LUTHER COLLEGE
Department of Nursing

STUDENT HANDBOOK
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The Luther College nursing program is currently fully accredited by the Commission on Collegiate Nursing Education and approved by the Iowa Board of Nursing.
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preface</td>
<td>6</td>
</tr>
<tr>
<td>Department of Nursing: Program Introduction</td>
<td>6-10</td>
</tr>
<tr>
<td>Department History</td>
<td>7</td>
</tr>
<tr>
<td>Mission Statement</td>
<td>8</td>
</tr>
<tr>
<td>Program Objectives</td>
<td>9</td>
</tr>
<tr>
<td>Nursing Program Information</td>
<td>10-12</td>
</tr>
<tr>
<td>Academic Admission and Progression</td>
<td>10</td>
</tr>
<tr>
<td>Admission</td>
<td>10</td>
</tr>
<tr>
<td>Direct Entry</td>
<td>10</td>
</tr>
<tr>
<td>Criteria</td>
<td>10</td>
</tr>
<tr>
<td>Notification</td>
<td>10</td>
</tr>
<tr>
<td>Minimum Standards for Progression</td>
<td>11</td>
</tr>
<tr>
<td>Probation</td>
<td>11</td>
</tr>
<tr>
<td>NCLEX-RN Preparation</td>
<td>12</td>
</tr>
<tr>
<td>Graduation Requirements</td>
<td>12</td>
</tr>
<tr>
<td>All College Requirements</td>
<td>12</td>
</tr>
<tr>
<td>Nursing Major Requirements</td>
<td>12</td>
</tr>
<tr>
<td>Mid-Year Graduation</td>
<td>12</td>
</tr>
<tr>
<td>Student Organizations</td>
<td>13</td>
</tr>
<tr>
<td>NSNA</td>
<td>13</td>
</tr>
<tr>
<td>IANS</td>
<td>13</td>
</tr>
<tr>
<td>LSNA</td>
<td>13</td>
</tr>
<tr>
<td>Department Events</td>
<td>14</td>
</tr>
<tr>
<td>All-Department Banquet</td>
<td>14</td>
</tr>
<tr>
<td>Senior Pinning Ceremony</td>
<td>14</td>
</tr>
<tr>
<td>Other Activities</td>
<td>14</td>
</tr>
<tr>
<td>Department Staffing and Committees</td>
<td>14</td>
</tr>
<tr>
<td>Department Staffing</td>
<td>14</td>
</tr>
<tr>
<td>Committees</td>
<td>14</td>
</tr>
<tr>
<td>Nursing Faculty Department Meetings</td>
<td>14</td>
</tr>
<tr>
<td>Luther College Committees</td>
<td>14</td>
</tr>
<tr>
<td>Student Resources and Services</td>
<td>15</td>
</tr>
</tbody>
</table>
Expenses Related to Nursing Program 15-17
- Background Checks 15
- Malpractice Insurance 16
- Nursing Pin 16
- CPR Certification 16
- Employment 16
- Financial Aid 16
- Off-Campus Fees 16
- Textbooks and Course Lab Manuals/Workbooks 17
- NCLEX-RN Prep Testing 17

Requirements for Participation in Clinical and Simulation Courses 17-20
- Arrangements for Clinical Experiences 17
- Previous Licensure 17
- Nursing Student Health Summary Information 17
  - First Year (& Transfer Students) 17
  - Sophomore Year 18
  - Mantoux Test 18
  - Influenza Immunization 18
- CPR Certification 18
- Health Insurance 18
- Attire for Patient/Client Interaction 19
- Equipment 19
- Preparation for Clinical Experiences 19
- Attendance at Clinical Experiences 20
- Transportation 20
- Required Agency Orientations 20

Americans with Disabilities Act: Department of Nursing Policy 20-21
- Core Performance Standards 21

Student Information 22-23
- Student Responsibilities 22
- Special Accommodations 22
- Student Clinical/Lab Contract 22
- Student Clinical Evaluations 23
- Summary Evaluation of Graduates 23
- Recreation 23
- Licensure Responsibilities 23

Academic Standards 24-25
- Clinical, Lab and Simulation Expectations 224
- Clinical Evaluation: Google Document Reflection 24
- Student Performance Requirements 24
- Significance of Failing Clinical 24
- Unsatisfactory Clinical Performance 25

Student Remediation: Performance Improvement Plans 25-26
## Skills and Simulation Labs

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab Guidelines</td>
<td>27</td>
</tr>
</tbody>
</table>

## Policies and Procedures

<table>
<thead>
<tr>
<th>Topic</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Health and Welfare</td>
<td>27</td>
</tr>
<tr>
<td>Student Illness or Injury</td>
<td>28</td>
</tr>
<tr>
<td>Pregnancy Policy</td>
<td>28</td>
</tr>
<tr>
<td>Other Health Factors</td>
<td>28</td>
</tr>
<tr>
<td>Chemical Use and Chemical Impairment</td>
<td>28-29</td>
</tr>
<tr>
<td>Complaint Process</td>
<td>39</td>
</tr>
<tr>
<td>Extended Student Absence</td>
<td>39-30</td>
</tr>
<tr>
<td>Ethical Responsibilities</td>
<td>30</td>
</tr>
<tr>
<td>Honor Code</td>
<td>30</td>
</tr>
<tr>
<td>Academic Dishonesty</td>
<td>30-31</td>
</tr>
<tr>
<td>Code of Ethics for Nurses</td>
<td>31</td>
</tr>
<tr>
<td>Bill of Rights and Responsibilities for Students of Nursing</td>
<td>31-33</td>
</tr>
<tr>
<td>Felony Convictions</td>
<td>33</td>
</tr>
<tr>
<td>Removal From and Readmission to Nursing Clinical Classes/Nursing Program</td>
<td>33</td>
</tr>
<tr>
<td>Procedures for Removal</td>
<td>34</td>
</tr>
<tr>
<td>Procedures for Appeal</td>
<td>35</td>
</tr>
<tr>
<td>Procedures for Readmission to the Nursing Program</td>
<td>34-35</td>
</tr>
<tr>
<td>Social Media Policy</td>
<td>35-36</td>
</tr>
</tbody>
</table>

## Appendices

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>APPENDIX A - Curriculum Plan for Nursing Major (started Fall semester 2018)</td>
<td>37-38</td>
</tr>
<tr>
<td>APPENDIX B - Core Performance Standards – Examples</td>
<td>39-40</td>
</tr>
<tr>
<td>APPENDIX C - Creighton Clinical Evaluation Instrument (with CCEI Standards across the curriculum)</td>
<td>41-61</td>
</tr>
<tr>
<td>APPENDIX D - Student Clinical/Lab Contract</td>
<td>62</td>
</tr>
<tr>
<td>APPENDIX E - Student Confidentiality and Integrity Agreement</td>
<td>63</td>
</tr>
<tr>
<td>APPENDIX F – Simulation Lab Confidentiality and Photo Release Agreement</td>
<td>64</td>
</tr>
<tr>
<td>APPENDIX G - Simulation Lab Fiction Contract</td>
<td>65</td>
</tr>
<tr>
<td>APPENDIX H – Student Civility Contract</td>
<td>66-68</td>
</tr>
<tr>
<td>APPENDIX I - Summary Evaluation of Graduate by Nursing Faculty</td>
<td>69</td>
</tr>
</tbody>
</table>
Preface
This handbook has been developed to assist students in the nursing major to become better acquainted with the Department of Nursing and the baccalaureate nursing program at Luther College. The information included in this handbook applies specifically to students enrolled in the nursing major and is prepared to be used in conjunction with the Luther College Student Handbook and the Luther College Catalog. This handbook is intended to be a concise, practical guide for students. We encourage you to seek clarification of any policy you do not understand. The Student Handbook is available online on the Department of Nursing website. At the start of the program, students are introduced to the Handbook and are instructed how to locate it on the website. All students are accountable for the content of the Student Handbook published in the year of admission to the nursing program. The Handbook is reviewed annually and any changes required will be shared with students via e-mail.

Department of Nursing: Program Introduction
Luther College is an independent, residential, liberal arts college affiliated with the Lutheran church. It was originally established by the leaders of the Norwegian Evangelical Lutheran Church in America in 1861 at Halfway Creek, Wisconsin as the “Norwegian Lutheran School for the Education of Ministers.” Following a year at Halfway Creek, Luther College moved to the St. Cloud Hotel in downtown Decorah where planning for a permanent building for the school to be constructed on a 32-acre site in West Decorah was begun. At this same time, the purpose of the school to prepare pastors and teachers for the church, and to provide a liberal arts education for men of the church to enter other professions requiring a more basic education was clarified. Luther College embraced the classical curriculum, which followed the pattern of the Latin schools of Europe or the German Gymnasium with emphasis on languages and literature, especially the classical languages of Latin and Greek as well as the modern languages of German, Norwegian, and English. Eventually, a radical transformation of the curriculum occurred in 1932 that moved away from the classical curriculum to the inclusion of a variety of elective choices and the Greek and Latin requirement was dropped. In addition, the formal approval of coeducation and the introduction of a series of pre-professional programs in 1936 accommodated the greater diversity of student interests in a new era of the college. Fortunately, coeducation came just in time to permit the college to survive the effects of World War II when for several years there were few enrolled male students. It is apparent that Luther College enjoys a rich history and traditions that are described in Luther College: Who We Are, written by Wilfred F. Bunge, first published in 2002 and updated in 2009. Throughout its evolution, the College has retained its steadfast commitment to the liberal arts and an “education that disciplines minds and develops whole persons equipped to understand and confront a changing society.”

Luther College is located in Decorah, Iowa, a community of 8,100 people nested in the bluff country of northeast Iowa along the Upper Iowa River. The Minnesota border lies 15 miles to the north; the Mississippi River lies 30 miles to the east. Luther is a place of intersection, founded where river, woodland, and prairie meet. The 200-acre main campus is surrounded by an additional 800 acres featuring biology field sites, and many miles of hiking and cross-country ski trails. These latter acres are devoted to farming, environmental research, and biological studies.

All students receive a solid foundation in the liberal arts through the all-college Paideia (Greek for “education”) program. Paideia includes a common yearlong interdisciplinary course for first year students and an upper class values seminar. Luther has more than 60 majors, minors,
interdisciplinary minors, and pre-professional and special programs. For the past five years, Luther has been ranked nationally as one of the top 25 baccalaureate colleges for the number of students studying abroad.

Luther College is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools, the National Council for Accreditation of Teacher Education for the preparation of elementary and secondary school teachers, the Iowa Department of Education, the Council on Social Work Education (baccalaureate level), the National Association of Schools of Music, the Iowa Board of Nursing and the Commission on Collegiate Nursing Education. The management and control of the college is vested in a Board of Regents, consisting of 30 members serving four-year terms plus a bishop designated by the bishops of the Evangelical Lutheran Church in America (ELCA), Region Five, and the president of the college as an ex officio member. The officers of administration, the president of the Alumni Association, a representative from the ELCA’s Vocation and Education Unit, and representatives of the faculty and the student body also meet with the regents.

Department History
The question of Luther College offering a major in nursing was raised during the spring of 1973. Drs. Russell Rulon and Phillip Reitan of the Department of Biology were particularly interested in the establishment of such a program. As one faculty member stated: “The Christian concept of service fully justifies Luther’s undertaking to prepare qualified nursing personnel and to give them as well the kind of liberal arts education which we are capable of doing” (Luther College Faculty Memo, December 5, 1973). Coincidentally, the administration of Rochester Methodist Hospital in Rochester, Minnesota indicated a need for graduates of a baccalaureate nursing program and pledged support for such an endeavor by offering facilities for clinical experiences. Their desire was fueled by both a wish for a mix of interdisciplinary students including baccalaureate prepared nurses receiving educational experiences at the facility and the recent closure of their diploma nursing program.

A study was conducted in the fall of 1973 to determine the feasibility of establishing a baccalaureate nursing program at Luther College. It should be noted that at this time there were no such programs in northeastern Iowa where a shortage of baccalaureate prepared nurses existed. The results of the study together with a recommendation that the College endorse a nursing program led to the approval by the College faculty and the Board of Regents of a new baccalaureate nursing program in 1974. This cemented the relationship between Luther College and Rochester Methodist Hospital, particularly since the hospital was situated in a renowned medical center, which would provide an excellent resource for the program. Mayo Clinic physicians and other health personnel used Methodist Hospital for patient care, which allowed for a variety of excellent learning experiences to be identified for the nursing program that included contact with patients from all over the United States and the world. After graduating its first class of 28 in 1978, the Luther College Department of Nursing obtained full approval from the Iowa Board of Nursing and accreditation from the National League for Nursing (NLN) in 1979. NLN accreditation was no longer sought after accreditation by AACN/CCNE (Commission on Collegiate Nursing Education) was achieved in 2003.

The nursing program is delivered on the main campus of Luther College in Decorah, Iowa and off-campus in Rochester, Minnesota, which is 75 miles northwest of Decorah. Students spend their first year, sophomore and senior years in residency on the main campus in Decorah where
they receive class and clinical experiences. The junior year is currently spent in Rochester. Students live in apartments and attend classes in space rented by Luther College at Zumbro Lutheran Church. The Zumbro facility provides classroom space, a student lounge, faculty and administrative assistant offices, and an environment conducive to learning. Clinical experiences are provided at a variety of facilities in the Rochester area.

The Department of Nursing has offered two undergraduate nursing programs, the traditional Bachelor of Arts (BA) and the BA completion program. Students are admitted to the nursing program as first year students or when a student declares a change in major. Transfer students may be admitted to the nursing program based upon analysis of their previous education and experience and on a space available basis. During fall 2011 two initiatives occurred: (1) the Luther College Department of Nursing, Luther College and its Board of Regents approved a proposal to terminate the RN-BA program which was then approved by the Iowa Board of Nursing at the November 30, 2011 meeting and, (2) a direct entry program was approved for high achieving high school students who meet specific criteria.

Over 950 students have completed the Luther College nursing program. Graduates have been employed in over 36 states as well as in such countries as Bolivia, Kenya, China, United Kingdom, Norway, Switzerland, New Zealand, Guam and Malta. Luther nursing graduates have continually strived to make the world a more comfortable, caring place to be as demonstrated by the assimilation of a variety of roles. The nursing department has indeed reinforced the mission of the college—to undertake the Christian concept of service to church, society, and the world.

Revised June 2012

Mission Statement
At Luther College, we are inspired by our faithful roots to serve the greater good. We learn in collaboration with our health partners to transform ourselves and our communities with an emphasis on global health initiatives. We foster self-reflection and self-care as teachers and within our learners to promote a sense of wholeness, wellness, and resilience. By striving to live these values, we aspire to prepare nurses to lead and reform healthcare and wellness practices in complex evolving environments through academic and clinical excellence.

This mission statement was created by the Nursing Department faculty with the intention of leveraging our values to achieve our vision. Building on our core values of leadership, reforming, social justice, and wellness and resilience, we work to achieve our vision: Norse Nurses: Bold reformers for the greater good of health and healthcare

Adopted 2018
Program Objectives
1. Utilize the knowledge, ability and values obtained through a liberal arts education as the basis for nursing practice.

2. Demonstrate leadership, knowledge and skills, quality improvement, and patient safety to provide high quality nursing care.

3. Critically evaluate and implement nursing research and theory as it applies to professional practice.

4. Utilize patient care technologies, advances in nursing sciences, and health care policies to implement and support safe nursing practices.

