerate acts of sexual misconduct, including sexual violence. If you have experienced sexual violence, or know someone who has, the University can help. It is important to understand that federal regulations and University policy require faculty to immediately report complaints of sexual misconduct known to them to the IU South Bend Deputy Title IX Coordinator to ensure that appropriate measures are taken and resources are made available. IU South Bend will work with you to protect your privacy by sharing information with only those that have a legitimate administrative or legal reason to know. If you are seeking help and would like to speak to someone confidentially, you can make an appointment with a Mental Health Counselor on campus through the Student Counseling Center. Find more information about sexual violence, including campus and community resources, at <http://stopsexualviolence.iu.edu>.

Chapter IV

BSN Specific Policies

Attendance and Professionalism

COURSE ATTENDANCE

1. Students are expected to attend all lectures and are held responsible for content presented. In case of absence, it is the student's responsibility to obtain the information presented from another classmate.
2. Attendance is monitored at the discretion of the instructor and will be taken into consideration when final grades are calculated.
3. All classes canceled due to snow or other unforeseen events will be rescheduled, if possible, or material will be made available.
4. When offered, students are responsible for attending scheduled examination hand-back sessions for review of their examinations. If unable to attend, arrangements must be made with faculty before the hand-back session.

CLINICAL COURSE ATTENDANCE

Clinical hours are carefully calculated to meet Indiana State Board of Nursing and Accreditation requirements. Break and lunch times are included in the posted hours when appropriate (usually for a session lasting more than three hours). Published hours can and do vary according to the clinical experience or rotation. Patient demands may require that a student stay in the setting for additional time, which will not be compensated.

In general, per semester or course, a two credit hour clinical/lab course will have at least 75 hours of documented patient care or lab time and a three credit hour clinical course will require at least 112 hours and 30 minutes. A one credit hour clinical/lab course will require 37 hours and 30 minutes of direct patient or lab work. Orientation, pre and post conferences, service work and non-lecture course educational experiences can be included in these hours.

CLINICAL ETIQUETTE

- Faculty need to have current information on how to reach each student during or following each clinical day. Often documentation, medication administration or procedures assigned to the patient are (apparently) omitted, and the agency will attempt to contact the faculty or student for clarification. The faculty member needs to be able to contact the student.
- A clinical agency needs to have a current phone number on file for each student; the schools provide this and thus, please inform the School of Nursing of any changes in your contact information.
- Often the school or agency is contacted when the student has an emergency. The school has a close record of the student's whereabouts and will contact the faculty with the student in order to get them the message.
- It is unprofessional and unacceptable to use the clinical agency telephones or computers for personal calls/contacts. Using a unit/agency telephone should be reserved for emergencies only.
- Most clinical agencies prohibit the use of personal cell phones. Breaching these policies will be considered unprofessional and may jeopardize completion of your clinical.

- All clinical agencies have designated parking privileges for student nurses. **Parking policies are strictly enforced.** All agencies prohibit students from parking in the visitors parking areas. Failure to adhere to policy jeopardizes parking privileges for all students.

CLASSROOM ETIQUETTE

- In order to maintain a respectful environment, collegial behavior is required. Students who do not demonstrate professional, collegial behavior will be asked to leave the classroom and must meet with the instructor prior to the next class session. Any student who continues to demonstrate intimidating and/or disruptive behavior that interferes with a respectful environment conducive to learning may not be permitted to return to the classroom and will be referred to the Admission, Progression, and Graduation Board of the IU South Bend School of Nursing for action and or the Indiana University South Bend Office of Student Conduct.
- Following IU South Bend policy, children are not permitted in the classroom, lab or clinical setting at any time.
- Lecture content is presented beyond reading assignments and not all reading assignments are covered in the lecture—please plan accordingly when studying.
- As a courtesy, students are to request permission of the instructor conducting the class to tape/digitally record the class.
- All handouts and test questions are considered to be the intellectual property of the course instructor. Students are prohibited from posting and/or sharing handouts or test questions with other students. Sharing test questions with other students is considered as cheating and will be dealt with according to IU South Bend policy.
- Often PowerPoint handouts are provided for each lecture on Canvas. It is not mandatory for students to print out the handouts, which are provided as a courtesy to students. Students should be prepared to take detailed notes. These handouts are intended as a tool for students and should not be distributed for uses beyond the class note-taking

LAB & SIMULATION RULES:

- Children are not allowed in the labs at any time
- Clean up after your practice or lab time, returning the lab to the state you found it in
- Sign in for practice time
- Expensive, high tech equipment is in the labs and should be cared for appropriately; assure that the doors are closed if you are the last one to leave
- Simulation sessions are treated as clinicals are and require expected professional behavior
- If you do not know how to use the equipment, please seek assistance
- Simulations provide essential learning (or evaluation) and are to be taken seriously including any assigned preparation.
- Inappropriate use of the lab and equipment can result in disciplinary action

SCHEDULES & NURSING CLINICAL COURSES (BSN)

Clinical nursing experiences are designed to provide students with the best possible learning experiences. In order to achieve this it is often necessary to make changes from the published schedule as the clinical rotation nears. Every effort by the School of Nursing is made to keep these changes to a minimum and to notify students as soon as the changes are known. In general, it is best to keep the following in mind:

- Clinical courses are arranged between the times of 6:00 a.m. and 11:00 p.m. on any day of the week. Students must be available for assignments between these hours.
- A one-credit-hour clinical course meets for three hours a week, a two-credit-hour clinical course meets for six hours a week, and a three-credit-hour clinical course meets for nine hours a week. These hours are often adjusted to accommodate the clinical agencies' hours and flow of care.
- Some clinical courses are scheduled based on the total number of hours required for the semester, and therefore schedules may reflect a more concentrated presentation of hours.
- The times are subject to change on a week-by-week basis, as dictated by the learning experience.
- Students should be aware that they may be required to collect patient care data at the hospital or agency prior to the assigned clinical day. The time of which you will go collect data may vary with clinical sites and faculty expectations but is usually after 3:00 p.m.

Clinical sites are located throughout the South Bend region and can typically include agencies in St. Joseph, Elkhart, Marshall, and La Porte counties in Indiana, and Berrien County in Michigan.

Each semester's clinical rotation schedules vary. Within a given semester different rotations may be offered but each schedule meets course clinical hour requirements.

Students should have reliable transportation, budget costs of travel and plan their time to accommodate expected travel times, including travel during inclement weather.

- Certain clinical courses require travel between agencies and homes of clients. Being familiar with a community is highly recommended.
- Travel liability to and from clinical, assignment and community activities sites are the sole responsibility of the student. IU South Bend does not provide travel liability insurance. Such travel has inherent risks and these risks are accepted by the student.
- Clinical group sizes need to be as uniform as possible to provide students with the best learning and supervision possible. It is possible that students will be switched between clinical sections after registration in order to achieve this equity.

APPEARANCE CODE

The Appearance Code provides IU South Bend SON students with information necessary to select on-duty attire and accessories which are compatible with professionalism, infection control, employee identification, neatness, and modesty. If attire is unacceptable to the clinical instructor or preceptor, the student may be sent home and will have to make up clinical time at their expense.

Attire must be clean, unstained, and ironed. The attire fabric should be of sufficient thickness so undergarments do not show through. Good judgment should be exercised in selecting the appropriate size of the clothing so that it is not low cut at the neck or tight across the chest and hips.

BSN: Nursing students are required to wear a regulation IU South Bend School of Nursing scrub student nursing uniform, inclusive of the embroidered IU South Bend Nursing logo. Uniforms must be purchased from the designated vendor. IU South Bend student identification will be required to purchase the scrubs.

Article I: General Guidelines

- Tight fitting attire is not appropriate. Discreet underwear which is not readily visible through clothing is to be worn. At no time should undergarments be visible.
- Fingernails must be neatly trimmed and clean. Nail polish, if worn, must be neutral or pastel in color and without chipping. **No artificial nails may be worn by those providing direct patient care.**
- Hair and beards must be clean and neatly groomed. If hair falls below shoulder length, it must be pulled back.
- **Tattoos** are to be covered with clothing (long sleeves, turtle necks) or make-up (ex. Neutrogena Tattoo make-up). Bandages draw more attention to an area and therefore are not acceptable means of coverage.
- Only two earrings per ear are permitted. Post earrings only, no dangling earrings for safety reasons. All other visible body piercings (face, mouth, tongue, ear gauges, etc.) must be removed. If the piercing cannot be removed due to medical reasons (rapid closure), then a flat/flesh colored stud may be applied.
- Good personal hygiene is expected.
- Smelling of tobacco smoke is prohibited; it is not acceptable to leave patient care areas to smoke. Area hospitals are smoke free environments and these policies are strictly enforced for nursing students.
- Light cologne, simple make-up, and a watch and/or ring may be worn. All jewelry should be simple, inconspicuous and kept to a minimum. One ring per hand is permissible.
- Patient gowns or isolation gowns are not acceptable as a cover-up for your uniform except when working in isolation or other restricted areas.
- Gum chewing is prohibited in direct patient/client care areas and roles

Article II: Lab Coats

White lab coats are required to be worn when the student is at the clinical site other than on scheduled clinical days, i.e. to select a patient and/or review patient information. Lab coats must be at least mid-thigh in length and have a collar. An IUSB School of Nursing Patch can be purchased from the bookstore and affixed to the left upper sleeve; another option is the approved embroidery as with the scrub tops. The official name tag must be worn on the lab coat.



Attire under lab coat needs to be professional, modest, and tasteful. Metal fabrics (sequins, beads...), shorts, jeans, sweats are not acceptable. Slacks must be ankle length. Stockings or socks must be worn in patient care areas according to state regulations. No open-toe shoes may be worn. Denim fabric is not considered acceptable business attire.

Article III: Shoes

Shoes need to be purchased for the exclusive use of clinicals and are ideally only for clinicals. Shoes must be nearly completely white or black and made of leather or impermeable materials (small amount of trim is acceptable). Aerobic shoes are acceptable if they are made of leather. White canvas, cotton, or nylon shoes are unacceptable. White or black shoelaces are required. Shoes must

be clean, quiet, safe and comfortable. No open-toe shoes or clogs may be worn. Appropriate white stockings or socks must be worn at all times. "Croc"-type footwear is permitted by most agencies as long as it has a heel strap and does not have holes but we do not recommend them.

Article IV: Professional Wear for Volunteer Activities

When assisting with health programs and assignments outside traditional clinical settings (health fairs, flu shot/immunization programs, ceremonies, volunteer efforts connected to the school, etc.) please check with the instructor or coordinator of the program for appropriate attire. Unless otherwise directed, either the school uniform or the guidelines for professional wear described under "lab coats" are to be followed. Also, see "other" for additional appearance requirements, which are extended, to any setting where the student is representing the School of Nursing. It is expected that student nurses acting in a professional capacity dress and behave in a professional manner at all times. The school of nursing student nametag is to be worn for these activities regardless of attire.

