DISCLAIMER

The policies and procedures contained in this handbook are subject to change without notice at the discretion of the Program Directors with the approval of the Dean. Any changes made will be communicated to students in a timely manner. It is the responsibility of each student to be acquainted with all requirements, policies, and procedures for his or her degree program and to assume responsibility for meeting those requirements.

INTRODUCTION

This handbook has been prepared for the purpose of assisting nursing majors to become acquainted with the Department of Nursing and the various programs within the Department. The philosophy of each program is included along with the unique curriculum structure for that program and the program outcomes. Whether you are enrolled in the Baccalaureate Degree Program or the Masters Degree Program, you are encouraged to read the information on both programs offered in the Department. This information is most helpful in your understanding of what is involved/expected in the degree preceding your current one or in one to follow. An increased understanding in these key areas will also contribute to making the best decisions for your future development.

The attached policies are applicable to students in the nursing degree programs. Some policies designate if that policy or parts of that policy apply to specific groups of nursing students, i.e., non-RNs, BSN, or MSN. As students admitted to Nebraska Methodist College (NMC), you have access to the College Catalog found on the NMC Website. All information in the College Catalog applies to nursing students who have the same privileges and responsibilities as other College students.

Revised 7/09, 1/10, 7/12
Reviewed 7/05, 7/06, 8/08, 8/10, 7/1, 7/13
OPPORTUNITIES FOR STUDENT COMMUNICATION AND INVOLVEMENT

Students are welcomed to communicate openly with faculty and administration. The following are ways to become involved with the business of the Department of Nursing:

- Department of Nursing Meetings held in October, December/January, March and May: Contact Dr. Linda Hughes at linda.hughes@methodistcollege.edu to add agenda items for discussion at department meetings.

- Communication Forums: Informal (face-to-face) meetings with students will be scheduled during the semester. Invitations will be sent to all nursing students via their NMC email accounts. Contact the program directors, either Dr. Karen Johnson, Director of the BSN Nursing Program, or Dr. Susan Ward, Director of Special Programs, to identify items to be discussed at the forums.

- Communication Tool: The communication tool is located at the back of this handbook and is available on the college webpage under student handbooks. Please use this tool to communicate concerns and suggestions. Undergraduates please contact either Dr. Karen Johnson, Director of the BSN Program or Dr. Susan Ward, Director of Special Programs, via email or phone to discuss concerns and or questions about the form as a hard copy. Graduate Students may contact Dr. Linda Foley, director of Graduate Nursing Programs.

- Student Senate and/or Methodist Student Nursing Association (MSNA): Contact officers of Student Senate and/or MSNA for items of concern or suggestions. Officers of both organizations are listed on the college webpage under student organizations.

Department of Nursing Contact Information

Dr. Linda Hughes……………. Dean of Nursing………………………………… office phone 354-7049
Dr. Linda Foley……………… Director, Graduate Programs …………………... office phone 354-7050
Dr. Karen Johnson …………... Director, BSN Program…………………….. office phone 354-7038
Dr. Susie Ward……………… Director, Special Programs …………………….. office phone 354-7063
Dr. Fran Henton……………… Community Based Curriculum Coordinator …. office phone 354-7043

DEPARTMENT OF NURSING
VISION AND MISSION STATEMENTS

Vision: Dynamic nursing education, for today and for tomorrow, for individuals and the global community.

Mission: The Department of Nursing is committed to providing quality education that prepares resilient professional nurses who are caring and practice holistically to meet the ever changing challenges of the 21st century through a culture of evidence-based practice.

Faculty will support students, peers, the College and the community in this mission through a collaborative, accepting environment and through relationships fostered by mentoring and role modeling.

Implemented 7/07
Revised 7/12
Reviewed 7/08, 8/08, 8/09, 7/10, 7/11, 7/13
RN-MSN

&

MSN PROGRAM
MASTER OF SCIENCE DEGREE
NURSING

MSN PHILOSOPHY

The philosophy of the Master of Science Program of the Division of Nursing which builds on the AACN Baccalaureate Essentials is reflective of the values and beliefs from which the NMC mission and core values were formulated.

Nursing integrates empirical, personal, aesthetic, ethical and emancipatory ways of knowing to care for clients (Chinn and Kramer, 2011). Nursing is concerned with promoting health, preventing illness, restoring health, and caring for the sick and dying.

Learning is a lifelong, continuous process through which humans acquire knowledge that results in changes of behavior, attitudes, and/or ways of thinking. The nursing faculty believe that nursing education is built on the application and synthesis of the biophysical sciences, psychosocial sciences, the humanities, and nursing science. Teaching is an interactive process that uses a system of actions to promote acquisition, application, integration, and synthesis of knowledge. The graduate faculty serve as teachers, facilitators, resource persons, evaluators, mentors, and professional role models. Graduate education plays a strategic role in the ongoing development of the skilled professional who will contribute to the health, business, political, and social structures of the global community.

Completion of the Master of Science Nursing Program provides the graduate with a strong theoretical and practical base congruent with the MSN Essentials to improve healthcare through a culture of evidence-based practice. This education will prepare the graduate with a firm background in critical thinking and decision-making skills. The master's prepared nurse will have the necessary skills to practice independently and interdependently and to build interdisciplinary collegial relationships. The graduate will participate in the creative development of partnerships with communities to deliver services to a variety of populations. There will be consideration and advocacy for the health care needs of populations, especially those at risk and the growing number of those clients who are underserved. The graduate will be able to use creativity and flexibility in order to deal with roles less clearly defined as well as to manage and carry out the changing and challenging advanced nursing roles. This graduate will function in an increasingly complex health care system that includes responding to global, technological, and environmental issues. The graduate will be able to analyze, synthesize, and utilize knowledge in a scholarly manner. An understanding of health care policy, financing, cultural sensitivity, and ethical decision making will assist graduates in assuming a leadership role in promoting effective systems in nursing and healthcare.


Revised 12/99, 9/07, 7/08, 8/08, 10/12
Editorial Changes 9/01
Reviewed 7/00, 4/01, 8/02, 1/03, 8/04, 1/05, 12/05, 12/06, 9/07, 8/08, 12/08, 7/09, 7/10, 7/11, 7/12, 7/13
Nebraska Methodist College
Department of Nursing
MSN PROGRAM OUTCOMES

1. **Translate and integrate scholarship as a foundation for nursing and health care.**
   a. Address ethical issues related to scholarship.
   b. Build on clinical expertise focusing on a population of interest.
   c. Demonstrate use of the research process.
   d. Integrate theory and research outcomes into nursing administration, education and practice.
   e. Contribute to quality improvement and population health by embracing change and innovation through evidence-based nursing and interprofessional collaboration.

2. **Embraces the roles of the nurse educator/executive to facilitate learning and change.**
   a. Develop a personal philosophy as a nurse educator/executive.
   b. Develop the capacity for recognizing and reflecting on problems that fall outside current knowledge.
   c. Serve in the role of educator/executive and role model when working with students, staff, peers, and other constituencies.
   d. Promote critical thinking in those that they educate and serve.
   e. Engage in professional development as a nurse educator/executive.
   f. Foster professional role development through leadership, collaborative skills, and relationship development with peers, students/personnel, clients, colleagues, and members of the interprofessional team.
   g. Model self-reflection and lifelong learning.
   h. Effectively participate in curriculum/program design and evaluation of outcomes.

3. **Values social, political, legal and ethical influences that impact nursing practice and nursing education.**
   a. Evaluate the process of ethical decision making.
   b. Apply ethical principles in the role of educator/executive.
   c. Advocate for public policy that promotes and protects the health of the public.
   d. Formulate strategies that respond to policy changes that impact health and education.
   e. Analyze the impact of access on the health of populations.

4. **Appreciates the impact of diversity within nursing and the global community.**
   a. Examine personal thinking for clarity, objectivity and bias.
   b. Demonstrate behaviors and attitudes that support respect, reciprocal learning, and advocacy related to human differences.
   c. Coach others to improve sensitivity and acceptance of diverse individuals and groups.
   d. Develop culturally competent educational/workplace practices.

5. **Demonstrates competency in developing an effective professional nursing environment.**
   a. Analyze the issues related to the use of advanced technology.
   b. Integrate informatics and current and emerging technologies into practice enhancing patient outcomes.
   c. Communicate effectively based on the context of the situation.
   d. Develop networks, collaboratives, partnerships, and interprofessional relationships to enhance nursing’s influence within the academic/healthcare community and the broader community.
   e. Develop skills for working within an institution and a system of governance.

*Revised 3/99, 9/05, 12/0, 4/13, 8/13*
*Reviewed 7/00, 4/01, 8/02, 1/03, 8/04, 1/05, 1/06, 8/07, 12/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/12, 8/13*
NMC MODEL OF MASTER’S NURSING EDUCATION

Master’s Graduate Nursing Core

Competencies for indirect care practice roles (Nurse Executive)

Competencies for Direct Care Roles (Nurse Educators)

Direct Care Core (3 P’s)

Didactic and supervised practice experiences to demonstrate integration of advanced nursing knowledge in master’s level practice.

Effective 8/13
RN to Master of Science Degree
Bridge Curriculum

CURRICULUM STRUCTURE

The RN-MSN track for the RN without a bachelor’s degree affords the RN the ability to earn 18 semester credit hours of undergraduate bridge courses (statistics, leadership, research, health assessment, public/community health) and then transition into the MSN Program without receiving a BSN.

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRS 402 Nursing Assessment for the RN</td>
<td>3</td>
</tr>
<tr>
<td>SSC 360 Introduction to Statistics</td>
<td>3</td>
</tr>
<tr>
<td>SSC 370 Principles of Research</td>
<td>3</td>
</tr>
<tr>
<td>NRS 476/476C RN to BSN Community Health Nursing</td>
<td>6</td>
</tr>
<tr>
<td>NRS 446 Collaborative Nursing Leadership in a Global Society</td>
<td>3</td>
</tr>
<tr>
<td><strong>TOTAL CREDIT HOURS</strong></td>
<td><strong>18</strong></td>
</tr>
</tbody>
</table>

*Initial 12/09
Revised 7/13
Reviewed 7/10, 7/11, 7/12, 7/13*
CURRICULUM STRUCTURE

The following plan represents full-time progression through the program. A student must earn a minimum of 36 semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRS 509 Advanced Nursing Roles &amp; Phenomena</td>
<td>3</td>
</tr>
<tr>
<td>NRS 513 Measurement &amp; Statistical Concepts for Data Interpretation</td>
<td>3</td>
</tr>
<tr>
<td>NRS 516 Teaching/Learning</td>
<td>3</td>
</tr>
<tr>
<td>NRS 518 Instructional Methods</td>
<td>3</td>
</tr>
<tr>
<td>NRS 508 Issues in Advanced Nursing Roles</td>
<td>3</td>
</tr>
<tr>
<td>NRS 517 Critical Appraisal of Knowledge for Practice</td>
<td>3</td>
</tr>
<tr>
<td>NRS 519 Synthesis and Use of Knowledge for Evidence-Based Practice</td>
<td>3</td>
</tr>
<tr>
<td>NRS 546 Advanced Health Assessment, Pathophysiology &amp; Pharmacology</td>
<td>3</td>
</tr>
<tr>
<td>NRS 523 Curriculum/Program Development &amp; Evaluation</td>
<td>4</td>
</tr>
<tr>
<td>NRS 592 Capstone I</td>
<td>2</td>
</tr>
<tr>
<td>NRS 524 Practicum in Nursing Education</td>
<td>4</td>
</tr>
<tr>
<td>NRS 594 Capstone II</td>
<td>2</td>
</tr>
</tbody>
</table>

TOTAL CREDIT HOURS 36

Reviewed 7/11, 7/12, 7/13
Revised 2/11
MASTER OF SCIENCE DEGREE
NURSE EXECUTIVE TRACK
(For students matriculating May 2011)

**CURRICULUM STRUCTURE**

The following plan represents full-time progression through the program. A student must earn a minimum of **36** semester credit hours to be eligible for the Master of Science in Nursing. All course requirements as outlined below must be met.

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRS 509 Advanced Nursing Roles &amp; Phenomena</td>
<td>3</td>
</tr>
<tr>
<td>NRS 513 Measurement &amp; Statistical Concepts for Data Interpretation</td>
<td>3</td>
</tr>
<tr>
<td>NRS 550 Organizational Behavior &amp; Structure</td>
<td>3</td>
</tr>
<tr>
<td>NRS 552 Role of the Nurse Executive I: Leading an Organization</td>
<td>3</td>
</tr>
<tr>
<td>NRS 508 Issues in Advanced Nursing Roles</td>
<td>3</td>
</tr>
<tr>
<td>NRS 517 Critical Appraisal of Knowledge for Practice</td>
<td>3</td>
</tr>
<tr>
<td>NRS 519 Synthesis and Use of Knowledge for Evidence-Based Practice</td>
<td>3</td>
</tr>
<tr>
<td>NRS 554 Role of the Nurse Executive II: Human Resource Management</td>
<td>3</td>
</tr>
<tr>
<td>NRS 558 Role of the Nurse Executive III: Financial Mgt &amp; Economics</td>
<td>4</td>
</tr>
<tr>
<td>NRS 592 Capstone I</td>
<td>2</td>
</tr>
<tr>
<td>NRS 559 Practicum: Management, Improvement, &amp; Evaluation in Health Care Organizations</td>
<td>4</td>
</tr>
<tr>
<td>NRS 594 Capstone II</td>
<td>2</td>
</tr>
</tbody>
</table>

**TOTAL CREDIT HOURS** 36
POST-MASTERS CERTIFICATE  
NURSE EDUCATOR & NURSE EXECUTIVE  

CURRICULUM STRUCTURE  
The following plan represents progression for the online post-master’s certificate as a nurse educator/nurse executive. There are a total of 14 credit hours to complete for each certificate.

<table>
<thead>
<tr>
<th>Nurse Educator (PMC)</th>
<th>Nurse Executive (PMC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRS 516</td>
<td>NRS 550</td>
</tr>
<tr>
<td>Developing Your Ad Nsg Role</td>
<td>Organizational Behavior &amp; Structure</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>NRS 518</td>
<td>NRS 552</td>
</tr>
<tr>
<td>Instructional Methods</td>
<td>Role of the Nurse Ex. I: Leading an Organization</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>NRS 523</td>
<td>NRS 558</td>
</tr>
<tr>
<td>Curriculum/Program Development &amp; Evaluation</td>
<td>Role of the Nurse Ex. III: Financial Management &amp; Economics</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>NRS 524</td>
<td>NRS 559</td>
</tr>
<tr>
<td>Practicum in Nursing Education</td>
<td>Practicum: Management, Improvement &amp; Evaluation in Health Care Organizations</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

TOTAL HOURS 14  
TOTAL HOURS 14  

Reviewed 8/08, 12/08, 7/10, 7/11, 7/12, 7/13  
Revised 5/09
MSN E-Portfolio Policy

Purpose:

To ensure that graduate students meet program outcomes through completion of a professional e-portfolio.

Policy:

In order to graduate, students must complete the e-portfolio that demonstrates program outcomes have been met. The portfolio process begins in the first course in the program and students are expected to independently continue to update their portfolio after each semester.

Procedure:

1. Students begin the portfolio process in NRS 509 Advanced Nursing Roles and Phenomena.
2. Students are expected to independently update their e-portfolio each semester.
3. In the last semester of their program students are expected to initially submit/share their updated e-portfolio. The MSN director will notify students about due dates. Designated MSN faculty will provide feedback using the E-Portfolio Assessment Grid.
4. Students are expected to update their e-portfolio based on feedback received. Students must then submit/share their final e-portfolio by the designated due date.
5. The director and one other graduate faculty will review and provide feedback indicating that students have met/not met program outcomes using the E-Portfolio Assessment Grid.

Effective 8/08
Reviewed 7/09, 7/11, 7/12, 7/13
Revised 8/1, 7/11
Nursing Students Interaction with Minors Policy

PURPOSE:

To identify expectations and requirements regarding interaction of nursing students with Minors except in situations of direct patient care.

Minor is defined as a person under the age of nineteen (19) who is not enrolled or accepted for enrollment at NMC

POLICY:

Required Training: In recognition of the imperative of protecting Minors, NMC requires that nursing students working with Minors be trained regarding policies and issues relating to interactions with Minors. This training shall be at least annually before a nursing student begins working with Minors. Training shall be documented, with the nursing student signing a statement indicating his/her understanding and receipt of NMC policies and procedures. This training shall include:

a) NMC policies regarding interactions
b) Use of background checks to screen nursing students
c) Responsibility for modeling respectful behaviors
d) Consequences of conduct violations
e) Behavioral signs that Minor victims may exhibit
f) Sexual abuse and sexual harassment
g) Inappropriate behavior
h) Other appropriate topics
i) Reporting requirements and procedures.