5. Collaborate with other health care professionals, the client, and others in the provision of care to promote, maintain and restore optimum health.

6. Assess, advocate and participate for health promotion and disease prevention strategies at the individual, family, community and populations levels.

7. Adhere to professional standards and the ANA Code of Ethics to enhance and advance the practice of professional nursing.

8. Incorporate critical thinking, communication, and caring behaviors in the application of the nursing process with a respect for the dignity, diversity and beliefs of all people in providing care to clients in diverse settings.

Adopted, May 20, 2011
Nursing Program Information

Academic Admission and Progression
Luther's nursing program, with its longstanding connection to Mayo Clinic Rochester, has a very strong reputation. Clinical resources both in the Rochester and Decorah areas limit the number of students who can be enrolled in the program and so the number of qualified program applicants may exceed the number who can be admitted. Students must understand that admission to Luther does not itself mean admission to nursing. Applicants must meet minimum eligibility requirements indicated below; however, obtaining or exceeding minimum criteria does not guarantee admission. Decisions affecting admission to the major will be made at the end of the fall semester. Luther also offers a direct entry program into the nursing major for high achieving high school seniors. Should students not qualify for admission, they are allowed one additional re-application.

Admission
Minimum criteria for admission to the nursing major include:
- A minimum cumulative grade point average (GPA) for college courses taken at Luther College of 2.75.
- A minimum grade of C in all courses required for the nursing major.
- Repetition of any single course required for the major no more than once.
- Repetition of a total of no more than two courses required for the major.

Direct Entry
Students qualified for Direct Entry into the nursing major will be contacted by Admissions. There will be no separate application to complete.

Criteria
Direct Entry admission is competitive and meeting the minimum requirements does not guarantee admission.
- Minimum 27 Composite on ACT or SAT Critical Reasoning and Mathematics combined score of 1220
- Minimum GPA of 3.8
- Minimum Science Reasoning Score of 25 on ACT or minimum 570 Mathematics score on the SAT
- No deficiencies in the minimum high school course requirements of
  - Four years of English
  - Three years of mathematics
  - Three years of social science
  - Two years of natural science (including one year of laboratory science)

Notification
Notification of acceptance of Direct Entry into the nursing major will be mailed.
**Minimum Standards for Progression:**
Students must meet criteria at the end of each semester in order to continue enrollment in nursing courses. Exceptions may be considered by the Nursing Department and communicated to individual students.

Criteria for Progression and Retention in the nursing major:
1. A minimum cumulative grade point average (GPA) of 2.75 for courses taken at Luther College.
2. A minimum grade of C in each course required for the nursing major.
3. No courses required for the major (nursing courses and correlative courses) have been repeated more than one time.
4. No more than two courses required for the major (nursing courses or correlative courses) have been repeated.
5. A level of health is maintained that does not interfere with the student’s ability to function adequately and safely in the nursing major. The student is expected to seek appropriate professional assistance as needed. The faculty may recommend the need for assistance, a leave of absence, and/or withdrawal from the program.
6. Satisfactory performance in all classroom, clinical, and laboratory (including simulation) experiences:
   a. Safe performance in clinical practice.
   b. Appropriate professional behavior.
   c. Preparation of required assignments prior to class, clinical, or lab.
   d. Follow-through with assignments/care at appropriate level.
   e. Evidence of emotional maturity when caring for patients.

Students may be **dismissed from a course for breach of ethical responsibilities**. A student dismissed for such a violation will not be allowed to continue in any clinical nursing course that semester. (For example: HIPAA violations, academic dishonesty, a pattern of late or incomplete assignments, misleading and/or misstating facts or events). A student dismissed under such circumstances will meet with the course coordinator and department head to discuss individual implications for current course schedule and continuation in the nursing program.

**Probation:**
1. Any nursing student who fails to meet the cumulative GPA requirement of 2.75 for progression in the nursing major after completing the first semester of sophomore-level nursing courses will be placed on probation.

2. A student placed on probation will be notified in writing (e-mail is acceptable) of his/her probationary status prior to the first day of classes for the next semester immediately following the term in which the deficit in academic requirement occurred. The student may choose to use his/her academic advisor, other teaching faculty or the nursing department head to assist him/her in exploring concerns, identifying problems and planning actions to meet his/her goals. A formal recommendation delineating appropriate activities may be specified for the student.

3. The student shall be returned to good academic standing and will be so notified in writing when he/she has achieved a cumulative GPA of 2.75 or higher.
4. The maximum probationary period is one semester. If the student is unable to meet the cumulative GPA progression requirements after this time, he/she will be dismissed from the program.

NCLEX-RN Preparation
The DON requires all students to participate in the Kaplan program. Kaplan is a comprehensive online assessment and review program that is designed to provide nursing students with a variety of tools that will assist them throughout their nursing program in a variety of ways. Participation in the Kaplan program will allow the student to gain experience in taking computerized nursing exams similar to the National Council Licensure Examination (NCLEX), increase confidence in nursing knowledge base and comprehension, identify strengths and weaknesses, and to develop plans for remediation ultimately enhancing success in the nursing program and the NCLEX upon graduation. Individual subject tests are administered at appropriate intervals throughout the nursing curriculum. Examples of exams utilized are the following: Critical Thinking, Fundamentals of Nursing, Physical Assessment/Wellness, Medical/Surgical, Obstetrics/Gynecology/Growth and Development, Pharmacology, Pediatrics, Psychosocial Nursing and Pathophysiology. Additional information can be found at https://nit.kaplan.com

Graduation Requirements
All College Requirements: See Luther College Catalog “All-College Requirements”
https://www.luther.edu/catalog

Nursing Major Requirements: See Luther College Catalog “Curriculum: Nursing"

Mid-Year Graduation:
The decision for mid-year graduation rests with the applicant. The following criteria should be considered in the decision-making process.
   a. An intent form provided by the department for mid-year graduation must be completed by the candidate by the end of fall semester of the junior year. This form should be sent to the Department Head. This intent form enables the faculty to assist the student in the enrollment process.
   b. The applicant should meet requirements for graduation as discussed under Criteria for Admission and Progression in the Nursing Major in the Department of Nursing Student Handbook and all College Requirements.
   c. Mid-year graduation is contingent upon space availability in clinical and lab settings. Should the Nursing Department need to limit the number of mid-year graduates, the Department will consider student cumulative GPA, Luther College credit hours earned, and total credit hours earned.
Student Organizations

NSNA - The National Student Nurses’ Association (NSNA) is the only national organization for students of nursing. The NSNA “mentors the professional development of future registered nurses and facilitates their entrance into the profession by providing educational resources, leadership opportunities, and career guidance”. NSNA does this by:

a. promoting and encouraging student participation in community affairs and activities,
b. speaking for students of nursing to the public, institutions, organizations and governmental bodies,
c. promoting and encouraging students’ participation in interdisciplinary activities,
d. working to influence the development of relevant approaches to nursing education,
e. intensifying recruitment efforts and promoting educational opportunities for all persons,
f. and promoting collaborative relationships with other nursing and health organizations.

IANS - IANS is the Iowa Association of Nursing Students. As a branch of NSNA, it functions on a state level to meet the national objectives.

LSNA - LSNA is the Luther College Student Nurse Association. The main purpose of the organization is to aid in the development of the individual students and to urge students of nursing, as future health professionals, to be aware of and to contribute to, improving the health care of all people. LSNA also makes recommendations to the Department of Nursing concerning student welfare and professional growth. Objectives include:

a. discussing pertinent matters related to student welfare, health and activities
b. promoting social and professional activities and assist with these activities when necessary

All nursing majors are encouraged to join. The group as a whole will annually elect officers. In addition, each class will annually elect two representatives to serve as liaisons to LSNA and Department of Nursing faculty. A nursing faculty member will serve as advisor. The responsibilities of student representatives include:

a. attending all meetings
b. serving as class contact persons responsible for coordinating departmental/student activities
   c. disseminating information to class members through class meetings

Activities and programs will be sponsored on campus and in Rochester throughout the year. Examples of past projects include procuring various educational films relating to the health field, sponsoring speakers, organizing and participating in screening clinics, arranging educational programs in collaboration with the college health service, promoting awareness of the organization on the campus, and participating in state and national organizations. LSNA is annually responsible for planning the departmental banquet.
Department Events
The Luther College Department of Nursing sponsors two major events each academic year. These events are the All-Department Banquet and Senior Pinning Ceremony.

All-Department Banquet
The All-Department Banquet is held annually on the Luther College campus. All levels in nursing (first year through seniors) and faculty are invited to participate. LSNA and student representatives from each class will coordinate the planning of the banquet along with a faculty advisor. The banquet consists of a social hour, dinner, and program.

Senior Pinning Ceremony
The Senior Pinning Ceremony is held each academic year in May. The ceremony is held on the Saturday of Commencement weekend. A standard program is used for the ceremony. Senior students, along with the department head and the department administrative assistant, will coordinate the arrangements. At this ceremony, the seniors receive their Luther College Nursing Pins and are honored at a reception following the program.

Other Activities
Other social activities may be initiated by faculty or students and are encouraged.

Department Staffing and Committees
Department Staffing
The Luther College faculty consists of a combination of full-time and part-time faculty, and is chaired by the Department Heads. There is one full-time administrative assistant in Decorah who works through the summer and one administrative assistant in Rochester who works during the school year only. The two administrative assistants are responsible for coordinating and carrying out the on-going support staff activity on the two campuses to meet the needs of the professional staff and students. The department may utilize work-study students during the school year.

Committees
Nursing Faculty Department Meetings
Meetings are held regularly to discuss current concerns, needs, and problems confronting the department. Students are able to have input to the faculty through their elected class representative and alternate. Students can request time at a faculty meeting to discuss concerns.

Luther College Committees
Luther College nursing students are encouraged to participate in college-wide student committees such as student senate and faculty and staff committees that include student representatives.
Student Resources and Services

Student Services

● Student Academic Support
  Luther College nursing students have access to a variety of services on campus including:
  Student Academic Support Center (SASC) (563) 387-1270 [www.luther.edu/sasc] SASC and
  TRIO staff are available to provide support and will activate disability accommodations for
  students in Decorah as well as Rochester. They are available via email, phone, virtual chat or
  in person on campus.

● Student Life [www.luther.edu/studentlife]
  o Religious Life
  o Residence Life
  o Counseling Services
    Counseling Services are also available in Rochester for nursing students through Zumbro
    Valley Health Center. Contact Rochester faculty or the Student Life Office for more
    information.
  o Wellness Education and Alcohol-Abuse Prevention
  o Career Center
  o Diversity Center
  o Health Service

  On Campus: The Luther College Student Health Service is a comprehensive outpatient
  clinic that can meet most health needs of students. Medical problems that go beyond the
  scope of the Health Service are referred to appropriate off-campus facilities. Students can
  see a nurse at no charge or a provider at a minimal charge. Students are responsible for
  submitting claims to their insurance company.

  In Rochester:
  A variety of resources are available to Luther College nursing students while they are in
  Rochester (junior year). A current list of resources is provided to students at the
  beginning of their Rochester year. Students are responsible for any charges.

Expenses Related to Nursing Program

The student is responsible for all additional expenses, unless otherwise noted.

Background Checks

Iowa law requires that nursing education programs initiate the following background checks for
students participating in clinical experiences in Iowa facilities: Criminal Background Check
through the Iowa Division of Criminal Investigation and Child & Dependent Adult Abuse
Record Checks through the Iowa Department of Human Services. There is a charge to students
for the Criminal Background Check.

Minnesota law requires that nursing education programs initiate a Background Study through the
Minnesota Department of Human Services for all students participating in clinical experiences in
Minnesota facilities. A charge for this background study was put into effect July 1, 2007.

Clinical facilities require that all students participating in clinical experiences in their agencies
initiate a national background check. This is to ensure a safe clinical environment for both
students and the public and to meet the contractual requirements of the clinical agencies. Luther has established an acceptable screening procedure with Verified Credentials, Inc. There is a charge for this service.

**Malpractice Insurance**
Luther College comprehensive fee includes the cost of the malpractice insurance required of students before beginning work in the clinical settings.

**Nursing Pin**
Upon completion of the nursing program, each student is eligible to wear the Luther College nursing pin. It was designed by the first graduating class of 1978 and reflects the philosophy of Luther College and the nursing department. (See design on the front page of the handbook.) It can be ordered through the Luther College Book Shop during the senior year and will be received during the pinning ceremony. The cost of the pin is incurred by the student.

**CPR Certification**
Cardiopulmonary Resuscitation (CPR) Certification is required for all nursing students prior to beginning clinical courses. Each student must maintain current certification through the American Heart Association (BLS for Healthcare Providers) throughout the nursing program. The cost of the certification is incurred by the student.

**Employment**
Employment is discouraged when it interferes with the student’s ability to meet course requirements. The student may not wear any identifiable part of the student uniform (i.e., school insignia, name pin) while working as a health care employee. By law, an unlicensed student may not assume professional nurse responsibilities when working for pay. He/she may only accept employment as a nurse aide/orderly, nurse technician, or in a non-nursing capacity. Summer technician/internship programs following the junior year are available from a variety of institutions and are the responsibility of the student to seek and find support. Summer internships are not required for the major. Some summer internships require faculty support and the department cannot guarantee faculty availability for this purpose.

**Financial Aid**
Several scholarships are available for nursing majors. Nursing students seeking their first bachelor’s degree benefit from the Bernice Fischer Cross and Bert S. Cross Perpetual Endowment for the Luther College Mayo Nursing Program and Health Sciences Program. This endowment is used for equal-share assistance for Luther College nursing students seeking their first bachelor’s degree who are enrolled in the curriculum provided in the Mayo Medical Center in Rochester, Minnesota. This is not a need-based scholarship. Please refer to the Luther College catalog, call the Financial Aid Office for details, or contact the Department Head.

**Off-Campus Fees**
During the junior year the College assesses a fee to offset a portion of the costs of the off-campus program. Students are responsible for the cost of housing during the Rochester year.

Students who participate in capstone experiences off-campus are required to find and finance individual housing arrangements. Faculty may not be available to provide housing support. Any additional costs related to meeting individual clinical facility health-related requirements are
incurred by the student. When offered, students may also incur additional cost if they choose to enroll in a summer capstone, which will include summer tuition, available on the Registrar’s website.

Textbooks and Course Lab Manuals/Workbooks
Textbooks and manuals are available through the Luther College Book Shop.

NCLEX-RN Preparation
Students are assessed a fee during four semesters of the nursing program for NCLEX-RN preparation. Fee includes cost of course related testing, study materials and review session following graduation in preparation for NCLEX-RN.

Requirements for Participation in Clinical and Simulation Courses
Arrangements for Clinical Experiences
Clinical experiences are arranged under the direction of the course and clinical coordinator in collaboration with the Department Head(s). Clinical agencies (Mayo Clinic Rochester, Veterans Memorial Hospital, Winneshiek Medical Center, Winneshiek Public Health, etc.) expect all clinical requests to be submitted by Luther College and not by individual students. Students are expected to communicate clinical learning needs and preferences to the course and clinical coordinator. Students should not contact clinical agencies to arrange additional clinical learning opportunities.

Previous Licensure
Clinical participation is not allowed by persons who have been denied licensure by the Iowa Board of Nursing or whose license is currently suspended, surrendered, or revoked in any country or US jurisdiction due to disciplinary action.

Note: Simulation, laboratory, and clinical experiences are all considered to be part of the clinical requirements of the nursing program. Consideration for participation, preparation, and evaluation for “clinical” experiences will be related to all of these types of learning activities.