Article V: Picture ID

A valid IU South Bend picture ID or valid driver's license must be carried with the student at all times. Certain agencies may require displaying of your identification as part of your uniform.

Article VI: Name Pin

An IU South Bend School of Nursing name pin is required to be worn and visible at all times on clinical units. Name pins must be worn when participating in a professional setting; selecting patients at a hospital; volunteering for community health programs; and as designated by the faculty in certain clinical settings. Certain labs may also require you to wear your name pin.

Name pins are ordered directly from PAC in Mishawaka; order forms can be obtained from Student Services (we recommend the purchase of two).

Some agencies require additional badges issued by them to be worn. These typically must be turned in upon completion of the clinical and failure to do so will result in an incomplete in the course.

Some agencies require the display of a picture ID. Therefore students should have an IU South Bend ID card for this purpose.

Article VII: Appearance Other

Attire must be well fitting, clean, unstained, and ironed. Good judgment should be exercised in selecting the appropriate size of the scrubs so that it is not low cut at the neck or tight across the chest and hips. Follow guidelines for laundering colorfast clothes. Students should launder the red scrub uniform prior to wearing it for the first time. The scrubs have been known to "bleed" and require colorfastness preparation to avoid an unprofessional appearance in the clinical setting. In general we recommend not washing the red scrubs with whites.

It is encouraged that students have two sets of scrubs that are washed after each wear. If arrangements can be made, scrubs should not be worn outside of the hospital setting to prevent nosocomial infections.

Uniform accommodations may be requested for religious needs or pregnancy. Contact the Director of Undergraduate Programs.

PERFORMANCE

CLINICAL MAKE-UP POLICY AND GUIDELINES

Indiana University South Bend School of Nursing Policy: *All clinical time is mandatory. All clinical absences must be made up.*

Guidelines:

- The student must be making satisfactory progress towards all course competencies before make-up can be offered.
- Clinical time includes all required experiences, pre/post conferences and observations outlined by the faculty.
- Tardiness and early departures will be noted and counted towards missed time.
- Faculty and course coordinators have the right to determine the nature of the experience that will make up the time missed.
- Students should not work night shifts (10 or 11pm to 6 or 7am) before a clinical day- this is considered unsafe and not optimal for learning.

*No more than 20% of any clinical time can be missed; missing more than 20% will result in course failure (or withdrawal if extenuating circumstances can be documented).

*Missed time is cumulative and cannot be repeatedly made up (that is if a student makes up the 20% of missed time and then has to miss again, additional time for make-up will not be awarded.)

What to do if you have to be absent or tardy:

You should not come to clinical if symptomatic with a fever, cold or flu. Most agencies do not allow students or employees with an open cold sore (Herpes) in patient care areas. Patients are often immunocompromised and cannot afford this exposure.

If you should become ill and are unable to come to the facility, it is your responsibility to notify both the instructor **and the facility**, before the start of the clinical day, so that your patient can be reassigned to another person. Failure to do this will be viewed as unprofessional behavior.

Do not call the instructor after 10 p.m. or before 5 a.m. unless it is a dire emergency. All office phone messaging services are date and time stamped. **If you cannot call the faculty or the agency, call the School of Nursing at 574-520-4382 and leave a message including how the faculty member will be able to reach you.**

You are required to be on the hospital unit at the time assigned. If you are going to be late, it is essential that you notify both the instructor and the hospital unit. Failure to do this will be viewed as unprofessional behavior. Clinical faculty should know how to reach you and when to expect your arrival. Chronic tardiness will result in the issuance of a learning contract. Such a contract will be forwarded to all co-clinical course faculty and future clinical faculty.

A student must always notify the faculty member and/or the nurse in charge of a patient if the student leaves the unit or agency for any unscheduled reason.

Students in community-based agencies should page or call the faculty member's cell phone, as directed, if a change in schedule is experienced.

You are expected to turn in written clinical assignments when they are due. Papers submitted late without notification of instructor will not be accepted. Consistently late papers can lead to failure in the course.

Students who are dressed inappropriately can be sent home and the missed time will be made up.

Students impaired in any way (including signs of sleep deprivation from working nights) will be sent or escorted home. See Essential Abilities Statement. Alcohol and drug impairment can result in dismissal; faculty can request testing at the student's cost if the faculty or staff of the agency identify behaviors or signs consistent with impairment.)

Inclement Weather: make-up time for clinicals cancelled or delayed due to weather is determined and set by the individual faculty. All weather-related inquiries should be made directly with your clinical faculty member.

Summary of Critical Behaviors:

Breach of the following critical behaviors can lead to course failure and/or appropriate academic and disciplinary actions.

5. Breach of client confidentiality.
6. Untruthfulness or misrepresentation of facts.
7. Cheating, including plagiarism.
8. Lack of professional attire and demeanor at any time in the clinical area.
9. Lack of prompt notification of appropriate persons when errors occur in the clinical area.
10. Consistent tardiness without notification of appropriate faculty and the clinical area.
11. Repeated lack of knowledge or inability to transfer knowledge from pre-requisite courses to current clinical situations.
12. Consistent demonstration of lack of respect for human dignity and the uniqueness of the client unrestricted by consideration of social or economic status, personal attributes or the nature of the health problem.

Skills Validation Policy

Adopted 5/8/95, revised 2/2004, 5/2011, March 2015

Students who have interrupted their studies for longer than one semester will be required to demonstrate validation of clinical skills to reenter the clinical courses by successfully enrolling in and completing the course NURS K-220 Clinical Skills Overview.

- Interruption of studies can be for any reason including failures, withdrawals, or personal leaves of absence. Interruption is defined as a semester where clinical courses are not taken.
- NURS K-220 will include at a minimum:
 - 1). Medication Math Exam--must be completed with 90% success
 - 2). Psychomotor Skill Exam--demonstration of skills
- Attend a mandatory review session. After completing the session the student is expected to practice at least 4 hours before testing will be scheduled.
- In the event that the student fails either exam, it may be repeated one time. This can be the same exam or one that is similar.
 - It is recommended that the student receives remedial assistance (tutoring) before retaking the exam(s)
- Should the student fail the psychomotor skill validation on the second attempt, repeat of the course covering that skill and related content will be required before being considered for progression. APG Board will be notified.
- Should the student fail to achieve 90% on the second math exam attempt, the student will be reviewed by the APG Board.
- The student shall be provided with access to lab resources in order to prepare for the exam.

Student Errors in Patient Care Experiences Policy and Procedure

Policy:

IU South Bend School of Nursing Faculty believe all nursing care experiences further learning by students. In keeping with this belief and the *Just Culture [Outcome Ingenuity™]* concept, IU South Bend School of Nursing faculty promote transparency in reporting errors* or near misses** made during patient care experiences. Students will report errors or near misses immediately to the supervising faculty and the primary nurse caring for the patient. Institutional policies for error reporting will be followed. The supervising faculty will notify the appropriate Program Director of any student error reports filed with the healthcare institution.

Procedure:

The appropriate Program Director, in consultation with the faculty, will determine if referral to APG Board review/MSN Council or Dean is needed. In order to assure that education is not an element in the error, the BSN Program Director may conduct a root cause analysis into the error or near miss separately from the healthcare institution. Should reckless behavior be determined to be a factor, School of Nursing disciplinary processes will be followed. (Accepted by SON Faculty Council September 6, 2013, Rev. October 4, 2013)

**"Error: An act of commission (doing something wrong) or omission (failing to do something right) that reaches the patient and leads to an undesirable outcome or significant potential for such an outcome"(Nursing2015, Just Culture Toolkit, Just Culture Definitions).*

***"Near miss: An act of commission (doing something wrong) or omission (failing to do something right) that DOES NOT reach the patient but has potential to cause harm" (Nursing2015, Just Culture Toolkit, Just Culture Definitions).*

Reference

Nursing2015 (September 7, 2013). Just Culture Definitions. Retrieved from <http://nursing2015.files.wordpress.com/2010/02/just-culture-definitions1.pdf>

Writing Rubric (Guidelines):

The following grading rubric is used for most writing assignments. Faculty assigns points and may add expectations to this standard format.

The following grid (on page 41) explains areas of assessments and criteria:

Indiana University South Bend School of Nursing Writing Rubric

Areas of Assessment		Criteria
Organization (pts)	____ () ____ () ____ () ____ () ____ () ____ ()	An inviting introduction, conclusion leaves a sense of closure Thoughtful transitions Sequencing is logical & effective Pacing is well controlled The title is original Flows smoothly
Voice (pts)	____ () ____ () ____ () ____ ()	The reader feels a strong interaction with the writer The writer takes a risk The tone & voice are appropriate for the purpose & audience Strong commitment to this topic
Conventions (pts)	____ () ____ () ____ () ____ () ____ ()	Spelling is correct Punctuation is accurate Grammar and usage are correct Appropriate use of technical terms Paraphrasing tends to be sound
Presentation (pts)	____ () ____ () ____ () ____ ()	APA format is followed Paraphrased & quoted information is referenced appropriately The title makes it easy to access the desired information Timely completion of assignment
Rubric (pts)	____ ()	Hands in rubric with assignment

The Indiana University *Code of Student Rights, Responsibilities and Conduct* outlines appropriate student academic conduct and proceedings.

MATHEMATICS COMPETENCY

Mathematical competency is required in the practice of nursing. In the Fourth Semester of the program, students are given two opportunities to pass the required math validation as a part of NURS B249, Science & Technology of Nursing Practicum. Students are given two opportunities to achieve a score of 90% or better and pass the math validation. Those who are unsuccessful fail the course. Each semester additional math skills are introduced. Demonstration of math competencies will be assessed each semester.

The School of Nursing faculty recommends self-study using the text, *The Nurse, The Math & The Meds* by Joyce M. Mulholland, to prepare for this math validation. This text is available in the IU South Bend Bookstore. We also have an online math tutorial at www.edgt.com. Register as a new student and use the following access key: S-MM-7304-7574.

Students should concentrate their study on the following areas:

- Basic mathematical computation
- Ratio and proportion or dimensional analysis
- Decimals and fractions
- Metric system
- Converting to another system (Apothecary to Metric)
- Interpreting story problems
- Students may be required to demonstrate progressive math competency as they progress through the curriculum. [See specific clinical semester course requirements.]

Sample Problems

1. The doctor has ordered 35 mg (milligrams) of a medication. The label on the medication reads 50 mg per 1 ml (milliliter). How much will you give?
2. 1 gm (gram) of a medication is ordered. The medication is supplied 15 gr (grains per tablet. How many tablets will you give?
3. Change 100 mg to grams.
4. The patient is discharged with instructions to take 10 ml of a medication. How many tsp. (teaspoons) are in 10 ml?
5. Tylenol gr x is ordered. The label reads 325 mg per tablet. How many tablets will you give?
6. 4 inches = ____ cm (centimeter)
7. 150 lbs (pounds) = ____ Kg (kilograms)
8. The physician orders gr 1/150 of a drug. The label reads 0.4 mg per ml. How much will you give?