Behavioral Expectations when interacting with Minors: Nursing students should be positive role models for Minors, and act in a caring, honest, respectful and responsible manner that is consistent with the mission and core values of NMC. Nursing students working in NMC programs covered by this policy must follow these expectations to avoid behaviors that could cause harm or be misinterpreted:

a) Do not be alone with a single Minor except in situations of direct patient care.
b) Do not engage in any sexual activity, make sexual comments, tell sexual jokes, or share sexually explicit material (or assist in any way to provide access to such material) with Minors.
c) One-on-one interactions should occur only when at least two nursing students are present at all times with a Minor. If a one-on-one interaction is required, meet in open, well-illuminated spaces or rooms with windows observable by other nursing students.
d) Do not meet with Minors outside of established times for Program activities. Any exceptions require the written parental authorization and must include more than one Nursing student.
e) Do not invite Minors to your home. Any exceptions, if any, required the written authorization by the Minor’s parent/guardian.
f) Do not engage or allow Minors to engage you in romantic or sexual conversations, or related matters, unless required in the role of counselor or health care provider.
g) Do not engage or communicate with Minors through email, text message, social networking websites (e.g., Facebook, Twitter, blogs, etc.), internet chat rooms, or other forms of social media expect and unless there is an educational or Programmatic purpose and the content of the communication is consistent with the mission of NMC.
g) Do not touch a Minor in a manner that a reasonable person could interpret as inappropriate. Touching should generally only be in the open and in response to the Minor’s needs, for purpose that is consistent with the Program’s mission and culture, and/or for a clear educational, developmental, or health-related (i.e. treatment of any injury) purpose. Any resistance by the Minor should be respected.

h) Do not engage in any abusive conduct of any kind toward, in the presence of, a Minor, including but not limited to verbal abuse, striking, hitting, punching, spanking, or restraining. If restraint is necessary to protect a Minor or other Minors from harm, all incidents must be documented and disclosed to the coordinator of the Program and the Minor’s parent/guardian.

i) Do not use, possess or be under the influence of alcohol or illegal drugs while on duty or when responsible for a Minor’s welfare.

j) Nursing students must not transport Minors in vehicles.

k) Possession of or use of any type of weapon or explosive device is prohibited.

Reporting Allegation(s) of Inappropriate Behavior or Abuse of a Minor

Every member of the NMC community has an obligation to report immediately instances or suspected instances of the abuse of or inappropriate interactions with Minors – “If you see something, say something.” Nebraska law requires any person who has a reasonable cause to believe that a child has been subjected to abuse or neglect or observes such a child being subjected to conditions or circumstances which reasonably would result in child abuse or neglect, report it to the proper law enforcement agency or to the Department of Health and Human Services. Accordingly, if you have reasonable cause to believe that child abuse or neglect has occurred, including sexual assault:

1. You must report it;
2. You should give as much information and details as possible;
3. Reporting Adults are immune from liability, civil or criminal, if the report is made in good faith and not giving maliciously false statements;
4. If you willfully fail to make a report, you will be in violation of Nebraska Statute 28-717.

DHHS has established the following toll-free number to be used by any person at any hours of the day or night, to report child abuse: (800) 652-1999.

Any suspecting member of the NMC community is also required to contact and report the inappropriate behavior and/or abuse to their Program director and/or campus security.

Effective 8/13
MSN Attestation Policy

Purpose:

To ensure that graduate students have completed a health screening or have documented health status during their time in the MSN Program

Policy:

In order to have compliance in the clinical/practicum courses, all graduate, students must sign the electronic attestation form on admission to the program and each January.

Procedure:

1. Students will be provided a link to complete and submit the attestation form.

2. Students who do not complete and submit the attestation form will be placed on hold for the next semester.

Attestation Form

I attest that I have completed a health screening or have documented health status of the following:

a) Tuberculin skin test within the past 12 months; documentation as a previous positive reactor, any treatment received, or a chest x-ray within the past 12 months.

b) Proof of Rubella and Rubeola immunity by positive antibody titers or 2 doses of MMR.

c) Varicella immunity by positive history of chickenpox, proof of 2 Varicella immunizations, or positive antibody titer.

d) Proof of Hepatitis B immunization or completion of a certificate of declination of vaccine.

e) Proof of Tdap immunization or a certificate of declination of vaccine.

f) Proof of Influenza vaccine or completion of certificate of declination of vaccine.

g) Negative drug screen

If any changes occur during the program, I agree to contact the Program Director immediately. This information and documentation is needed for you to complete any clinical or practicum component of the program

* Required

I acknowledge and agree that my electronic submission of this form to Nebraska Methodist College (NMC) is my acknowledgement that this form is true and accurate, and NMC can rely on the form as if my handwritten signature was affixed to the form, and this electronic attestation serves as my electronic signature. *

Please type your full name here.

Effective 12/13
BSN PROGRAM
BACHELOR OF SCIENCE DEGREE NURSING

PHILOSOPHY
The philosophy of the Baccalaureate Program of the Department of Nursing is reflective of the values and beliefs from which the NMC mission and core values were formulated.

The nursing faculty believes human beings are holistic and integrated. Each human being has dignity, basic rights and responsibilities, individual needs, and a unique internal environment. The human interacts within the environment, which encompasses all external factors that affect the human’s well being and speaks to physical, social, and existential dimensions as well as various settings. The client is the human recipient of care — individual, family, group, or community.

Health is viewed as a dynamic state of mental, physical, social, and spiritual well being that maximizes the individual’s ability to function in his or her environment. Illness is an alteration in the dynamic state of well being that leads to disharmony between the human self and the environment. Health promotion, illness prevention, maintenance, and rehabilitation are facilitated by activities or programs directed toward enhancement, stabilization, or restoration of a dynamic state of well being.

Nursing is a caring, creative, dynamic, and interactive process that uses scientific and humanistic bodies of knowledge to assist the client in attainment of a dynamic state of well being with a focus on human responses to actual or potential health problems. The nursing curriculum focuses on Jean Watson’s science of caring* and is based on the following assumptions. Nursing is concerned with promoting health, preventing illness, restoring health, and caring for the sick and dying. The practice of caring is an integral part of nursing and consists of the caritas processes, which are those interventions that result in the satisfaction of human needs. The caring response promotes health and human growth and accepts a human not only as he or she is now, but as whom he or she may become. A caring atmosphere is one that offers the development of potential while allowing the client to choose the best action at a given point in time. Caring is demonstrated and practiced interpersonally and uses the systematic nursing process approach.

The curricular framework incorporates a community-based approach that prepares students to build connections between knowledge and action in an increasingly interdependent world. Students develop the attributes of effective nursing professionals and responsible citizens through focused and meaningfully applied learning experiences. Community-based education encompasses the concepts of health promotion, self care, prevention, collaboration, and continuity of care within the context of culture and community.

The nursing faculty believe that nursing education uses the science of caring and builds on the application and synthesis of the biophysical, psychosocial, computer, and information sciences and the humanities. Learning is a lifelong, continuous process through which humans acquire knowledge that results in changes of behavior, attitudes, and/or ways of thinking. The faculty view teaching as an interactive process that uses a system of actions to promote the acquisition, application, integration, and synthesis of knowledge. Optimal learning is enhanced by interaction with faculty members who use a variety of instructional strategies and settings. Faculty members serve as teachers, facilitators, resource persons, evaluators, and professional role models. Nursing education facilitates the student in developing interpersonal caring response skills and communication techniques that produce therapeutic interactions within the nurse-client relationship.

Completion of the baccalaureate nursing program prepares the graduate for professional practice as a nurse generalist, pursuit of advanced studies in nursing, and enhancement of lifelong learning. The nurse generalist uses critical thinking, nursing theory, research, nursing process, caritas processes, and clinical skills while assuming responsibility and accountability for providing nursing care to clients in a variety of settings. Additionally, the nurse generalist is able to demonstrate leadership and management skills in organization, change, advocacy, coordination, collaboration, and communication. Thus, the nurse generalist promotes the use of lifelong evidence-based and humanistic practice behaviors to change and respond to the health needs and well being of clients in a dynamic and diverse world.

Effective 8/22/02; Reviewed 1/03, 8/04, 1/05, 8/07, 12/08, 7/09, 8/10, 7/12, 7/13
Revised 8/08, 7/11
BACHELOR OF SCIENCE DEGREE
NURSING

PROGRAM OUTCOMES

1. Integrate culturally competent professional nursing care with clients while incorporating caring and
the caritas processes to promote autonomy, altruism, human dignity, integrity, and social justice.*

2. Develop and analyze alternative solutions based on scientific and humanistic rationale for situations
encountered in professional nursing practice.

3. Incorporate professional communication in interactions with clients, colleagues and community
partners.

4. Synthesize scientific and humanistic knowledge derived from theory and research in the provision of
professional nursing care.

5. Evaluate skills and ongoing assessment into the process of planning, intervening, and evaluating the
delivery of professional nursing care including health promotion, risk reduction, disease prevention,
illness/disease management, and rehabilitation to meet the health needs of clients.

6. Collaborate with clients and community partners as an agent to facilitate change within a global
health care environment.

7. Assume professional responsibility and legal/ethical accountability in providing health care.

8. Evaluate research critically and use findings selectively in professional nursing practice.

9. Incorporate knowledge of health care system policy and of professional activism into nursing
practice.

10. Integrate leadership and management skills as a professional caregiver, teacher, and manager of client
care.

*Adapted from AACN, The Essentials of Baccalaureate Education for Professional Nursing, 2008
Effective 8/22/02
Reviewed 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/12, 7/13
Revised 7/11
Technical Standards for BSN Nursing Students

In preparation for professional nursing roles nursing students are expected to demonstrate the ability to meet the demands of a professional nursing career. Certain functional abilities are essential for the delivery of safe, effective nursing care. An applicant to the Bachelors of Science in Nursing program must meet the following technical standards and maintain satisfactory demonstration of these standards for progression throughout the program. Students unable to meet these technical standards will not be able to complete the program. Students shall notify faculty of any change in their ability to meet technical standards. The technical standards include but are not necessarily limited to the following:

**General Ability:**
The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses is integrated, analyzed and synthesized in a consistent and accurate manner. The student is expected to possess the ability to perceive pain, pressure, temperature, position, vibration, and movement in order to effectively evaluate patients. A student must be able to respond promptly to urgent situations.

**Observational Ability:**
The student must have the ability to make accurate visual observations and interpret them in the context of clinical/laboratory activities and patient care experiences. The student must be able to document these observations accurately.

**Communication Ability:**
The student must communicate effectively verbally and non-verbally to obtain information and explain that information to others. Each student must have the ability to read, write, comprehend and speak the English language to facilitate communication with patients, family members, and other members of the health care team. The student must be able to document and maintain accurate records, present information in a professional manner and provide patient instruction to effectively care for patients and their families.

**Motor Ability:**
The student must be able to perform gross and fine motor movements with sufficient coordination needed to provide complete physical assessments and provide safe effective care for patients. The student is expected to have psychomotor skills necessary to perform or assist with procedures, treatments, administration of medications, and emergency interventions including CPR if necessary. The student must have sufficient levels of neuromuscular control and eye-to-hand coordination as well as possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, and physical exertion required for safe patient care. Students must be able to bend, squat, reach, kneel or balance. Clinical settings may require that students have the ability to carry and lift loads from the floor, from 12 inches from the floor, to shoulder height and overhead. The student must be able to occasionally lift 50 pounds, frequently lift 25 pounds, and constantly lift 10 pounds. The student is expected to be able to maintain consciousness and equilibrium and have the physical strength and stamina to perform satisfactorily in clinical settings.
**Intellectual – Conceptual Ability:**
The student must have the ability to develop problem-solving skills essential to professional nursing practice. Problem solving skills include the ability to measure, calculate reason, analyze, and synthesize objective and subjective data, and to make decisions, in a timely manner that reflect thoughtful deliberation and sound clinical judgment. The student must demonstrate application of these skills and possess the ability to incorporate new information from peers, instructors, and the nursing and healthcare literature to formulate sound judgment to establish care plans and priorities in patient care activities.

**Behavioral and Social Attributes:**
The student is expected to have the emotional stability required to exercise sound judgment, and complete assessment and intervention activities. Compassion, integrity, motivation, and concern for others are personal attributes required of those in the nursing program. The student must fully utilize intellectual capacities that facilitate prompt completion of all responsibilities in the classroom and clinical settings; the development of mature, sensitive, and effective relationships with patients and other members of the health care team. The ability to establish rapport and maintain interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. Each student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; and effectively collaborate in the clinical setting with other members of the healthcare team.

**Ability to Manage Stressful Situations:**
The student must be able to adapt to and function effectively in relation to stressful situations encountered in both the classroom and clinical settings, including emergency situations. Students will encounter multiple stressors while in the nursing program. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program related.

**Background Check/Drug Screening:**
Clinical facilities require that Nebraska Methodist College perform drug testing and background checks on all students before they are allowed to participate in clinical experiences. Therefore, students will be required to have a background check performed and submit to drug screening before being allowed into clinical practice.

*Effective 8/06*
*Reviewed 8/08, 7/09, 8/10, 7/11, 7/12, 7/13*
*Revised 8/07*
### BACHELOR OF SCIENCE DEGREE NURSING

(For students matriculating Spring 2009 to Spring 2011)

**TRADITIONAL BSN STUDENT – CURRICULUM STRUCTURE**

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 126** semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices. Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

#### FRESHMAN YEAR 1st Year

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credit Hours</th>
<th>Second Semester</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>COM 101 English Composition</td>
<td>3</td>
<td>NRS 100 Intro to Comm-Based Nursing</td>
<td>4</td>
</tr>
<tr>
<td>SSC 101 Introduction to Psychology</td>
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<td>SCI 226 Human Anatomy &amp; Phys II</td>
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<td>SCI103 College Chemistry</td>
<td>3</td>
<td>COM 230/245 Language/Culture*</td>
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<td>SCI 225 Human Anatomy &amp; Physiology I</td>
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<td>SCI 280 Microbiology</td>
<td>3</td>
</tr>
<tr>
<td>HUM 150 World of Ideas: Critical Reasoning</td>
<td>3</td>
<td>HUM 2-- World of Ideas: -----</td>
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</table>

**TOTAL HOURS 16**

**TOTAL HOURS 17**

#### SOPHOMORE YEAR 2nd Year

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credit Hours</th>
<th>Second Semester</th>
<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>SCI 315 Pathophysiology</td>
<td>3</td>
<td>NRS 240 Comm-Based Care w/Families</td>
<td>6</td>
</tr>
<tr>
<td>NRS 220 Comm-Based Care with Adults</td>
<td>7</td>
<td>SCI 265 Intro to Pharmacology</td>
<td>3</td>
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<td>NRS 202 Health Assessment across the lifespan</td>
<td>3</td>
<td>SCI 240 Principles of Nutrition</td>
<td>3</td>
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<tr>
<td>SSC 215 Lifespan Psychology</td>
<td>3</td>
<td>NRS 245 Public Health Science I</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>SSI 235 Sociology of Culture</td>
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**TOTAL HOURS 16**

**TOTAL HOURS 16**

#### JUNIOR YEAR 3rd Year

<table>
<thead>
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<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>NRS 340 Comm-Based Care Across Life Span</td>
<td>9</td>
<td>NRS 350 Advanced Concepts</td>
<td>9</td>
</tr>
<tr>
<td>SSC 360 Introduction to Statistics</td>
<td>3</td>
<td>SSI 370 Principles of Research</td>
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</tr>
<tr>
<td>NRS Non-Clinical Elective</td>
<td>2</td>
<td>HUM 210 Introduction to Ethics</td>
<td>3</td>
</tr>
<tr>
<td>COM 320 Healthcare/Leadership</td>
<td>3</td>
<td>NRS 345 Public Health Science II</td>
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**TOTAL HOURS 17**

**TOTAL HOURS 17**

#### SENIOR YEAR 4th Year

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<th>Credit Hours</th>
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<tbody>
<tr>
<td>NRS 445 Nursing the Global Society</td>
<td>3</td>
<td>NRS 462 Community-Based Care: Complexity of Aging</td>
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<tr>
<td>NRS 450 Community-Based Care: Complex</td>
<td>9</td>
<td>NRS 470 Senior Synthesis</td>
<td>1</td>
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<td></td>
<td></td>
<td>NRS 470P Senior Preceptor Practicum</td>
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</tr>
<tr>
<td>HUM 2-- World of Ideas: -----</td>
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<td>HUM 2-- World of Ideas: -----</td>
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</table>

**TOTAL HOURS 15**

**TOTAL HOURS 12**

*Revised 03/06, 8/07, 8/08, 1/09, 7/12*

*Reviewed 8/06, 8/10, 7/11, 7/13*

Refer to pre/co-requisite requirements  * May take COM 252 (1) credit if applicable; ** Change Fall 2012
## BACHELOR OF SCIENCE DEGREE NURSING

(For students matriculating Fall 2011)

**TRADITIONAL BSN STUDENT – CURRICULUM STRUCTURE**

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of **126** semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices. Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