Nursing Student Health Summary Information
The Nursing Department is required to provide documentation to clinical agencies in order to promote safety. Documentation of health information, insurance, and CPR certification is a shared responsibility of the student and Nursing Department. Failure of the student to submit documentation as directed may result in removal from clinical nursing courses.

First Year (& Transfer Students)
A complete physical examination is required upon admission to Luther College. The examination form will be sent by the Admissions Office upon acceptance to the College. It should be completed by the student’s health care provider and forwarded to the Luther College Health Service prior to entering college and will be kept on file in the Health Service Office.
Sophomore Year
Prior to entering the first nursing course, the following information must be recorded within the Student Passport System (SPS) prior to fall enrollment in the first required nursing class.

This data must be completed and submitted to the nursing department the last day of spring semester classes prior to enrollment in the first required nursing course.

1. Dates of the following vaccines:
   a. Poliomyelitis – most recent booster
   b. Diphtheria – most recent booster
   c. Tetanus – most recent booster
   d. Pertussis – most recent booster (within specified time period per clinical agency requirements)
   e. MMR (measles, mumps, rubella) – two doses. If two dose series was not completed, immunity must be verified by titer results for all three diseases.

2. Verification of Varicella (Chicken Pox) – vaccination date or year of disease.

3. Verification of Hepatitis B Vaccine – recommended but not required. Student must either provide dates for three (3) doses of the vaccination or sign waiver declining the vaccine.

4. Mantoux test must be completed upon admission and annually while enrolled in nursing courses. Reporting is required to the SPS by June 15.

Mantoux
Initially a two-step Mantoux test must be completed for incoming nursing students during June with results submitted to SPS prior to June 15. Upper class nursing students complete a one-step Mantoux and submit results in May prior to leaving campus. If a student is not able to receive the Mantoux test, it is necessary to obtain negative results through a chest x-ray for TB prior to beginning clinical courses.

Influenza immunization
Influenza immunization is required for all nursing students prior to October 31 of each year.

Failure to complete SPS documentation will impact eligibility for clinical experiences.

CPR Certification
American Heart Association BLS for Healthcare Providers certification is required for all nursing students prior to beginning nursing courses. Proof of certification is due in the Nursing Department office before students are allowed to participate in clinical experiences and must not expire prior to the end of the semester. Each student must maintain current certification. 

Proof of recertification is required to the nursing department every two years for clinical participation and must be received by the nursing department by the first day of the month after expiration month.

Health Insurance
Students who participate in nursing clinical experiences are required to have health insurance coverage. Proof of health insurance coverage must be provided on an annual basis prior to the start of any off-campus clinical experience. Students must bring their health insurance cards to the Nursing Department office each year. Photocopies will be made and kept on file.
Attire for Patient/Client Interaction

1. Professional dress includes:
   a. Below-the-knee length skirts or dresses or ankle-length dark or khaki pants. No jeans, Capri pants, or leggings with tunic tops.
   b. Clean, wrinkle free shirt or blouse (no t-shirts)
   c. Dress shoes with stockings/hose, no sneakers or athletic shoes, no exposed toes or heels
   d. A watch with a “second” hand
   e. Luther nametag and/or photo ID access card if required, visible on the upper half of the body.

2. Uniforms used for all clinical courses with the exception of Behavioral Health Nursing (Nursing 376) and Population-based Care (Nursing 421):
   a. The student uniform consists of royal blue pants, and a top as specified by the Department of Nursing, with a Luther emblem. A t-shirt or undergarment worn under the top should be solid white.
   b. Name pin shall be worn visible on the upper half of the body.
   c. White, black, or brown, soft-soled shoes with closed toe, closed low heel and with minimal colored marks are required. No Crocs or mesh on shoes are allowed. Shoes must be kept clean and be in good condition.
   d. Student uniforms are worn at all times in the clinical agencies unless otherwise designated. Uniforms should be changed prior to attending classes on campus.
   e. Clothes worn in clinical experiences should be neat, clean, wrinkle free and in good repair. There should be no wrinkles, dirt, or stains on clinical clothing.

3. Jewelry: For pierced ears, two pair of small, non-dangling earrings is acceptable. Visible body piercing, other than ears, is unacceptable during clinical experiences. They must be removed for clinical. No additional jewelry such as necklaces, bracelets or rings other than engagement and/or wedding rings may be worn.

4. Hair longer than shoulder length must be pulled back with a plain fastener. Beards and mustaches should be neatly trimmed. Hair coloring should adhere to clinical agency policy.

5. Nails should be clean, well-manicured, short and without colored polish. No artificial nails are allowed.

6. Visible tattoos need to be covered with clothing or a bandage during clinical experiences according to agency policy.

7. The use of cosmetics should be conservative in nature. Perfumes, colognes, and fragranced lotions should not be used.

8. Undergarments should not be detected through outer clothing.

Equipment
In the clinical agency, students need to have a faculty-approved stethoscope with interchangeable bells and diaphragms suitable for adults and children. Bandage scissors are also useful and recommended. Students should plan on carrying a watch and black pen.

Preparation for Clinical Experiences
Students are expected to demonstrate adequate preparation for clinical and simulation experiences. Students who are unprepared may be told by the instructor to leave the clinical setting and given a failing grade for that clinical experience.
Attendance at Clinical Experiences
Attendance and punctuality at required clinical experiences are mandatory. Tardiness or unexcused absences are considered a clinical failure for the day. Students with more than two absences will meet with the clinical faculty member and course coordinator to discuss how to meet the course objectives.

In the event of illness or emergency, the student must notify the instructor personally prior to the assigned clinical time that the student will be absent. In the event of illness or injury, the instructor reserves the right to request a health care provider’s note. Students involved in campus associated extracurricular activities (e.g. music ensembles or athletics) for which attendance to lab/clinical will be disrupted (2 occurrences or less) must make arrangements to make up the lab/clinical or attend another scheduled lab/clinical with their instructor prior to the absence. A note from the campus coach and/or activity coordinator is required to be excused from lab/clinical activities and a makeup session offered. More than two occurrences are not allowed.

Transportation
Students will be required to provide their own transportation and parking expenses when they are enrolled in nursing courses in Rochester, Decorah, and surrounding areas. Clinical experiences occur in hospitals and community settings as well as in client’s homes in Rochester, Decorah, and surrounding areas.

Required Agency Orientations
Required agency orientations will be provided prior to beginning each clinical course including safety training, confidentiality, emergency codes, etc.

Americans with Disabilities Act: Department of Nursing Policy
The Americans with Disabilities Act (ADA), 1990, was promulgated by the United States Congress to prohibit discrimination against qualified individuals with disabilities. Disability is defined in the Act as a person with a) physical or mental impairment that substantially limits one or more of the major life activities of such individuals; b) a record of such impairment; or c) being regarded as having such an impairment. A “qualified individual with a disability” is one who, with or without reasonable accommodation or modification, meets the essential eligibility requirements for participation in the program. Also see online College Catalog, “Disability Services”

Examples of disabilities likely to be covered by ADA:
- Physical Impairments: Orthopedic, visual, speech, and hearing impairments: cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV (symptomatic or asymptomatic), tuberculosis, addictions.
- Mental Impairments: Mental handicaps, organic brain syndrome, psychiatric disorders, learning disabilities.
- Examples of “record of such impairment”: history of psychiatric illness; addiction to drugs or alcohol; physical illness; erroneously diagnosed with a condition.
- Examples of “regarded” as having a disability: See SASC website
Core Performance Standards
The Department of Nursing, in defining nursing as a practice discipline with cognitive, sensory, affective and psychomotor performance requirements, has adopted a list of “Core Performance Standards” (see table below). Each standard has an example of an activity, which a student would be required to perform while enrolled in the Luther College nursing education program. Admission to and progression in the nursing program is not based on the standards. Rather, the standards are used to assist each student in determining whether accommodations or modifications are necessary.

### Core Performance Standards

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

Additional examples provided in Appendix B
Student Information

Student Responsibilities

Each nursing student at Luther College has unique personal, intellectual, emotional, and spiritual strengths, which are further developed during their learning experiences at Luther College. The student is aware of and accepting of his/her responsibility as an active, contributing member of the academic community. The student at Luther College has a right to a sound education, to self-evaluation, to organize and participate in an organization directed toward achieving professional goals and to protection of his/her academic rights. The learning process is enhanced through a collaborative relationship between teacher and student with the teacher also acting as a resource person. The student is expected to be responsible for his/her own learning and growth. In addition, the student nurse should assume responsibility for the following:

a. Knowledge about the curriculum plan for nursing majors. (See Appendix A)
b. Knowledge about criteria for progression/retention in the nursing major. (See College Catalog)
c. Knowledge about the governance and authority within Luther College.
d. Representation in recruitment of new faculty members.
e. Maintenance of confidentiality.
f. Participation in the development and evaluation of the curriculum.
g. Collaboration with other members of the health team in providing nursing care with respect for the dignity of human beings.
h. His/her appearance and conduct in the clinical area, which is reflective of professional nursing.
i. Attendance in all classes, clinicals, and exams as scheduled including final exams.

Finally, students are expected to display civil behavior in all interactions with faculty, staff, and peers and including clinical agency staff, patients, and families. Incivility will not be tolerated given its negative impact on the work and learning environments. At the start of nursing courses, students will read and sign the Student Civility Contract, which will be in effect during enrollment in the nursing program (Appendix H).

Special Accommodations

Any student needing classroom or exam accommodations due to the impact of a disability or medical condition must register for services with the Disability Services’ Office in the Student Academic Support Center (SASC). The office will verify the need for accommodations and develop a plan to be distributed to appropriate instructors. Students who use accommodations should also contact the instructor privately and in a timely manner to discuss the most effective methods to implement the approved accommodations. The SASC office is located in Room 108, Preus Library, and can be reached at (563) 387-1270.

Student Clinical/Lab Contract

At the beginning of each clinical/lab course, students will be asked to sign the Department of Nursing clinical/lab contract (Appendix D). Faculty discuss the importance of the contract with students each semester.
**Student Clinical Evaluations**
Clinical evaluations are done during and at the conclusion of each clinical course. Clinical self-evaluation and faculty evaluations are kept electronically. (See appendix C)

**Summary Evaluation of Graduates**
A summative evaluation is completed on each nursing major after completion of the curriculum. Students are evaluated individually for attainment of the program objectives. Students will complete the Summary Evaluation of Graduates Form in collaboration with their faculty advisor (Appendix I). The faculty advisor will review clinical evaluations across the curriculum to support the summary evaluation process, while the student records examples of achievement of program objectives. This completed form, signed by the student, is kept in the student’s permanent file in the Department of Nursing and may be used to assist in completing references requested at a later date.

**Recreation**
The department of nursing provides memberships at Edge Fitness for student use during their year in Rochester.

**Licensure Responsibilities**
Pre-licensure students enrolled in the nursing program at Luther College are preparing for licensure as registered nurses. On completion of the basic nursing program, a student is eligible to take the National Council Licensure Examination for Registered Nurses or NCLEX-RN. This examination is administered by each State Board of Nursing and must be passed by each graduate to register as a nurse. The examination may be taken in Iowa or in another state. Licensure by endorsement is available through other states once the examination has been passed and an application is filed with that other state.

The NCLEX-RN will be administered through a computerized testing service on an individual basis. Students will be notified through the nursing program regarding application procedures and costs as the time for the examination and licensure approaches (see Felony Convictions p. 34)
Academic Standards
Clinical, Lab and Simulation Expectations
Students will be evaluated during clinical and lab experiences using a combination of self-evaluation and faculty evaluation. See appendices C and D for faculty evaluation tools.

Clinical Evaluation
Clinical evaluation occurs in a formative and summative manner, incorporating student reflection, faculty observation, and performance evaluation. Throughout the semester, students are to write a self-evaluation found of their clinical experiences. Reflections must extend beyond what happened in clinical: It should be an in-depth analysis and reflection of your performance during clinical, reflecting your thought processes and actions, demonstrating what you learned, and creating goals/plans for future learning. Consider the questions and process below, based on Gibb’s (1988) model of reflection: what did you learn, what does it mean, and what will you do next? Reflections should be submitted as directed in the course syllabus. Clinical instructors will respond to your reflections prior to your next clinical experience; it is expected that you will review this prior to your next clinical experience and initial to indicate understanding. Additionally, formal evaluation occurs through the Creighton Competency Evaluation Instrument (C-CEI)®.

Student Performance Requirements
The following requirements are pertinent to each nursing course within the program. At a minimum, the student will:

- a. Use correct terminology (in speaking and in writing, including word choice, spelling and pronunciation).
- b. Write in a neat, legible manner.
- c. Complete assignments on time.
- d. Be on time for clinical assignments except by prior arrangement with the clinical instructor.
- e. Be responsible for getting completed assignments to the instructor.
- f. Seek guidance/assistance when appropriate.
- g. Identify own learning needs and seek experiences to meet these needs.
- h. Communicate knowledge and experiences in a collegial group (i.e., small group, clinical lab group).
- i. Evaluate self, according to course objectives/criteria.
- j. Be responsible for the content of each class, as well as materials, handouts, and announcements.
- k. Turn off all electronic devices during exams and as requested by faculty.
- l. Be responsible for understanding the expectations for college work is 2-3 hours outside for every one credit of class time, e.g. for a 4-credit course it would be 8-12 hours.

Significance of Failing Clinical
Unsatisfactory clinical performance in any clinical or lab setting is described below, but is not all-inclusive, and may result in failure of the clinical experience, clinical course, or removal from the program. A student who performs unsatisfactorily will meet with the clinical instructor, course coordinator, and department head to discuss implications of the failure in collaboration with the academic advisor. Additionally, patterns of unsatisfactory performance over time may result in removal from the program.
Unsatisfactory Clinical Performance
1. Unexcused tardiness or absenteeism.
2. Unprofessional behavior (incivility).
3. Observations of concerning student behavior by agency staff.
4. Unsafe practice.
5. Failure to adhere to the dress code. Please review the Luther College Department of Nursing Student Handbook for information on “Attire for Patient/Client Interaction” (page 17). Please note that you will be sent home if you are not in compliance with the Dress Code as described in the handbook. This is including the Simulation Experiences. Please pay particular attention to the dress code regarding hair.
6. Being unprepared to care for patients, not being able to discuss the patient’s pathophysiology or medications, treatments, procedures and/or nursing interventions.
8. Violation of HIPAA (copying information written or verbal included).
9. Administering medications without approval and/or supervision of instructor or RN.
10. Misleading or misstating facts or events.
11. Pattern of unsatisfactory or late written work.
12. Failure to resubmit written material, if requested by faculty.
13. Failure to accomplish goals set in remediation or performance improvement plan.
14. Inappropriate or personal cell phone use (including vibrating mode) when with the client or at the clinical agency. The only appropriate cell phone usage would be to utilize an electronic medication resource, calculator, or nursing resource. If you are utilizing a cell phone, please follow appropriate decontamination procedures. Follow individual course policy regarding cell phone use in clinical agencies.
15. Inappropriate internet or intranet usage while at the clinical agency.
16. In the event that a student is not performing satisfactory and safe clinical practice the student will receive both verbal and written (Google Docs) feedback and complete the Student Remediation Plan (see below).
17. In the event that a student exhibits behaviors deemed unprofessional by clinical faculty the student will work with his or her advisor to address behavior concern.