Students are encouraged to develop a study plan to meet the math objectives. Students should try to use math skills while in the grocery store by calculating price per pound, ounce, serving, etc. While cooking, look at measuring cups or spoons for metric equivalents. With a ruler convert centimeters to inches.

GROUP WORK EXPECTATIONS

Throughout the program students are expected to work in groups. Nursing is a team based profession and learning to manage and work in groups is an essential skill. The following charts can assist you in practicing best group behavior:

Group Project Grading Rubric as a guide for Group Work

Category	Beginning 1	Developing 2	Accomplished 3	Exemplary 4
Group Cooperation	We did most of the work by ourselves, we talked a little among our group members	We worked together most of the time, sharing information regularly	We worked together so that everyone contributed to the final project	Everyone worked together using his or her abilities and knowledge to make the project come together
Distribution of Group Tasks	Some group members did not complete any of the work	Everyone had a job to do but some jobs were incomplete	We divided up and completed the work equally	Work was shared fairly according to the abilities and interests of the members
Group Leadership	We had no leader so we just did our own thing	No one person was a leader so we usually helped each other get the job done	One or more persons took a leadership role and gave good directions that kept us going	We had a leader who helped us organize and stay on task until the job was complete
Communication among group members	We only talked when we thought we needed to, but received little feedback	We talked about what we were doing	We usually asked each other for help and showed our work to each other	We talked all the time and shared our work for group feedback
Individual Participation	A few people tried very hard, but most didn't do much	Each person did some work and tried to do a fair share	We all seemed to find our place and do what was needed	Everyone did a great job, I would work with these people again
Listening to other points of view	We usually listened to what others were saying but some either did not share ideas or argued	We usually listened to each other and tried to use what they said in the project	We listened while others talked, we learned about different viewpoints, and used some of that information in the project	Everyone listened to each other a lot, and used what we heard to improve our work and the whole project
Showing respect	No one was courteous and opinions were not valued	Some were courteous and some opinions were valued	Most were courteous and most opinions were valued	All were courteous and valued each other's opinions
Rate your experience of this group project	I would rather work alone	I learned that group work can sometimes be helpful	I liked learning this way and would probably try it again	It was a valuable and realistic way to learn. My group was great.

Honest evaluation of individual members performance in a group (include yourself).

Category	Beginning 1	Developing 2	Accomplished 3	Exemplary 4
Source of Conflict	Participated in regular conflict that interfered with group progress. The conflict was discussed outside of the group.	Was the source of conflict within the group? The group sought assistance in resolution from the instructor.	Was minimally involved in either starting or solving conflicts.	Worked to minimize conflict and was effective at solving personal issues within the group.
Assistance	Contributions were insignificant or nonexistent	Contributed some toward the project	Contributed significantly but other members clearly contributed more	Completed an equal share of work and strived to maintain equity throughout the project
Effectiveness	Work performed was ineffective and mostly useless toward the final project	Work performed was incomplete and contributions were less than expected	Work performed was useful and contributed to the final project	Work performed was very useful and contributed significantly to the final project
Attitude	Rarely had a positive attitude toward the group and project	Usually had a positive attitude toward the group and project	Often had a positive attitude toward the group and the project	Always had a positive attitude toward the group and the project
Attendance & Readiness	Rarely attended group meetings, rarely brought needed materials, and was rarely ready to work	Sometimes attended group meetings, sometimes brought needed materials, and was sometimes ready to work	Almost always attended group meetings, almost always brought needed materials, and was almost always ready to work	Always attended group meetings, always brought needed materials, and was always ready to work
Focus on the task	Rarely focused on the task and what needed to be done. Let others do the work.	Focused on the task and what needed to be done some of the time. Other group members sometimes had to nag, prod, and remind to keep this member on task.	Focused on the task and what needed to be done most of the time. Other group members could count on this person most of the time.	Consistently stayed focused on the task and what needed to be done. Other group members could count on this person all of the time.

EVALUATION

GRADING SCALE

All lecture courses in the Indiana University School of Nursing in South Bend utilize the following grading scale in nursing courses. An **attainment of at least a C, or 75%, is required to successfully pass a lecture course**. Grades will not be rounded in lecture courses and extra credit is not allowed. For example, a grade of 74.9% is not rounded to 75% and results in a course failure. Likewise, a score of 89.9% is a B+ and not rounded to 90%. Failure to receive a final grade of "C" will require the student to retake the course.

100-97	A+	89-87	B+	79-77	C+	69-67	D+
96-93	A	86-83	B	76-75	C	66-63	D
92-90	A-	82-80	B-	74-70	C-	62-60	D-
						59 & below	F

The official grade code of Indiana University includes quality points for the purpose of determining the cumulative grade point average. Quality points are assigned as follows:

A+	4.0	B+	3.3	C+	2.3	D+	1.3
A	4.0	B	3.0	C	2.0	D	1.0
A-	3.7	B-	2.7	C-	1.7	D-	0.7
						F	0.0

If a student is unsuccessful in a course, refer to the IU South Bend Bulletin for progression guidelines. It is recommended that the student meet with the faculty member first. Advisors are available to assist students with the procedures. Before repeating a course, it is recommended that the student carefully examine and rectify study/class habits that may have led to difficulties in the course; this may include counseling for text anxiety and time management. Students will be asked to submit a plan for success before repeating a course.

CALCULATING GPA

Your SIS transcript shows your semester and cumulative GPA. You can also use the GPA calculator found at: www.iusb.edu/registrar/gpacalculation.php and <http://registrar.indiana.edu/information/calculator.shtml>

GRADE GRIEVANCES

<https://students.iusb.edu/registrar/grades/grievances.html>

If a student disputes their final course grade, the student must discuss the matter with the faculty member assigning the grade. Further information regarding grade grievances can be found in the current IU South Bend *Bulletin* and *Code of Student Rights, Responsibilities, and Conduct*. Assistance may also be obtained from a Student Services Advisor.

MID-TERM ADVISORY REPORTS

Mid-term advisory reports are issued to students who are having difficulty in a course. In a mid-term advisory report, the faculty member identifies problem areas that need to be addressed in order for the students to be successful in the course. Students who receive a mid-term advisory report are expected to make an appointment to meet with their professor to address the areas of concern and develop a plan for success. If a student has a grade less than C in a didactic course, a mid-term advisory report will be issued.

TEST TAKING AND MAKE-UP

The only acceptable excuses for missing an exam are serious illness or death of a close family member. The student must call or contact the faculty secretary at **(574) 520-4382** or contact the faculty member directly, no later than one hour before the exam is to be given. The student must leave their name and phone number. Failure to notify the secretary or faculty member will result in a "0" for that exam. Faculty will decide on the type of examination to be given to the student who is unable to take the original examination.

1. Examinations will be scheduled, and all students are required to take all examinations.
2. The proctor of the examinations will:
 - Ensure students have logged in properly and received passwords.
 - Give any instructions and corrections verbally prior to commencement of the exam.
 - Write corrections on the chalkboard.
 - Not answer any questions during exam time regarding exam questions nor define any terms.
3. The student(s) taking the examinations will:
 - Arrive at the designated room on time.
 - Be the only persons allowed in the classroom.
 - Leave all books, coats, purses, etc., securely under the desk or area designated by proctor. This policy also applies to exam hand-back sessions. Note taking is not permitted during exam hand-back sessions.
 - Turn cell phones off and place securely in backpack or purse.
 - Remove hats, hoodies, and jackets with large pockets.
 - If calculators are permitted, **only freestanding** pocket calculators are allowed. **Cell phones cannot be used as a calculator.** In computer based exams, calculator is embedded within the software.
 - Refrain from suspicious behaviors such as talking, looking around the room, looking at another student, or glancing at other computer screens.
 - Place yourself in a position or space in the test room to avoid the appearance of cheating. Often seating assignments will be made for exams.
 - Refrain from opening any computer program other than the one to take the exam; this includes e-mail, internet, and cell phones. ExamSoft/Examplify locks down other programs.
 - Your exam will be removed and you will receive a zero "0" if suspected of cheating.
 - Report any misconduct or annoying behavior to the proctor during the exam so appropriate action may be taken.
 - ExamSoft is able to track changes and all access to the exam. Make sure the upload function completed before closing laptop. If provided with a scantron type paper test, accept responsibility for transposing answers from test form to the computer answer sheet. Credit will not be given for any answer erroneously transposed.
 - Place your name and student identification number on the answer sheet and the test booklet when paper is used and return it to the proctor.
4. Make sure your answers are uploaded in ExamSoft.
5. The student will refrain from discussing exam content with class members. Most faculty will provide an opportunity to review exams when all students have taken the exam.
6. Those students coming late will:
 - Wait until all initial directions are given and questions answered.
 - Be given no additional verbal directions.
 - Be given no extension beyond the time allotted for the exam.

7. Questions about test content will not be answered during an exam. If you have some other difficulty, raise your hand and a proctor will come to your seat.

8. Cheating****:

“Honor Code: In accordance with the Honor Code, I will not engage in dishonesty in my academic activities, and I will not tolerate such dishonesty by other students.”

- If you display any of the following behaviors: looking around the room, looking at another computer in a computer lab, looking at another student’s paper, not covering your answer sheet, raising your paper, you will be suspected of cheating, **YOUR PAPER OR COMPUTER WILL BE TAKEN FROM YOU (or your exam blocked on the computer) AND YOU WILL BE GIVEN A “0” FOR THE EXAM.** If you have any problems with the above stated behaviors, you need to move to the front of the room at the beginning of the test session.
- Disclosure of exam material including its nature or content during or after the exam is prohibited and will be considered cheating.
- Faculty has the right to determine if behavior appears to be cheating. The student Code of Conduct is followed for reporting and discipline.
- ExamSoft tracks all activities while in the exam and can report early or unapproved access.
- **Exams are essential measures of competence and knowledge in order to provide safe patient care and cheating is not only prohibited by the university but is considered unsafe behavior in preparation for professional practice.**

9. Accommodations for testing are only provided with written documentation from the Office of Student Disabilities.

- Test anxiety should be addressed with assistance from the Student Counseling Center.
- The only acceptable method to avoid distractions, are ear plugs.

10. Policy for make-up tests is as follows:

- Make-up exams are possible, but are the exception. They may be given for such circumstances as personal illness/injury, hospitalization of student’s own child, or death in the family.
- The prerequisite to this is that the student must call the instructor in advance of the test to explain the absence (illness, for example, unless the student is involved in a traffic accident on the way to the test). Documentation may be required.
- Make-up tests may be the same test or essentially the same test given to the entire class. It should be given on the next work day following the original test date unless extenuating circumstances (such as a continuing illness, death of an immediate family member or funeral out of town) prevent the student from taking the test within 24 hours or the next day. Documentation may be required. [Immediate family members typically mean mother, father, wife, husband, sister, brother or children]

11. Final exams. The published exam schedule as provided by the Registrar’s Office for the IU South Bend campus is followed and adhered to by the School of Nursing.