### FRESHMAN YEAR

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<thead>
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<th>Credit Hours</th>
<th>Second Semester</th>
<th>Credit Hours</th>
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<tr>
<td>COM 101 English Composition</td>
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<td>SCI 226 Human Anatomy &amp; Phys II</td>
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<td>SCI103 College Chemistry</td>
<td>3</td>
<td>SCI 280 Microbiology</td>
<td>3</td>
</tr>
<tr>
<td>SCI 225 Human Anatomy &amp; Physiology I</td>
<td>4</td>
<td>SCI 230 Pharmacology I**</td>
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<tr>
<td>HUM 150 World of Ideas: Critical Reasoning</td>
<td>3</td>
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**TOTAL HOURS 16**

### SOPHOMORE YEAR

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credit Hours</th>
<th>Second Semester</th>
<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>SCI 315 Pathophysiology</td>
<td>3</td>
<td>NRS 240 Comm-Based Care w/Families</td>
<td>6</td>
</tr>
<tr>
<td>NRS 220 Comm-Based Care with Adults</td>
<td>7</td>
<td>SCI 235 Pharmacology II**</td>
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<tr>
<td>NRS 202 Health Assessment across the lifespan</td>
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<td>SCI 240 Principles of Nutrition</td>
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</tr>
<tr>
<td>SSC 215 Lifespan Psychology</td>
<td>3</td>
<td>NRS 245 Public Health Science I</td>
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</tr>
<tr>
<td>SCI 230 Pharmacology I**</td>
<td>1</td>
<td>SSC 235 Sociology of Culture</td>
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**TOTAL HOURS 17**

### JUNIOR YEAR

<table>
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<th>Credit Hours</th>
<th>Second Semester</th>
<th>Credit Hours</th>
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<tbody>
<tr>
<td>NRS 340 Comm-Based Care Across Life Span</td>
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<td>NRS 350 Advanced Concepts</td>
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</tr>
<tr>
<td>SSC 360 Introduction to Statistics</td>
<td>3</td>
<td>SSC 370 Principles of Research</td>
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<tr>
<td>NRS Non-Clinical Elective</td>
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<td>HUM 210 Introduction to Ethics</td>
<td>3</td>
</tr>
<tr>
<td>COM 320 Healthcare/Leadership</td>
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<td>NRS 345 Public Health Science II</td>
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**TOTAL HOURS 17**

### SENIOR YEAR

<table>
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<tr>
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<th>Credit Hours</th>
<th>Second Semester</th>
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</thead>
<tbody>
<tr>
<td>NRS 445 Nursing the Global Society</td>
<td>3</td>
<td>NRS 462** Community-Based Care: Complexity of Aging</td>
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<tr>
<td>NRS 450 Community-Based Care: Complex Concepts Across the Life Span</td>
<td>9</td>
<td>NRS 470 Senior Synthesis</td>
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<tr>
<td>HUM 2-- World of Ideas: -----</td>
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<td>HUM 2-- World of Ideas: -----</td>
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**TOTAL HOURS 15**

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Revised 03/06, 8/07, 8/08, 1/09, 7/12
Reviewed 8/06, 8/10, 7/11, 7/13

Refer to pre/co-requisite requirement

* May take COM 252 (1) credit if applicable; ** Change Fall 2012
BACHELOR OF SCIENCE DEGREE IN NURSING  
(For students matriculating Fall 2011)

TRADITIONAL BSN STUDENT - 5 YEAR PLAN CURRICULUM STRUCTURE

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 126** semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices.

Note: Before matriculation: math assessment will occur. Completion of modules will be required if not successful in the assessments.

**YEAR ONE: 25 CREDIT HOURS**

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
<th>Course</th>
<th>Credit Hours</th>
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<tbody>
<tr>
<td>COM 101</td>
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<td>SSC 215 Lifespan Psych</td>
<td>3</td>
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<tr>
<td>SSC 101</td>
<td>3</td>
<td>COM 230/245 Language/Culture*</td>
<td>3</td>
</tr>
<tr>
<td>SCI 103</td>
<td>3</td>
<td>SCI 225 A&amp;P I</td>
<td>4</td>
</tr>
<tr>
<td>HUM 150</td>
<td>3</td>
<td>HUM 2 World of Ideas: ------</td>
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<tr>
<td><strong>Total Hours</strong></td>
<td><strong>12</strong></td>
<td><strong>Total Hours</strong></td>
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**YEAR TWO: 26 CREDIT HOURS**

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<th>Course</th>
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<th>Course</th>
<th>Credit Hours</th>
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<tbody>
<tr>
<td>SCI 280</td>
<td>3</td>
<td>NRS 100 Intro to Comm.</td>
<td>4</td>
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<tr>
<td>HUM 2 World of Ideas: ------</td>
<td>3</td>
<td>HUM 2 World of Ideas: ------</td>
<td>3</td>
</tr>
<tr>
<td>SCI 226</td>
<td>4</td>
<td>SCI 315 Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>SCI 235</td>
<td>3</td>
<td>HUM 210 Intro to Ethics</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total Hours</strong></td>
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<td><strong>Total Hours</strong></td>
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**YEAR THREE: 26 CREDIT HOURS**

<table>
<thead>
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<th>Course</th>
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<th>Course</th>
<th>Credit Hours</th>
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<tr>
<td>SCI 240</td>
<td>3</td>
<td>NRS 240 CB Care-Families</td>
<td>6</td>
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<tr>
<td>NRS 202</td>
<td>3</td>
<td>SSC 360 Intro to Stats</td>
<td>3</td>
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<tr>
<td>NRS 220</td>
<td>7</td>
<td>SCI 235** Pharmacology II</td>
<td>2</td>
</tr>
<tr>
<td>SCI 230</td>
<td>1</td>
<td>NRS 245 Public Hlth I</td>
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<td><strong>Total Hours</strong></td>
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**YEAR FOUR: 26 CREDIT HOURS**

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<th>Course</th>
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<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>NRS 340</td>
<td>9</td>
<td>SSC 370 Intro to Research</td>
<td>3</td>
</tr>
<tr>
<td>COM 320</td>
<td>3</td>
<td>NRS 345 Public Hlth II</td>
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<td><strong>Total Hours</strong></td>
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<td><strong>Total Hours</strong></td>
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**YEAR FIVE: 23 CREDIT HOURS**

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<th>Course</th>
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<th>Course</th>
<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>NRS 445</td>
<td>3</td>
<td>NRS 462** Comm. Based Care: Complexity of Aging</td>
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<td>NRS 450</td>
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<td>NRS 470 Senior Synthesis</td>
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<td>NRS 470P</td>
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<td>NRS 470P Senior Preceptor</td>
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<tr>
<td>NRS 465</td>
<td></td>
<td>NRS 3-- Non Clin Elective</td>
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<td><strong>Total Hours</strong></td>
<td><strong>12</strong></td>
<td><strong>Total Hours</strong></td>
<td><strong>11</strong></td>
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*Eff: 8/09 Reviewed 8/10, 7/11, 7/13
Revised 7/12
Refer to pre/co-requisite requirements
* May take COM 252 (1) credit if applicable; ** Change Fall 2012
# Bachelor of Science Degree Nursing

## Accelerated BSN Student - Curriculum Structure

The following plan represents one progression option for full-time never-before-nurses. A student must earn a minimum of 71** semester credit hours plus transfer credits to be eligible for the Accelerated Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices. Note: Before matriculation: TEAS math and reading assessment will occur. Completion of modules will be required if not successful in the assessments.

### Spring Semester – First Session

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td>NRS 100A</td>
<td>Introduction to CB Nursing</td>
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<tr>
<td>NRS 202A</td>
<td>Health Assessment across the life span</td>
<td>3</td>
</tr>
<tr>
<td>SCI 315A</td>
<td>Pathophysiology</td>
<td>3</td>
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<tr>
<td>SCI 265A</td>
<td>Pharmacology</td>
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**Total Hours: 10**

### Spring Semester – Second Session

<table>
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<tr>
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<th>Credit Hours</th>
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<tr>
<td>NRS 220A</td>
<td>Comm-Based Care w/ Adults</td>
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<tr>
<td>SCI 265A</td>
<td>Pharmacology</td>
<td>3</td>
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<tr>
<td>SC315A, SC265A, &amp; NS202</td>
<td>will run the entire semester</td>
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**Total Hours: 10**

### Summer Semester – First Session

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
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<tbody>
<tr>
<td>NRS 240A</td>
<td>Comm-Based Care w/Families</td>
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<tr>
<td>NRS 245A</td>
<td>Public Health Science I</td>
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**Total Hours: 7**

### Summer Semester – Second Session

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<th>Course Title</th>
<th>Credit Hours</th>
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<td>Comm-Based Care Across LS</td>
<td>9</td>
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<tr>
<td>NRS 345A</td>
<td>Public Health Science II</td>
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**Total Hours: 11**

### Fall Semester – First Session

<table>
<thead>
<tr>
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<th>Course Title</th>
<th>Credit Hours</th>
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<tr>
<td>NRS 350A</td>
<td>Adv. CB Nsg Comm./Mental Health</td>
<td>9</td>
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<tr>
<td>COM 230A or COM252*</td>
<td>Language &amp; Culture in Healthcare</td>
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**Total Hours: 12/10**

### Fall Semester – Second Session

<table>
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<th>Course Title</th>
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<td>NRS450A</td>
<td>Comm-Based Care Complex</td>
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<td>NRS 446A</td>
<td>Collab Nsg Leadership/Global Society</td>
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</tr>
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<td></td>
<td>Starting 2013 will run entire semester</td>
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**Total Hours: 12**

### Spring Semester – First Session

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<tr>
<td>NRS 462A**</td>
<td>Comm-Based Complexity of Aging</td>
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<td>NRS__A</td>
<td>Non-Clinical Elective</td>
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<td>SSC 465A</td>
<td>Capstone (entire semester)</td>
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**Total Hours: 8**

### Spring Semester – Second Session

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<td>NRS470P (A)</td>
<td>Senior Preceptor Practicum</td>
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**Total Hours: 3**

Reviewed 8/06, 8/10, 7/11, 7/12, 7/13
Revised 05/06, 8/07, 8/08, 1/09, 1/10, 11/11, 7/12
* May take COM 252 (1) credit if applicable; ** Change Fall 2012
## PHASE I - PREREQUISITES:

<table>
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<td>English Composition</td>
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<tr>
<td>HUM 210</td>
<td>Introduction to Ethics</td>
</tr>
<tr>
<td>HUM 220/255/270*</td>
<td>W of I: The Arts, Hist Persp, Hum Conn</td>
</tr>
<tr>
<td>HUM 220/255/270*</td>
<td>W of I: The Arts, Hist Persp, Hum Conn</td>
</tr>
<tr>
<td>HUM 220/255/270*</td>
<td>W of I: The Arts, Hist Persp, Hum Conn</td>
</tr>
<tr>
<td>SSC 101</td>
<td>Introduction to Psychology</td>
</tr>
<tr>
<td>SSC 215</td>
<td>Life-Span Psychology</td>
</tr>
<tr>
<td>SSC 235</td>
<td>Sociology of Culture</td>
</tr>
<tr>
<td>SSC 360</td>
<td>Introduction to Statistics</td>
</tr>
</tbody>
</table>

27 credits

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUM 150**</td>
<td>World of Ideas: Critical Reas &amp; Rhet.</td>
</tr>
<tr>
<td>NRS 430</td>
<td>RN Professional Seminar</td>
</tr>
<tr>
<td>NRS 402</td>
<td>Health Assessment for RNs</td>
</tr>
<tr>
<td>NRS 446</td>
<td>Collaborative Nursing Leadership in a Global Society</td>
</tr>
<tr>
<td>COM 230/245***</td>
<td>Language and Culture in Healthcare</td>
</tr>
<tr>
<td>SCI 315</td>
<td>Pathophysiology</td>
</tr>
<tr>
<td>SSC 370</td>
<td>Principles of Research</td>
</tr>
<tr>
<td>NRS 476</td>
<td>Community Health Nursing</td>
</tr>
<tr>
<td>NRS 476C</td>
<td>Community Health Nursing Practicum</td>
</tr>
<tr>
<td>NRS 480 or Age Wise</td>
<td>Complexity in Nursing</td>
</tr>
<tr>
<td>SSC 465</td>
<td>Capstone: The Educated Citizen</td>
</tr>
</tbody>
</table>

33 credits

* Nine credits of Humanities: World of Ideas must include at least 2 out of the 3 areas: The Arts, Historical Perspectives, Human Connection

**Maximum credit awarded for HU 150 is 2 credit hours; students who transfer in this credit must enroll in HUM 152 for 1 credit. ***Maximum transfer credit awarded for CM230/245 is 2 credit hours; students who transfer in this credit must enroll in COM 252 for 1 credit.

Effective 7/11 Revised 10/12, Reviewed 7/12, 7/13
RN to BSN and RN to MSN Bridge Attestation Policy

Purpose:
To ensure that RN to BSN and RN to MSN Bridge students have completed a health screening or have documented health status during their time in the RN to BSN and RN to MSN Bridge Programs.

Policy:
In order to have compliance in the clinical/practicum courses, all RN to BSN and RN to MSN Bridge students must sign the electronic attestation form on admission to the program and each January.

Procedure:
1. Students will be provided a link to complete and submit the attestation form.
2. Students who do not complete and submit the attestation form will be placed on hold for the next semester.

Attestation Form
I attest that I have completed a health screening or have documented health status of the following:

a) Tuberculin skin test within the past 12 months; documentation as a previous positive reactor, any treatment received, or a chest x-ray within the past 12 months.
b) Proof of Rubella and Rubeola immunity by positive antibody titers or 2 doses of MMR.
c) Varicella immunity by positive history of chickenpox, proof of 2 Varicella immunizations, or positive antibody titer.
d) Proof of Hepatitis B immunization or completion of a certificate of declination of vaccine.
e) Proof of Tdap immunization or a certificate of declination of vaccine.
f) Proof of Influenza vaccine or completion of certificate of declination of vaccine.
g) Negative drug screen

If any changes occur during the program, I agree to contact the Program Director immediately. This information and documentation is needed for you to complete any clinical or practicum component of the program.

* Required
I acknowledge and agree that my electronic submission of this form to Nebraska Methodist College (NMC) is my acknowledgement that this form is true and accurate, and NMC can rely on the form as if my handwritten signature was affixed to the form, and this electronic attestation serves as my electronic signature. *

Please type your full name here.

Effective 12/13
The following is the progression plan for full-time LPN nurses to the BSN program. A student must earn a minimum of 121 semester credit hours to be eligible for the Bachelor of Science in Nursing. Actual course availability in any given semester/session is dependent upon College practices.

### PHASE 1

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>COM 101</td>
<td>English Composition</td>
<td>3</td>
</tr>
<tr>
<td>SCI 103</td>
<td>College Chemistry</td>
<td>3</td>
</tr>
<tr>
<td>SCI 225</td>
<td>Human Anatomy and Physiology I</td>
<td>4</td>
</tr>
<tr>
<td>SCI 226</td>
<td>Human Anatomy and Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>SSC 101</td>
<td>Introduction to Psychology</td>
<td>3</td>
</tr>
<tr>
<td>SCI 280</td>
<td>Microbiology</td>
<td>3</td>
</tr>
<tr>
<td>COM 230/245*</td>
<td>Language and Culture in Healthcare</td>
<td>3</td>
</tr>
<tr>
<td>HUM 150</td>
<td>World of Ideas: Critical Reasoning and Rhetoric (1 credit for HU152)</td>
<td>1-3</td>
</tr>
<tr>
<td>HUM 220</td>
<td>World of Ideas: The Arts</td>
<td>3</td>
</tr>
<tr>
<td>NRS 176</td>
<td>LPN Bridge Course</td>
<td>1</td>
</tr>
</tbody>
</table>

**Total 28-30 Credits**

### PHASE 2

#### Semester One

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSC 215  Life-Span Psychology</td>
<td>3</td>
</tr>
<tr>
<td>NRS 220  Community-Based Care with Adults</td>
<td>7</td>
</tr>
<tr>
<td>NRS 202  Health Assessment Across the Life-Span</td>
<td>3</td>
</tr>
<tr>
<td>SCI 230** Pharmacology I</td>
<td>1</td>
</tr>
<tr>
<td>SCI 315  Pathophysiology</td>
<td>3</td>
</tr>
</tbody>
</table>

**17 Credit Hours**

#### Semester Two

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCI 240  Principles and Concepts of Nutrition</td>
<td>3</td>
</tr>
<tr>
<td>SCI 235  Sociology of Culture</td>
<td>3</td>
</tr>
<tr>
<td>NRS 240  Community-Based Care with Families</td>
<td>6</td>
</tr>
<tr>
<td>NRS 245  Public Health Science I</td>
<td>1</td>
</tr>
<tr>
<td>SCI 235** Pharmacology II</td>
<td>2</td>
</tr>
</tbody>
</table>

**15 Credit Hours**

#### Semester Three

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSC 360  Introduction to Statistics</td>
<td>3</td>
</tr>
<tr>
<td>NRS 340  Community-Based Care Across the Life-Span</td>
<td>9</td>
</tr>
<tr>
<td>NRS 400  Non-clinical nursing elective</td>
<td>2</td>
</tr>
<tr>
<td>COM 230  Healthcare Collaboration and Leadership</td>
<td>3</td>
</tr>
</tbody>
</table>

**17 Credit Hours**

#### Semester Four

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUM 210  Introduction to Ethics</td>
<td>3</td>
</tr>
<tr>
<td>NRS 350  Advanced Concepts in Community-based nursing</td>
<td>9</td>
</tr>
<tr>
<td>NRS 345  Public Health Science II</td>
<td>2</td>
</tr>
<tr>
<td>SSC 370  Principles of Research</td>
<td>3</td>
</tr>
</tbody>
</table>

**17 Credit Hours**

#### Semester Five

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUM 225  World of Ideas: Historical Perspectives</td>
<td>3</td>
</tr>
<tr>
<td>NRS 450  Community-based Care: Complex Concepts Across the Life-span</td>
<td>9</td>
</tr>
<tr>
<td>NRS 445  Nursing the Global Society</td>
<td>3</td>
</tr>
</tbody>
</table>

**15 Credit Hours**

#### Semester Six

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUM 270  World of Ideas: Human Connection</td>
<td>3</td>
</tr>
<tr>
<td>NRS 462** Community-Based Care: Complexity of Aging</td>
<td>3</td>
</tr>
<tr>
<td>NRS 470  Senior Synthesis</td>
<td>1</td>
</tr>
<tr>
<td>NRS 470S  Senior Preceptor Practicum</td>
<td>2</td>
</tr>
<tr>
<td>SSC 465  Capstone: The Educated Citizen</td>
<td>3</td>
</tr>
</tbody>
</table>

**Total 93 Credits**

Reviewed 8/06, 8/07, 7/09, 7/11, 7/12, 7/13 Revised 05/06, 8/08/ 8/10, 7/12, 2/13*

May take COM 252 (1) credit if applicable; ** Change Fall 2012
ADMINISTRATION OF CONTROLLED SUBSTANCES
POLICY

PURPOSE:

To identify the nursing student’s responsibility in administration of controlled substances.