Student Remediation: Performance Improvement Plans
In the event that a student is not performing in a satisfactory manner and safe clinical practice is potentially compromised or compromised, the student will receive both verbal and written (Google Docs) feedback and remediation initiated.
1. The student and faculty will meet within 3 business days of the clinical shift and/or simulation (or as soon as schedule permits) to complete and discuss the “Performance Improvement Plan” (PIP).
2. The faculty member and student will sign the PIP in order to send to the lab director for initiation of Remediation.
   a. Remediation is the act or process of correcting a performance gap (Clinical Simulation in Nursing, (2013) 9, S15-S18, Standards of Best Practice: Simulation Standard III: Participant Objectives).
   b. PIP form is found below
3. There will be a written description of what needs to be accomplished by the student to pass clinical and the date by which the improvements need to be accomplished.
4. The student is responsible for contacting the lab director for scheduling of a remediation session within one week from notification by clinical instructor that remediation is required. The lab director will facilitate remediation and any required evaluation will be completed by the instructor.

5. Remediation may involve instructor facilitated learning, simulation, or hands on practice in the nursing lab.

6. Evaluation of the remediation success in either a clinical rotation or a simulation will occur within 2 weeks of completed remediation (or as soon as schedule permits). If the remediated skill is not improved, there will be a clinical failure as a result.

7. A student can complete no more than two different remediation topics in one semester. An identified remediation topic may only be remediated one time. If a third remediation topic/skill is required or if a student requires additional remediation on a topic that has already been remediated, the student is deemed to have failed the clinical experiences.

*Remediation is most ideally completed on the Decorah campus due to lab facilities and students in Rochester may be required to travel to Decorah for remediation purposes.

**PERFORMANCE IMPROVEMENT PLAN**

<table>
<thead>
<tr>
<th>Student Performance concerns:</th>
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<table>
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<tr>
<th>Detailed improvement plan:</th>
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<table>
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<tr>
<th>Expected Outcome (with completion date):</th>
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Student Signature & Date______________________________________________________

Faculty Signature & Date______________________________________________________

**Skills and Simulation Labs**
The Luther College Skills and Simulation Labs located in Valders Hall of Science offer a learning space created to provide students an environment dedicated to the active growth of clinical judgment. Nursing students participate in various laboratory experiences throughout the curriculum, where focus is placed on the development of competent nursing assessment, interventions, and outcome evaluation, to promote patient safety. The labs house numerous equipment and supplies, affording students hands-on learning opportunities to prepare for clinical experiences in the healthcare setting. The simulation lab contains three high-fidelity mannequins where students develop and deliver a complete plan of care, without risk of harm to the patient.
To initially participate in lab activities, incoming nursing students are required to understand and sign the Student Confidentiality and Integrity Agreement. See Appendix F. This agreement, once signed by the student, has no expiration date and remains in effect regardless of participation in future nursing coursework, graduation or leave from Luther College, or any other reason. Once students enter nursing coursework that involves simulation activities, each student is required to understand and sign both the Confidentiality and Photo Release Agreement for Simulation and the Fiction Contract for Simulation. See Appendices G and H. These agreements, once signed by the student, have no expiration date and remain in effect regardless of participation in future nursing coursework, graduation or leave from Luther College, or any other reason.

Behavior in the lab is synonymous with behavior is actual patient care settings. Students will be required to sign the Student Clinical/Lab Contract prior to participation in courses involving either the nursing labs, actual patient care settings, or both. See Appendix E.

Certain lab activities (not all) that involve a simulated clinical experience where the student is participating and/or observing in patient care and reflecting on the experience will be counted as clinical hours.

When classes are not meeting in the labs, remediation and/or additional practice of select nursing care is scheduled through the student's course instructor or the Nursing Lab and Simulation Director. Open labs are scheduled, as appropriate, for each nursing course and vary from semester to semester.

**Lab Guidelines**
1. At the end of lab sessions, all equipment and supplies should be returned to the place they were found and the lab should be left in order.
2. No mobile device or camera use is allowed in the labs except for during breaks as directed by lab faculty.
3. Students are expected to demonstrate professional behavior while in the lab, even if scheduled lab activities have been dismissed.
4. Only portable equipment may be checked out.
5. Equipment must be signed out by the Nursing Lab and Simulation Director, or as delegated.
6. Any equipment problems should be reported at the time of return.
7. Equipment belonging to the lab may not be borrowed by other agencies except at the discretion of the Nursing Lab and Simulation Director, or as delegated.
8. Faculty, staff, and students are accountable for any lost or damaged equipment signed out in their name.

**Policies and Procedures**

**Student Health and Welfare**
All Luther students are required to have private health insurance coverage and to have this information on their health records. Proof of insurance coverage is required by some clinical agencies.

Since it is the philosophy of the Department of Nursing that persons should be responsible for their own health care, there are no further requirements. However, each person is urged to seek
adequate medical care when indicated, as preventive care is preferable to curative treatment. Nurses serve as role models for clients; therefore, promotion of health should be practiced on every level. Students should aim toward an optimum level of health for themselves. It is recommended that students have a physical exam every other year and screenings as per current Center for Disease Control recommendations.

**Student Illness or Injury**
It is important to notify your instructor and the clinical area as soon as you know you will be unable to attend a scheduled clinical learning experience. If you are aware of having an elevated temperature or of having been exposed to a communicable disease, it is important to report this to your instructor.

If a student misses an assigned clinical experience due to an illness or injury they should notify their instructor. The instructor may require a health care provider verification of the illness as well as a release before the student is allowed to return to the clinical setting.

**Pregnancy Policy**
- The pregnant student must be in good health and under the care of a licensed health care provider.
- The student should inform her clinical instructor so she is not assigned to situations potentially hazardous to her pregnancy.
- The pregnant student will be allowed to continue in the clinical courses until the assignment becomes detrimental to her health, the pregnancy interferes with her educational experiences, or her licensed health care provider withdraws approval. The student shall have written permission from her licensed health care provider prior to returning to the clinical setting.

**Other Health Factors**
It is the responsibility of the student to inform the appropriate instructor(s) of any physical or mental condition that might interfere with the safety of the student and/or client while in the clinical area prior to provision of client care in the clinical setting.

**Chemical Use and Chemical Impairment**
In compliance with the ANA Code of Ethics, the Iowa Board of Nursing and personnel policies with contracted affiliated clinical agencies and with a strong commitment to protect public welfare, the Luther College nursing faculty requires that nursing students provide safe, effective and supportive patient care.

1. The Luther College nursing faculty defines the chemically impaired student as a person who, while in the academic or clinical setting, is under the influence of, or has abused, either separately or in combinations, mind altering substances including alcohol, over-the-counter medications, prescribed medications, illegal drugs, inhalants or synthetic designer drugs. Chemical abuse shall be defined as the misuse of alcohol and other drugs that impair the individual’s ability to meet standards of performance in classroom and clinical settings or contribute to inappropriate interpersonal interactions. Chemical dependency is defined as a state of chemical abuse in which there is a compulsion to take a drug, either continuously or periodically, in order to experience its psychic effects or to
avoid the discomfort of its absence. No student shall come to clinical settings under the influence of alcohol, marijuana, controlled substances, other drugs or medicines that affect his/her alertness, coordination, reaction, response, judgment, decision-making, or safety. Anyone involved in clinical experiences should not ingest alcohol at least 12 hours prior to the start of the experience.

2. Luther college faculty has a responsibility to intervene when patient safety and clinical performance are compromised by a student who is chemically impaired. Indications or symptoms of chemical impairment, abuse or dependency include (but are not limited to) the following:
   - sleepiness or altered mental status
   - tremors
   - slurred or rapid speech
   - instances of leaving without permission
   - repeated physical illness while in the clinical area
   - repeated mistakes
   - evidence of poor judgment
   - difficulty following or recalling instructions,
   - complaints from clients, family members, other students or facility staff.
   - symptoms of CNS impairment (i.e. unsteady gait, pupil dilation, withdrawal symptoms or hangover)
   - Other symptoms or symptoms of impairment not listed above

Complaint Process
The College written formal plan for handling student complaints is published in the student handbook and college catalog (www.luther.edu/catalog/), and https://www.luther.edu/studentlife/dean/studenthandbook/).

When students have cause to believe that their “right to expect that their professors are competent to render fair evaluations of student academic work, and that such evaluations will be free of prejudice and caprice have been violated,” (see Luther College Student Handbook) they may avail themselves of the College grievance procedure. Grievances fall under three categories: lack of information; competence; and prejudice. In addition, when a student feels that his/her academic evaluation has not been fairly rendered, he/she has 30 days after the release of the final grades by the Registrar’s Office to file an appeal. In the case of lack of information, the student should first make an effort to resolve the matter by registering a complaint with the instructor. In the event that this fails to produce a resolution the student may submit a formal petition to the department in question. In the case of competence and prejudice, the student may formally request a departmental review of the situation.

The College Student Senate also serves as a forum for student concerns, issues, and problems. Check out the student senate constitution here.

Extended Student Absence
Given an extended absence from nursing course and clinical work, it is the expectation that students demonstrate competence prior to re-entry into all nursing courses. For all students with an extended absence (more than 2 weeks), students will demonstrate competency based on expectations for the most recently completed nursing courses. If the absence occurs during the
semester, competency evaluation would include concepts and skills covered through the start of the absence. Additionally, students who are away from the program for more than one (1) semester should work with their advisor to consider retaking nursing courses to refresh competency.

To support the student achieving competence following an absence, the nursing department requires that a student participate in three (3) simulated lab experiences with emphasis on nursing assessment, interventions, and therapeutic communication. Each simulation experience will include evaluation with the CCEI. The first two simulation experiences will be evaluated from a formative perspective, providing the student opportunity to improve performance and achieve competence. The final simulation will include summative evaluation by two nursing faculty and requires a minimum 73% standard through the CCEI. When the student meets this criteria, the student will be allowed to return to nursing course and clinical. If the student does not meet this criteria, the student will not be allowed to progress through the program. Students may opt to withdraw from the nursing program and change majors or re-take course work recommended by faculty that will support student competency and program progression.

**Ethical Responsibilities**
Professional integrity calls for maintenance of ethical guidelines in scholastic endeavors. Students are preparing to assume the role of professional nurses, which entails moral, ethical and legal behavior. Therefore, students are expected to demonstrate integrity in completion of all course work. This refers to clinical, classroom, and related learning experiences.

**Honor Code**
At Luther College, each student assumes responsibility for maintaining academic integrity though the Honor Code. Each faculty member supports Luther College’s commitment to academic integrity by teaching and modeling academic integrity as well as by creating an environment that is supportive of the Honor Code. A student’s enrollment at Luther College acknowledges an understanding of the Honor System under which courses are being administered. If students are aware of dishonest work, they are expected to contact the Honor Council.

**Academic Dishonesty**
Personal and professional honesty is expected in all academic and clinical work. Students giving evidence of dishonesty shall forfeit the grade for that work and may fail the course or the clinical. The following behaviors are examples of violating academic honesty and include, but are not limited to:

a. *Plagiarism*: presenting another person’s work or data as your own without acknowledging the source
b. *Fabricating*: intentional falsification or invention of any information or citation-
c. *Cheating*: while an examination is being given
d. *Stealing*: Removing from the premises without permission any property belonging to the Department of Nursing or from any clinical facility with whom the Department has a contract
e. *Facilitating academic dishonesty*: knowingly or intentionally helping or attempting to help someone violate the Luther Honor System
f. *Falsification*: of attendance in non-supervised clinical experiences
g. *Lying*: the deliberate act of deviating from the truth
Group work is acceptable only when the assignment is made for group processing. Professional integrity calls for maintenance of ethical guidelines in scholastic endeavors. This refers to clinical, lab, classroom and related learning experiences.

**Code of Ethics for Nurses**

As guests in various agencies throughout clinical experiences, students are expected to conduct themselves as professionals. The *Code of Ethics for Nurses*, adopted by the American Nurses’ Association (2014), is a suggested guideline for professional behavior.

- The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
- The nurse’s primary commitment is to the patient, whether an individual, family, group, or community.
- The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
- The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse’s obligation to provide optimum patient care.
- The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
- The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
- The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
- The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.
- The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

**Bill of Rights and Responsibilities for Students of Nursing**

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

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures, which provide and safeguard the students’ freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.

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

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

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

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

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

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

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

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

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

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

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

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

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

18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.

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

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

21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

Felony Convictions
Chapter 147.3 of the Iowa Code provides for a licensing board to consider past felony convictions of applicants for licensure in the state. It is important to understand that a felony conviction will not automatically preclude anyone from licensure in this state. However, the law (Sect. 147.3, Iowa Code) does provide the opportunity for regulatory boards to review such convictions.

The Iowa Board of Nursing, after review of relevant information, must determine whether or not the felony relates to the practice of the profession before the issuance of a license. The applicant will be asked to appear before the Board at a regularly scheduled meeting to provide clarification or answer questions, as is deemed appropriate. Should the Board find that the felony does relate to the practice, they still may determine that licensure will be granted due to demonstrated successful rehabilitation. The Board’s authority in this matter does not extend to institutional requirements for entry into nursing education programs, or exclude one from taking the licensure examination. Should there be additional questions or concerns, please contact the Department Head. All other states in the USA have similar policies regarding prior felony convictions.

Removal From and Readmission to Nursing Clinical Classes/Nursing Program
A Luther College student may be removed from his/her nursing courses, including but not limited to clinical experiences, under the following conditions:

1. The Luther student interacts with any instructor, facility staff, peer, or patients in an inappropriate manner:
   a. Physical, sexual, or verbal abuse
   b. Impatience, humiliation, or harassment
   c. Inappropriate contacts which imply a friendship rather than a mentor relationship
   d. Discussion of highly personal topics with patients
   e. Violation of confidentiality
   f. Inappropriate language, jokes, innuendoes, or sharing of inappropriate printed and/or media material with patients
   g. Inappropriate use of electronic mail and/or technology in the work setting.

2. The Luther student is found to be in possession or use of drugs or alcohol, which may involve physiological or psychological hazards.

3. The Luther student displays behaviors that reflect academic dishonesty or is dishonest with nursing department faculty regarding assignments, clinical absences, personal concerns or status as a student.

4. The Luther student exhibits behavior that could endanger patients or others.

5. The Luther student fails to comply with the objectives of the clinical experience; fails to demonstrate a growing sense of the profession because of prolonged absence and/or tardiness; or is found guilty of a felony crime during the clinical placement whether or not such is related to the health science setting.
Procedures for Removal
The process begins when it is determined by appropriate persons (clinical faculty, faculty, Nursing Department Head, and clinical agency personnel), that a situation exists which prevents the student from making continual progress during the clinical experience. Specifically, the process begins when circumstances indicate that the student is unable or unwilling to make critical changes or adaptations that would result in progress toward gaining professional skills.

A recommendation for removal from a clinical placement may be made by a clinical instructor, Luther professor(s), or other person(s) knowledgeable about the behavioral concerns. Written documentation regarding the area(s) of concern shall be provided by the individual recommending the removal. Nursing Department Head will consider the nature of the concerns and share that information with the student nurse's academic advisor and the appropriate departmental faculty.

Nursing Department Head will also confer with the student nurse, in person, by phone or by electronic means, to verify the information and gain an understanding of his/her knowledge and explanation related to the concerns. The Department Head will make his/her decision based on the best interest of the cooperating medical facility and the patients being served, taking into consideration the student nurse, to the extent possible.