12. Reporting of Exam Results:

- Faculty requires a minimum of 24-hours to review exam results including item analysis. It is inappropriate and unprofessional to argue with faculty regarding exam questions. Course faculty are the experts on their course content and will provide guidelines for students who identify questions they believe need additional review. How faculty handle this is up to the individual faculty or course and will be announced.
- Examination scores will be posted to Canvas within a week of the exam. Please do not call or e-mail faculty or the secretary regarding exam grades. Results will not be called or e-mailed.

- Students will refrain from coming to faculty offices or congregating in hallways awaiting results following the exam. Faculty will release results of exam via Canvas grade book or in manner deemed appropriate by course faculty.
- Exam hand-back sessions are scheduled at the discretion of the faculty. Note-taking is not permitted during these review sessions unless directed by faculty.
- Final exams are not subject to exam review unless deemed appropriate by faculty.

*****Also see PLAGIARISM section in earlier in this Section.

RESUMING PROGRESSION AFTER STUDIES ARE INTERRUPTED

Please review the policies regarding academic standing of students enrolled in the nursing major, including progression, repeat of nursing courses, academic probation, and dismissal found in the current **IUSB Bulletin**. <http://bulletins.iu.edu/iusb/2014-2015/schools/health-sciences/nursing/nursing-bsn-info.shtml#policies>

Prior to repeating a nursing course, the student is required to submit a **plan for success** to the APG Board. This letter must contain a self-analysis describing what factors contributed to the deficiencies in this course and how the student intends to address the issues. The student should also include any plans for additional courses during the semester the course is being repeated.

Enroll in and successfully complete NURS K-220 prior to progression.

Upon successful completion of the repeated courses, a second letter to the APG Board is required requesting permission to progress in the BSN program (space may not always be available). This request must detail a plan for successful completion of the remainder of the BSN program. Deadlines to request permission to progress are:

July 1st Fall Progression

October 1st Spring Progression

GRADUATION RELATED ACTIVITIES

Additional graduation activities include but are not limited to:

- Photographing. Photos are required for NCLEX examination. Cost begins at \$32.00 and includes the cost of the Class Composite Framed Photograph for the School of Nursing and a smaller unframed version for each graduate.
- IUSB School of Nursing Pin. Approximately \$30-\$100. Optional, but recommended as identification of your professional nursing degree program and status.
- Sigma Theta Tau Induction (7th or 8th semester). (Approximately \$120.)
- Rental of Caps and Gowns for Commencement. (Approximately \$35.00)
- Awarding of Indiana University Academic Distinction (based on IU undergraduate study).
- ATI Comprehensive Diagnostic Assessment (\$58)
- NCLEX Review Course. (Approximately \$400.)
- NCLEX EXAM (Approximately \$250.)

REVIEW COURSES

The School of Nursing highly recommends that all graduating students take an NCLEX review course prior to taking their state board examination. Participating in a structured review course prepares the student for not only the content of the exam, but for the unique computer format of the testing. These courses also address the common problem of test anxiety that many students experience before their state boards, and teach specific techniques, which significantly improve a student's

probability of success. Review course participation is especially critical for students who are identified as high risk due to results of diagnostic testing, and/or consistent problems in course testing throughout the curriculum.

The School of Nursing will provide all graduating students with information on national state board review courses that become available in our area each semester, including any review course sponsored by the School of Nursing at IU South Bend. It is the responsibility of the individual student to register and pay for a review course of their choice.

COMMENCEMENT

Commencement ceremonies occur only in May. Attendance is optional although highly encouraged and requested.

The student must file an application with the School of Nursing recorder by September 1 for December graduation and by January 15 for May, June or August graduation.

QUESTIONS ASKED BY THE INDIANA STATE BOARD OF NURSING

The practice of nursing in the State of Indiana is regulated through the Indiana State Board of Nursing. At completion of the BSN program, graduates of the School of Nursing may apply for licensure. When applying for licensure, these questions must be answered as a part of the application:

1. Has disciplinary action ever been taken regarding any health license, certificate, registration or permit you hold or have held in **any** state or country?
2. Have you ever been denied a license, certificate, registration or permit to practice as a nurse or **any** regulated health occupation in **any** state or country?
3. Have you ever:
 - 1) Been arrested;
 - 2) Entered into a diversion agreement;
 - 3) Been convicted of;
 - 4) Pled guilty to; or
 - 5) Pled nolo contendere to any offense, misdemeanor or felony in **any** state (*except minor traffic violations resulting in fines*)?
4. Have you ever been terminated, reprimanded, disciplined or demoted in the scope of your practice as a nurse or as another health care professional?
5. Have you ever had a malpractice judgment against you or settled any malpractice action?
6. Are you now being, or have you ever been treated for drug or alcohol abuse?

INDIANA STATE BOARD OF NURSING

You can “like” the Indiana State Board of Nursing on Facebook and keep apprised of meetings and changes. The official website address is www.in.gov/pla/nursing.htm. For spring (May) graduates, completed applications along with photograph and fees are due to **the School of Nursing** by **March 10th or as posted**. Late applications are placed in the “bottom of the State Board file” and will delay permission to test into late summer or fall.

Chapter IV

MSN Specific Policies

Appearance Code

The Appearance Code provides IU South Bend SON students with information necessary to select on-duty attire and accessories which are compatible with professionalism, infection control, employee identification, neatness, and modesty. If attire is unacceptable to the clinical instructor or preceptor, the student may be sent home and will have to makeup clinical time at their expense.

Attire must be clean, unstained, and ironed. The attire fabric should be of sufficient thickness so undergarments do not show through. Good judgment should be exercised in selecting the appropriate size of the clothing so that it is not low cut at the neck or tight across the chest and hips.

- **LAB COATS**

White lab coats may be required for most clinical experiences. Lab coats must be worn at least mid-thigh in length and have a collar. Front button lab coats with a collar are preferable lab coats. Attire under lab coats need to be professional, modest, and tasteful. Metal fabrics (sequins, beads, etc.) shorts, jeans, and sweats are not acceptable. Slacks must be ankle length. Denim fabric and leggings are not considered acceptable business attire. Additional uniform accommodations may be made upon request.

- **SHOES**

Shoes must be clean, quiet, safe and comfortable. No open-toe shoes may be worn. Appropriate stockings or socks must be worn at all times.

- **PROFESSIONAL WEAR FOR VOLUNTEER ACTIVITIES**

When assisting with health programs and assignments outside traditional clinical settings (health fairs, flu shot/immunization programs, ceremonies, volunteer efforts connected to the school, etc.) please check with the instructor or coordinator of the program for appropriate attire. Unless otherwise directed, the guidelines for professional attire are to be followed. Also, see "other" for additional appearance requirements, which are extended to any setting where the student is representing the School of Nursing. It is expected that student nurses acting in a professional capacity dress and behave in a professional manner at all times. The name badge from the School of Nursing is to be worn for these activities regardless of attire.

- **PICTURE ID**

A valid IU South Bend picture ID or valid driver's license must be carried with the student at all times.

Certain agencies may require display of the official picture identification as part of the uniform.

- **NAME BADGE**

An IU South Bend School of Nursing name badge is required to be worn and visible at all times on clinical units. Name badges must be worn when participating in a professional setting; volunteering for community health programs; and as designated by the faculty in certain clinical settings. **Forms for obtaining the name badge will be handed out at orientation.** We recommend the purchase of two (2) name badge. It is the responsibility of the student to purchase the name badge(s).

- **APPEARANCES OTHER**

- Tight fitting attire is not appropriate. Discreet underwear which is not readily visible through clothing is to be worn. At no time should undergarments be visible.
- Fingernails must be neatly trimmed and clean. Nail polish, if worn, must be neutral or pastel in color and without chipping. **NO artificial nails** may be worn by those providing patient care.

- Hair and beards must be clean and neatly groomed. If hair falls below shoulder length, it must be pulled back.
- Tattoos are not to be visible.
- Only two earrings for each ear are permitted. Dangling earrings are to be avoided for safety reasons. Additional exposed body piercing is not acceptable, including tongue piercing.
- Good personal hygiene is expected.
- Smelling of tobacco smoke is prohibited. **It is not** acceptable to leave patient care areas to smoke. Area hospitals are smoke free environments and these policies are strictly enforced for nursing students.
- Light cologne, simple make-up, and a watch and/or ring may be worn. All jewelry should be simple, inconspicuous and kept to a minimum. One ring per hand is permissible.
- Patient gowns or isolation gowns are not acceptable as a cover-up for your uniform except when working in isolation or other restricted areas.
- Gum chewing is **prohibited** in direct patient/client care areas and roles.

GRADUATE CREDIT-CONTACT HOUR CALCULATION POLICY

The IU South Bend School of Nursing MSN Family Nurse Practitioner (FNP) program has adopted the same graduate credit-contact hour calculation formula that has traditionally been used at IUPUI. The laboratory and clinical credit-contact formula is necessary to ensure that graduates accumulate sufficient number of hours necessary to meet the requirements for certification upon graduation.

- Didactic and seminar credit contact hour calculation is based on a 1:1 ratio per 15-week academic semester. Example: 3 credit hour didactic = 3 credit hours per week (15 week semester) or 45 contact hours per semester.
- Laboratory hour credit contact calculation is based on a 1:4 ratio per 15-week academic semester. Example: 1 credit hour laboratory = 4 contact hours per week (15 week semester) or 60 contact hours per semester.
- Clinical hour credit contact calculation is based on a 1:5 ratio per 15-week academic semester. Example: 1 credit hour clinical = 5 contact hours per week (15 week semester) or 75 contact hours per semester.
- Didactic and seminar contact hours are based on a 50-minute hour, per Indiana University and Indiana University South Bend policy.
- Laboratory and clinical contact hours are based on a 60-minute hour, per Indiana University and Indiana University South Bend policy.

TRAVEL

Travel liability to and from clinical assignment and community activities sites is the sole responsibility of the student. Indiana University South Bend **does not** provide travel liability insurance. Such travel has inherent risks and these risks are accepted by the student.

CONTINUING NURSING STUDENT RESPONSIBILITIES

For students enrolled in clinical nursing courses during the summer sessions, TB screening, immunizations, and CPR certification must be valid through the final day of the summer session in which the student is enrolled.

For students who are finishing an “Incomplete” grade in a nursing course with a clinical component, the CPR recertification, immunizations, and TB screening must be valid until the course requirements are completed.

Additional Documentation

Due to frequent changes in the national standards and recommendations for adult immunizations, it may be necessary for the School of Nursing to request additional documentation beyond what is listed here prior to clinical admission. Criminal background checks may be conducted at any time in the program depending upon a clinical site’s requirements or due cause. Students will be notified if they are affected.

Progression in the Master of Science in Nursing Program

DIDACTIC AND CLINICAL COURSE ATTENDANCE

- Students are expected to attend all classes and are held responsible for all required reading and content presented. In case of absence, it is the student’s responsibility to obtain the information presented from another classmate.
- Attendance is monitored at the discretion of the instructor and will be taken into consideration when final grades are calculated.
- All classes canceled due to snow or other unforeseen events will be rescheduled, if possible, or material will be made available.