POLICY:

Student nurses may administer controlled substances utilizing the following specified criteria.

PROCEDURE:

1. Students will abide by the policy of the clinical agency and individual state regulatory boards.

2. An RN or faculty member must check and when indicated, co-sign all controlled substances administered by students.

3. Partial doses and wasted or refused narcotics must be disposed of properly and witnessed by the student and co-signing RN or faculty member.

Reviewed 3/94, 2/95, 8/96, 8/99, 4/01, 1/03, 1/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/12, 7/13
Revised 8/97, 5/00, 8/04, 12/05
CLINICAL PERFORMANCE CRITERIA POLICY

PURPOSE:

To ensure that satisfactory clinical performance is evaluated throughout the nursing program and that nursing students maintain sufficient clinical practice hours for licensure.

POLICY:

Clinical course outcomes and guidelines will be used to evaluate clinical performance in all clinical courses. These established outcomes must be achieved at a satisfactory level by the completion of the clinical experience or the student will receive a grade of unsatisfactory and must repeat the entire course (theoretical and clinical components). Students who miss clinical/laboratory experiences will be required to make up clinical/lab time. Excessive clinical/laboratory absences can result in an incomplete or failure of the course.

PROCEDURE:

Competency in the following clinical performance measures is evaluated in each clinical course as well as at the end of the program. Clinical performance is graded Satisfactory, Unsatisfactory or Incomplete. Students receiving Unsatisfactory will be required to retake the entire course (theoretical and clinical components).

Students will:

a. meet stated outcomes and guidelines of assigned clinical course.

b. demonstrate satisfactory preparation for client care according to course outcomes and guidelines. If students come to clinical unprepared, they will be dismissed from the scheduled clinical experience resulting in an unexcused absence.

c. correlate theoretical concepts and scientific principles with clinical practice.

d. deliver-client care according to course outcomes and guidelines.

e. complete assignments within specified time as designated in course syllabi.

f. provide safe client care within the standards of legal, ethical, and professional practice according to course outcomes and guidelines. Five rights need to be observed by all students doing medication administration.
g. be removed from clinical for any behavior deemed unsafe which may result in failure of the course.

h. be on time. Any student who is late can be placed on a clinical performance plan, or dismissed from the scheduled clinical experience resulting in an unexcused absence.

i. notify clinical/laboratory faculty of an absence before the scheduled clinical experience begins. A no call, no show is an unexcused absence.

j. In the BSN program (ACE and Traditional):
   • attendance at a clinical orientation is required.
   • students who do not attend clinical orientation can be academically withdrawn from the course by the Director of the Undergraduate Nursing Programs.
   • one unexcused absence automatically results in a clinical performance plan.
   • a second unexcused absence will result in failure of the course.
   • absence for more than two clinical/lab experiences, may result in an incomplete in or failure of the course.
   • clinical/pre-clinical/lab will be made up according to specific guidelines set up by the course faculty and based on the expectations of the clinical agencies.

In the ACE program:
   • one unexcused absence may result in failure of the course due to the accelerated curriculum design.

Reviewed 3/94, 2/95, 8/96, 8/99, 4/01, 1/03, 1/05, 8/06, 8/07, 8/08, 12/08, 8/10, 7/11, 7/12, 7/13

Revised 5/00, 8/04, 12/05, 12/07, 7/09
CLINICAL SKILLS COMPETENCY POLICY

PURPOSE:

To facilitate preparation and successful competency in nursing skills.

POLICY:

All undergraduate students in the Department of Nursing will be required to demonstrate satisfactory skills competency in identified skills throughout the program.

PROCEDURE:

**NRS 340, 350, and 450**

1. Students enrolled in NRS340, 350, and 450 must demonstrate proficiency with the following skills by midterm of the semester: Foley catheter insertion, medication reconstitution with intramuscular injection and mixing insulins in a single syringe with subcutaneous injection, open tracheal suctioning, nasogastric tube insertion and gastric tube feeding administration.
   a. Students are required to sign up for a demonstration time. A student who does not sign up, signs up but is not present for the demonstration, or does not cancel/notify prior to 24 hours before the demonstration time, will receive a clinical absence and be required to take part in a full day clinical make-up.

2. A student who does not demonstrate proficiency during the skills competencies will receive a U (Unsatisfactory) on their weekly clinical evaluation form and must return to perform a repeat demonstration of the skill/skills during the repeat demonstration day. Prior to the repeat demonstration, the student is required to attend an open lab time in the Nursing Arts Center to practice the skill/skills. A student who is consistently unable to competently demonstrate the required skills by midterm will receive a U on Course Outcome V (Evaluate skills and ongoing assessment into the process of planning, intervening, and evaluating the delivery of professional nursing care...[refer to complete outcome]) and will continue to demonstrate the skill/skills until proficiency is obtained. Consistent U’s may result in a course failure or a clinical point (refer to Unsatisfactory/Unsafe Clinical Practice Policy Department of Nursing Student Handbook).

**NRS 462**

3. Students enrolled in NRS462 must demonstrate proficiency with the following skills by the end of the course: Foley catheter insertion, medication reconstitution with IM injection, mixing insulins in a single syringe with subcutaneous injection, open tracheal suctioning, NG tube insertion, g-tube feeding administration, oxygen administration via a nasal cannula, assessment of heart and lung sounds, peripheral intravenous catheter insertion, and intravenous push medication administration.

4. A student who does not demonstrate proficiency during the NRS462 skills competencies will receive a U on their weekly clinical evaluation form and must return to perform a repeat demonstration of the skill/skills during the repeat demonstration day. A student who is consistently unable to competently demonstrate the required skills by the end of the semester will receive a U on Course Outcome V (see above) and will continue to
demonstrate the skill/skills until proficiency is obtained. Consistent U’s may result in a course failure, a clinical point, and/or advancement into NRS470 may be delayed.
CO-ASSIGNMENT POLICY

PURPOSE:

To facilitate continuity and consistency of client care when co-assignment is indicated.

POLICY:

In agencies requiring co-assignment, non-RN student nurses will be co-assigned with a registered nurse or designated person.

It is the responsibility of the faculty member and students to communicate with the co-assigned nurse/designated person on an ongoing basis which aspects of care will be provided by the student as determined by the course objectives. Based on this communication, the student nurse, faculty member and the co-assigned registered nurse/designated person share the responsibility for assuring that all aspects of client care are provided.

The faculty member is responsible for the provision of supervision of learning experiences for the students.

Agency personnel are ultimately responsible for all client care that is given.

PROCEDURE:

1. Students will confer with the co-assigned RN or designated person regarding specific student responsibilities in the setting.

2. Student will inform the co-assigned RN or designated person of any activities that lie outside the scope of the course outcomes.

3. Students will be responsible for keeping the co-assigned RN/designated person and faculty member informed of changes in client condition.

4. At the end of each clinical experience, students will give a comprehensive report according to course and agency guidelines.

Reviewed 3/94, 2/95, 8/96, 5/00, 4/01, 1/05, 12/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/12, 7/13
Revised 8/99, 1/03, 8/04
CONFIDENTIALTY POLICY

PURPOSE:

To ensure student preparation in the vital nature of confidentiality before clinical practicum experiences and to comply with clinical agency requirements.

POLICY:

The student must obtain and maintain verification of ongoing confidentiality education.

PROCEDURE:

1. Preparation in confidentiality/HIPAA guidelines must be reviewed in nursing courses and through clinical sites.

2. Successful instruction on compliance with confidentiality/HIPAA guidelines must be received with the first clinical nursing experience and annually updated.

3. Students who have not successfully completed the training on confidentiality cannot be admitted to the clinical setting.

4. Faculty will document student confidentiality education in clinical courses.

Effective 1/06
Reviewed 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/12, 7/13
DEPARTMENT OF NURSING AND CLINICAL AGENCY
REQUIREMENTS TO ATTEND CLINICAL POLICY

PURPOSE:
To ensure Nebraska Methodist College students are in compliance with college and clinical agency requirements prior to beginning clinical and throughout the semester. This mitigates their risk of contracting communicable and blood borne illnesses and the risk to other students, clients, and the NMC community.

POLICY:
The student must comply with college and clinical agency requirements, Basic Life Support (BLS) and health requirements. Failure to do so prior to the first day of clinical will result in ineligibility to attend clinical. These same requirements must be maintained throughout the semester. Failure to do so prior to expiration or deadline will result in ineligibility to attend clinical.

PROCEDURE:
The following procedures will be used:
1. Complete all college and clinical agency specific requirements.
   a. Computer Based Training
   b. Background check and other required security measures
   c. Clinical skills competency
2. Complete BLS (full or renewal) course as needed.
   a. BLS preparation must be obtained through the American Heart Association (Health Care Provider Course) or Red Cross (CPR/AED for the Professional Rescuer).
   b. Official current BLS cards must be presented by the student to Student Developmental Services.
3. Complete health requirements as determined by the college and clinical agency.
   a. Must be current on all required immunizations and documentation must be presented by the student to Student Developmental Services.
   b. TB (TST) screening must be completed annually and documentation must be presented by the student to Student Developmental Services. A complete TST is
one which has been placed and read 48-72 hours after placement. Students will be
allowed 1 year plus 7 days from their previous TST to complete the annual
requirement. If more than 1 year and 7 days has elapsed from the previous test,
the student will not be allowed to attend clinical until the TST is placed and read.

c. Obtain an influenza vaccination annually or sign a waiver by date determined by
the college or clinical agency. Documentation must be presented by the student to
Student Developmental Services.

d. Drug screen completed as required by college and clinical agency.
ELECTRONIC COMMUNICATION POLICY

PURPOSE:

To facilitate knowledge regarding appropriate means of communication through electronic devices.

POLICY:

All students are required to utilize the Nebraska Methodist College e-mail system for electronic communication with College/Program faculty and personnel.

PROCEDURE:

1. Students are responsible for content of their email communication. Inappropriate material or material sent in bad taste may be subject to disciplinary action as deemed by the Program Director. This includes any disrespectful or denigrating comments about another person.

2. Electronic Communication Etiquette: Students are to use appropriate and professional etiquette when communicating with College faculty or personnel, or any representative of the Program including clinical instructors. This includes, but is not limited to:
   - Appropriate salutation or greeting by name (i.e., Hello, Dr. Smith, Hi Jane, etc.)
   - Full sentences with appropriate grammar (no text message, shortcuts, or jargon)
   - Closure (i.e., Thanks, Mary; Regards, Tom)

Effective 12/12
Reviewed 7/13
FAILURE OF TWO BSN NURSING COURSES POLICY

PURPOSE:

To halt the progression of students who are not demonstrating satisfactory academic performance necessary for completion of the BSN nursing program.

POLICY:

Any student who fails a second BSN nursing course while at NMC will be dismissed from the program.

PROCEDURE:

1. Students who have failed a second BSN course will be automatically dismissed from the program.
2. If a student feels that extenuating circumstances contributed to the second failure, the student can appeal the dismissal.
3. A student should submit a letter of appeal to the Dean, specifically outlining the extenuating circumstances within 14 days from the date of dismissal. This letter should include supporting evidence and a detailed plan for future academic improvement.
4. A Department of Nursing Review Board will be convened and make a recommendation on the appeal, to the Dean, based on the student’s circumstances and academic record.
5. The decision on the appeal given by the Dean is final. Should the student be allowed to continue in and/or be readmitted to the BSN program, a developmental plan will be completed and incorporate the student’s plan for success. A subsequent failure of a nursing course will result in permanent dismissal.

Effective 1/06
Reviewed 8/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/13
Revised 8/06, 8/09, 12/09, 7/12
GRADING NURSING COURSES POLICY

PURPOSE:

To clarify the grading policies of undergraduate nursing courses.

POLICY:

Students must have a minimum of 75% average on all examinations to successfully complete a course. Theoretical and clinical/laboratory components of nursing courses shall be taken concurrently. Failure in any component will necessitate repeating the entire course.

PROCEDURE:

1. Students will register for the theory and clinical components of a nursing course concurrently.

2. Theoretical component will indicate actual classroom hours, and only these credit hours will be computed into the grade point average.

3. Students must achieve a minimum of 75% exam average to successfully complete the course.

4. Prior to final course grade computation, examinations will be averaged separately to determine if the 75% has been met or exceeded.

5. Test grade averages equal to or greater than 60% and less than 75% will result in a “D” in the course. Test grade averages less than 60% will result in an “F” in the course.

6. If test grade average is greater than or equal to 75%, the final theory grade is computed incorporating all graded class assignments.

7. A grade of less than “C” in the theory component of any nursing course and/or an unsatisfactory in the clinical/lab component necessitates repeating the entire course.

8. Test scores and final grades will not be rounded.

Reviewed 3/94, 2/95, 8/99, 5/00, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11, 7/12, 7/13
Revised 5/96 4/01, 12/01, 12/12
Effective 8/01
MEDICATION ADMINISTRATION AND 
MATH CALCULATION PROFICIENCY POLICY

PURPOSE:

To assess non-RN nursing students’ medication administration and/or math calculation proficiency appropriate to nursing course requirements.

POLICY:

Medication administration and/or math calculation proficiency will be tested throughout the curriculum to ensure delivery of safe client care.

PROCEDURE:

1. NRS100 students will have medication administration and/or math calculation content incorporated into the course theory. These students will have medication administration and/or math calculation items incorporated into unit examinations. Students will apply medication administration/math calculation in clinical on a regular basis. If problems are identified remediation will be required.

2. All other non-RN students will be tested on medication administration and/or math calculation at the beginning of each clinical nursing course. Students taking NRS 462 and NRS 470 will be required to take medication administration and/or math calculation testing only in NRS 462.

3. Medication administration and/or math calculation proficiency (90%) must be demonstrated within the first week after a course begins. The medication administration and/or math calculation test may be retaken one time, for a total of two attempts.

4. Students who do not successfully complete medication administration and/or math calculation testing after two attempts, will be required to register for a one-half credit remediation course devoted to medication administration and math calculation, to be taken concurrently with the nursing clinical course. Students that fail the math exam are not allowed to pass medication in clinical until they have successfully passed the remediation course. Each course is responsible for identifying how the students will meet the course objectives. Students may administer medications once medication and math calculation proficiency (90%) is demonstrated at the completion of the remediation course.

5. Students must show all work when taking medication administration and/or math calculation tests. Calculators* can be used for math computation.

*Calculator that can be used is a Sharp EL-2435B or Staples STP466465, available in the NMC Bookstore.

Effective 8/02
Revised 3/18/94, 5/96, 8/97, 8/99, 5/00, 4/01, 4/02, 1/03, 8/04, 8/06, 3/10, 7/11, 11/11, 7/12
Reviewed 4/95, 1/05, 12/05, 8/07, 8/08, 7/09, 8/10, 7/13
NCLEX PREPARATION POLICY (NRS 462 AND NRS 470)

PURPOSE:
To assess students’ level of preparation or readiness for and facilitate successful completion of the NCLEX-RN®.

POLICY:
All undergraduate non-RN students are required to complete all components of NCLEX preparation in NRS 462 and NRS 470.