The Department Head will, after consultation with appropriate college and clinical agency personnel, inform all parties of the date of termination and any other contingencies that must be addressed to ensure the ongoing care of patients. He/she will also inform the Student Life and Registrar's offices at Luther College.

Procedures for Appeal
Students who do not agree with the decision regarding removal from the clinical placement may appeal that decision, in writing, to the Vice President for Academic Affairs and Dean of the College. Such appeal should list the reasons why the student believes the removal unwarranted, under one of the three reasons given in the Faculty Handbook policy 614.0: “lack of information, competence, or prejudice.” Such an appeal must be made prior to the end of the semester in which the removal occurred. The decision of the Vice President for Academic Affairs and Dean of the College is final.

Procedures for Readmission to the Nursing Program
1. Once any illness leads to the student being unable to progress (withdrawal from classes or medically-related withdrawal from the college), re-admission is handled by Student Life and the faculty in the Nursing Department. If faculty recommendations are favorable and space is available in the appropriate clinical nursing course, the student may apply to re-enter within two calendar years of the date of withdrawal.

2. Students who wish to return to the Luther College Nursing Program must apply for re-admission by contacting the Student Life Office. Application for re-admission requires a statement of intent to return and supporting evidence for readiness to rejoin the college. Student Life staff will provide information and assist the student in completing the appropriate forms in cases where students have been on a medical-related withdrawal or who have been removed from nursing classes.
For chronic issues, the department will typically require that a student take a considerable leave from the program. For example, if a student withdraws medically in relation to a chronic health issue or mental health concern in the fall, the committee will not permit his/her return until the following fall, on the assumption that more than several months will be required to manage a chronic health or mental health issue. On the other hand, in the case of a family crisis of short duration, the department would most likely approve a return the upcoming semester. The department head, assisted by the clinical faculty member(s) involved, will provide the student with specific information regarding their evaluation of the student’s potential to succeed and recommendations concerning re-entry into the appropriate clinical nursing course.

3. In the situations of chronic or mental health issues mentioned above, the student is required to have a medical and/or mental health provider complete the form, “Medical Release of Information,” (forms available in Student Life Office) which requests information on support services and recommendations for the student, as well as documentation that supports that the student is capable of meeting the requirements of a nursing clinical experience.

Failure to provide documentation or comply with the recommendations may delay or cancel re-entry. In the event that space is not available to accommodate all students recommended for re-entry into a particular clinical nursing course or sequence or in unusual circumstances, priority for re-entry will be based upon recommendations of departmental faculty and the Department Head of Nursing.

4. After the required documentation is provided, it will be reviewed by the Nursing Department, who will then notify the Student Life office regarding re-admittance.

Social Media Policy

Social media includes personal blogs and other websites, including Facebook, LinkedIn, SnapChat, Instagram, Twitter, YouTube or others. These guidelines apply whether a student is posting to his/her own site or commenting on other sites:

1. Follow all applicable Luther College internet usage guidelines

2. Follow all applicable clinical agency internet usage guidelines

3. Maintain confidentiality, you must not post pictures or write about patients, patient family members or the inside of any clinical agency without the express permission of that agency

4. Whether you identify yourself as a nursing student or not, your social media activities should be consistent with the profession’s high standards of conduct.

5. Be professional; use good judgment and practice mutual respect toward peers, faculty and other nursing students. For example:
   a. Do not wear your uniform into social settings (bars) where pictures may be taken of you and posted online.
   b. Do not friend faculty until after you graduate from the program.
   c. In the “about me” section of your blog or social media site, be clear that “the views expressed on this site are my own and do not reflect the views of my nursing program or clinical agencies.”
   d. Do not make disparaging remarks about patients, other nursing students, faculty, staff nurses or facilities.
e. Cyber-bullying is considered lateral violence and affects the patient care team and the effectiveness of care. This may result in sanctions by the college or an employer.

Luther College nursing faculty and affiliated clinical agencies strongly discourage “friending” of patients on social media websites except in the unusual situation where a friendship pre-dates the clinical relationship. If you communicate on sites or blogs that are affiliated with Luther College in any way, be aware that you represent Luther’s nursing program and professional language and behavior is expected.

Students are made aware of the fact that in the workplace as a future RN, instances of inappropriate use of social and electronic media may be reported to the Board of Nursing, this varies according to jurisdiction. The BON may investigate a nurse on the grounds of unprofessional conduct, unethical conduct, moral turpitude, mismanagement of patient record, revealing privileged communication and breach of confidentiality. Such allegations and potential disciplinary action may affect your job review, your ability to get a job, and may result in civil or criminal penalties.
**PROPOSED CURRICULUM PLAN FOR NURSING MAJOR**
(all sophomores and first-year students beginning fall semester 2018)

<table>
<thead>
<tr>
<th>FIRST SEMESTER</th>
<th>JANUARY TERM</th>
<th>SECOND SEMESTER</th>
<th>SUMMER</th>
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<tbody>
<tr>
<td><strong>First Year 20____</strong></td>
<td>First Year</td>
<td>Paideia I ................. 4</td>
<td>Biology 116 ................. 4</td>
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<tr>
<td>Paideia I ................. 4</td>
<td>J-term Seminar .................. 4</td>
<td>Biology 116 ................. 4</td>
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<td>Biology 115 ................. 4</td>
<td></td>
<td>Health 125 ..................... 2</td>
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<tr>
<td>PE Skills/Wellness .............. 2</td>
<td></td>
<td>Psych130/Rel/Language ............. 4</td>
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<td>Psych130/Rel/Language ............. 4</td>
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<td><strong>Sophomore Year 20____</strong></td>
<td>Biology 190 ................. 4</td>
<td>Nursing 236 ..................... 2</td>
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<tr>
<td>Biology 190 ................. 4</td>
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<td>Nursing 237 ..................... 2</td>
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<td>Nursing 234 ..................... 2</td>
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<td>Science 250 ....................... 4</td>
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<td>Nursing 235 ..................... 2</td>
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<td>Psych240 (if needed) ............. 4</td>
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<td>Science 240 ..................... 4</td>
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<td>Elective .........................</td>
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<tr>
<td>Psych130 or Psych 240 ............. 4</td>
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<tr>
<td><strong>Junior Year 20____</strong></td>
<td>______ .................. 4</td>
<td>Nursing 372 ..................... 2</td>
<td></td>
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<tr>
<td>Rochester, MN @Mayo facilities</td>
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<td>Nursing 373 ..................... 2</td>
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<td>Nursing 370 ..................... 2</td>
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<td>Nursing 382 ..................... 2</td>
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<td>Nursing 371 ..................... 2</td>
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<td>Nursing 376 or Nursing 378 .......... 2</td>
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<td>Nursing 374 ..................... 2</td>
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<td>Nursing 386 ..................... 2</td>
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<td>Nursing 377 ..................... 4</td>
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<td>Nursing 388 ..................... 2</td>
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<td>Nursing 376 or Nursing 378 .......... 2</td>
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<td>Nursing 390 ..................... 2</td>
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<td>Nursing 384 ..................... 2</td>
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<tr>
<td><strong>Senior Year 20____</strong></td>
<td>Nursing 480 ..................... 4</td>
<td>Nursing 425 (if needed) ............. 2</td>
<td></td>
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<tr>
<td>Nursing 420 ..................... 2</td>
<td>(160 hours – Med/surg)</td>
<td>Nursing 490 (if needed) ............. 1</td>
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<tr>
<td>Nursing 421 ..................... 2</td>
<td></td>
<td>Nursing 421 (if needed) ............. 2</td>
<td></td>
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<tr>
<td>Nursing 490 ..................... 1</td>
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<td>Elective .........................</td>
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<tr>
<td>Nursing 425 ..................... 2</td>
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<td>Elective .........................</td>
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<tr>
<td>Elective .........................</td>
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</tbody>
</table>

*Requirements to enter/remain in the Program:
- 2.75 GPA (Luther Cumulative)
- “C” or better in Nursing and nursing support courses

Optional: Study Away (Nottingham, England)
N420 ..................... 2
N421 ..................... 2
Nursing 480 ..................... 4
(160 hours – Med/surg)
Both courses are contingent upon faculty and clinical space availability.
### CURRICULUM GUIDE FOR NURSING MAJOR

<table>
<thead>
<tr>
<th>GENERAL REQUIREMENTS</th>
<th>SUPPORTIVE REQUIREMENTS</th>
<th>NURSING MAJOR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Common Ground</strong></td>
<td>Bi115: Human Anatomy (NWL)</td>
<td>Nurs 234: Pathways to Practice I</td>
</tr>
<tr>
<td>Paideia I (2 courses)</td>
<td>Bi116: Intro-Human Physiology</td>
<td>Nurs 235: Pathways to Practice I Lab</td>
</tr>
<tr>
<td>Religion (2 courses)</td>
<td>Bio190: Clinical Microbiology</td>
<td>Nurs 236: Pathways to Practice II</td>
</tr>
<tr>
<td>Language (0-3 courses)</td>
<td>Psych130: General Psychology (HBSSM)</td>
<td>Nurs 237: Pathways to Practice II Clinical</td>
</tr>
<tr>
<td>Wellness (2 courses)</td>
<td>Psych240: Developmental Psych (HB)</td>
<td>Nurs 370: Health &amp; Healing I (4 credit)</td>
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<tr>
<td><strong>Fields of Inquiry: Human Knowledge and Its Methods</strong></td>
<td>Health125: Prin. of Nutrition</td>
<td>Nurs 371: Health &amp; Healing I Clinical</td>
</tr>
<tr>
<td>The Natural World (2 courses)</td>
<td>Sci250: Clinical Pharmacology (Quant)</td>
<td>Nurs 372: Health &amp; Healing II</td>
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<tr>
<td>Human Behavior (2 courses)</td>
<td>Sci240: Pathophysiology</td>
<td>Nurs 373: Health &amp; Healing II Clinical</td>
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<td>Human Expression (2 courses)</td>
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<td>Nurs 374: Behavioral Health Care</td>
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<td><strong>Integrative Understanding</strong></td>
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<td>Nurs 376: Behavioral Health Clinical</td>
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<tr>
<td>Paideia II (0-2 courses)</td>
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<td>Nurs 377: Family/Child Nursing</td>
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<tr>
<td>Senior Project (1 course)</td>
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<td>Nurs 378: Family/Child Nursing Clinical</td>
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<td><strong>January Term</strong></td>
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<td>Nurs 382: Gerontological Nursing</td>
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<tr>
<td>First Year J-term Seminar</td>
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<td>Nurs 384: Evidence Based Practice</td>
</tr>
<tr>
<td>(1 course)</td>
<td></td>
<td>Nurs 386: Prof Nsg Prac: An Immersion Exper</td>
</tr>
<tr>
<td>Second Required J-Term (1 course)*</td>
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<td>Nurs 388: Health Informatics</td>
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<td>Nurs 390: Nursing Leadership in Health Care</td>
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<tr>
<td><strong>Perspectives</strong></td>
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<td>Nurs 420: Population Based Care</td>
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<tr>
<td>Intercultural (1 course)</td>
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<td>Nurs 421: Population-Based Care Clinical</td>
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<tr>
<td>Historical (1 course)</td>
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<td>Nurs 425: Synthesis of Nsg Prac Across Lifespan</td>
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<tr>
<td>Quantitative* (1 course)</td>
<td></td>
<td>Nurs 480: Sr Leadership Capstone (4 credit)</td>
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<tr>
<td>Ethical *</td>
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<td>J-term or summer after junior year</td>
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<td>Research *</td>
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<tr>
<td>Speaking and Public Presentation*</td>
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<tr>
<td>Writing*</td>
<td></td>
<td>Nurs 490: Senior Project</td>
</tr>
</tbody>
</table>

* requirements met by Paideia II and nursing classes

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### Nursing Handbook 2018
APPENDIX B

LUTHER COLLEGE
Department of Nursing

CORE PERFORMANCE STANDARDS – EXAMPLES

PHYSICAL ACTIVITY REQUIREMENTS

- CONSTANT
  - Reaching: Extending hand(s) and arm(s) in any direction.
  - Standing: Maintaining an upright position.
  - Walking: Moving about on foot to accomplish tasks.
  - Lifting: Raising objects from a lower to higher position or moving objects horizontally from position to position.
  - Fingering: Writing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.
  - Talking: Expressing or exchanging ideas by means of the spoken word – those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.
  - Hearing: Perceiving the nature of sounds at normal range; ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when auscultating and percussing.
  - Repetitive Motions: Substantial movements (motion) of the wrists, hands, and/or fingers.

- FREQUENT
  - Balancing: Maintaining equilibrium to prevent falling when assisting patients with activity.
  - Stooling: Bending body downward and forward by bending spine at the waist (for example, emptying suction canister that is below waist level or obtaining supplies from low shelves)
  - Kneeling: Bending legs at knee to come to rest or kneel.
  - Crouching: Bending the body downward and forward by bending leg and spine.
  - Pushing: Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.
  - Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.
  - Grasping: Applying pressure to an object with the fingers and palm.
  - Feeling: Perceiving attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of the fingertips and palms.

- OCCASIONAL
  - Climbing: Stairs, stools, ramps

VISUAL ACUITY REQUIREMENTS

- Ability to read pertinent printed material and distinguish colors.
- Ability to include inspection during patient assessment.
- Ability to accurately read measurements on patient related equipment--some examples include: thermometers, mechanical gauges, glucometers, IV pumps, and computer monitor displays
INTELLECTUAL/EMOTIONAL REQUIREMENTS
Students are required to:
● Identify relevant data during client assessments
● Analyze data using principles of logical or scientific thinking to formulate nursing diagnoses
● Evaluate the outcomes of client care
● Collaborate with other health care professionals to meet common goals.
● Adaptability to performing a variety of duties, often changing from one task to another without loss of efficiency or composure.
● Demonstrate professional and ethical conduct as outlined in the Student Handbook.