LABS AND SIMULATION RULES

High fidelity (realistic) patient care simulations may be offered throughout the program. These simulated patient experiences are treated like actual clinical ones; appropriate behavior and attire are expected. IU South Bend School of Nursing is fortunate to have state of the art simulation models and labs. Students also may engage in an online simulated learning environment. Students have an opportunity to solve real life problems in a safe environment where they can learn and experience common clinical situations which do not always arise during actual patient care. These experiences are very popular with the students, truly enhancing learning and problem-solving, especially regarding how to deal with emergencies and complications.

Rules for lab and simulations are:

- All simulated experiences must be considered as live experiences. This means that professional communication and behavior are expected at all times.
- Children are not allowed in the classroom or labs at any time.
- Clean up after your practice or lab time, returning the lab to the state you found it in.
- Sign in for practice time.
- Expensive, high tech equipment is in the labs and should be cared for appropriately; assure that the doors are closed if you are the last one to leave.
- If you do not know how to use the equipment, please seek assistance. Simulations provide essential learning (or evaluation) and are to be taken seriously including any assigned preparation.
- Inappropriate use of the lab and equipment can result in disciplinary action.

CLASSROOM ETIQUETTE

- In order to maintain a respectful environment, collegial behavior is required. Students who do not demonstrate professional, collegial behavior will be asked to leave the classroom and must meet with the instructor prior to the next class session. Any student who continues to demonstrate intimidating and/or disruptive behavior that interferes with a respectful environment conducive to learning may not be permitted

to return to the classroom and will be referred to the Admission, Progression, and Graduation Committee of the IU South Bend School of Nursing for action.

- Following IU South Bend policy, children are not permitted in the classroom, lab or clinical setting at any time.
- Lecture content is presented beyond reading assignments and not all reading assignments are covered in the lecture – please plan accordingly when studying.
- As a courtesy, students are to request permission of the instructor conducting the class to tape/digitally record the class.
- All handouts and test questions are considered to be the intellectual property of the course instructor. Students are prohibited from posting and/or sharing handouts or test questions with other students. Sharing test questions with other students is considered *cheating* and will be dealt with according to IU South Bend policy.
- It is not mandatory for faculty to provide handouts prior to class. If individual faculty elects to provide handouts, students are not required to print them unless otherwise instructed. Students should be prepared to take detailed notes. Any handouts are intended as a tool for students and should not be distributed for uses beyond the class note-taking.

TEST TAKING AND MAKE-UP

The only acceptable excuse for missing an exam is serious illness or death of a close family member. The student must notify the professor directly no later than one hour before the exam is to be given via phone call or e-mail. The student also may notify the Administrative Assistant for Nursing at (574) 520-4382 if the professor is unavailable. Failure to notify the professor will result in a “0” for that exam. The course professor will decide on the type of examination to be given to the student who is unable to take the original examination.

1. Examinations will be scheduled, and all students are required to take all examinations.
2. The proctor of the examination will:
 - a. Distribute the exam and answer sheet; or, with computer based exams, ensure students have logged in properly.
 - b. Give any instructions and corrections verbally prior to commencement of the exam.
 - c. Write corrections on the chalkboard.
 - d. Not answer any questions during exam time regarding exam questions nor define any terms.
3. The student(s) taking the examination will:
 - a. Arrive at the designated room on time.
 - b. Be the only person allowed in the classroom.
 - c. Leave all books, coats, purses, etc., securely under the desk or area designated by the proctor. This policy also applies to exam hand-back sessions. Note taking is not permitted during exam hand-back sessions.
 - d. Turn off cell phones and place securely in backpack or purse.
 - e. Remove hats, hoodies, and jackets with large pockets.
 - f. If calculators are permitted, **only freestanding** pocket calculators are allowed. **Cell phones or other personal digital devices (PDAs) cannot be used** as a calculator. In computer based exams, a calculator is embedded within the software.
 - g. Refrain from suspicious behaviors such as talking, looking around the room, looking at another

- student, raising your paper for others to view or glancing at other computer screens.
- h. Place yourself in a position or space in the test room to avoid the appearance of cheating. Often seating assignments will be made for exams.
 - i. Keep answer sheets covered.
 - j. Refrain from opening any computer program other than the one to take the exam; this includes email, internet, PDAs, cell phones.
 - k. Your exam will be removed and you will receive a zero "0" if suspected of cheating.
 - l. Report any misconduct or annoying behavior to the proctor during the exam so appropriate action may be taken.
 - m. Accept responsibility for transposing answers from test form to the computer answer sheet. Credit will not be given for any answer erroneously transposed.
 - n. Place your name and student identification number on the answer sheet and the test booklet.
4. Return the exam and answer sheet as directed.
 5. The student will refrain from discussing exam content with class members. Most faculty will provide an opportunity to review exams when all students have taken the exam.
 6. Those students coming late will:
 - a. Wait until all initial directions are given and questions answered.
 - b. Be given the exam and answer sheet by the proctor.
 - c. Be given no additional verbal directions.
 - d. Be given no extension beyond the time allotted for the exam.
 7. Questions about test content will not be answered during an exam. If you have some other difficulty, raise your hand and a proctor will come to your seat.
 8. Individual professors reserve the right to determine the manner of testing. Some utilize Canvas, others ExamSoft, while others prefer paper exams. If a professor gives a paper exam, all papers will be collected at the end of the class session. Both the test booklet and the answer sheet must be returned. Check your answer sheet before turning it in for completeness and accuracy! Avoid erasures.
 9. Cheating is not tolerated and is dealt with immediately. Please see the information about cheating and plagiarism in this chapter.
 10. If you display any of the following behaviors: looking around the room, looking at another student's paper, not covering your answer sheet, raising your paper, looking at another computer in a computer lab, you will be suspected of cheating. **YOUR PAPER WILL BE TAKEN FROM YOU (or your exam blocked on the computer) AND YOU WILL BE GIVEN A "0" FOR THE EXAM.** If you have any problems with the above stated behaviors, you need to move to the front of the room at the beginning of the test session.
 11. Disclosure of exam material including its nature or content during or after the exam is prohibited and will be considered cheating.
 12. Faculty has the right to determine if behavior appears to be cheating. The Student Code of Conduct is followed for reporting and discipline.
 13. Exams are essential measures of competence and knowledge in order to provide safe patient care, and cheating is not only prohibited by the university but is considered unsafe behavior in preparation for professional practice.
 14. Accommodations for testing are only provided with written documentation from the Office of Student Disabilities.
 15. Test anxiety should be addressed with assistance from the Student Counseling Center.
 16. The only acceptable method to avoid distractions, are ear plugs.

17. Policy for make-up tests is as follows:
18. Make-up exams are possible, but are the exception. They may be given for such circumstances as personal illness/injury, hospitalization of student's own child, or death in the family.
19. The prerequisite to this is the student must call the instructor in advance of the test to explain the absence (illness, for example, unless the student is involved in a traffic accident on the way to the test). Documentation may be required.
20. Make-up tests may be the same test or essentially the same test given to the entire class. It should be given on the next work day following the original test date unless extenuating circumstances (such as a continuing illness, death of an immediate family member or funeral out-of-town) prevent the student from taking the test within 24 hours or the next day. Documentation may be required. **Immediate family members mean: mother, father, wife, husband, sister, brother or children.**
21. Final exams. The published exam schedule as provided by the Registrar's Office for the IU South Bend campus is followed and adhered to by the School of Nursing.
22. Reporting of Exam Results.
 - a. Faculty requires a minimum of 24-hours to review exam results including item analysis. It is inappropriate and unprofessional to argue with faculty regarding exam questions. Faculty are experts of their course content and will provide guidelines for students who identify questions they believe need additional review. How faculty handle this is up to the individual faculty or course and will be announced.
 - b. Examination scores will be posted to Canvas within a week of the exam. Please do not call or email faculty regarding exam grades. Results will not be called or emailed.
 - c. Students will refrain from coming to faculty offices or congregating in hallways awaiting results. This behavior is deemed inappropriate by course faculty.
 - d. Exam hand-back sessions are scheduled at the discretion of the faculty. Note taking is not permitted during these review sessions unless directed by the faculty.

Final exams are not subject to exam review unless deemed appropriate by faculty.

DESCRIPTORS FOR CHEATING AND PLAGIARISM

Cheating: dishonest, corrupt, amoral, immoral, devious, deceitful, wrong, unethical, dishonorable Plagiarism:

copying, lifting, stealing, illegal use, breach of copyright, bootlegging

GRADING SCALE

All courses in the Indiana University South Bend, School of Nursing MSN program utilizes the following grading scale in nursing courses.

100-97 A+	89-87 B+	79-77 C+	69-67 D+
96-93 A	86-83 B	76-75 C	66-63 D
92-90 A-	82-80 B-	74-70 C-	62-60 D-
			Below 60 F

An attainment of at least a B- or 80% is required to successfully pass a course. Failure to receive a final grade of "B- or higher will require that the student retake the course. Please note that rounding is not permitted and 79.9% is not a passing grade. The course work in each semester serves as a pre-requisite for subsequent courses; therefore the student must pass each course in a given semester before progressing in the program.

The official grade code of Indiana University includes quality points for the purpose of determining the cumulative grade point average. Quality points are assigned as follows:

A+	4.0	B+	3.3	C+	2.3	D+	1.3
A	4.0	B	3.0	C	2.0	D	1.0
A-	3.7	B-	2.7	C-	1.7	D-	0.7
						F	0.0

If a student is unsuccessful in a course, refer to the campus *Bulletin* for progression guidelines. It is recommended that the student meet with the faculty member first. Advisors are available to assist students with the procedures. Before repeating a course, it is recommended that the student carefully examine and rectify study/class habits that may have led to difficulties in the course; this may include counseling for text anxiety and time management. Students will be asked to submit a plan for success before repeating a course.

INCOMPLETE

Graduate faculty follow the IU South Bend Incomplete policy as listed in the *Bulletin*. In order to receive an Incomplete, a substantial amount (at least 75%) of course work must be successfully completed by the end of the semester. Furthermore, an Incomplete “is awarded only under circumstances of hardship”. If a student receives an Incomplete, he/she is Out-of-Progression and must resume progression the following year. If a student receives an incomplete and wants to finish the course work during the next semester he/she must have approval by the appropriate faculty member and Graduate Program Director. The student must finish all coursework prior to registering for classes the following semester unless other arrangements are made with the faculty and graduate director.

COURSE FAILURE AND PROGRAM PROGRESSION

Failure of either didactic, lab, or clinical coursework means that the student fails and must repeat the entire course. Courses in each semester serve as a pre-requisite for all subsequent coursework; therefore failed courses must be successfully completed before the student may enroll in subsequent courses and/or progress in the program.

Withdrawal in the First Three Semesters

MSN students who withdraw from any part of the first three semesters of the program must reapply to the program. Readmission in this situation is not automatic.