PROCEDURE:
Students enrolled in NRS 462 will:

1. Achieve a minimum score of 90% on the non-proctored online ATI RN Comprehensive Predictor® practice assessment. The practice assessment report will be presented to the course faculty in order for the student to be eligible to complete the proctored, online RN Comprehensive Predictor® ‘exit’ assessment.
   - First Attempt:
     a. Students who achieve the minimum score (i.e., achieve the 90% Predicted Probability) will earn 50 classroom points.
     b. Students who earn between 80-89% Predicted Probability will earn 20 classroom points and will be required to remediate and retest during NRS 462.
     c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points and will be required to remediate and retest during NRS 462.
   - Second attempt:
     a. Students who are required to complete a second RN Comprehensive Predictor® and achieve the benchmark: 90% Predicted Probability of first-time NCLEX-RN® success will receive 25 classroom points.
     b. Students who are required to complete a second RN Comprehensive Predictor® and earn between 80-89% Predicted Probability will earn 15 classroom points and will be required to remediate and retest during NRS 470.
     c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points and will be required to remediate and retest during NRS 470.

2. Score at or above the 90% Predicted Probability of first-time NCLEX-RN® success on the proctored ATI RN Comprehensive Predictor® ‘exit’ assessment.
   - First Attempt:
     a. Students who achieve the minimum score (i.e., achieve the 90% Predicted Probability) will earn 50 classroom points.
     b. Students who earn between 80-89% Predicted Probability will earn 20 classroom points and will be required to remediate and retest during NRS 462.
     c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points and will be required to remediate and retest during NRS 462.
   - Second attempt:
     a. Students who are required to complete a second RN Comprehensive Predictor® and achieve the benchmark: 90% Predicted Probability of first-time NCLEX-RN® success will receive 25 classroom points.
     b. Students who are required to complete a second RN Comprehensive Predictor® and earn between 80-89% Predicted Probability will earn 15 classroom points and will be required to remediate and retest during NRS 470.
     c. Students who earn below 80% Predicted Probability will earn 0 (zero) classroom points and will be required to remediate and retest during NRS 470.

3. Students who do not achieve 90% Predicted Probability on the RN Comprehensive Predictor® ‘exit’ assessment during NRS 462 will be required to remediate with the ATI Specialist and complete a 3rd RN Comprehensive Predictor® assessment at their own expense during NRS 470.

4. Students who do not achieve 90% Predicted Probability on the 3rd proctored RN Comprehensive Predictor® will receive an Incomplete in NRS 470 and be required to remediate with the ATI Specialist. The Incomplete will be removed upon successful completion of all remediation activities or exercises.

5. Students enrolled in NRS 470 will be required to attend NCLEX PREP Seminars in conjunction with NRS 470. These seminars will focus on:
- Licensure issues and general NCLEX-RN® exam information,
- Strategies for successful mental and emotional NCLEX-RN® preparation
- Understanding and interpreting individual results of the RN Comprehensive Predictor® assessment to identify content areas or topics requiring additional study.
NURSING CLINICAL DRESS CODE POLICY

PURPOSE:

To maintain professional appearance of nursing student and to assure student and client safety during clinical experiences.

POLICY:

Professional appearance must be maintained during all clinical experiences. Guidelines for professional attire will adhere to the policy of Nebraska Methodist College and to that of the institution in which the clinical experience is held. Failure to adhere to the College and institutional policy for professional attire may result in disciplinary action.

PROCEDURE:

1. Students are expected to look professional.

2. Non-licensed BSN students’ clinical uniform in acute and long-term care settings is as follows:

   a. The College uniform will consist of one of the designated tops and plain white or navy blue slacks/scrub pants or skirt. Stretch pants, leggings, or white denim pants are not considered appropriate professional attire. White turtlenecks or mock turtlenecks may be worn under tops in adherence with agency policy. The College arch and patch will be placed on the left sleeve two inches below the shoulder seam. There will be no space between arch and patch. The dove emblem will be positioned on the left collar. If there is no collar, the emblem will be positioned on the left side even with the top button, and midway between the buttons and the inseam. A white scrub jacket is acceptable with appropriate identification during the clinical practicum.

   b. White socks, flesh tone, or solid dark socks, as appropriate. No bare legs. Underwear must not be visible through the uniform.

   c. Predominantly white closed-toe and closed heel shoes; leather or washable vinyl only.

   d. Student identification must be worn and clearly visible (student nurse pin is optional). Student identification will consist of the student’s first name.

   e. One of the designated white lab coats with College arch and patch and name tag must be worn during pre-laboratory experiences and at other clinical experiences as specified. The lab coat is to be worn over appropriate street clothes which are limited to slacks and shirt, skirt and blouse, or dress. Blue jeans, shorts, short skirts, open-toe or open heel shoes are not allowed.

   f. When the student is engaged in the preceptor (NS470) experience, the student must wear the student uniform unless specified by the specific unit (i.e. OR scrubs) but the College student identification must be visible.
3. Licensed BSN students' clinical uniform is as follows unless otherwise designated by course guidelines:
   a. A white lab coat with College arch and patch placed as above and name tag must be worn during clinical experiences.
   b. The lab coat is to be worn over appropriate street clothes which are limited to slacks and shirt, skirt and blouse, or dress. Blue jeans, shorts, short skirts, open-toe or open heel shoes are not allowed.

4. Student uniform for clinical experiences not located in acute or long-term care settings is as follows:
   a. Navy blue skirt or slacks with white polo or shirt and designated jacket.
   b. Students must wear student identification and school patches at all times.
   c. Shoes: solid closed toe black, brown, gray, or blue.

Some clinical/practicum experiences may have alternate dress guidelines. See course syllabi for specific guidelines.

5. Artificial nails are not allowed in clinical areas. Nail polish must conform to the requirements of the clinical agency. Fingernails should be clean, neat, moderate in length and well-maintained. Polish colors should be traditional and should not detract from the attire, uniform or work environment.

6. Hair must be clean. Long hair must be styled off the face and shoulders and away from the front of the uniform. “Pony-tails” or similarly styled hair is permitted as long as the hair does not fall forward over the shoulders. Beards and mustaches must be kept clean and neatly trimmed.

7. Student uniform/clothing with the College insignia will only be worn when in the student role.

8. Tattoos and Body Piercings should not be so outstanding or numerous that they become a distraction or attract inordinate attention. During clinicals, tattoos (permanent or temporary) must be completely covered and not visible. Except for one stud earring per earlobe, no other body piercing jewelry is permitted. Nose piercing jewelry must be removed or covered. The exhibition of “non-traditional jewelry during clinicals (i.e., wearing of earrings by male students, belly-button piercing by any student) is unacceptable.”

Note: Students must look professional at all times when in student uniform. Professional includes: clean, wrinkle-free clothes and being well-groomed. Faculty may use their discretion when determining if a student’s appearance is professional, and when counseling a student regarding appearance and/or removing them from clinical

Reviewed 3/94, 2/96, 5/00, 4/01, 1/05, 12/05, 8/06, 7/09, 8/10, 7/11, 7/12, 7/13
Revised 8/96, 8/97, 5/98, 8/99, 1/03, 8/04, 8/0, 8/07, 8/08, 12/08, 12/10, 7/12, 12/12

45
Nursing Students Interaction with Minors Policy

PURPOSE:

To identify expectations and requirements regarding interaction of nursing students with Minors except in situations of direct patient care.

Minor is defined as a person under the age of nineteen (19) who is not enrolled or accepted for enrollment at NMC

POLICY:

Required Training: In recognition of the imperative of protecting Minors, NMC requires that nursing students working with Minors be trained regarding policies and issues relating to interactions with Minors. This training shall be at least annually before a nursing student begins working with Minors. Training shall be documented, with the nursing student signing a statement indicating his/her understanding and receipt of NMC policies and procedures. This training shall include:

a) NMC policies regarding interactions
b) Use of background checks to screen nursing students
c) Responsibility for modeling respectful behaviors
d) Consequences of conduct violations
e) Behavioral signs that Minor victims may exhibit
f) Sexual abuse and sexual harassment
g) Inappropriate behavior
h) Other appropriate topics
i) Reporting requirements and procedures.

Behavioral Expectations when interacting with Minors: Nursing students should be positive role models for Minors, and act in a caring, honest, respectful and responsible manner that is consistent with the mission and core values of NMC. Nursing students working in NMC programs covered by this policy must follow these expectations to avoid behaviors that could cause harm or be misinterpreted:

c) Do not be alone with a single Minor except in situations of direct patient care.
d) Do not engage in any sexual activity, make sexual comments, tell sexual jokes, or share sexually explicit material (or assist in any way to provide access to such material) with Minors.
c) One-on-one interactions should occur only when at least two nursing students are present at all times with a Minor. If a one-on-one interaction is required, meet in open, well-illuminated spaces or rooms with windows observable by other nursing students.
c) Do not meet with Minors outside of established times for Program activities. Any exceptions require the written parental authorization and must include more than one Nursing student.
d) Do not invite Minors to your home. Any exceptions, if any, required the written authorization by the Minor’s parent/guardian.
e) Do not engage or allow Minors to engage you in romantic or sexual conversations, or related matters, unless required in the role of counselor or health care provider.
f) Do not engage or communicate with Minors through email, text message, social networking websites (e.g., Facebook, Twitter, blogs, etc.), internet chat rooms, or other forms of social media expect and
unless there is an educational or Programmatic purpose and the content of the communication is consistent with the mission of NMC.

g) Do not touch a Minor in a manner that a reasonable person could interpret as inappropriate. Touching should generally only be in the open and in response to the Minor’s needs, for purpose that is consistent with the Program’s mission and culture, and/or for a clear educational, developmental, or health-related (i.e. treatment of any injury) purpose. Any resistance by the Minor should be respected.

h) Do not engage in any abusive conduct of any kind toward, in the presence of, a Minor, including but not limited to verbal abuse, striking, hitting, punching, spanking, or restraining. If restraint is necessary to protect a Minor or other Minors from harm, all incidents must be documented and disclosed to the coordinator of the Program and the Minor’s parent/guardian.

i) Do not use, possess or be under the influence of alcohol or illegal drugs while on duty or when responsible for a Minor’s welfare.

j) Nursing students must not transport Minors in vehicles.

k) Possession of or use of any type of weapon or explosive device is prohibited.

**Reporting Allegation(s) of Inappropriate Behavior or Abuse of a Minor**

Every member of the NMC community has an obligation to report immediately instances or suspected instances of the abuse of or inappropriate interactions with Minors – “If you see something, say something.” Nebraska law requires any person who has a reasonable cause to believe that a child has been subjected to abuse or neglect or observes such a child being subjected to conditions or circumstances which reasonably would result in child abuse or neglect, report it to the proper law enforcement agency or to the Department of Health and Human Services. Accordingly, if you have reasonable cause to believe that child abuse or neglect has occurred, including sexual assault:

5. You must report it;
6. You should give as much information and details as possible;
7. Reporting Adults are immune from liability, civil or criminal, if the report is made in good faith and not giving maliciously false statements;
8. If you willfully fail to make a report, you will be in violation of Nebraska Statute 28-717.

DHHS has established the following toll-free number to be used by any person at any hours of the day or night, to report child abuse: (800) 652-1999.

Any suspecting member of the NMC community is also required to contact and report the inappropriate behavior and/or abuse to their Program director and/or campus security.

*Effective 8/13*
PERFORMANCE PLANS POLICY

PURPOSE:

To establish strategies that will improve student classroom and/or clinical performance.

POLICY:

Performance Plans will be initiated by faculty at any time the student is at high risk for not successfully meeting course requirements.

PROCEDURE:

1. Faculty will meet with the student needing a performance plan for classroom and/or clinical performance.

2. Faculty delineates rationale for initiating a performance plan.

3. The behaviors and outcomes that must occur for the student to be successful will be clearly and specifically written.

4. Referrals to Students Services will be made as appropriate to meet the goals of the performance plan.

5. A copy of the performance plan remains with the course faculty, one is given to the student, and one is given to the student’s advisor.

6. Periodic evaluation of the student’s progress will be monitored by the faculty and shared with the student.

7. At the end of the semester, the student will meet with faculty for final course/clinical evaluations to determine if the outcomes have been successfully met. A copy of the completed performance plan will be filed in the student advising folder.

Reviewed 5/00, 4/01, 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11, 7/12, 7/13
Revised 8/99, 12/05, 12/07
Effective 1/97
PREPARATION & ADMINISTRATION
OF INTRAVENOUS MEDICATION POLICY

PURPOSE:

To specify student responsibility related to intravenous medication.

POLICY:

Students will follow the policies of the affiliating agencies related to preparation and administration of intravenous medications.

PROCEDURE:

1. The administration of all intravenous medications by non-RN students must be under the supervision of a faculty member or qualified registered nurse.

2. Students are not permitted to administer intravenous:
   a. Antineoplastic agent via direct intravenous push.
   b. Conscious sedation by direct intravenous push.
   c. Antiarrhythmic agents, unless the client is connected to cardiac monitor.
PREPARATION & ADMINISTRATION OF INVESTIGATIONAL & EXPERIMENTAL DRUGS POLICY

PURPOSE:

To specify student responsibility related to administration of experimental or Investigational drugs.

POLICY/PROCEDURE:

Students will not prepare or administer investigational or experimental drugs.

Reviewed 3/94, 2/95, 8/96, 8/99, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/11, 7/12, 7/13
PROGRESSION TESTING IN BSN PROGRAM POLICY

PURPOSE:

To facilitate collaborative and individualized long term learning and transfer of knowledge from theory to application and course to course while demonstrating progress toward program outcomes and eventually successful testing on the NCLEX-RN.

POLICY:

All undergraduate non-RN students in the Department of Nursing will be required to complete standardized comprehensive testing throughout the curriculum and score at or above the ATI recommended cut score for Proficiency Level 2.

PROCEDURE:

1. Beginning in NRS220 and in each subsequent nursing clinical course, students will complete the assigned standardized testing.

2. Students will first complete a non-proctored online practice assessment and achieve at least a 90%. The score sheet of the online practice assessment will be presented to the faculty before the student is eligible to complete a proctored test.

3. Students must score at or above the ATI recommended cut score for Proficiency Level 2 on the designated proctored ATI test. For students scoring below the ATI recommended cut score for Proficiency Level 2, remediation and practice will occur before repeating up to a total of two proctored tests scheduled with the faculty.

4. A total of 50 examination points will be given if Proficiency Level 3 is attained on the first test(s). A total of 45 examination points will be given if the benchmark of Proficiency Level 2 is attained on the first test(s). A total of 20 examination points will be awarded if Proficiency Level 1 is attained on the first test(s). If Proficiency Level below Level 1 is attained on the first test(s), no points will be awarded.

5. A total of 25 examination points will be given if Proficiency Level 3 is attained on the second test(s). A total of 20 examination points will be awarded if the benchmark of Proficiency Level 2 is attained on the second test(s). A total of 10 examination points will be awarded if Proficiency Level 1 is attained on the second test(s). If proficiency level below Level 1 is attained on the second test(s), no points will be awarded.

6. An “incomplete” will be assigned in a clinical nursing course if a proficiency level 2 is not attained after two proctored tests have been taken. The incomplete will be changed once all of the following occur:
   - Student meets with ATI specialist
   - ATI developmental plan is written and goals met
   - All other course requirements have been met

7. Beginning in NRS220, each student will be tracked in ATI progressive testing. When the student is unsuccessful in meeting the first-attempt cut score for Proficiency Level 2 in two nursing courses, the student will be required to complete structured remediation. If the student continues to be unsuccessful in meeting the first-attempt cut score in subsequent nursing courses, the student will continue to be enrolled in a structured remediation until NRS470.
8. In NRS 240 students will complete the proctored nutrition ATI test which will be worth 25 points. These points will be included in the classroom points and not exam points. The nutrition ATI test will be taken only one time. Students who achieve Proficiency Level 2 will be awarded 25 points. Students who achieve Proficiency Level 1 will be awarded 15 points. If Proficiency Level below Level 1 is attained on the test, no points will be awarded. Students who do not meet Proficiency Level 2 will be required to complete remediation per course faculty.
SUMMER REGISTRATION POLICY FOR TRADITIONAL BSN CLINICAL NURSING COURSES

PURPOSE:

To facilitate equitable registration of students for summer clinical courses.

POLICY:

In order to provide equitable summer clinical nursing course registration for students and a sound educational experience, the following guidelines will be used.

PROCEDURE:

1. Students must have a cumulative GPA of 3.0 or higher at the end of Fall semester to register for summer clinical courses.

2. Pre-requisite courses must be completed prior to entering summer clinical courses.

3. Students with a 3.0 and above cumulative GPA will be prioritized for summer clinical courses based on the following criteria. *
   - Cumulative GPA rounded to the one hundredth place
   - Number of hours left to complete the nursing program of studies
   - Failure of more than one general education course
   - Failure of any BSN nursing courses

*In the event that selection criteria are equal among students, and the number of eligible students exceeds class slots, a randomized process will be used to determine which students are selected.

4. The student and advisor will meet and complete the Checklist for Summer BSN Clinical Courses and submit by the Department of Nursing published deadline.

