WEBER STATE UNIVERSITY
Dumke College of Health Professions
School of Nursing

MSN STUDENT HANDBOOK
Academic Year 2014-2015
WEBER STATE UNIVERSITY  
School of Nursing

WELCOME TO WEBER STATE UNIVERSITY  
NURSING PROGRAM

The School of Nursing (SON) faculty, administration, and staff welcome you and wish you a rewarding and successful experience in nursing. The purpose of this handbook is to be a resource to acquaint students with nursing curricular design, SON competencies, and program policies and procedures. It is designed to provide department and program information after students have been admitted to the program. WSU School of Nursing Faculty believe students successfully attain educational goals through an understanding of their responsibility and an adherence to established policies.

Nursing students have the same rights, privileges, and responsibilities as all other university students and are expected to abide by university standards. *Students are responsible for knowing and following the policies and procedures outlined in this Handbook.*

*Policies are subject to change as needed. Students, by serving on committees and working with the student organization, have input for change and modification of existing policies.*

The WSU School of Nursing including the Master’s Degree (MSN) program is fully accredited by the Accreditation Commission for Education in Nursing (ACEN).

Accreditation Commission for Education in Nursing (ACEN)  
3343 Peachtree Road NE, Suite 850  
Atlanta, GA 30326  
www.acenursing.org

*This handbook is subject to change with adequate notification.*
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Part A
School of Nursing Structure & Organization
Section I, School of Nursing Organizational Chart
SECTION II: MISSION STATEMENT
Weber State University
Dumke College of Health Professions
School of Nursing

MISSION STATEMENT
The Weber State University Dumke College of Health Professions (DCHP) School of Nursing’s mission statement supports the mission of Weber State University (WSU) and DCHP. The WSU School of Nursing’s mission is unique to the nursing profession and is designed to prepare nurses at the associate’s, bachelor’s and master’s degree levels while offering an academic setting wherein safe patient-centered care, quality improvement, evidence-based practice, teamwork and collaboration, and informatics are core values. To achieve this mission the School of Nursing (SON) prepares graduates who will competently practice nursing within a complex local, national, and international environment, understand the significance of evolving healthcare technology, and apply both professional and ethical principles with sensitivity to the diverse needs of individuals, groups, and communities.

WSU SCHOOL OF NURSING VISION AND PHILOSOPHY
Our vision is to lead the nation in innovative learning environments which incorporate technology, challenge learners, develop educators, and transform health care worldwide. Our vision statement is future-oriented and supports the mission and philosophy of the WSU SON.

The WSU nursing faculty articulates a philosophy for the School of Nursing that is consistent with that of the University and the Dumke College of Health Professions. The philosophy statements define the faculty’s core values as they relate to professional nursing education and practice. These core values include: Excellence in nursing education and practice; respect for self and the diversity found within others; the creation of an inclusive environment in which students can learn the practice of nursing; organizational and personal accountability; and the promotion of a learning and nursing practice environment that exhibits integrity in both choice and action.

WSU School of Nursing Career Ladder Model
Meeting the complex healthcare needs of a global society requires varying patterns and levels of nursing education and practice. The WSU School of Nursing’s approach to nursing education offers four separate but coordinated programs of study: Associate Degree Nursing, PN to RN (AS/AAS), Bachelor of Science Nursing, and Master of Science Nursing. Each program level prepares the graduate to either practice nursing or provide leadership within increasingly complex roles and broader levels of autonomy. This progression model, or career-ladder nursing education model, affords the nursing student, each with a unique set of life challenges, the opportunity to engage in life-long learning and expand within his or her professional, cultural, personal, and social roles.

The WSU School of Nursing offers multi-levels of undergraduate preparation, as well as graduate preparation in nursing administration and nursing education. To fulfill the program’s primary goals, its curricular framework combines coursework in the liberal arts and sciences with those required within the nursing curriculum.
**Undergraduate Programs.** The primary goals of the WSU School of Nursing’s undergraduate programs are to prepare Associate Degree in Nursing (ADN) and Bachelor of Science in Nursing (BSN) graduates with the essential role competencies and professional attributes required to meet the healthcare needs of a global, multi-cultural, multi-national, and multi-generational society. Therefore, upon completion of the undergraduate programs’ curriculum, the graduate is prepared to fulfill the following professional roles: 1) Provider of patient-centered nursing care, 2) Nurse designer, manager, and coordinator of evidence-based patient care, and 3) Member and leader within the nursing profession.

**Graduate Programs.** The primary goal of the WSU School of Nursing’s Master of Science in Nursing (MSN) program is to prepare graduates with the essential professional attributes associated with the advanced professional roles of the nurse administrator and academic nurse educator. Building upon the knowledge and skills acquired in the students’ undergraduate nursing education, completion of the graduate program curriculum prepares the graduate to fulfill the roles and responsibilities established in the following national guidelines:

SECTION III: OUTCOMES AND GRADUATE COMPETENCIES
Weber State University
Dumke College of Health Professions
School of Nursing

SCHOOL OF NURSING OUTCOMES
Outcomes are developed as performance indicators which give evidence that the WSU School of Nursing is meeting the mission and goals set by administration and faculty. Documentation of outcomes shows the effectiveness of the educational program and serves to guide maintenance and revision of components of the School of Nursing. SON outcomes have been developed using the Accreditation Commission for Education in Nursing (ACEN) [formerly known as the National League of Nursing Accreditation Council (NLNAC)] criteria as guidelines. SON outcomes are consistent with the mission and philosophy of WSU and the DCHP.