FORMAL COMPLAINTS

The MSN program follows the procedures as outlined by the IU South Bend Office of Student Conduct under “Complaints Against Members of the University Faculty and Administration”

(<https://www.iusb.edu/judicial/admincomplaint.php>). Students are encouraged to discuss minor complaints about course matters directly with faculty members. Likewise, faculty members are discouraged from talking about other faculty members with students. Therefore, students should first talk to the faculty member of concern. If the minor issue cannot be resolved between the student and individual faculty member, students are invited to discuss it with the Graduate Program Director and/or Dean.

Complaints of a serious nature or a formal complaint that is signed and submitted by a student or community constituent should be submitted to the Graduate Program Director, Dean, or the upper university administration. A formal complaint is one that outlines perceived violations related to nursing, university, or Indiana State Board of Nursing policies and procedures. Any complaints received by the program are seriously considered by the Graduate Program Director, Dean, or university administration as necessary and appropriate action in regards to changing policy or revising curricular decisions are determined.

Process for documentation of formal complaints



GOOD STANDING

A student is in good academic standing when his or her cumulative grade point average is 3.0 or higher.

MAINTAINING

- Students who do not register for a period of three consecutive semesters will be dismissed from the program.
- Students admitted on probation who fail to remove the conditions of admission within one semester will be dismissed from the program.
 - Students attaining an unsatisfactory grade (below B-) in any course may repeat the course only once. If a course must be repeated, the department may specify additional conditions relating to progression in the program. Evidence of lack of progress toward the degree is described as failure to successfully attain a B- or higher in a course in which an unsatisfactory grade has been previously received. This means that a student will be dismissed from the MSN program if the student fails to achieve a minimum grade of B- or S (Satisfactory) in any one nursing course (didactic or practicum/clinical) by the second attempt, or any two nursing courses (didactic or practicum/clinical) on the first attempt. Students who do not complete all degree requirements within six years following initial registration will be dismissed. Students may appeal their dismissal to the Graduate Faculty Council one time only.

DISCIPLINARY PROBATION

Disciplinary probation is administered under the Code of Student Rights, Responsibilities, and Conduct. The faculty reserves the right to request the withdrawal of a student when problems related to personal integrity, health, maturity, or safety in the practice of nursing demonstrate the student's unfitness to continue preparation for professional nursing.

ACADEMIC PROBATION

A student is placed on academic probation when the cumulative grade point average falls below 3.0 or if he or she earns below a B- in a required course. Students who are placed on academic probation for two semesters will be dismissed from the program.

UNSATISFACTORY PERFORMANCE BY A STUDENT

If a student receives a one or two in any area on the clinical evaluation form by the preceptor, faculty or student, the Graduate Program Director will be informed and an emergency Graduate Faculty Council meeting will be held to determine the course of action for the student. If a student receives an average of a B- or below at any time during any course taken during the program, the issue will come before the Graduate Program Director and possibly the Graduate Faculty Council for further course of action for the student.

OUT-OF-PROGRESSION

MSN students who are considered to be out-of-progression are those who:

1. Receive a grade below B- in any course;
2. Receive an unsatisfactory grade in any clinical course;
3. Withdraw from any course or semester for any reason after the first three semesters. (Withdrawal within the first three semesters requires application for re-entry);
4. Do not meet health and safety requirement deadlines.

RESUMING PROGRESSION FOR OUT-OF-PROGRESSION STUDENTS

Resuming progression for out-of-progression students is not automatic. Out-of-progression MSN students who wish to reenter or progress in the program must submit a written request for reentry to the APG Committee. This request requires a list of the specific courses in which the student wishes to enroll and, as appropriate, an explanation of any extenuating circumstances that may have hindered academic performance, and a Plan for Success addressing areas of deficiency. All requests for progression are evaluated on the basis of available resources, and, if appropriate, on the satisfactory completion of any conditions and/or faculty recommendations that existed at the time progression was disrupted.

DISMISSAL

A MSN student is dismissed from the program when, in the judgment of the Graduate Faculty Council, there is a lack of progress toward the degree. Lack of progress includes, but is not limited to the following:

- Failure to achieve a 3.0 cumulative GPA.
- Failure to meet Indiana University School of Nursing Essential Abilities expectations (refer to the Statement of Essential Abilities listed under General Policies of the School of Nursing in this section of this publication).

Dismissal may occur without prior probation. Any student who is academically dismissed at one Indiana University campus is also in dismissal status at all other Indiana University campuses.

- Falsification of records and reports, plagiarism, or cheating on an examination, quiz, or any other assignment is cause for dismissal (see Indiana University Code of Student Rights, Responsibilities, and Conduct).
- The faculty reserves the right to dismiss any nursing student whose personal integrity, health, or conduct demonstrates unfitness to continue preparation for the profession of nursing. Integrity and conduct is judged according to the standards of the most recent Code of Ethics for Nurses as adopted by the American Nurses' Association and the IU School of Nursing Statement of Essential Abilities.
- When a student is dismissed, he or she will receive a formal letter from the Dean of the College of Health Sciences and Graduate Program Director, and/or Judicial Affairs. The dismissal of any nursing student is contingent upon review by the Graduate Faculty Council on the campus of enrollment. Nursing student dismissal is subject to the appeal process on the campus of enrollment.

REINSTATEMENT OF A DISMISSED STUDENT

<https://healthscience.iusb.edu/docs/policies/Reinstatement%20Process.pdf>

Appeals for immediate reinstatement are not considered except as warranted by extraordinary circumstances. In such cases, students reinstated by the Admission, Progression and Graduate Committee have prescribed standards of performance for the semester for which they are reinstated. Failure to meet these standards results in an irrevocable dismissal. Students who are reinstated must adhere to policies in effect at the time of reinstatement. (See *MSN Student Policy Handbook*, the *IU South Bend Bulletin*, and policy updates.)

TESTING REQUIREMENT FOR PROGRAM RE-ENTRY

All students who re-enter the program must adhere to the academic policies in effect at the time of resuming studies. This applies to out-of-progression students, reinstated students after a dismissal, or students who are returning after finishing a course in which an "Incomplete" was given. Patient safety is a priority; therefore prior to reinstatement, any out-of-progression or dismissed student must demonstrate satisfactory knowledge and skill in pathophysiology, pharmacology, and advanced physical assessment. The Graduate Faculty Council reserves the right to determine the manner of testing for this content. Typically this testing is done through a written pharmacology/pathophysiology exam passed with a minimum score of 80% and successful validation of skill in performing a head-to-toe physical assessment and evidence of synthesis of clinical knowledge. Students who do not meet minimum requirements set forth by the Graduate Faculty Council may not progress in the program and are subject to dismissal from the program.

Master of Science in Nursing Graduation Requirements

Students in the Master of Science in Nursing program are responsible for meeting the following degree requirements. Though the Graduate School of Nursing makes every attempt to provide students with academic advising and program planning assistance, students are accountable for complying with all published academic policies related to the Master of Science in Nursing graduate program. To be eligible for graduation from the program students must:

1. Complete all required MSN FNP graduate nursing courses and one graduate elective with a B- or better and have an AGPA of 3.0 or better.
2. Complete 600 supervised direct patient care clinical hours.
3. Complete all MSN degree requirements. Students with extenuating circumstances must complete all requirements within 6 years of enrolling in the first graduate course.
4. File a Graduation Application Form

COMPLETION OF DEGREE REQUIREMENTS

The registrar must receive all removal of Incompletes, deferred grades, special credit, and independent study grades no later than three weeks prior to the end of classes of the student's last semester before graduation.

Graduation Information and Guidelines

Graduation Related Activities

Additional graduation activities include but are not limited to: Sigma Theta Tau

Induction

Rental of Caps and Gowns for Commencement and Hooding

Application for Degree Form

Review Courses

The School of Nursing highly recommends that all graduating students take a review course prior to taking their credentialing examination. Participating in a structured review course prepares the student for not only the content of the exam, but for the unique computer format of the testing. These courses also address the common problem of test anxiety that many students experience before their state boards, and teach specific techniques, which significantly improve a student's probability of success.

The School of Nursing will provide all graduating students with information on review courses that become available in our area each semester. It is the responsibility of the individual student to register and pay for a review course of their choice

Clinical Policies

Clinical Experiences

The educational program should provide direct client care experiences for the graduate to master critical clinical experience and knowledge. The National Organization of Nurse Practitioner Faculties (NONPF) guidelines state that “**500 clinical hours is the minimum number required for nurse practitioner education**” (p. 77). The MSN curriculum is based upon the strong foundation set in accredited BSN programs. The students are expected to have achieved the following essentials as set forth by the AACN in regards to baccalaureate education.

Preceptor Qualifications and Guidelines

Based on the National Task Force on Quality Nurse Practitioner Education: Criteria for Evaluation of Nurse Practitioner Programs 2012 (4th) Edition:

Preceptors must:

- Engage in patient care consistent with the program’s mission: Primary care or specialty that complements primary care knowledge.
- Have clinical practice experience; a minimum of one year of clinical experience in the population-focused practice area prior to engaging in clinical supervision.
- Engage in clinical practice consistent with the population focus of specialty courses: i.e. pediatric, women’s health, and adult/geriatric patients.
- Be a Nurse Practitioner with minimum of a Master’s Degree in Nursing or extensive clinical experience in the content area in which he or she provides clinical supervision, have national certification, or be a physician (MD or DO).
- Have an unrestricted license to practice in the state where the clinical rotations are completed.
- Be willing to precept the student by facilitating the educational process for the required number of clinical hours; engage in formative and summative evaluation with the student; communicate with and meet with the faculty member throughout the semester.

Before students engage in clinical time with a preceptor, that preceptor must be properly vetted. This means that the School of Nursing engages in careful review of the preceptor’s qualifications before granting formal approval. It is the student’s responsibility to have the preceptor fully complete the “Preceptor Information Form” (found on Canvas Graduate Program Central modules) and turn it in to the faculty of record at least two weeks before the beginning of the semester. Students who do not have the form turned in on time may not engage in clinical activities until the preceptor has been vetted. Students engaging in clinical time with an un-approved preceptor may not claim any of the clinical time and are at risk for course failure for unprofessional behavior.

Within the first week of the clinical rotation, the “Preceptor Agreement Form” (found on Canvas Graduate Program Central modules) must be signed by the student, preceptor, and supervising clinical faculty. Signed forms must be uploaded by the student to Typhon External Documents, Clinical Agreement folder by end of third week of clinical.

Clinical Placement

Clinical placement is a complex process and shared responsibility between the student and faculty. The Graduate Program Director and faculty will assist students with planning for clinical rotations. We make every reasonable effort to accommodate a student’s placement request. Specialty locations will be incorporated in the student’s clinical experiences throughout the program and are not limited to one semester. The student must be delivering hands on patient care. In hospital or observation only situations are not acceptable. The focus of the Family Nurse Practitioner program is the provision of primary care to individuals and families across the lifespan; therefore, in-hospital, acute care clinical rotations are not permitted.