Effective 1/00
Revised 2/00, 12/05, 12/07, 6/09
Reviewed 4/01, 1/03, 8/04, 1/05, 8/06, 8/07, 8/08, 8/10, 7/11, 7/12, 7/13
TRANSPORTATION OF CLIENTS POLICY

PURPOSE:

To clarify the student nurse’s role and responsibility in transportation of clients.

POLICY:

Nursing students will NOT be permitted to transport clients.

PROCEDURE:

1. Nursing students are encouraged to assist clients in arranging transportation for visits to physicians, hospitals, clinics, and referral agencies.
2. Nursing students will NOT provide such transportation.
3. Nursing students may meet clients at such visits or accompany them on public transportation.

Reviewed 3/94, 2/95, 8/96, 8/99, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 12/08, 7/09, 8/10, 7/11, 7/12, 7/13
# UNSATISFACTORY/UNSAFE CLINICAL PRACTICE POLICY

The student will demonstrate professionalism and safe practice at all times in the clinical setting and during scheduled validations in the Nursing Skills Lab (NSL). Any behaviors inconsistent with this expectation will be documented and remain a part of the student's clinical performance record throughout the nursing program. Unacceptable behaviors may be classified as unsatisfactory/unsafe or critical unsatisfactory/unsafe. Unsatisfactory/Unsafe behaviors will have a point value attached to them. Points are not confined to one course but are considered cumulative in evaluating the student's overall clinical performance. **An accumulation of 4 points will result in a full review of the student's clinical performance record by the Clinical Review Panel.**

## UNSATISFACTORY/UNSAFE PRACTICES

The following behaviors are considered **unsatisfactory/unsafe**. Each incident will be assigned 1 point. Course expectations and student level in the nursing program are factors in determining unsatisfactory/unsafe behaviors.

<table>
<thead>
<tr>
<th>Unsafe/Unsatisfactory</th>
<th>Each incident will be assigned 1 point.</th>
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<tbody>
<tr>
<td><strong>Paperwork</strong></td>
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<tr>
<td>Failure to meet the client and gather assessment data prior to the clinical experience.</td>
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<tr>
<td>Failure to complete clinical preparation assignments, as determined per course.</td>
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<tr>
<td>Failure to complete clinical paperwork on time as designated by clinical faculty.</td>
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<tr>
<td><strong>Absence/Tardy</strong></td>
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<tr>
<td>Failure to call faculty and/or the unit prior to assigned time of arrival for illness or tardiness.</td>
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<tr>
<td>Repeated tardiness.</td>
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<tr>
<td>Unexcused absence (no call, no show or leaving assigned area without proper communication with instructor/staff).</td>
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<tr>
<td><strong>Patient Care Issues</strong></td>
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<tr>
<td>Inadequate knowledge of treatments, medications, or plan of care.</td>
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<tr>
<td>Medication error.</td>
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<tr>
<td>Treatment error.</td>
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<tr>
<td>Error occurring as result of lack of consultation by faculty/staff.</td>
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<tr>
<td><strong>Unprofessional Behavior</strong></td>
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<tr>
<td>Communication with staff, faculty, fellow students, or clients that is disrespectful or otherwise unprofessional.</td>
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<tr>
<td>Inappropriate dress.</td>
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<tr>
<td>Any behavior deemed unsatisfactory by the clinical faculty or course faculty.</td>
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</tbody>
</table>

Clinical faculty will complete the Occurrence Report and Occurrence Report Comments form on the day of the incident. The clinical faculty will also notify the Dean of Nursing of point accumulation that day. The student will separately complete an Occurrence Report Comments form to be turned in to the Dean of Nursing within 3 business days of the incident/occurrence. The student may document “no comment” on the form if the occurrence is not contested.

The student, clinical faculty and course faculty will meet within 3 business days to review the Occurrence report and complete a Clinical Performance Plan. The course/clinical faculty will determine if an appropriate learning assignment or skills lab referral related to the unsatisfactory/unsafe behavior needs to be completed by the student.

All unsatisfactory/unsafe incidents will be recorded and kept confidential on file with the Dean of Nursing. Should a student accumulate 3 points, a notification letter will be mailed to the student. Accumulation of 4 points will initiate a Clinical Panel Review (see below). Records will be maintained until program completion for each student.

**Note:** Accrued clinical points will remain in effect on return of out-of-sequence students; the cumulative total will be carried throughout progression of program of study.

*Effective 1/1/09  Revised 12/09 Reviewed 7/09, 8/10, 7/11, 7/12, 7/13*
The following behaviors are considered critical unsatisfactory/unsafe and potentially place the client, self, or others in immediate danger. An incident involving any of these behaviors will result in consequences from the specific policy violated or result in immediate full clinical review from the clinical review panel and MAY result in disenrollment from the school of nursing.

<table>
<thead>
<tr>
<th>CRITICAL UNSAFE/UNSATISFACTORY (Place date next to all that apply). This will result in immediate review of the incident. *Contact Course Coordinator and appropriate Nursing Program Director ASAP.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Any life-threatening error or action by the student to client, staff, faculty, or others.</td>
</tr>
<tr>
<td>2. Implementing any action that is in direct violation of the course, school, or Agency HIPPA Confidentiality Policy.</td>
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<tr>
<td>3. Violation of the Personal Conduct Policies: College Code of Conduct and Alcohol and Drug policies.</td>
</tr>
</tbody>
</table>

**CLINICAL REVIEW PANEL**

If initiated, the Clinical Review Panel will meet within 5 business days. The Panel consists of the Nursing Program Director, President of MSNA, President of Student Government, and one other course faculty designated by the Dean of Nursing who is not assigned to that clinical course. If a conflict of interest occurs, the Dean of Nursing will assign a parallel alternate to the panel. The student will not be able to participate in further clinical activities until the Panel has made a recommendation and the Dean of Nursing has made a final decision.

The panel will make one of the following recommendations:

   a. This recommendation allows the student to accumulate 2 more points with continued enrollment in the nursing program.
   b. Should the student accumulate 1 of the two allowed points, a notification letter will be mailed to the student.
   c. Should a second Clinical Review Panel be initiated, either a course failure or disenrollment from either the nursing program or the college will be the recommendation.

2. Assign course failure(s).
   a. This recommendation allows the student to accumulate 2 more points with continued enrollment in the nursing program.
   b. Should the student accumulate 1 of the two allowed points, a notification letter will be mailed to the student.
   c. Should a second Clinical Review Panel be initiated, disenrollment from either the nursing program or the college will be the recommendation.
   d. Should another Occurrence Report be filed, the student will be dis-enrolled from the nursing program.

3. Disenrollment of student from the program and possible dismissal of student from the college.

Course faculty will make the final decision regarding remediation for student progression.

*Effective 1/1/09  Revised 12/09, 7/12  Reviewed 7/09, 8/10, 7/11, 7/13*
VERBAL OR TELEPHONE ORDERS POLICY

PURPOSE:

To clarify the BSN student nurses' role and responsibility related to physicians’ verbal/telephone orders.

POLICY:

Unlicensed nursing students will not be permitted to take physicians’ verbal or telephone orders.

PROCEDURE:

1. Licensed RN or faculty member may take physicians’ verbal or telephone orders according to agency policy.

2. Unlicensed nursing students will not take physicians’ verbal or telephone orders, but are encouraged to participate according to course outcomes.

Effective 8/02
Reviewed 3/94, 2/95, 8/96, 5/00, 4/01, 1/03, 8/04, 1/05, 12/05, 8/06, 8/07, 8/08, 7/09, 8/10, 7/1, 7/12, 7/13
Revised 8/99, 12/08
GLOSSARY OF TERMS

ACTIVISM – Purposeful professional advocacy with energy and decision.

ADVOCACY – Through a caring process, empowering self, and/or clients/peers whose needs are not being met.

AGGREGATE/SELECT GROUPS – A group of people that reflect a specific characteristic or need.

ALTRUISM – Expression of concern for self/others on social issues and trends which impact health care delivery.

AUTONOMY – Acceptance of responsibility and consequences of actions.

BELIEF – Attitudes and expectations held by an individual.

CARITAS PROCESSES – “An extension of Carative Factors”; those interventions utilized in the delivery of health care that result in the satisfaction of certain human needs” (Watson, 2008, p.39.).

CARING – “Consists of Carative Factors/Caritas Processes that facilitate healing, honor wholeness, and contribute to the evolution of humanity” (Watson, 2008, p. 17).

CARING RESPONSE – Acceptance of a person as he or she is not but as he or she may become/ is becoming (Watson, 2008, p. 17).

CHANGE – A deliberate process that results in a positive alternate pattern of function for the client and self.

CHANGE AGENT – Health care professional who promotes change in the client.

CLINICAL – An experience/site that enables students to learn to provide nursing care with clients wherever they may be.

CLIENT – The human recipient of care: individual, family, group or community.

CLIENT ADVOCATE – Health care professional who promotes the interest of the clients’ well-being.

COLLABORATION – Working together to achieve a positive outcome.

COMMUNICATION – An interactive process with clients, colleagues, and other health professionals utilizing various techniques to address issues of health promotion and restoration, illness/disease prevention, and care for the sick and dying.

– Therapeutic – with clients
– Professional – with health care partners
– Dialogue – shared information through the processes of self-exploration and interpersonal dynamics

COMMUNITY – A group of people who share some type of bond, engage in interaction with each other, and function collectively in regard to common concerns, needs, and problems in an increasingly interdependent world.

COMMUNITY BASED EDUCATION - Responds to the needs identified by the community and brings together participants from the college, community members, and health care partners. It builds on ongoing and true partnerships between education and the community and is a learning process that enables students to learn to provide nursing care with people wherever they may be.

COMMUNITY OF INTEREST – The groups and individuals who have an interest in the mission, goals, and expected outcomes of the nursing unit and its effectiveness in achieving them. The community of interest comprised of the stakeholders of the program and may include both internal (e.g. current students, institutional administration) and external constituencies (e.g. prospective students, regulatory bodies, practicing nurses, clients, employers, the community/public, etc.). The community of interest might also encompass individuals and groups of diverse backgrounds, races, ethnicities, genders, values, and perspectives who are served and affected by the program.

COMMUNITY PARTNERS - Members of a community who engage in dialogue and/or other activities for the purpose of improving or maintaining the health and well-being of their community.

CORE VALUES – The values defined by the College: caring, excellence, holism, learning, respect.

CRITICAL THINKING – is fostered in an open environment where individuals are encouraged to be reflective, evaluative, pose questions, express intuitive thought, explore alternatives, and develop creative solutions. It is a reasoning process from which assumptions are formulated, inferences are drawn, options are analyzed, and conclusions are derived. This means that the Critical Thinker is engaged in:

– the art of being habitually inquisitive
– the art of removing bias, prejudice, and one-sidedness of thought
– the art of thinking clearer, more accurate and more defensible (Paul, 1995)
CULTURAL COMPETENCE – Characterized by a set of attitudes, practices, and/or policies that respects, rather than merely shows receptivity to different cultures and people.

CULTURAL SENSITIVITY - Precedes cultural competency. The act of demonstrating awareness of the multitude of human differences, including age, ethnicity, socio-economic characteristics, sexual orientation and other considerations.

DISEASE PREVENTION – Interventions during the stage of susceptibility before pathological changes have begun.

DIVERSITY – Understanding that each individual is unique, and the recognition of individual differences such as, race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, or religious beliefs. Understanding each other and moving beyond simple tolerance to embracing and celebrating the richness of differences unique within each individual.

EMOTIONAL INTELLIGENCE – Emotionally-based competencies that can be learned and improved over time: competencies include knowing and managing one’s emotions, motivating oneself, recognizing emotions in others, and handling relationships (Salovey and Mayer, 1990).

ENVIRONMENT – All external factors which affect the human’s well being. Environment includes physical, social and existential dimensions as well as various health-related settings.

EVIDENCE BASED PRACTICE – A problem-solving approach to clinical care that incorporates the conscientious use of current best practice from well-designed studies, a clinician’s expertise, patient values and preferences and healthcare resources.

FAMILY – A group of individuals interacting together to form a unit in society.

GLOBAL HEALTH CARE ENVIRONMENT – All external factors that have the potential to impact health worldwide.

GROUP - Two or more individuals who interact in such a manner that the attitude, behavior or performance of one or more individuals is influenced by that of other members.

HEALTH – A dynamic state of mental, physical, social, and spiritual well-being which maximizes the individual’s ability to function in his or her environment.

HEALTH CARE PARTNERS — Members of health care and related professions who are engaged in dialogue and/or other activities directed toward the well-being of clients, families, groups or communities.

HEALTH CARE SYSTEM POLICY – Public policy impacting care delivery and nursing practice including health care delivery systems, organizations, and financing.

HEALTH MAINTENANCE – Activities or programs directed toward stabilization of a dynamic state of well-being.

HEALTH PROMOTION – Activities or programs directed towards enhancement of a dynamic state of well-being.

HOLISTIC – A philosophical concept in which the whole is inextricably related and linked to each part.

HUMAN – Holistic integrated being with basic rights and responsibilities, individual needs, and a unique internal environment.

HUMAN DIGNITY – Inherent worth and uniqueness of an individual.

HUMANISTIC – A sensitivity to self and others that translates into thought or actions, with a concern for maintaining or supporting the interests and ideals of each individual.

ILLNESS – The alteration in the dynamic state of well-being that leads to disharmony within the individual and between the human self and the environment.

INDIVIDUAL – A distinct entity consisting of an indivisible whole.

INFORMATICS – The integration of computer science and information science into the acquisition and processing of data, information and knowledge within the science and practice of nursing.

INTEGRITY – Behaviors which are congruent with professional values/codes.

INTELLECTUAL SKILLS – Utilization of cognitive abilities.

INTERNAL ENVIRONMENT – All factors within a human which affect well-being.

INTERPERSONAL COMMUNICATION – The ability to process thoughts, feelings, needs and wants with others.

INTERPERSONAL SKILLS – Behaviors that promote positive relationships between persons.

LEADERSHIP – A dynamic process incorporating styles and techniques utilized to motivate and direct the activities of others. This includes the ability to communicate effectively to facilitate change and resolve conflict.

LEARNING – A continuous process though which individuals acquire knowledge which results in a change in behavior, attitude, and/or way of thinking.

LEARNING CENTERED THEORY: Teaching with the following characteristics: achieving clarity about learning outcomes, coordinating teaching and assessment to promote student learning, aligning structures and resources to serve student learning, and working continuously to improve the environment for learning. (Alverno College Institute. 2002). Student Learning: A central Focus for Institutions of Higher Education. Milwaukee, Wisconsin: Alverno College
LEVELS OF PREVENTION

PRIMARY – Interventions during the stage of susceptibility before pathological changes have begun. Primary preventive efforts include both health promotion and specific protection.
SECONDARY – Interventions which focus on presymptomatic disease or clinical disease. Secondary preventive efforts include early diagnosis, prompt treatment and disability limitation.
TERTIARY – Interventions which focus on minimizing the residual disability and help the client learn to live productively with limitations. Tertiary preventive efforts are aimed at returning the client to the highest level of functioning possible and includes the utilization of community resources.

LIFE SPAN – The entire course of events from conception to death.

MUTUALITY – Reciprocal relationships directed toward the achievement of outcomes based on shared concerns and contributions.

NURSE GENERALIST – A professional who utilizes critical thinking, nursing theory, research, nursing process, carative factors/caritas processes and clinical skills while assuming responsibility and accountability for providing nursing care to clients in a variety of settings. This professional is able to demonstrate leadership and management skills in organization, change, advocacy, coordination, collaboration and communication with other health disciplines in order to provide comprehensive care.

NURSING – A caring, creative, dynamic, and interactive process which utilizes scientific and humanistic knowledge to assist the client in attainment of a dynamic state of well-being with a focus on human responses to actual or potential health problems.

NURSING PROCESS – A systematic approach of assessment, diagnosis, planning, implementation, and evaluation for promoting, maintaining or restoring a dynamic state of well-being. It is a form of problem-solving, decision making and critical thinking which has been adapted to the needs of nursing and directed toward meeting the needs of clients.

PERSONAL DEVELOPMENT – The demonstration of skills that enable the individual to pursue lifelong self development, to function optimally in today’s complex society, and to serve as a positive influence in the community.

PRINCIPLES – Accepted knowledge and rules of action or conduct.
- Humanistic – derived from the study of human behavior/interaction
- Scientific – derived from the study of the physical and/or natural world
- Technologic – derived from applied sciences.

PRIORITIZATION – Identifying a sequence of actions or ideas in order of importance.

PROFESSIONAL ACTIVISM – Functions that promote the goals of the profession and the well-being of society.

PROFESSIONAL NURSE – An individual who has graduated from an approved nursing program and has achieved RN licensure status.

PROFESSIONAL ROLE DEVELOPMENT – Acquiring the characteristics defined as professionalism.

PROFESSIONALISM – Conduct and/or qualities that characterize a professional. Characteristics of the nursing profession are: general education, scientific body of knowledge, acceptance of a code of ethics, legal and personal accountability and responsibility, leadership ability, autonomy and dedication to excellence.

PSYCHOMOTOR SKILLS – Behaviors that integrate physical activity and mental processes.