EQUIPMENT/TOOLS
Students will routinely use the following equipment:
● Standard medical and nursing equipment and special equipment found in the assigned area.
● Computers

CLASSROOM, LABORATORY, AND CLINICAL CONDITIONS
● Students in this classification have been identified as having the likelihood of occupational exposure to blood or other potentially infectious materials and, therefore, are included in the OSHA Exposure Control Plan with all its specifications for preventing contact with the above material.
● The student may be required to wear a facemask, gown, and/or gloves.
● The student is subject to inside environmental conditions, for example, protection from weather conditions, but not necessarily from temperature changes.
● The student is subject to hazards in the work area and may be exposed to chemotherapy spills, chemical cleaners, radioactive implants/isotopes, and/or sharp instruments.
● The student is subject to a range of noise levels from quiet to moderate: phones, pagers, mechanical alarms (i.e. IV pumps, ventilators, cardiovascular monitors, pulse oximeters), and occasional construction noise.
## APPENDIX C

### Creighton Competency Evaluation Instrument (C-CEI)

**College of Nursing**

<table>
<thead>
<tr>
<th>Student(s) Name:</th>
<th>Scenario:</th>
<th>Evaluator:</th>
<th>Date: <strong><strong>/</strong></strong>/____</th>
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<table>
<thead>
<tr>
<th><strong>ASSESSMENT</strong></th>
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<th>COMMENTS:</th>
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<tbody>
<tr>
<td>1. Obtains Pertinent Data</td>
<td>0</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>2. Performs Follow-Up Assessments as Needed</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>3. Assesses the Environment in an Orderly Manner</td>
<td>0</td>
<td>1</td>
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<table>
<thead>
<tr>
<th><strong>COMMUNICATION</strong></th>
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<tbody>
<tr>
<td>4. Communicates Effectively with Intra/Interprofessional Team (TeamSTEPPS, SBAR, Written Read Back Order)</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>5. Communicates Effectively with Patient and Significant Other (verbal, nonverbal, teaching)</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>6. Documents Clearly, Concisely, &amp; Accurately</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<td>7. Responds to Abnormal Findings Appropriately</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<td>8. Promotes Professionalism</td>
<td>0</td>
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<td>NA</td>
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<tr>
<th><strong>CLINICAL JUDGMENT</strong></th>
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<tbody>
<tr>
<td>9. Interprets Vital Signs (T, P, R, BP, Pain)</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>10. Interprets Lab Results</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>11. Interprets Subjective/Objective Data (recognizes relevant from irrelevant data)</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>12. Prioritizes Appropriately</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>13. Performs Evidence Based Interventions</td>
<td>0</td>
<td>1</td>
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<tr>
<td>14. Provides Evidence Based Rationale for Interventions</td>
<td>0</td>
<td>1</td>
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<tr>
<td>15. Evaluates Evidence Based Interventions and Outcomes</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>16. Reflects on Clinical Experience</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>17. Delegates Appropriately</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<th><strong>PATIENT SAFETY</strong></th>
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<tbody>
<tr>
<td>18. Uses Patient Identifiers</td>
<td>0</td>
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<td>NA</td>
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<tr>
<td>19. Utilizes Standardized Practices and Precautions Including Hand Washing</td>
<td>0</td>
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<tr>
<td>20. Administers Medications Safely</td>
<td>0</td>
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<tr>
<td>21. Manages Technology and Equipment</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>22. Performs Procedures Correctly</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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<tr>
<td>23. Reflects on Potential Hazards and Errors</td>
<td>0</td>
<td>1</td>
<td>NA</td>
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</tbody>
</table>

**COMMENTS**

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For more information, please contact Martha Todd, MS, APRN @ mtodd@creighton.edu

Revised 4/22/2014

Nursing Handbook 2018
CCEI Grading Guidance

*Before any instructor evaluates students using the CCEI, it should be required that they demonstrate completion of the online training: https://nursing.creighton.edu/academics/competency-evaluation-instrument/training*

This table provides guidance for students and faculty regarding clinical expectations across the curriculum. It is assumed that all expectations from previous courses are implemented in concurrent and future clinical courses.

**The instructor reserves the right to fail any student for unsafe care regardless of credit received or passing score if the instructor deems the student’s knowledge and/or practice to be inadequate. This results in failure for the clinical (including simulation) shift and may have impact for course outcomes and progression.

<table>
<thead>
<tr>
<th>ASSESSMENT</th>
<th>N237 Criteria for Score of 1</th>
<th>N371 Criteria for Score of 1</th>
<th>N373 Criteria for Score of 1</th>
<th>N376 Criteria for Score of 1</th>
<th>N378 Criteria for Score of 1</th>
<th>N425 Criteria for Score of 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obtains Pertinent Data</td>
<td>● Obtains 2 pieces of subjective data related to patient presentation, diagnosis, or reason for admission</td>
<td>● Be prepared to discuss relevant subjective and objective data from assessment</td>
<td>● Completes physical assessment in an organized, thorough manner without assistance from RN or instructor</td>
<td>● Obtain (and be prepared to discuss) relevant subjective and objective data.</td>
<td>● Obtain pertinent data from the pregnancy record</td>
<td>● Obtains specific subjective data related to patient presentation, diagnosis, or reason for admission (i.e. a patient with a headache includes interview about vision changes)</td>
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<tr>
<td>Obtains 2 pieces of objective data from physical assessment related to patient presentation, diagnosis, or reason for admission</td>
<td>● Obtains pain (rating, location)</td>
<td>● On Mary Brigh 9D/E: Complete neuro exam, including cranial nerves</td>
<td>● Be prepared to discuss relevant subjective and objective data from assessment</td>
<td>● Review vital signs (including pain ratings).</td>
<td>● Be prepared to discuss relevant subjective and objective data.</td>
<td>● Obtains specific objective data related to patient presentation, diagnosis, or reason for admission.</td>
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<tr>
<td>Obtains pain (rating, location)</td>
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<td>● On Francis 5C: Assess for signs of medication toxicity (tinnitus, tingleing, and metallic taste in the mouth) for epidural patients</td>
<td>● On Mary Brigh 5C/F: Assess chest tube drainage for</td>
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<td>● On Mary Brigh 5C/F: Assess chest tube drainage for</td>
<td>● Completes physical assessment in an organized, thorough manner without assistance from RN or instructor</td>
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<tr>
<td>Perform Follow-Up Assessments as Needed</td>
<td>Performs follow-up assessments as needed</td>
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<tr>
<td>- Performs follow-up assessments based on patient presentation, diagnosis, or reason for admission</td>
<td>- Can discuss the difference between a focused and full assessment and describe what focused assessments are required on an ongoing basis during the clinical shift</td>
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</table>
| - Examples: Patient rates pain 7/10 and Student Nurse assists with splinting and administers 10 mg Oxycodone. An hour later Student Nurse reassesses pain and finds patient reports reaching the pain goal of 3/10. Or, patient has urinary catheter removed at 0600. Student Nurse assesses for need to void during initial assessment at | - Example: Student reviews labs and notices the patient is anemic with a Hemoglobin 7.5gm/dl. Student immediately assesses vital signs, observing for signs of poor perfusion (mentation, chest pain, shortness of |}

- Performs follow-up assessments when necessary/required
- Performs follow-up assessments as needed
- Examples: C-section patient rates pain 7/10 and Student Nurse assists with splinting and administers 10 mg Oxycodone. 45 minutes later, LCSN reassesses pain and finds patient reports reaching the pain goal of 3/10.
- Fr3C/2B: reassessment after pain, nausea, admission (i.e. a patient with a headache includes assessment of pupils and motor response of the face and extremities)
- Obtains pain (rating, location, onset)
- Obtains VS (full set, including pulse ox)
<table>
<thead>
<tr>
<th>Assesses the Environment in a Orderly Manner</th>
<th>Does not behave with detriment in regards to environment safety concerns during scheduled clinical shift at clinical site or in simulation</th>
<th>Sample assessment: 0800 and follows up before 1200.</th>
<th>Follow up before 1200.</th>
<th>Complete an environmental assessment for safety. (Room checks and Milieu checks.)</th>
<th>Survey the environment for safety, cleanliness, and organization</th>
<th>Survey the environment for safety, cleanliness, and organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Survey the environment for safety, cleanliness, and organization</td>
<td>• Bed is low, locked with call light within reach. Surfaces free of clutter (bedside table, floor, etc.). Any necessary supplies for assessment (cotton swab) or interventions (dressing supplies) are at bedside.</td>
<td>• Bed is low, locked with call light within reach. Surfaces free of clutter (bedside table, floor, etc.). Any necessary supplies for assessment (cotton swab) or interventions (dressing supplies) are at bedside.</td>
<td>• Complete an environmental assessment for safety. (Room checks and Milieu checks.)</td>
<td>• Survey the environment for safety, cleanliness, and organization</td>
<td>• Bed is low, locked with call light within reach. Surfaces free of clutter (bedside table, floor, etc.). Any necessary supplies for assessment (cotton swab) or interventions (dressing supplies) are at bedside.</td>
<td></td>
</tr>
<tr>
<td>• On Mary Brigh 9D/E: Suction and oxygen set up, seizure pads with rails up on Seizure Precaution care plan.</td>
<td>• On Francis 5C and Mary Brigh 5C/F: Continuous</td>
<td>• On Francis 5C and Mary Brigh 5C/F: Continuous</td>
<td>• Complete an environmental assessment for safety. (Room checks and Milieu checks.)</td>
<td>• On Mary Brigh 9D/E: Suction and oxygen set up, seizure pads with rails up on Seizure Precaution care plan.</td>
<td>• On Francis 5C and Mary Brigh 5C/F: Continuous</td>
<td></td>
</tr>
<tr>
<td>• Ei 52: For patients with NGT, NGT is patent and connected to appropriate suction.</td>
<td>• Ei 72: Ineffective protection reflected in POC for patients with impaired immunity. Only dedicated</td>
<td>• Ei 72: Ineffective protection reflected in POC for patients with impaired immunity. Only dedicated</td>
<td>• Ei 72: Ineffective protection reflected in POC for patients with impaired immunity. Only dedicated</td>
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<td>• Ei 72: Ineffective protection reflected in POC for patients with impaired immunity. Only dedicated</td>
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<tr>
<td>• Fr3C/2B: Crib safety, rails up,</td>
<td>• Identifies safety concern before patient harm and immediately prevents or corrects</td>
<td>• Examples of environmental safety concerns include, but are not limited to, improper use of side rails and bed elevation, slippery surfaces/spillage or clutter not attended to, no call light, not fixing risky patient positioning, biohazard left at bedside,</td>
<td>• Is there family or a significant other present?</td>
<td>• On Ei 32/33: Continuous pulse oximetry in place for patients on epidural pain management; neonate safety and abduction precautions, bassinette safety</td>
<td>• Fr3C/2B: Crib safety, rails up,</td>
<td></td>
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<tr>
<td>Unclean surfaces used in care, oxygen/suction/IV pump in use not assessed for accuracy, etc.</td>
<td>Pulse oximetry in place for patients on PCA or epidural pain management; assessment of chest tube drainage system and presence of blue clamps</td>
<td>Equipment in the room. No fresh flowers or fruit present. ET5/6: Patient is aware of activity or fluid restrictions. Cardiac monitor in place and turned on.</td>
<td>Abduction precautions for under age 2, room order</td>
<td>Oxygen/suction/IV pump in use not assessed for accuracy, etc.</td>
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</table>

**COMMUNICATION**

- Communicates Effectively with Intra/Interprofessional Team (TeamSTEPPS, SBAR, Written Read Back Order)
- Communicates integrity
- Uses N371 Communication tool to introduce self to assigned RN, discuss student learning and patient care needs, and evaluate performance
- Uses SBAR during patient hand-off
- Uses closed-loop communication
- Uses SBAR during patient hand-off
- Demonstrates effective SBAR during CCEI post-conference, demonstrating the ability to be complete and concise in report
- Communicates in a professional manner (both verbal and non-verbal) with patients, staff (SBAR), peers and faculty.
- Demonstrates trustworthiness, genuineness, and warmth.
- Uses SBAR during patient hand-off
- Provides organized report to provider or healthcare team member with minimal prompting
- Utilizes 'read back and verify' following verbal orders and/or diagnostic results received
- Identifies self to healthcare staff communicate with
<p>| Communicates Effectively with Patient and Significant Other (verbal, nonverbal, teaching) | Introduces self | Explains plan of care | Uses layperson terms | Does not ignore patient's verbal expressions | Communicate with patient and significant other(s) is accurate | Adapts communication approach to needs of patient and family (ie, use of humor or silence) | Engages patient and family in care planning | Uses White Boards for planning purposes | Discusses POC and shift goals with patient and family | Utilize therapeutic communication strategies including: Establishing initial rapport and presenting self as trustworthy. Establishing an effective working relationship with the client | Presenting self as someone who has information, skill and ability that can help the patient or significant others. Avoiding superficiality and “social” communication with patients. Structuring the 1:1 therapeutic interaction. Inviting the client to talk about whatever he or she wants to share. Using open-ended questioning to encourage | Adapts communication approach to developmental needs of patient and family members | Introduces self, discusses POC with patient and family demonstrates good listening skills demonstrates integrity in interdisciplinary communication | Introduces self | Explains plan of care | Uses layperson terms | Does not ignore patient's verbal expressions | Communicate with patient and significant other(s) is accurate | Adapts communication approach to needs of patient and family (ie, use of humor or silence) | Engages patient and family in care planning | Uses White Boards for planning purposes | Discusses POC and shift goals with patient and family | Utilize therapeutic communication strategies including: Establishing initial rapport and presenting self as trustworthy. Establishing an effective working relationship with the client | Presenting self as someone who has information, skill and ability that can help the patient or significant others. Avoiding superficiality and “social” communication with patients. Structuring the 1:1 therapeutic interaction. Inviting the client to talk about whatever he or she wants to share. Using open-ended questioning to encourage | Adapts communication approach to developmental needs of patient and family members | Patient education occurs as appropriate (i.e. explanation of meds or other interventions before administration; education on disease process). |</p>
<table>
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<th>Patient to explore thoughts and feelings.</th>
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<tr>
<td>Actively listening (SOLER: Sit squarely, Open-body, Lean forward, Eye contact, Relaxed posture)</td>
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<td>Using silence in a therapeutic manner.</td>
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<tr>
<td>Reflecting feelings</td>
</tr>
<tr>
<td>Accurately perceiving/imaging (in your mind) the feelings the client might be experiencing</td>
</tr>
<tr>
<td>Stating to the patient your understanding of his/her feelings</td>
</tr>
<tr>
<td>Validating your perception of feelings</td>
</tr>
<tr>
<td>Giving helpful, nontoxicating feedback</td>
</tr>
<tr>
<td>Limiting use of self disclosure</td>
</tr>
<tr>
<td>Avoiding advice giving</td>
</tr>
<tr>
<td>Clarifying</td>
</tr>
</tbody>
</table>
• Confronting when appropriate
• Summarizing the client’s thoughts and feelings for him/her.
• Communicating respect, empathy, positive regard, immediacy and warmth (to patients and significant others)
• Communicating genuineness by behaving in a free and spontaneous manner during 1:1 therapeutic interaction.
• Communicating a positive orientation for patient (instilling hope).
• Promoting patient strengths by identifying and verbalizing to patients their personal strengths/assets, as noted in documentation
| Documents Clearly, Concisely, & Accurately | • Documents on the MAR  
• If not documenting meds, then N/A | • Use EMR to document initial assessment, interventions, and evaluative data | • Use EMR to document initial assessment, interventions, and evaluative data  
• Complete any required documentation promptly, accurately, clearly and concisely. (Psychiatric Flow Sheet Assessment, Vital Signs Flow Sheet, and Med Administration Documentation) | • Documents clearly, concisely, and accurately  
• Use EMR to document initial assessment, any interventions, and evaluative data  
• documents medication administration and follow-up assessments | • Documents on the MAR  
• If not documenting meds, then N/A |

| Responds to Abnormal Findings Appropriately | • Communicates abnormal findings during scheduled clinical shift to faculty at clinical site or colleagues in simulation | • Understands that abnormal findings may be expected or unexpected  
• Patient s/p lumbar laminectomy has lower back pain [abnormal, expected finding]  
• Patient s/p bronchoscopy reports substernal chest pain [abnormal, unexpected finding]  
• Takes initiative to take action: If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches | • Understands that abnormal findings may be expected or unexpected  
• Patient s/p right mastectomy has right chest pain [abnormal, potentially expected finding, but student explores surgical versus cardiac nature of pain]  
• Patient s/p right sided pigtail catheter insertion describes substernal chest pain [abnormal, unexpected finding]  
• Takes initiative to | • Communicates abnormal findings to RN staff and faculty.  
• Understands that abnormal findings may be expected or unexpected  
• Takes initiative to take action: If patient reports unusual symptom (Mother with HTN or infant with T< 36.5) or there are unexpected assessment findings, student approaches instructor/RN for additional assistance  
• discuss abnormal findings and implications for POC with RN or faculty | • Responds to specific or significant abnormal findings (i.e. calls provider to report change in mental status and/or attempts to reorient a patient who has become confused). |
<table>
<thead>
<tr>
<th>Promotes Professionalism</th>
<th>• Professional dress (i.e. watch, stethoscope, hair pulled away from face, no nail)</th>
<th>• Arrives on time with professional appearance</th>
<th>• Arrives on time with professional appearance</th>
<th>• Come fully prepared to clinical and exhibit professional behavior.</th>
<th>• Arrives on time with professional appearance</th>
<th>• Professional dress (i.e. watch, stethoscope, hair pulled away from face, no nail)</th>
</tr>
</thead>
<tbody>
<tr>
<td>instructor/RN to discuss abnormal findings and implications for POC</td>
<td>• report findings to RN or instructor: If patient has abnormal VS (like low oxygen saturation), student approaches RN or instructor for additional assistance</td>
<td>• take action: If patient reports oral discomfort, student completes appropriate assessment and provides oral care, discusses with RN or instructor appropriateness of asking for oral anesthetic prescription.</td>
<td>• report findings to RN or instructor: If patient has abnormal VS (like low oxygen saturation), student approaches RN or instructor for additional assistance</td>
<td>• discuss plan of care and assess preferences of the patient and family</td>
<td>• provide patient education during medication administration</td>
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<td>Professional behavior demonstrated through appropriate verbal and non-verbal communication</td>
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<td>Cuts short polishes, nails</td>
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<tr>
<td>Responds to patient respectfully</td>
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</table>

**CLINICAL JUDGMENT**

<table>
<thead>
<tr>
<th>Interprets Vital Signs (T, P, R, BP, Pain)</th>
<th>Reviews vital signs (TPR, BP, Pain)</th>
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<tbody>
<tr>
<td>Reports or takes action during scheduled clinical shift to address abnormal vital signs, including pain and pulse oximetry as needed</td>
<td>Reviews vital signs and understands the meaning of vitals in the context of care</td>
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</table>

- Patient admitted with heart failure has an irregular heart rate of 116. The student recognizes tachycardia increases the myocardial oxygen demand in an already compromised organ. The student also notices a change in rhythm from regular to

- Post-op patient’s temp is 100.1 F: Student interprets this as abnormal finding and that it may indicate post-op infection.