Clinical Hours Requirements

Clinical hour requirements are carefully calculated to meet Indiana State Board of Nursing, academic, and accreditation standards. IU South Bend requires students to engage in a **minimum of 600 supervised direct patient care clinical hours in a primary care setting** or a setting that complements primary care knowledge. Therefore, all clinical hours are mandatory and all missed time must be made up. Students are responsible for contracting with the preceptor for the time spent in the clinical agency. It is important for students to understand that their time in a clinical agency with a clinical preceptor will be different than hours published in the official Schedule of Classes. Patient demands may require that a student stay in the setting for additional time, which will not be monetarily compensated.

Students may only engage in clinical hours during the semester; this means students may not engage in clinical activities before or after the semester begins or ends. Furthermore, students may not engage in clinical activities if the approved preceptor is off-site and/or unable to provide supervision of direct patient care.

Students may not engage in clinical activities within a hospital setting other than rounding with the preceptor on primary care patients who are hospitalized or in an extended care facility. When rounding in a hospital or extended care facility, students must be actively engaged in the direct patient care process when possible.

See the MSN Student Policy Handbook and/or course syllabus for specific clinical requirements and policies regarding missed time. Insufficient clinical hours may result in course failure, or if extenuating circumstances exist, a grade of Incomplete. Please note that faculty will not make accommodations for a student's work schedule. A grade of Incomplete will not be granted when work requirements interfere with the student's ability to engage in the required amount of clinical hours. It is the student's responsibility to complete all clinical coursework in a timely manner, regardless of her or his work schedule. Incomplete grades must be removed before the student may progress in the program.

Clinical Time Policy

Assigned faculty are responsible for clinical supervision of students in all precepted clinical experiences. Students are expected to engage in clinical activities during regular business hours (Monday through Friday, 8 a.m. to 5 p.m.) and are required to complete all clinical hours before the last regular day of classes. Supervising clinical faculty must be aware of the days and times that students are in the clinical setting. Students in clinical courses are required to contact their clinical agency/preceptor to negotiate their schedule no later than the end of the first week of classes. **No later than the beginning of the second week of the semester, students must provide their supervising clinical faculty with a detailed schedule of the days and times they will be in the clinical site.**

Supervising clinical faculty must be notified of any schedule variation as soon as possible (i.e. missed day due to illness, a late start or early end to the day, or engaging in clinical activities on an unscheduled day). Students planning to be at a clinical site outside regular business hours or during finals week must receive permission well in advance and in writing from their supervising clinical faculty via the "Request to Engage in Clinical Time Outside of Regular Business Hours" form. This form may be found on the Canvas Graduate Program Central under modules.

Students must document the shift time (start and end time, lunch and breaks) that they are in the agency and the clinical activities that they engaged in. Clinical time claimed may only include time that the student is actively engaged in Category A and B Clinical Activities (see below).

Falsification of clinical time and/or activities will result in course failure, immediate suspension and possible dismissal from the program and the filing of an academic integrity violation with the Office of Student Conduct.

Clinical Paperwork Checklist

1. **Preceptor Information Form:** Due to faculty of record at least two weeks before beginning of the semester.
2. **Preceptor Agreement Form:** Due to supervising clinical faculty by end of the second week of semester. Must be signed by the student, preceptor, and supervising clinical faculty. Signed forms must be scanned and uploaded by the student to Typhon External Documents, Clinical Agreement folder by end of third week of clinical.
3. **Request to Engage in Clinical Time Outside of Regular Business Hours Form:** Must be signed by supervising clinical faculty when student wishes to engage in clinical experiences in times outside regular business hours or during finals week. Signed form must be scanned and uploaded by the student to Typhon External Documents, Outside Hours folder as soon as it is signed.

Definition of Clinical Activities*

A minimum of 80% of clinical activities must be Category A activities (supervised direct patient care, observation, and clinical consultation). The remaining 20% of clinical time may be Category B clinical activities (telephone callbacks, record review, and clinical review/research).

CATEGORY A CLINICAL ACTIVITIES (SHOULD CONSTITUTE 80% OF CLINICAL TIME):

Direct patient care: Activities spent in face-to-face contact with the patient collecting subjective and objective data, deriving diagnosis/diagnoses, developing a care plan, and documenting findings in the patient chart. Students must note their level of involvement in the patient contact and decision making: independent, <50%, >50% of care. A minimum of 80% of Category A clinical time should be in the provision of direct patient care.

Observation/Shadowing: Activities spent observing the preceptor engage in direct patient care. Observation generally occurs early in the semester, or with extremely complex patient situations. It is expected that as the student gains clinical experience, that the amount of observation time diminishes. Observation should constitute less than 20% of Category A clinical time.

Clinical preparation and review: Activities that may include in-the-office patient chart review, case discussion with the preceptor, review of evidence-based practice guidelines that pertain to the patient case, reviewing and calculating medications/dosages. Time spent reviewing diseases etc. outside of clinical hours may not be counted as clinical time.

CATEGORY B CLINICAL ACTIVITIES (SHOULD CONSTITUTE NO MORE THAN 20% OF CLINICAL TIME):

Telephone callbacks: Activities in which the student responds to patient telephone messages or calls patients with results of diagnostic testing.

Review of records: Activities that involve the review of lab, imaging, pathology or other patient care records/documents. This also may include time spent preparing for a patient who did not arrive for a scheduled appointment.

Clinical review/research: Learning activities that occur within the clinical setting in which the student spends time researching particular disease processes, pathophysiology, diagnostic testing options or meaning of results, medication choices, treatment options, and evidence-based treatment plans. This may also include preceptor-led discussions of patient cases that the student was not directly involved with.

*Adapted from the University of Arizona College of Nursing Clinical Time Policy.

Typhon Policies

Typhon is an online patient tracking software system with scheduling, evaluation, and portfolio functions. Students who are graduating after December 2015 will be required to purchase this program. Typhon policies will be updated after it is implemented in September, 2015. Students will be notified of and expected to adhere to these policies.

1. Typhon client encounters need to be completed within 7 days from the date of service. The encounters will be locked and unable to be edited if not done within 7 days. If you were unable to enter them in the 7 day timeframe, that clinical time will need to be made up.
2. Student schedules must be uploaded into Typhon by the second week of each clinical course. If not completed by the second week, you will not be able to attend clinical until the faculty receives it. If not completed within the first month of classes, you will receive a clinical failure which in turn is a course failure.
3. Self-evaluations must be done by the end of the day of their onsite midterm/final evaluation. If not, faculty may reschedule your evaluation and you may need to add another day
4. Students will be required to upload an exemplar assignment each semester as designated by the course faculty.

Program of Study and Course Descriptions

Master of Science in Nursing Family Nurse Practitioner Program of Study

Spring Semester	Summer Semester	Fall Semester
<u>Spring 1: Semester 1</u> Y515: Advanced Pathophysiology (3 credits) Y612: Advanced Pharmacology (3 credits)	<u>Summer 1: Semester 2</u> N502: Nursing Theory (3 credits) N504: Leadership for Advanced Nursing Practice (3 credits)	<u>Fall 1: Semester 3</u> Y535: Dynamics of Family Health Care (3 credits) F570: Advanced Health Assessment (3 credits)
<u>Spring 2: Semester 4</u> F580: Primary Care I: Acute Illnesses Processes (3 cr: 2 didactic; 1 clinical cr: 75 practice hrs.) R500: Research (3 credits)	<u>Summer 2: Semester 5</u> F581: Primary Care II: Stable & Chronic Illnesses (3 cr: 2 didactic; 1 clinical cr: 75 practice hrs.) Elective (3 credits)	<u>Fall 2: Semester 6</u> F572: PHC of Children (3 credits: 2 didactic; 1 clinical cr: 75 clinical contact hours) R590 Scholarly Project (3 credits)
<u>Spring 3: Semester 7</u> F578: PHC of Families (6 credits: 375 clinical contact hours)		

Course Descriptions

APRN CORE COURSES

NURS-Y 515 Advanced Pathophysiology (3 credits)

Provides advanced knowledge of pathophysiology as the foundation for nursing management in the health care of adults.

NURS-Y 612 Advanced Pharmacology Across the Lifespan (3 credits)

This course provides a basis for understanding the use of pharmacotherapeutic agents for clients across the life span. The course builds upon the pharmacologic knowledge base acquired at the bachelor's-level in nursing.

NURS-F 570 Advanced Health Assessment Across the Lifespan (3 credits)

This course enables students to develop advanced practice nursing skills in individual health assessment of infants, children, adults, and aging people. In addition, students develop skills in family and community assessment.

GRADUATE CORE COURSES

NURS-N 504 Leadership for Advanced Nursing Practice (3 credits)

Course addresses core competencies as leadership, role, healthcare economics, policy, and the law and ethics that are essential to all advanced nursing practice roles and healthcare in complex systems.

NURS-N 502 Nursing Theory (3 credits)

Focus is on evaluating the factors and issues influencing the development of theory in nursing. Theoretical terminology and criteria for the evaluation of theories are examined. Linkages applied between theory, practice, and research are explored.

NURS-Y 535 Dynamics of Family Health Care (3 credits)

Provides students with opportunities to study families within the community context. Consideration is given to theories of family functioning and roles in family health care, using family assessment tools and other nursing intervention strategies.

NURS-R 500 Nursing Research Methods (3 credits)

This course provides a survey of research in nursing, including critique of research literature, research designs, sampling, data collection and measurement strategies, relation of research and theory, development of researchable problems, and theory utilization.

NURS-R 590 Scholarly Project (3 credits) prerequisite: NURS-R 500.

A guided experience in identifying a researchable nursing problem and in developing and implementing a research proposal.

APRN CORE FNP CLINICAL COURSES (TOTAL OF 600 DIRECT PATIENT CARE CLINICAL HOURS)

For 2020 and beyond graduates NURS-F 580: Primary Care I: Acute Illnesses Processes (3 credits: Minimum of 75 direct patient care clinical hours)

Theory-guided, evidence-based advanced nursing practice approaches to health promotion and common acute illness processes of individuals across the lifespan within primary care are examined. Individual health-illness processes are applied within the context of family and community

NURS-F 581: Primary Care II: Acute & Stable Illnesses (3 credits: Minimum of 75 direct patient care clinical hours)

Theory-guided, evidence-based advanced nursing practice approaches to acute and stable chronic illness processes of individuals across the lifespan within primary care are examined with a focus on increasingly complex health problems. Individual health-illness processes are applied

within the context of health promotion for the family and community

NURS-F 582 Primary Care III: Chronic & Complex Illness Processes (3 credits: Minimum of 75 direct patient care clinical hours)

Theory-guided, evidence-based advanced nursing practice approaches to chronic and complex illness processes of individuals across the lifespan within primary care are examined. Individual health-illness processes are applied within the context of health promotion for the family and community

For 2019 Graduates

NURS-F 572 Primary Health Care of Children (3 credits: Minimum of 75 direct patient care clinical hours)

Enables students to develop a knowledge base for clinical decision making in assessment and provision of primary healthcare nursing for children and families. Topics include health promotion/maintenance, disease prevention, diagnosis, and treatment of common acute and stable chronic illnesses in children. Minimum of 75 clinical hours/semester.