REHABILITATION – Interventions that focus on helping the client to live productively with limitations by facilitating maximum functioning and independence.

RESTORATION - Return of individuals to their previous state of health.

RISK REDUCTION - Preventive efforts that decrease the likelihood of health disruption.

SERVICE-LEARNING – A pedagogy that incorporates community service into academic coursework. It allows students to provide service that enhances their understanding through a reflective process while meeting course outcomes and community-identified needs.

SHARED LEARNING PARTNERSHIPS – A collaborative process between participants from the college, community members, and health care partners for the purpose of enabling students to learn to provide nursing care to people wherever they may be.

SHARED PARTNERSHIPS – A collaborative process between participants from the college, community members, and health care partners for the purpose of improving or maintaining the health and well-being of a community.

SOCIAL JUSTICE – A perception of fairness within the boundaries of a society’s value system.

STANDARD OF PRACTICE – Standards of care and standards of professional performance as outlined in the American Nurses’ Association Standards of Clinical Practice and AACN Essentials of Baccalaureate Education.

TEACHING – An interactive process that uses a system of actions to promote the acquisition, application, integration and synthesis of knowledge.
THERAPEUTIC NURSING INTERVENTION – Any direct or indirect activity arising out of an independent or dependent nursing function to promote and/or restore health, prevent illness, and care for the sick and dying, using humanistic, scientific, and technological principles.

VALUE – A belief which an individual holds about the worth of given ideas or behaviors.

VULNERABLE POPULATIONS – Groups at risk for unmet needs.

WELLNESS – A state of maximized personal potential.

WELLNESS-ILLNESS CONTINUUM – A model that illustrates the progression of health from a neutral point toward optimum holistic health, or from the neutral point toward a progressively worsening state of health.

WELL-BEING – Perception of one’s own holistic health.


### PRE-REQUISITE/CO-REQUISITE GRID FOR NURSING COURSES WITH CORE CURRICULUM REQUIREMENTS

<table>
<thead>
<tr>
<th>Nursing Course</th>
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<th>Co-Requisite</th>
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<tbody>
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<td>NRS 100/100C (Intro CB NS)</td>
<td>COM 101 English</td>
<td>HUM 150 World of Ideas – Critical Reasoning</td>
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<td>SCI 225 A &amp; P I</td>
<td>COM 2 ___ Language/Culture</td>
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<td>SCI 103 Chemistry</td>
<td>SCI 226 A &amp; P II</td>
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<td>Satisfactory Math</td>
<td>SCI 280 Microbiology</td>
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<td>Competency or course</td>
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<tr>
<td>NRS 220/220C (CB NS with Adults)</td>
<td>All year 1 courses (except HUM 2___ World of Ideas)</td>
<td>SCI 315 Pathophysiology</td>
<td>NRS 202/202L (Hlth Assess Lifespan)</td>
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<td>SSC 215 Life span Psychology</td>
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<td>NRS 202/202L (Hlth Assess Lifespan)</td>
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<td>NRS 220/ 220C (CB NS with Adults)</td>
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<td>NRS 240/240C (CB NS with Families)</td>
<td>All year 1 courses</td>
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<td>NRS 245 (Pub Health I)</td>
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<td>NRS 220/220C</td>
<td>SCI 240 Nutrition</td>
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<td>SCI 315 Pathophysiology</td>
<td>SSC 235 Sociology of Culture</td>
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<td>HUM 2 ___ World of Ideas (completion of 1 out of 3 World of Ideas courses)</td>
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<td>NRS 245 (Pub Health I)</td>
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<td>NRS 240/240C (CB NS with Families)</td>
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<tr>
<td>Non Clinical Nursing Electives</td>
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<td>Refer to Pre-requisite requirements for Non Clinical Nursing electives in Appendix C</td>
<td></td>
</tr>
<tr>
<td>NRS 340/340C (CB NS Lifespan)</td>
<td>All year 1 &amp; 2 courses</td>
<td>SSC 360 Statistics</td>
<td>*COM 320 can be taken with NRS 340</td>
</tr>
</tbody>
</table>
## Appendix A-2

### Students Matriculated at NMC Spring 2009 – Spring 2011

<table>
<thead>
<tr>
<th>Nursing Course</th>
<th>Pre-Requisite</th>
<th>Pre-Requisite/Co-Requisite</th>
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<tbody>
<tr>
<td>NRS 350/350C (Advanced Concepts)</td>
<td>All year 1 &amp; 2 courses unless specified</td>
<td>*COM 320 Health Care Collaboration (May be taken after the completion of NRS 240 with either NRS340 or NRS350. COM 320 is not a required Co-Requisite with NRS 350 but is a pre-requisite to NRS 445)</td>
<td>NRS 345 (Pub Health II)</td>
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<td>NRS 340/340C (CB NS Lifespan)</td>
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<td>SSC 370 Research (can be taken with NRS 220, 240, 340 or 350)</td>
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<td>SSC 360 Statistics</td>
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<td>HUM 210 Ethics (can be taken with NRS 220, 240, 340 or 350)</td>
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<td>NRS 345 (Pub Health II)</td>
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<td>NRS 350/350C (Advanced Concepts)</td>
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<tr>
<td>NRS 450/450C (CB : Complex)</td>
<td>All year 1, 2, &amp; 3 courses</td>
<td>HUM 2___ World of Ideas (completion of 2 out of 3 World of Ideas courses)</td>
<td>NRS 445 (NS Global Society)</td>
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<td>COM 320 (Healthcare Coll. &amp; Mgmt)</td>
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<td>Non-Clinical Nursing Elective NRS___</td>
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<td>NRS 445 (NS Global Society)</td>
<td>All year 1, 2, &amp; 3 courses</td>
<td>NRS 450/450C (CB Complex)</td>
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<td></td>
<td>*COM 320 (Healthcare Coll. &amp; Mgmt)</td>
<td>NRS 445 (NS Global Soc)</td>
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<tr>
<td>NRS 462/462C (CB NS Aging)*</td>
<td>All year 1, 2, &amp; 3 courses</td>
<td>SSC 465 (Capstone: The Educated Citizen)</td>
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<td>*Effective Fall 2012</td>
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<td>NRS 445 (NS Global Soc)</td>
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<td>NRS 450/450C (CB NS Lifespan)</td>
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<td>HUM 2___ World of Ideas (completion of all 3 World of Ideas courses)</td>
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<tr>
<td>NRS 470(Sr. Synthesis)</td>
<td>All year 1, 2, &amp; 3 courses</td>
<td>NRS 470P (Preceptorship)</td>
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<td>NRS 462/462C</td>
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<td>SSC 465 (Capstone: Educated Citizen)</td>
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<tr>
<td>NRS 470P (Preceptorship)</td>
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<td>NRS 470 (Senior Synthesis)</td>
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Revised 07/06, 8/08, 12/08, 6/09, 8/10, 7/12

Reviewed 8/07, 7/11, 7/13
### Appendix B-1
Nebraska Methodist College
Department of Nursing
Students Matriculated Fall 2011

**PRE-REQUISITE/CO-REQUISITE GRID FOR NURSING COURSES WITH CORE CURRICULUM REQUIREMENTS**

<table>
<thead>
<tr>
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<tr>
<td>NRS 220/220C (CB NS with Adults)</td>
<td>All year 1 courses (except HUM 2 World of Ideas)</td>
<td>SCI 315 Pathophysiology</td>
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<td></td>
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<td>SCI 230 Pharmacology I * Fall 2012</td>
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<td>NRS 202/202L (Health Assess Lifespan)</td>
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<td>NRS 202/202L (Hlth Assess Lifespan)</td>
<td>NRS 100 (Intro CB NS)</td>
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<tr>
<td>NRS 240/240C (CB NS with Families)</td>
<td>All year 1 courses</td>
<td>SCI 235 Pharmacology II* Fall 2012</td>
<td>NRS 245 (Pub Health I)</td>
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<td>NRS 220/220C</td>
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<td>SSC 215 Life span Psychology *Fall 2012</td>
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<td>NRS 340/340C (CB NS Lifespan)</td>
<td>All year 1 &amp; 2 courses</td>
<td>SSC 360 Statistics</td>
<td>*COM 320 can be taken with NRS 340</td>
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# Appendix B-2

## Students Matriculated at NMC Fall 2011

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<td>SSC 370 Research (can be taken with NRS 220,240,340 or 350 after completion of SSC 360)</td>
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<td>SSC 465 (Capstone: Ed Citizen)</td>
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*Revised 8/10, 712, 1/13  * Fall 2012 Reviewed 7/13
As of the Spring 2011 Semester students will be allowed to register for Non Clinical Nursing Electives only if they meet the pre-requisite requirements indicated below.

The following Non Clinical Nursing electives require NRS 220 as a pre-requisite.
- NRS 312 Infectious diseases: Don’t bug me
- NRS 358 Parish Nursing: Basic Parish nurse preparation
- NRS 363 Perspectives on grief and suffering
- NRS 364 Survey of complementary and alternative therapies in nursing
- NRS 365 History of Nursing seminar
- NRS 399/381 Immersion Experience Prerequisite: Laredo Trip

The following Non Clinical Nursing electives require NRS 240 as a pre-requisite.
- NRS 325 Current trends and controversies in transplantation
- NRS 361 Pain Management
- NRS 362 Empowering the Professional Nurse
- NRS 366 Women’s Health Issues
- NRS 367 Violence in society
- NRS 368 Genetics for Nursing Practice
- NRS 369 Leadership Development - limited to students in a Student Leadership Position
- NRS 371 Bio-Psychosocial Perspectives of Intimate Partner Violence
- NRS 399/381 Immersion Experience Prerequisite: Rosebud trip

Effective 1/1/2011
Revised 7/12, 7/13
Reviewed 7/11, 7/12, 7/13
Appendix D  
Checklist for Summer  
BSN Clinical Courses

To be completed by the student and their nursing advisor.

1. Provide GPA (rounded to the nearest hundredth) as of the Fall semester before entering the summer clinical course(s) (must be => 3.00). **Attach a current copy of the transcript.**

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<th>GPA</th>
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</table>

2. Will all prerequisite courses be completed before summer BSN nursing course(s) begins. List any remaining any pre/co-requisite coursework that will be taken with the summer clinical course below.

   | Pre/Co-Requisite Coursework to be taken with the nursing clinical course |
   |---|---|
   |   |   |

   |   |   |   |   |   |   |   |
   |   |   |   |   |   |   |   |

3. Has student failed more than one general education course?

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   |   |   |   |   |   |   |   |

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<thead>
<tr>
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<th>Grade</th>
<th>Course Retake and Date</th>
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4. Has student failed any nursing courses?

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<th>Course Retake and Date</th>
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5. List courses remaining to complete the BSN program, **including the summer semester.**

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<thead>
<tr>
<th>Course Number</th>
<th>Credit Hours</th>
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<th>Credit Hours</th>
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</table>

   | Total remaining credits to complete the NS Program |
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<tr>
<th>Student Signature</th>
<th>Date</th>
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<tr>
<th>Faculty Advisor Signature</th>
<th>Date</th>
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Reviewed 7/02, 1/03, 8/04, 1/05, 8/07, 8/08, 08/10, 7/11, 7/12, 7/13  
Revised 12/05, 12/0, 6/09
The Nebraska Methodist College BSN Admissions and Advancement Team wishes to encourage students to bring forward their suggestions or concerns for discussion. The Department of Nursing is committed to students and wants to hear from you.

Please use this tool to submit your suggestions and/or concerns. Depending on the nature of the suggestion and/or concern, your submission may be forwarded to another, more appropriate team/committee or individual for consideration. You may be invited to engage in an open dialogue about your suggestion or concern. Your suggestion and/or concern will be treated with respect. Each communication tool received will be reviewed with regard to the most appropriate action to take in order to meet the interests of all involved.

The form is to be submitted to Dr. Karen Johnson, Director of the BSN Nursing Program, or Dr. Susie Ward, Director of Special Programs and it will be reviewed or forwarded to the appropriate party. (May be sent via interoffice mail or email as an attachment)

Date Submitted ___________________

Student(s) Name(s):___________________________________________________
_____________________________________________________________________

Contact information:  __________________________________________________
_____________________________________________________________________

Suggestion and/or concern: Please provide by completing the back side of the form -->

Lower portion to be completed by the Department of Nursing

Team/Committee or Individual responsible for responding to the suggestion and/or concern:____________________________________________________________

Date of Action: ________________________

Response to Student(s): Provide details of discussion and or actions taken and responses to student(s).
______________________________________________________________________________________________
______________________________________________________________________________________________

Effective 8/07
Revised 7/09, 8/10, 7/11, 7/12
Reviewed 8/08, 8/09, , 7/13
Appendix E-2
Communication Tool
Identify The Problem or Suggestion (BE SPECIFIC)

---

**THEN, PUT YOURSELF IN THEIR SHOES....**
WHAT ARE SOME OPTIONS TO SOLVING THE PROBLEM OR IMPLEMENTING YOUR SUGGESTION?

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<thead>
<tr>
<th>WHAT ARE YOUR INTERESTS??</th>
<th>WHAT ARE THEIR INTERESTS??</th>
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*Effective/07*
*Revised 7/09,*
*Reviewed 8/07, 8/08, 8/10, 7/11, 7/12, 7/13*
APPENDIX F-1
NEBRASKA METHODIST COLLEGE
TRANSFER GUIDELINES (BSN TRADITIONAL and ACE Programs)

PURPOSE:
The purpose of these guidelines is to assist faculty and students in determining eligibility for transfer between the Traditional BSN Program and ACE program and identifying the process for transfer.

GUIDELINES:

Transferring from Traditional BSN Program into ACE Program

Students in the Traditional BSN program that have completed an Associate or Bachelor degree with a GPA of 2.75, and have completed all general education pre-requisite coursework prior to the semester in which they desire to transfer, will be considered. Students will not be eligible for transfer into the ACE program if they have failed any NMC course.

Students who desire a transfer from the Traditional BSN program into the ACE program will:
1. Communicate to BSN Nursing Program Director desire to transfer
2. Complete the Application for Transfer of Program (see below)
3. Complete an interview with the Director of Special Programs

Following completion of the above steps, Nursing Department Administration will:
1. Determine student eligibility
2. Determine availability of space in the ACE program
3. Determine program cost (Student Business Accounts)

Transferring from ACE Program to Traditional BSN Program

Students in the ACE program that desire a transfer into the Traditional BSN program will be considered based on their academic record and successful completion of courses. If a student has failed a course, the student must repeat the course as outlined in the Grading Nursing Courses Policy in the Department of Nursing Student Handbook. Each student will be reviewed on an individual basis.

Students who desire a transfer from the ACE program into the Traditional BSN program will:
1. Communicate to the Director of Special Programs desire to transfer
2. Complete the Application for Transfer of Program (see below)
3. Complete an interview with BSN Nursing Program Director

Following completion of the above steps, Nursing Department Administration will:
1. Determine the student’s academic status
2. Determine the student’s eligibility
3. Determine availability of space in the Traditional Program
4. Determine program cost (Student Business Accounts)

Any ACE student who fails NS350A or lower and transitions to the traditional program, must take HUM 152 Portfolio Introduction for 1 credit. Any ACE student who fails NRS450A and/or NRS 446A higher must take HUM 155 Portfolio Transition course for 0 credits.

Effective 1/09 Revised 08/10
Reviewed 7/11, 7/12, 7/13
Return completed application to: Admissions Office – NMC Riley-Leinart 1005

Please carefully print the information requested.

NAME:_______________________________________________________________________________________

____________________________________ Last                        first                        m.i.                        previous

STREET:______________________________________________________________________________________

CITY:_______________________________   STATE:___________________________     ZIP:________________

HOME PHONE: ____________________________

ME PHONE: ______________________________

SOCIAL SECURITY NUMBER:___________________________________

NMC ACADEMIC INFORMATION

FIRST TERM ENROLLED _______________________   CREDIT HOURS COMPLETED ______________

CURRENT GPA _________________________________

REQUEST FOR TRANSFER: (please check one)

_____ BSN to ACE

1. Student communicates to BSN Program Director a desire to transfer to ACE program.
2. Student completes Transfer of Program form.
3. Student schedules an interview with Director of Special Programs

_____ ACE to BSN

1. Student communicates to Director of Special Programs a desire to transfer to BSN program.
2. Student completes Transfer of Program form.
3. Student schedules an interview with BSN Program Director

***************************************************************************************
WRITTEN STATEMENT
Please provide an explanation to substantiate your request to transfer to a different program in the Nursing Dept.