- Post-op patient’s temp is 100.1 F, C: Student interprets this as abnormal finding and that it may indicate post-op infection.

**CRITICAL THINKING REQUIRED:**

- Post-op patient’s temp is 100.1 F.
- Critical thinking required: The same patient’s full set of VS: 100.1 F.
- Reports or takes action on specific VS during scheduled clinical shift to address abnormal vital signs, including pain and pulse oximetry as needed (i.e. applies oxygen, increases HOB, and/or call the provider for a patient with a
<table>
<thead>
<tr>
<th>Critical Thinking Required</th>
<th>The same patient’s full set of VS: 100.1°F, 92, 24, 118/72, Pain 6, SpO2 90%. What meaning does this have?</th>
<th>Irregular. The student interprets this as a change in cardiac rhythm and notifies the RN after completing a focused assessment.</th>
<th>92, 24, 118/72, Pain 6, SpO2 90%. What meaning does this have?</th>
<th>SpO2 of 86%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interprets Lab Results</td>
<td>Reports at least 1 relevant lab result pertinent to patient presentation, diagnosis, or reason for admission during clinical shift, post-conference, or debriefing</td>
<td>Interprets Lab Results</td>
<td>Recognize relevant laboratory data.</td>
<td>Interprets lab results newborn labs/tests pediatric post-op labs</td>
</tr>
<tr>
<td>Interprets Subjective/Objective Data</td>
<td>Reports relationship between at least 1 piece of subjective and 1 piece of objective data pertinent to patient presentation, diagnosis, or reason for</td>
<td>If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches instructor to administer PRN laxative</td>
<td>Recognize the relevance of subjective and objective data as it relates to the patient diagnosis and safety</td>
<td>Interprets subjective/objective data (recognizes relevant from irrelevant data). For example, EI30/32: Patient reports perineal pain, student approaches RN or instructor to administer a sitz bath, ice or medication.</td>
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<td></td>
<td>If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches instructor to administer PRN laxative</td>
<td>If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches instructor to administer PRN laxative</td>
<td>Recognize the relevance of subjective and objective data as it relates to the patient diagnosis and safety</td>
<td>Interprets subjective/objective data (recognizes relevant from irrelevant data). For example, EI30/32: Patient reports perineal pain, student approaches RN or instructor to administer a sitz bath, ice or medication.</td>
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<td></td>
<td>NOTE: It is expected that you accurately interpret assessment findings with growing independence. For example, it is expected</td>
<td>If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches instructor to administer PRN laxative</td>
<td>Recognize the relevance of subjective and objective data as it relates to the patient diagnosis and safety</td>
<td>If patient reports abdominal pain and chart review shows no BM x 3 days, student approaches instructor to administer PRN laxative</td>
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<td>Reports or takes action during scheduled clinical shift to address significant abnormal lab results (i.e. calling the provider and/or administering ordered furosemide to a HF with a BNP of 2400 pg/mL)</td>
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<tr>
<td>Prioritizes Appropriately</td>
<td>Admission during clinical shift, post-conference, or debriefing</td>
<td>That you would notice a patient’s heart murmur independently. It is also expected that you could provide basic description of the murmur (systolic versus diastolic, landmark where it is best heard), and relate to the patient’s diagnosis (i.e., expected finding given history of MV regurgitation and echo findings; or unexpected finding given absent history or previous record). It is not expected that you do advanced interpretation of the murmur (i.e., “patient has a grade II/VI holosystolic murmur”)</td>
<td>Fr3C/2B: Utilize parental knowledge while interpreting pt data, especially if pt is non-verbal.</td>
<td>the incision site, checking the MAR for pain meds ordered, repositioning, and/or calling provider to report patient signs/symptoms to obtain additional orders.</td>
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<tr>
<td>• Addresses safety issues first</td>
<td>• Uses Maslow’s hierarchy or other theories/evidence to support prioritization</td>
<td>• Uses Maslow’s hierarchy or other theories/evidence to support prioritization</td>
<td>• Uses ABCs</td>
<td>• Addresses safety issues first</td>
</tr>
<tr>
<td>• Completes assessment followed by interventions as appropriate</td>
<td>• Patient refused to walk after back surgery, reported back pain to be 6/10, and difficulty sleeping. Student prioritizes to first manage pain, then promote rest, and then engage patient in POC including ambulation</td>
<td>• Patient refused to walk after back surgery, reported back pain to be 6/10, and difficulty sleeping. Student prioritizes to first manage pain, then promote rest, and then engage patient in POC</td>
<td>• Assesses infant and pediatric safety interventions before the rest of the POC</td>
<td>• Performs specific assessments and interventions in an order that is not detrimental (i.e., the HOB was elevated for patient with difficulty breathing)</td>
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<tr>
<td>Performs Evidence Based Interventions</td>
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<td>before steroids were administered</td>
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<tr>
<td>• Performed 1 intervention pertinent to patient presentation, diagnosis, or reason for admission</td>
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<td>• The intervention does not have to be done correctly, but has to be pertinent and completed</td>
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<tr>
<td>• Interventions may include medication administration.</td>
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<tr>
<td>• Uses resources to guide interventions (EMR POC; evidence-based protocols, policies, and procedures; healthcare literature)</td>
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<td>• Recognizes importance of and integrates patient preferences within the POC</td>
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<tr>
<td>• Uses resources to guide interventions (EMR POC; evidence-based protocols, policies, and procedures)</td>
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<tr>
<td>• Accesses resources independently in preparation for clinical</td>
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<tr>
<td>• Reviews policy and procedural manual to prepare for flushing PICC line</td>
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<tr>
<td>• Uses resources to guide interventions (EMR POC; evidence-based protocols, policies, and procedures). For example: enhanced recovery for C-section</td>
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<tr>
<td>• Reviews pediatric specific procedures before clinical</td>
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<tr>
<td>• Performed specific interventions pertinent to patient presentation, diagnosis, or reason for admission (i.e. a post-operative hip was positioned to avoid adduction, had SCDs applied, and received enoxaparin)</td>
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<tr>
<td>• The intervention does not have to be done correctly, but has to be pertinent and completed</td>
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<tr>
<td>• Interventions may include medication</td>
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<tr>
<td>Provides Evidence Based Rationale for Interventions</td>
<td>• Demonstrate reasoning of utilized interventions to clinical faculty or simulation instructor during clinical shift, post-conference, or debriefing</td>
<td>• Student can find and describe rationale for chosen interventions</td>
<td>• Provide rationale for selected diagnoses and nursing interventions in plans of care.</td>
<td>• Student can find and describe rationale for chosen interventions</td>
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<tr>
<td>Evaluates Evidence Based Interventions and Outcomes</td>
<td>• Discusses outcome of at least 1 intervention during clinical shift, post-conference, or debriefing and compares expected outcome to actual outcome</td>
<td>• Have the interventions worked? Is the outcome achieved? Is the diagnosis solved?</td>
<td>• Have the interventions worked? Is the outcome achieved? Is the diagnosis solved?</td>
<td>• Have the interventions worked? Is the outcome achieved? Is the diagnosis solved?</td>
</tr>
<tr>
<td>Reflects on Clinical Experience</td>
<td>Participates in post conference and/or debriefing as evidenced by active discussion and listening, eye contact, and note-taking as appropriate</td>
<td>In the moment reflection as well as timely reflection after the fact within Google docs</td>
<td>In the moment reflection as well as timely reflection after the fact within Google docs</td>
<td>In the moment reflection as well as timely reflection after the fact within Google docs</td>
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<tr>
<td>Delegates Appropriately</td>
<td>N/A</td>
<td>Uses appropriate guidelines to support process of delegation to peers or PCAs</td>
<td>Uses appropriate guidelines to support process of delegation to peers or PCAs</td>
<td>Uses appropriate guidelines to support process of delegation to peers or PCAs</td>
</tr>
<tr>
<td>SAFETY</td>
<td>Elicits name and DOB from patient (or legal guardian) and compares with armband</td>
<td>Identifies patient during handoff, verifying name and DOB</td>
<td>Use bar code scanning for medication administration without support from instructor and verbalizes rationale for use of patient identifiers</td>
<td>Utilize hand washing or hand hygiene at the beginning and conclusion of every patient interaction.</td>
</tr>
</tbody>
</table>

**SAFETY**

- Elicits name and DOB from patient (or legal guardian) and compares with armband
- Identifies patient during handoff, verifying name and DOB
- Use bar code scanning for medication administration without support from instructor and verbalizes rationale for use of patient identifiers
- Utilize hand washing or hand hygiene at the beginning and conclusion of every patient interaction.
- Use bar code scanning for medication administration in addition to 2 other pt identifiers
- HUGs Tag, Nametag matching for mother-infant dyads
<table>
<thead>
<tr>
<th>Utilizes Standardized Practices and Precautions Including Hand Washing</th>
<th>Performs hand hygiene before patient contact and at all appropriate junctures thereafter</th>
<th>Performs the three checks for correct medication administration and demonstrates knowledge of</th>
<th>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff and demonstrates knowledge of</th>
</tr>
</thead>
<tbody>
<tr>
<td>If no armband, elicits name and DOB from patient (or legal guardian) and compares with chart</td>
<td>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff</td>
<td>Prepares for medication administration and demonstrates knowledge of</td>
<td>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff and demonstrates knowledge of</td>
</tr>
<tr>
<td>If unable to verbalize name and DOB due to altered mental status, compares armband with chart</td>
<td>Finds and uses resources to guide use of precautions when caring for a patient in precautions</td>
<td>Prepares for medication administration and demonstrates knowledge of</td>
<td>Performs the three checks for correct medication administration and demonstrates knowledge of</td>
</tr>
<tr>
<td>Utilize appropriate personal protective equipment.</td>
<td>EI 72: Adheres to universal gloving standard</td>
<td>Prepares for medication administration and demonstrates knowledge of</td>
<td>Performs hand hygiene before patient contact and at all appropriate junctures thereafter</td>
</tr>
<tr>
<td>Administer medications safely utilizing the “7 rights” according to Mayo Policy (person, medication, indication, dose, route, time, documentation)</td>
<td>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff</td>
<td>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff</td>
<td>Utilizes appropriate PPE</td>
</tr>
<tr>
<td>Maintain safe patient care environment (room checks, milieu monitoring, body and belonging searches, awareness of contraband items on unit, etc.)</td>
<td>Finds and uses resources to guide use of precautions</td>
<td>Finds and uses resources to guide use of precautions</td>
<td>Demonstrates understanding of the two types of isolation rooms in pediatrics</td>
</tr>
<tr>
<td>Seek assistance, as needed from faculty or RN staff.</td>
<td>Maintains patient privacy</td>
<td>Demonstrates use of universal precautions</td>
<td>Demonstrates use of universal precautions</td>
</tr>
<tr>
<td>If no armband, elicits name and DOB from patient (or legal guardian) and compares with chart</td>
<td>Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff</td>
<td>Performs hand hygiene before patient contact and at all appropriate junctures thereafter</td>
<td></td>
</tr>
<tr>
<td>If unable to verbalize name and DOB due to altered mental status, compares armband with chart</td>
<td>Finds and uses resources to guide use of precautions</td>
<td>Utilizes appropriate PPE</td>
<td>Performs the three checks for correct medication administration</td>
</tr>
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</table>

**Administers Medications Safely**

- Performs the three checks for correct medication administration and demonstrates knowledge of
- Prepares for medication administration and demonstrates knowledge of