NURS-F 578 Primary Health Care of Families (6 credits: Minimum of 375 direct patient care clinical hours)

Enables the FNP student to develop a practice base for clinical decision making in the assessment and management of healthcare of families. The course includes identification of health needs, nursing interventions for the prevention of illness, and health promotion.

GRADUATE ELECTIVE COURSE

The Graduate Faculty have been developing new elective courses. Beginning in Summer 2019, the elective courses hoping to be offered will be:

- Global Health Nursing
- Psych for the Primary Provider
- Nutraceuticals

Chapter V

Resources

Campus Resources

STUDENT ACADEMIC SUPPORT CENTER	<ul style="list-style-type: none"> ▪ Skills Tutorials, Software (Spell, speed read, vocabulary, typing, etc.) ▪ Tutoring ▪ Math Workshops ▪ English Conversation Groups ▪ Course Specific Software ▪ Foreign Languages ▪ Supplemental Instruction ▪ Major Advising Program for deciding a career path 	Rick Dennie, Director Coordinator 574-520-4164 Administration Bldg., Rm. 104 Email: rdennie@iusb.edu
AFFIRMATIVE ACTION	<ul style="list-style-type: none"> ▪ Responds and provides resolutions to those who are experiencing personal discomfort as a result of their race, sex, sexual orientation, age, religion, ethnicity, national origin, disability, or veteran’s status 	Human Resources Office Administration Bldg. 574-520-4384
CAREER MANAGEMENT SERVICES	<ul style="list-style-type: none"> ▪ Career Information Lab ▪ Assessment ▪ Individual Career Counseling ▪ Job Board ▪ Workshops ▪ Resume Referral Services ▪ Campus Interviews ▪ Job Fair 	Kim Moore Associate Director Administration Bldg., Rm. 104 574-520-4425 www.iusb.edu/career-services
DENTAL CLINIC	<ul style="list-style-type: none"> ▪ Oral cancer screening, instructions in proper dental care, teeth cleaning, fluoride treatment, dental x-rays for adults and children. <i>Open weekdays – September through June. By appointment only. Nominal charges.</i> 	Kim DeOrto Ed/Arts Bldg., Rm 1251 574-520-4155
DISABLED STUDENT SERVICES	<ul style="list-style-type: none"> ▪ Provides taped texts for students with vision impairments or dyslexia, note takers for students with mobility impairment. Assistance in scheduling and registration, special parking permits, alternative testing and referral to and from Vocational Rehabilitation and other community agencies. 	James Hasse, Director Administration Bldg., Rm. 113 574-520-4832
LIBRARY SERVICES	<ul style="list-style-type: none"> ▪ Ask a librarian—answers relatively simple questions about research and sources ▪ Library Guide—provides help to access references by subjects ▪ Handout available online—provides information on databases, support services, 	Library Information 574-520-4844 Reference Desk 574-520-4441

	<p>policies and procedures of the library, and library loan system policies.</p> <ul style="list-style-type: none"> ▪ FAQ's – Inter-library loans <p>Nursing Librarian</p> <ul style="list-style-type: none"> ▪ Susan Thomas 	<p>suethoma@iusb.edu Phone: 520-5500</p>
LEARNING RESOURCE CENTER	<ul style="list-style-type: none"> ▪ Transparencies, posters, binding, lamination. A library that contains education-oriented materials ranging from pre-school to high school. Provides help to create visuals for instructional purposes. 	<p>Kim Parker EA 2010 574-520-5548</p>
OFFICE OF INFORMATION TECHNOLOGIES (OIT)	<ul style="list-style-type: none"> ❓ Computer labs are available for students to use. Free classes for students attending IU South Bend. Consultants are available to help students at computer labs. ❓ Help Desk, 574-520-5555, will help you with software problems if required by the course you are taking 	<p>Paul Sharpe Northside, Rm. 0070A 574-520-5218</p>
HEALTH AND WELLNESS CENTER	<ul style="list-style-type: none"> ❓ Provides preventive health care and generates health awareness ❓ Offers health maintenance checks, flu shots, skin, bone marrow, and cholesterol screenings ❓ Organizes discussions on health related issues, etc. 	<p>Dwyer Hall 574-520-5557</p>
WRITER'S ROOM	<ul style="list-style-type: none"> ❓ Free tutorial help with planning, writing, revising, and editing papers for any course. (Does not include proofreading or correcting papers for students.) ❓ Help with reading and understanding assignments and writing essay exams ❓ Help with writing research papers, review of grammar, mechanics and spelling ❓ Workshops and small group sessions on special composition problems ❓ Consultation on writing letters of application, resumes, and personal essays 	<p>Joshua Rubin Writing Center Wiekamp Hall 3176 574-520-4302</p>
ACADEMIC CENTER FOR EXCELLENCE	<ul style="list-style-type: none"> ▪ The Learning Center, which offers drop-in tutoring and exam reviews for many courses and departments including Chemistry, Biology, Physics, Business and Economics, Accounting, Foreign Languages, Philosophy, Psychology, Computer Science and Computing, Music and others. ▪ Hosts Supplemental Instruction for specific sections of selected courses and Study Smarter Coaching to enhance Study Skills. ▪ Learning Resources page you'll find numerous links for help with course content as well as student skills. 	<p>Virginia Heidemann Tutoring Services Schurz Library 403E 574-520-4823</p>

EQUIPMENT & COST ESTIMATE TABLE

Equipment can be purchased at the IU South Bend bookstore or student preference. The IUSB Barnes & Noble bookstore stocks all equipment required.

Item	Description	Approx Cost*
REQUIRED:		
Top Hat Response System App.	Interactive app for phone or computer to use in classroom activities.	\$35.00 per year subscription
Stethoscope—Littman Classic II or Littman Cardiology III; or ADC Professional Stethoscope (603) or ADC Cardiology (601)	Professional quality with bell and diaphragm.	Cost starts around \$50.00 but students should not invest more than \$150.00 initially.
Sphygmomanometer (Blood pressure cuff)	Manual, normal adult size with portable case. Will be used often in sophomore and senior years in the community. Digital, self-inflating models are not acceptable.	Costs for quality cuff start around \$40.00
Bandage Scissors	Two pairs are recommended in case of loss.	Costs start at \$5.00
Clear metric ruler	Available in uniform shops or retail stores.	Cost starts at \$3.00
Watch with second hand	Digital watches are not permitted. Clear numbering and second marks should be clear to vision and watch band should be washable.	Personal Choice
Pen Light with pupil gauge		Costs start at \$3.50
Other recommended items:		
Digital Thermometer Reusable (with sheathes)	Reusable with disposable protective sheathes; available in most drug stores.	Costs start at \$8.00 – \$10.00
Reflex Hammer		Costs start at \$3.50.
Hemostat		Costs start at \$3.50.
Clipboard (nursing hint boards are available)		Cost \$20.00
Black ink pens and yellow highlighters		
Pocket calculators (No PDA's, cell phones etc.)		
Pocket organizer		
ID holder with key ring		
Comprehensive Medical Dictionary	Recommended: Taber's* or Mosby Phone apps may be available but cannot be used at major clinical sites.	
Medical Spell-check software		
ECG calipers in senior year		Costs start at \$5.00

*Updated June 2016. Please allow for a variation in costs.

COMPUTER PROGRAMS

All nursing students are required to have a laptop meeting these requirements.

Laptop Requirements for IU South Bend Campus

The following information is from UITS (core campuses) and is found at <http://uits.iu.edu/page/antk#new>

New Computer Hardware Minimum Recommendations

To use all the technology services available at IU, UITS suggests the following minimum hardware components for a new purchase. IU students, faculty, and staff can take advantage of special computer deals; see ComputerGuide: Deals by Vendor. Also, on this page, see the networking hardware section.

LAPTOP

	New Windows Laptop	New Mac Laptop
Processor:	2.2 GHz or higher	Any currently shipping Apple portable computer (MacBook, MacBook Pro, or MacBook Air)
Memory (RAM):	3 GB or more (we recommend 4 GB)	
Hard Drive:	250 GB or more	
Network Card:	Wireless 802.11 a/b/g/n (5GHz)	
Optical Drive:	DVD burner	
Operating System:	Windows 7 or 8	

Hardware discounts as well as software available to students can be found at www.iusb.edu/uits/software

EXAMSOFT

IU South Bend School of Nursing uses computer based testing whenever possible. The program is called "SoftTest" and must be downloaded from the company's website (www.examssoft.com/IUSBNursing). Students also receive emails with download instructions for downloads and training information. **Students are referred to as exam takers.** Make sure your email accepts email from Examssoft and the Firefox web browser is the recommended internet browser.

Extensive instructions will be provided to students.

COMPUTER AIDED INSTRUCTION

The School of Nursing subscribes to or has licenses for many computer software programs to supplement classroom instruction. Since these come in a variety of formats they can be found in several ways; faculty will let you know when they assign programs how they can be accessed. Most programs are accessed on line. That is you can access them from any internet site if you have web-site, the log-in and password. Faculty will provide you with instructions on how to access these.

We encourage all students to complete the 'Professor Nightingale's Test Taking Strategies for Student Nurses' program. This program goes over how to take nursing, NCLEX style tests and also helps with test anxiety strategies. You can access this program by going to: <http://www.professornightingale.com>. Click the Log-in button and enter: user name: sobend and password: 052510

ADDITIONAL PROGRAMS AND ACCESS EDGT

<http://edgt.com>

(You have to set up an account and access code to give to students – see Marti or your faculty member assigning the program for the access code.)

Programs:

- Be Drug Wise: Psychotherapeutic Meds Conflict Management
- Management Skills: Effective Delegation Math Magic for Meds II
- Medication Maestro: Safe Medication Administration Time Management

MSN Equipment and Software: Cost Estimate Table

Item	Description	Approx. Cost
Laptop with webcam		Personal choice
Latest version of Microsoft Office		Market price
Stethoscope—Littman Classic II or Littman Cardiology III recommended	Professional quality with bell and diaphragm.	Cost starts around \$60.
Otoscope/ophthalmoscope	Welch-Allyn type set	Costs start at \$200
Clear metric ruler	Available in uniform shops or retail stores.	Personal Choice
Pen Light	Two of these are recommended as well.	Costs start at \$5.
Reflex Hammer		Costs start at \$3.50.
ECG calipers		Costs start at \$5.
Epocrates® Essentials or Plus version	Clinical app with up-to-date medical information about medications, diseases, laboratory tests.	\$174.99/year
iHuman	Online avatar	\$ 100/semester
Typhon® NPST for Advanced Practice Nursing	Online patient tracking software with scheduling, evaluation, and portfolio functions.	Costs start at \$80. One-time fee.

*Updated by Graduate Faculty Council in 2018. Please allow for a variation in costs