______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
___________________________________________________________
STUDENT SIGNATURE: ______________________________ DATE: __________

Effective 1/09
Revised 08/10
Reviewed 7/11, 7/12

NURSING DEPARTMENT USE ONLY:

DATE: __________________

ACE to BSN
BSN Program Guidelines met: ____________
BSN Director Signature: __________________________

BSN to ACE
ACE Program Guidelines met: ____________
Director of Special Programs signature: __________________________

☐ RECOMMEND CHANGE OF PROGRAM

ADVISOR: _________________________________

SEMESTER EFFECTIVE: ___

Effective 1/09
Revised 8/10
Reviewed 7/11, 7/12, 7/13
INCIDENT REPORT
NMC Student Health Office
720 N. 87th Street, Omaha, NE 68114
Phone 354-7210     FAX 354-7265

TO BE COMPLETED BY STUDENT AND INSTRUCTOR/PRECEPTOR/STUDENT HEALTH NURSE

Name ___________________________ Student ID# ___________________________ Age ________ Date of Birth ________

Home Address ___________________________ Home and Cell Phone ___________________________

Program of study ___________________________ Witness to incident ___________________________

Circle One:

Male __ Female __________

Date of Incident __________ Time of Incident __________ Location of Incident __________

□ Injury/Incident

Describe how the accident or injury occurred in detail (job task performing, what was involved that led to incident and part of the body affected). Please be specific.

What action could have been taken to prevent this incident or its recurrence:

Program Director Name ___________________________ Notified? YES NO Date Notified __________

Instructor/Preceptor/Student Health Nurse Signature ___________________________

Phone # ___________________________

Student Signature ___________________________

Date __________

Effective 9/23/2010, Reviewed 7/12, 7/13
Appendix H-1
Nebraska Methodist College
UNSATISFACTORY/UNSAFE PRACTICES OCCURRENCE REPORT
COMPLETE PAGES 4-6 AND SUBMIT TO THE DEAN OF NURSING
(COMPLETE A CLINICAL PERFORMANCE PLAN)

<table>
<thead>
<tr>
<th>STUDENT</th>
<th>PROGRAM/COURSE</th>
<th>INSTRUCTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE OF INCIDENT</td>
<td></td>
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</table>

GENERAL EVENT INFORMATION:

<table>
<thead>
<tr>
<th>CLINICAL SITE:</th>
<th>CLIENT DESCRIPTION: (CIRCLE ONE)</th>
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<tbody>
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<td></td>
<td>MALE  FEMALE  AGE</td>
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</table>

LOCATION OF INCIDENT:

<table>
<thead>
<tr>
<th>INPATIENT</th>
<th>OUTPATIENT</th>
<th>HOME CARE</th>
<th>EXTENDED CARE</th>
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</thead>
</table>

TIME OF INCIDENT:

EVENT DETAILS:

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<tr>
<th>GENERAL INCIDENT TYPE:</th>
<th>INFLUENCING FACTORS:</th>
</tr>
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</table>

DESCRIBE HOW THE INCIDENT OCCURRED IN DETAIL:

DESCRIBE ACTION TAKEN:

IDENTIFY ACTION THAT COULD HAVE BEEN TAKEN TO PREVENT THIS INCIDENT OR ITS RE-OCCURRENCE:

<table>
<thead>
<tr>
<th>INSTRUCTOR SIGNATURE</th>
<th>DATE</th>
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<thead>
<tr>
<th>STUDENT SIGNATURE</th>
<th>DATE</th>
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</table>

THIS FORM TO BE TURNED IN TO THE DEAN OF NURSING.
### Appendix H-2

**Occurrence Report Comments — Students**

<table>
<thead>
<tr>
<th>Student comments related to occurrence:</th>
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<tr>
<th>Assigned S/U Learning Activity:</th>
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<table>
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<tr>
<th>Date for follow-up evaluation conference:</th>
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<table>
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<tr>
<th>Comments:</th>
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### Appendix H-3

**Occurrence Report Comments — Faculty**

<table>
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<tr>
<th>Faculty comments related to occurrence:</th>
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**Assigned S/U Learning Activity:**

**Date for follow-up evaluation conference:**

**Comments:**

---

76
Points for occurrences will be tracked by the Dean of Nursing

<table>
<thead>
<tr>
<th><strong>Unsafe/Unsatisfactory</strong></th>
<th>Each incident will be assigned one point</th>
</tr>
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<tbody>
<tr>
<td><strong>Paperwork</strong></td>
<td>Failure to meet the client and gather assessment data prior to the clinical experience.</td>
</tr>
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<td></td>
<td>Failure to complete clinical preparation assignments, as determined per course.</td>
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<td></td>
<td>Failure to complete clinical paperwork on time as designated by clinical faculty.</td>
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<tr>
<td><strong>Absence/Tardy</strong></td>
<td>Failure to call faculty and/or the unit prior to assigned time of arrival for illness or tardiness.</td>
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<td>Repeated tardiness.</td>
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<td></td>
<td>Unexcused absence (no call, no show or leaving assigned area without proper communication with instructor/staff).</td>
</tr>
<tr>
<td><strong>Patient Care Issues</strong></td>
<td>Inadequate knowledge of treatments, medications, or plan of care.</td>
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<td></td>
<td>Medication error.</td>
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<td></td>
<td>Treatment error.</td>
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<td></td>
<td>Error occurring as result of lack of consultation by faculty/staff.</td>
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<tr>
<td><strong>Unprofessional Behavior</strong></td>
<td>Communication with staff, faculty, fellow students, or clients that is disrespectful or otherwise unprofessional.</td>
</tr>
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<td></td>
<td>Inappropriate dress.</td>
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<td></td>
<td>Any behavior deemed unsatisfactory by the clinical faculty or course faculty.</td>
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</tbody>
</table>

**Critical Unsafe/Unsatisfactory** (Place date next to all that apply). This will result in immediate review of the incident. *Contact Course Coordinator and appropriate Nursing Program Director ASAP.*

- Any life-threatening error or action by the student to client, staff, faculty, or others.
- Implementing any action that is in direct violation of the course, school, or Agency HIPPA Confidentiality Policy.
- Violation of the Personal Conduct Policies: College Code of Conduct and Alcohol and Drug policies.

Notification letter sent on: ________________

**Below To be completed by Clinical Review Panel Only**

Date for Clinical Review Panel: ________________

Comments from Panel: ________________

Signatures: ________________ Date: ________________

Effective 1/1/09; Revised 12/09; Reviewed 7/09, 8/10, 7/11, 7/12, 7/13
The purpose of the Family Educational Rights and Privacy Act of 1974 is to assure all students, including those attending an institution of postsecondary education, access to their educational records and to protect such individuals’ right to privacy by limiting the transferability of their records without their consent.

Nebraska Methodist College (NMC) supports this act and maintains access for the students to review the validity of their NMC educational records.

NMC will not release non-directory information to the public or others who request it unless the College has a Waiver Release Form on file noting the record to be released and to whom. The College recognizes and complies with the exceptions listed in the Act.

“Directory Information” used by Nebraska Methodist College is as follows:
student name, address, telephone number, photographs, date and place of birth, field or program of study, dates of attendance, email address, class rosters, class schedules, advisor, academic awards and degrees, previous schools attended, achievements in campus organizations, graduation date (anticipated and official), academic class (freshman, sophomore, junior, senior), enrollment status (full-time, part-time, undergraduate/graduate).

Waiver Release Form

I, ___________________________, understand the Family Educational Rights and Privacy Act explained above and waive those rights of privacy to disclose information to any clinical site that I am assigned to throughout my time as a student at NMC and upon graduation from the program to the respective state board of nursing.

________________________________________________
Student’s Signature                                                                                   Date of Signature

Please supply the following information to facilitate the time needed to gather this information by the Registrar:

Printed Name:_____________________________________________________

Social Security #:___________________________________________

Birth date 00/00/0000 : _______________________________________

Current Address : ___________________________________________

College Email address: _______________________________________

*Effective 7/11; Revised 7/13; Reviewed 7/12*
Confidentiality Agreement

I understand/agree that as a student at Nebraska Methodist College (NMC), I must maintain the confidentiality of all medical, personal, proprietary, and financial information derived from my participation in NMC clinical and/or community experiences. This information includes, but is not limited to, written information, electronic information, and verbal communication.

I agree to follow all NMC, Methodist Health System (MHS), and all other health care agency policies and procedures with respect to individually identifiable information. I understand that I may access such information on a “need to know” basis only to the extent needed to perform my duties.

I understand MHS and other health care agencies conduct audits of its information systems to verify that information is being accessed by authorized individuals only.

I understand that violation of this confidentiality agreement may result in possible fines and civil or criminal penalties under state or federal law, as well as disciplinary or other correction action, including termination of access and/or suspension/dismissal from NMC.

_________________________________ ___________________________________ ________________
PRINTED NAME                                                                 SIGNATURE
DATE

User Access Code

I understand, as a student at Nebraska Methodist College, I may receive user access code(s). The code(s) are confidential. I will be held accountable for the code(s) and am responsible to ensure the security of the code(s) at all times. I understand that:

- My user access code is the equivalent of my signature.
- I will not disclose the code to anyone except as required by MHS or other health care agency policies.
- I will not attempt to access any information to which I am not authorized and/or to which I do not have a specific, work-related need to know.
- My accessing MHS or other health care agency computer systems via my code is recorded permanently.
- If I have reason to believe the security of my access code has been compromised, I will immediately contact my clinical instructor, and the supervisor of the clinical area. At MHS, the Information Technology Help Desk will be notified so that the code can be deleted and a new code assigned to me. In other health care agencies, I will follow their policies.
- I understand my user identification code will be deleted from the System when I no longer hold a position that requires that code(s).
- I further understand, if I violate any of these provisions, my instructor/department will be notified and that appropriate corrective action, up to and including suspension/dismissal, will be taken.

________________________________ ___________________________________ ________________
PRINTED NAME                                     SIGNATURE                                                DATE

Effective 8/08
Revised 8/09 Reviewed 8/10, 7/11, 7/12, 7/13
Technical Standards for BSN Nursing Students

In preparation for professional nursing roles, nursing students are expected to demonstrate the ability to meet the demands of a professional nursing career. Certain functional abilities are essential for the delivery of safe, effective nursing care. An applicant to the Bachelors of Science in Nursing program must meet the following technical standards and maintain satisfactory demonstration of these standards for progression throughout the program. Students unable to meet these technical standards will not be able to complete the program. Students shall notify faculty of any change in their ability to meet technical standards.

Initial here ________________

The technical standards include but are not necessarily limited to the following:

**General Ability:**

The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses is integrated, analyzed, and synthesized in a consistent and accurate manner. The student is expected to possess the ability to perceive pain, pressure, temperature, position, vibration, and movement in order to effectively evaluate patients. A student must be able to respond promptly to urgent situations.

Initial here ________________

**Observational Ability:**

The student must have the ability to make accurate visual observations and interpret them in the context of clinical/laboratory activities and patient care experiences. The student must be able to document these observations accurately.

Initial here ________________

**Communication Ability:**

The student must communicate effectively verbally and non-verbally to obtain information and explain that information to others. Each student must have the ability to read, write, comprehend and speak the English language to facilitate communication with patients, family members, and other members of the health care team. The student must be able to document and maintain accurate records, present information in a professional manner and provide patient instruction to effectively care for patients and their families.

Initial here ________________

**Motor Ability:**

The student must be able to perform gross and fine motor movements with sufficient coordination needed to provide complete physical assessments and provide safe effective care for patients. The student is expected to have psychomotor skills necessary to perform or assist with procedures, treatments, administration of medications, and emergency interventions including CPR if necessary. The student must have sufficient levels of neuromuscular control and eye-to-hand coordination as well as possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, and physical exertion required for safe patient care. Students must be able to bend, squat, reach, kneel or balance. Clinical settings may require that students have the ability to carry and lift loads from the floor, from 12 inches from the floor, to shoulder height and overhead. The student must be able to occasionally lift 50 pounds, frequently lift 25 pounds, and constantly lift 10 pounds. The student is expected to be able to maintain consciousness and equilibrium and have the physical strength and stamina to perform satisfactorily in clinical settings.

Initial here ________________
Intellectual –Conceptual Ability:
The student must have the ability to develop problem-solving skills essential to professional nursing practice. Problem solving skills include the ability to measure, calculate reason, analyze, and synthesize objective and subjective data, and to make decisions, in a timely manner that reflect thoughtful deliberation and sound clinical judgment. The student must demonstrate application of these skills and possess the ability to incorporate new information from peers, instructors, and the nursing and healthcare literature to formulate sound judgment to establish care plans and priorities in patient care activities.

Behavioral and Social Attributes:
The student is expected to have the emotional stability required to exercise sound judgment, and complete assessment and intervention activities. Compassion, integrity, motivation, and concern for others are personal attributes required of those in the nursing program. The student must fully utilize intellectual capacities that facilitate prompt completion of all responsibilities in the classroom and clinical settings; the development of mature, sensitive, and effective relationships with patients and other members of the health care team. The ability to establish rapport and maintain interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. Each student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; and effectively collaborate in the clinical setting with other members of the healthcare team.

Ability to Manage Stressful Situations:
The student must be able to adapt to and function effectively in relation to stressful situations encountered in both the classroom and clinical settings, including emergency situations. Students will encounter multiple stressors while in the nursing program. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program related.

Background Check/Drug Screening:
Clinical facilities require that Nebraska Methodist College perform drug testing and background checks on all students before they are allowed to participate in clinical experiences. Therefore, students will be required to have a background check performed and submit to drug screening before being allowed into clinical practice.

Nursing Student Handbook Policies:
My signature is a confirmation that I have received and will adhere to the Department of Nursing policies which include the Technical Standards for BSN nursing students. I am aware that the Nursing Student Handbook and the policies that it contains are available on NMC Angel and the NMC Website.
Appendix L
Nebraska Methodist College
Nursing Division
Annual Letter of Attestation

Annual Letter of Attestation

I, ________________________________, attest that there have been no changes to my background investigation record (including, but not limited to, felony, or misdemeanor charges/convictions) since the time of the original background investigation. If such a change occurs, I agree to contact the Program Director immediately.

____________________________________________                         _______________________
Student’s Signature                                                                 Date of Signature

Effective 7/13
Appendix M
Nebraska Methodist College
Nursing Division
Accident, Injury, Medical Emergency Protocol

If a student is involved in an accident or unusual occurrence which may cause actual or potential injury, proper documentation of the incident must be made within 24 hours. The completed Incident Report Form documenting the incident will be filed in the Campus Health Office.

Protocol for on-campus and off-campus occurrences:

- The student reports the incident to the appropriate faculty member, preceptor or designated supervisor, who initiates reporting and treatment.
- The student receives immediate first aid or medical attention at the site as needed, and will receive information related to the nearest emergency services, if necessary.
- The student must report the incident to the Campus Health Center within 24 hours by calling (402) 354-7211. If leaving a message, provide your name and contact information as well as the nature, date, and location of the incident.
- If necessary, the student will seek further treatment at the provider/agency of their choice. Any costs incurred are the responsibility of the student. The exception is a blood/body fluid exposure which requires immediate treatment (refer to Blood/Body Fluid policy).
- Campus Health will notify the student's Program Director and follow-up with the student as necessary.

Do not attempt to move or relocate an injured person, as you may cause additional harm. Wait for appropriate medical assistance.

NMC employees are not permitted to transport a sick or injured student under any circumstance. Employees may assist a student in contacting a friend or family member, or if necessary emergency personnel, to arrange transportation to a healthcare facility or other location.

Complete the incident report found at the link below.


Effective 7/13
Edna A. Fagan Pledging Ceremony

Friday, April 11, 2014 at 4:15pm

St. Andrew’s United Methodist Church
15050 W. Maple Rd.

All nursing students beginning in NRS100 are invited to participate by the Nebraska Methodist College Department of Nursing.

All nursing students beginning in NRS100 who are enrolled in their first nursing course and beyond have made a commitment to the profession of nursing. This choice encompasses serving and caring for others. The Department of Nursing at Nebraska Methodist College would like to recognize this milestone in your professional journey with a ceremony. In preparation for this ceremony, each participating student purchases a pin and selects the individual who will pin them during the ceremony as a symbol of their commitment to nursing. The selected individual is to be a registered nurse or higher level nursing student.

History: A century of nursing has seen profound changes in the nursing profession as well as in the nurse’s cap and uniform. Historically capping has been a traditional ceremony. The nurse’s cap was a distinctive means of identifying with a particular school and a way of distinguishing nurses from other caregivers and professionals. The need to wear a cap originated from a time when all women wore caps indoors for the functional purpose of covering the hair. Today, the cap is seldom visible in the wide variety of settings in which professional nurses’ practice. Professional nurses, male and female, can be identified by their nursing pins which signify their institute of learning. Therefore, in preparation for this ceremony, each participating student purchases a pin and selects the individual who will pin them during the ceremony as a symbol of their commitment to nursing. The selected individual is to be a registered nurse or higher level nursing student. The presence of you and your significant others honors your dedication to the profession of nursing and your future service to the global community.

The cost of the pin and ceremony is $10.00. A link to register for the ceremony will be provided in January, 2014.

Pledging will be followed by a reception with light refreshments. A professional photographer will be available to take pictures on this special day.

If you have any questions or concerns, please do not hesitate to contact: Cheryl Bouckaert at 354-7232 or via email at cheryl.bouckaert@methodistcollege.edu or casey.frost@methodistcollege.edu 354-7117 or Katherine.doty@methodistcollege.edu 354-7033.

*Upper level students who did not participate in the past are invited to participate.  
**Attire for this event is dress clothes and lab coat with college logo patches sewn on.