- Completes hand hygiene at appropriate points of care with minimal reminders from faculty/staff and demonstrates knowledge of
- Performs hand hygiene before patient contact and at all appropriate junctures thereafter
- Utilizes appropriate PPE
<table>
<thead>
<tr>
<th>n and accurately confirms the 6 Rights</th>
<th>medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</th>
<th>medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</th>
<th>medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</th>
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<tbody>
<tr>
<td>Compares medication labels carefully to MAR</td>
<td>See additional resources within the syllabus regarding medication administration</td>
<td>See additional resources within the syllabus regarding medication administration</td>
<td>See additional resources within the syllabus regarding medication administration</td>
</tr>
<tr>
<td>Compares patient armband carefully to MAR</td>
<td>Utilizes safe administration guidelines for high-risk medications including 2 RN verification, appropriate medication waste, etc.</td>
<td>Verifies patient allergies before medication administration</td>
<td>Accurately fills out pediatric medication worksheet before medication administration</td>
</tr>
<tr>
<td>Utilizes safe administration guidelines for high-risk medications including 2 RN verification, appropriate medication waste, etc.</td>
<td>Verifies patient allergies before medication administration</td>
<td>Elicits details about type of reaction to all known allergies</td>
<td>Validate pediatric patient allergies with parent or caregiver</td>
</tr>
<tr>
<td>Verifies patient allergies before medication administration</td>
<td>Does not behave with medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</td>
<td>Does not behave with medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</td>
<td>Does not behave with medication, as well as safety needs particular to the patient (i.e., dosage, timing, aspiration risk, etc.) and the route of administration.</td>
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**Note:**
- See additional resources within the syllabus regarding medication administration.
- Accurately fills out pediatric medication worksheet before medication administration.
- Validate pediatric patient allergies with parent or caregiver.
| Manages Technology and Equipment | • Correctly uses equipment associated with patient care (i.e. bedpan, BP cuff, incentive spirometer, stethoscope (on skin), O2 meter, suction, IV pump, SCDs, computer, needles (placed in Sharps), etc.) | • After orientation, navigates EMR for chart review and documentation with increasing independence  
  • Uses EMR to review VS trends, use of PRN medications  
  • Anticipates POC by navigating other provider notes | • Navigates EMR for chart review and documentation independently  
  • Locates admission note to understand context of admission  
  • Locates progress notes to understand current and anticipated POC  
  • Uses POC to support application of nursing process  
  • Uses EMR to review VS trends, use of PRN medications  
  • Anticipates POC by navigating other provider notes | • Navigates EMR for chart review and documentation with increasing independence  
  • Uses EMR to review pediatric record, pregnancy record, newborn record, VS trends, use of PRN medications  
  • Utilizes Syringe Pump with assistance of faculty or RN,  
  • Demonstrates use of correct size BP cuff for infant or child,  
  • Correctly and safely utilizes pediatric equipment such as cribs, oral syringes and arm restraints in addition to IV pumps, O2 Saturation monitors, bottle warmers and respiratory monitors. | • Correctly uses equipment associated with patient care (i.e. bedpan, BP cuff, incentive spirometer, stethoscope (on skin), O2 meter, suction, IV pump, SCDs, computer, needles (placed in Sharps), etc.) |
<table>
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<tr>
<th>Performs Procedures Correctly</th>
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<tr>
<td>Performs correctly assessments and interventions based on institutional policy and procedure and evidenced-based resources and instruction (i.e. pupils assessed using correct technique, repositioning done properly, medication preparation completed correctly (labeled, correct needle size), correct landmark for injection, etc.)</td>
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<tr>
<td>Accesses institutional policies and procedures in preparation for new procedures</td>
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<tr>
<td>Shows accountability for procedures learned and evaluated in N235 and 237.</td>
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<tr>
<td>Accesses institutional policies and procedures in preparation for new procedures</td>
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<tr>
<td>Shows accountability for procedures learned and evaluated in N235 and 237.</td>
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<tr>
<td>Accesses institutional policies and procedures in preparation for new procedures</td>
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<tr>
<td>Demonstrates understanding of rationale and safety in performing pediatric procedures</td>
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<tr>
<td>Correctly performs assessments and interventions based on institutional policy and procedure and evidenced-based resources and instruction (i.e. pupils assessed using correct technique, repositioning done properly, medication preparation completed correctly (labeled, correct needle size), correct landmark for injection, etc.)</td>
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<tr>
<th>Reflects on Potential Hazards and Errors</th>
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<tbody>
<tr>
<td>Reflects on potential hazards and errors surrounding patient care activities</td>
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<tr>
<td>Anticipates potential harm related to patient care</td>
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<tr>
<td>Patient becomes confused during shift: Student</td>
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<tr>
<td>Anticipates potential harm</td>
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<tr>
<td>Anticipates potential for errors in within the healthcare system</td>
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<tr>
<td>Anticipates potential harm, risk for abduction</td>
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<tr>
<td>Monitor for safe parental handling of infants, need for safety education</td>
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<td>Reflects on potential hazards and errors surrounding patient care activities</td>
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<tr>
<td>during clinical shift, post conference, and/or debriefing as evidenced by active discussion and listening, eye contact, and note-taking as appropriate</td>
<td>RN adjusts care approach to remain with the patient to maintain safety and communicates potential need for chair/bed alarm following end of student shift</td>
<td>monitors for signs of child maltreatment</td>
<td>during clinical shift, post conference, and/or debriefing as evidenced by active discussion and listening, eye contact, and note-taking as appropriate</td>
<td></td>
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</tbody>
</table>
APPENDIX D

LUTHER COLLEGE
Department of Nursing

Student Clinical/Lab Contract

Student: ________________________________

Course: ________________________________

As a student at Luther College, I am required to meet the following clinical/lab behaviors in order to remain in good standing in the nursing program:

- adhere to department policies and those of cooperating agencies
- maintain confidentiality
- adhere to ethical and legal standards
- demonstrate accountability for actions
- provide adequate safety measures for clients
- demonstrate sufficient preparation for nursing care of clients
- request guidance and supervision when necessary
- keep commitments inherent to my role as a student in the Luther College Nursing Department

I understand that if the clinical faculty determine that I am not meeting the criteria of this contract during any clinical experiences, I will be removed from patient care for that experience. I will be required to meet with the clinical faculty and department head as soon as possible prior to the next clinical experience. The meeting will be used to discuss the seriousness of the incident and consequences, which may include probation or failure of the course. A second infraction would mean failure of the course.

Student Signature: ________________________________  Date: __________________

My signature verifies I have read this contract and agree to uphold these standards and terms in my clinical experiences.
APPENDIX E

LUTHER COLLEGE
Department of Nursing

Student Confidentiality and Integrity Agreement

I, (please print your name) _____________________________, agree to respect the learning environment in the laboratory as part of the nursing curriculum beginning in NURS 235; for all subsequent nursing coursework; for any activities involving use of the lab not directly related to nursing coursework; and for any activities involving laboratory equipment checked out for use in the non-laboratory setting. I recognize that all of us have a right to a non-threatening learning environment. I agree to work with my peers to create a safe and stimulating learning experience. I will foster this type of environment by maintaining confidentiality surrounding events involving subjective assessment (i.e. gaining a health history) and objective assessment (i.e. performing a physical exam) of my lab partner or peer as well as the content of quizzes and exams. I will not tolerate destructive criticism and/or punitive or negative discussion, either in the lab or at another location. I recognize that all lab experiences are part of learning and collaborative practice. I understand that if I violate confidentiality, I will be excused from lab and will lose all points possible for the date(s) associated with the violation; and further sanctions may be administered by the instructor, as needed.

Student Signature: ________________________________ Date: ________________
APPENDIX F

LUTHER COLLEGE
Department of Nursing

Simulation Lab
Confidentiality and Photo Release Agreement

I, (please print your name) __________________________, agree to respect the learning environment in the Nursing Simulation Laboratory at Luther College. I recognize that all of us have a right to a non-threatening learning environment. I agree to work with my peers to create a safe and stimulating learning experience. I will foster this type of environment by maintaining confidentiality of the entire simulation experience including, but not limited to:

1. Details of the simulation scenario
2. Participant performance
3. Debriefing sessions

I will not tolerate destructive criticism and/or punitive or negative discussion, either in the Nursing Simulation Laboratory or at another location, regarding another participant’s performance. I recognize that all simulation experiences are part of learning and collaborative practice.

I understand that if faculty and/or staff determine I am not meeting criteria of this contract, I will be removed from all simulation experiences. I will be required to meet with the simulation faculty and/or staff and department head as soon as possible prior to the next simulation experience. The meeting will be used to discuss the seriousness of the incident and consequences, which may include loss of points associated with the breech, probation, or failure of the course. A second infraction would mean failure of the course.

I give my permission for the Luther College Department of Nursing to video record my performance in Simulation Laboratory clinical scenarios. These videoed sessions will be used to provide debriefing opportunities as well as leadership evaluation and quality improvement opportunities to appropriate instructors and participants. Individuals who may view my performance in a videoed simulation is limited to the following:

1. Other participants directly involved with or assigned to the specific simulation the participant is taking part in, either as providers of care or as observers
2. Faculty and/or staff facilitators of the specific simulation experience the participant is involved in
3. Faculty and/or staff coordinators of the nursing course or other educational session (i.e. continuing education for RNs) that the specific simulation is associated with and in which the participant is enrolled
4. Faculty and/or staff training with the Nursing Lab & Simulation Director in facilitating simulation activities

I understand that the videos will only be used for educational purposes. I certify that I am 18 years of age or older.

Student Signature: ___________________________ Date: ________________
The simulation instructors acknowledge that simulation cannot be exactly like real life, but will make the simulation as real as possible within the availability and restraints of resources and technology.

For an effective simulation, it is important for both the instructor and the participants to collaborate to create an engaging simulation and learning environment. The instructor’s obligation is to create a simulated environment that is as real as possible. It is the participant’s role to do their part to act, as best they can, as if the simulation were real, acknowledging that the participant will likely act differently in the simulated environment versus the clinical environment.

Given the simulator’s (mannequin’s) limitations, the simulation faculty/staff will do their best to make the simulation as real as possible. It makes the experience more enjoyable and effectual if you conduct yourself as if you are in a real clinical situation. To the extent possible, you should engage with the simulator and actors as if they are real patients, family members, or members of the healthcare team.

Faculty and staff take their role seriously during a simulation and we ask that you do as well.

Participant Signature ________________________________

Participant Name (Print) ______________________________

Date ______________
According to the American Nurses Association, incivility may be exhibited through behaviors such as rudeness, condescension, passive aggressiveness, bullying, psychological abuse, or deliberate undermining of activities. These types of incivility may lead to an unhealthy work and learning environment in which students feel pressured by peers to look the other way, and thus fail to demonstrate care and compassion for the person experiencing such incivility.

Students in the Department of Nursing are expected to conduct themselves ethically, honestly, and with integrity. This requires the demonstration of mutual respect and civility in academic and professional discourse. Additionally, adherence to the Luther College code of conduct, Department of Nursing Student Handbook, and course/clinical guidelines are a basic expectation of students in all interactions with faculty, staff, and patients. Throughout your academic career at Luther College, it is expected that students show the following qualities:

- **Attentiveness:** The student regularly attends class. All extended absences are for relevant and serious reasons and approved, where applicable, by the appropriate authority. The student is engaged throughout the class period and refrains from use of electronic/communication devices during class or clinical unless instructor approved (i.e. cell phone use, lap tops).

- **Demeanor:** The student has a positive, open attitude towards peers, teachers, and others during the course of nursing studies. The student functions in a supportive and constructive fashion in group situations and makes good use of feedback and evaluations.

- **Maturity:** The student functions as a responsible, ethical, law-abiding adult who makes a positive impact on the adult learning environment.

- **Cooperation:** The student demonstrates his/her ability to work effectively and in a fair, balanced manner in large and small groups and with other members of the health team, giving and accepting freely in the interchange of information and workload.

- **Responsibility:** The student has nursing school performance as his/her primary commitment (i.e. organized and prepared for class, self-directed with problem-solving, use of appropriate resources). Student/student and student/faculty academic interchanges are carried out in a reliable and trustworthy manner.

- **Authority:** A student shows appropriate respect for those placed in authority over him/her both within the College and in society.

- **Personal Appearance:** The student's personal hygiene and dress reflect the high standards expected of a professional nurse.

- **Communication:** The student demonstrates an ability to communicate effectively verbally, nonverbally, and in writing with peers, teachers, patients, and others. Effective communication is also timely with respect to the environment (i.e. initiating conversations with instructor regarding student performance, alerting instructor about class/clinical concerns).
- **Professional Role:** The student conducts self as a professional role model at all times and in compliance with the ANA Code of Ethics. The student demonstrates the personal, intellectual and motivational qualifications of a professional nurse, including self-care. Self-care is demonstrated by health promotion and maintenance (i.e. adequate rest, proper hygiene, constructive coping)

- **Judgment:** The student shows an ability to think critically regarding options, reflecting his/her ability to make intelligent decisions in his/her personal and academic life.

Examples of uncivil behavior are below but not inclusive:

- Demeaning, belittling or harassing others
- Rumoring, gossiping about or damaging a classmate/professor’s reputation
- Habitually interrupting as others speak
- Not paying attention or listening to others who address you
- Not responding to email, letters, or voice mail that requires a reply
- Sending emails that are inflammatory in nature
- Speaking with a condescending attitude
- Raising your voice, yelling, or screaming at instructors, peers, or clinical staff
- Habitually arriving late to class
- Knowingly withholding information needed by a peer, instructor, or clinical staff
- Discounting or ignoring solicited input from instructors/faculty regarding classroom and/or clinical performance or professional conduct.
- Overruling decision without direct discussion and rationale
- Not sharing credit for collaborative work or not completing an equitable share of collaborative work assigned
- Threatening others; this refers to physical threats, verbal/nonverbal threats, and implied threats.
- Displays of temper, tantrums
- Using up supplies or breaking equipment without notifying appropriate staff/faculty

**Expectation of Students:**

- Follow conventions of good classroom manners and student responsibilities as outlined above.
- Refrain from making generalizations and use data (facts, observations, measurements, etc) to support your perspective.
- Refrain from verbal, emotional or sexual harassment.
- Refrain from electronic harassment via text, email, Facebook, or any other electronic media.
- Listen respectfully to each other. Respond respectfully and reflectively to ideas aired in the classroom. Understand that disagreements can result in learning opportunities.
- Refrain from personal insults, profanity and other communication-stoppers.
- Recognize and tolerate different levels of understanding of complex social and cultural issues among your classmates and the professor.
- Arrive timely to class/clinical sessions.
- Bring the required supplies and be ready to be actively engaged in the learning process.
- Focus on the business at hand – the class, its content, learning and the professor.
• Turn cell phones off or to vibrate before the start of class.
• Refrain from texting during class time.
• Pick up trash upon leaving the room.
• Refrain from sleeping in class.
• Turn in assignments on time.
• Be courteous in class. (This does not mean that you have to agree with everything that is being said. However, your point will be much more credible if conveyed without rudeness, aggression, or hostility. If you strongly disagree with your professor, it is a good idea to speak with him/her after class)
• Respect the rules of the syllabus. Faculty are not going to negotiate assignments or grades earned.

By signing this contract, I acknowledge receipt and understanding of this contract. I understand that any behavior or action determined to be a breach of this contract may result in my being subject to disciplinary action, including possible dismissal from the nursing program.

Student Name (please print): ________________________________

Student Signature: ________________________________ Date: ________________________________
## Summary Evaluation of Graduates by Nursing Faculty

Please place a check mark in the columns below to indicate the extent to which you believe the student reached the objectives for graduates of the Luther College baccalaureate program in nursing.

<table>
<thead>
<tr>
<th>Objectives of The Nursing Program</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Utilize the knowledge, ability and values obtained through a liberal arts education as the basis for nursing practice.</td>
<td></td>
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<tr>
<td>Example:</td>
<td></td>
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<tr>
<td>2. Demonstrate leadership, knowledge and skills, quality improvement, and patient safety to provide high quality nursing care.</td>
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<tr>
<td>Example:</td>
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<tr>
<td>3. Critically evaluate and implement nursing research and theory as it applies to professional practice.</td>
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<tr>
<td>Example:</td>
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<tr>
<td>4. Utilize patient care technologies, advances in nursing sciences, and health care policies to implement and support safe nursing practices.</td>
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<tr>
<td>Example:</td>
<td></td>
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<tr>
<td>5. Collaborate with other health care professionals, the client, and others in the provision of care to promote, maintain and restore optimum health.</td>
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<tr>
<td>Example:</td>
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<tr>
<td>6. Assess, advocate and participate for health promotion and disease prevention strategies at the individual, family, community and populations levels.</td>
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<tr>
<td>Example:</td>
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<tr>
<td>7. Adhere to professional standards and the ANA Code of Ethics to enhance and advance the practice of professional nursing.</td>
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<tr>
<td>Example:</td>
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<tr>
<td>8. Incorporate critical thinking, communication, and caring behaviors in the application of the nursing process with a respect for the dignity, diversity and beliefs of all people in providing care to clients in diverse settings.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Example:</td>
<td></td>
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</tbody>
</table>

Comments:

____________________________________________

Student Signature

____________________________________________

Evaluating Faculty

Date

Date