At the completion of their program of learning, the following outcomes will be achieved:

Outcome #1  80% of the students will graduate from their programs within 150% of the stated length of the program.

Outcome #2 80% of the students taking the NCLEX exam will score at or above the national mean. The School of Nursing’s 3-year mean for NCLEX exam pass rates will be at or above the national mean for the same 3-year period.

Outcome #3 80% of School of Nursing graduates seeking employment will be involved in role related professional practice within 12 months of graduation.

Outcome #4 80% of School of Nursing graduate respondents will rate their overall satisfaction with their program of learning (ADN, BSN, MSN) at or above 3.0 out of 5.0 on the SON End of Program Evaluation Surveys.

Outcome #5 80% of School of Nursing graduate respondents will rate their overall program of learning satisfaction at or above 3.0 out of 5.0 on the SON Alumni Survey.

Outcome #6 80% of nursing employers will rate their overall satisfaction with WSU School of Nursing graduates at or above 3.0 out of 5.0 on the SON Employer Survey.
SCHOOL OF NURSING COMPETENCIES
The WSU School of Nursing has adopted the following competencies for its undergraduate and graduate programs. These competencies are adopted from the Quality and Safety Education for Nurses Initiative (QSEN).

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

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

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

4. Quality Improvement
   Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems, including participating in healthcare policy.

5. Safety
   Minimize risk of harm to patients and providers through both system effectiveness and individual performance.

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

DIFFERENTIATED PROGRAM COMPETENCIES

<table>
<thead>
<tr>
<th>SCHOOL OF NURSING CORE COMPETENCIES</th>
<th>Associate Degree Nursing (ADN)</th>
<th>Bachelor of Science Nursing (BSN)</th>
<th>Master of Science Nursing (MSN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Centered Care</td>
<td>Patient Centered Care</td>
<td>Patient Centered Care</td>
<td>Patient Centered Care</td>
</tr>
<tr>
<td>Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patients’ preferences, values, and needs.</td>
<td>Use nursing knowledge to include the patient in all care processes and decisions. Design and implement care which is adapted and centered on the unique wholeness of the individual patient and their family.</td>
<td>Integrate nursing expertise to include the patient in all care processes and decisions. Collaborate with patients, families, and communities to design unique and dynamic patient centered care environments.</td>
<td>Create and direct collaborative patient care environments that promote the development of nursing expertise that includes the patient perspective.</td>
</tr>
<tr>
<td>SCHOOL OF NURSING CORE COMPETENCIES</td>
<td>Associate Degree Nursing (ADN)</td>
<td>Bachelor of Science Nursing (BSN)</td>
<td>Master of Science Nursing (MSN)</td>
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</tr>
<tr>
<td><strong>Teamwork &amp; Collaboration</strong></td>
<td>Function effectively within nursing and inter-professional teams, fostering communication, mutual respect, and shared decision-making to achieve quality patient care.</td>
<td>Promote collaborative clinical decision making with nursing and interdisciplinary colleagues through implementation of effective communication and team building skills.</td>
<td>Evaluate the ability to use effective communication and collaboration skills when working with patients, families, and colleagues. Adapt communication, leadership, and teambuilding skills, to promote quality, competent and successful decision-making by nursing and collaborative interdisciplinary teams.</td>
</tr>
<tr>
<td><strong>Evidence-Based Practice (EBP)</strong></td>
<td>Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.</td>
<td>Make judgments in practice substantiated with evidence that integrates nursing science and knowledge to provide competent care to individuals and families.</td>
<td>Evaluate available evidence, expert opinion, and patient preferences to determine best practice. Evaluate the feasibility and appropriate evaluation methods for planned EBP interventions.</td>
</tr>
<tr>
<td><strong>Quality Improvement</strong></td>
<td>Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems, including participating in healthcare policy.</td>
<td>Monitor patient care outcomes to measure the effectiveness of patient care processes. Suggest and implement changes to improve the quality and safety of patient care.</td>
<td>Develop policies and processes based on identification of best practice that improve the quality and safety of nursing care provided by health care systems.</td>
</tr>
<tr>
<td><strong>Patient Safety</strong></td>
<td>Minimize risk of harm to patients and providers through both system effectiveness and individual performance.</td>
<td>Incorporate patient safety goals into the plan of care for all patients.</td>
<td>Incorporate patient safety principles into the development of comprehensive patient safety goals and safety education for nurses.</td>
</tr>
<tr>
<td><strong>Informatics</strong></td>
<td>Use information and technology to communicate, manage knowledge, mitigate error, and support decision making</td>
<td>Use information and technology to communicate, manage knowledge, mitigate error, and support decision making when providing direct patient care.</td>
<td>Formulate policies, processes, and/or educational plans that leverage information technology to optimize information management, reduce errors, and support clinical decision-making.</td>
</tr>
</tbody>
</table>

CONCEPT BASED CURRICULUM

The WSU School of Nursing curriculum is conceptually based and designed to give students the information and skills necessary to provide exceptional patient care in the ever changing healthcare environment. The curriculum represents the cutting edge in nursing education.

Courses are developed using key concepts that cross the life-span, the health-illness continuum, and various healthcare settings. Courses are taught using exemplars representing the disease states and patient populations students will be caring for upon graduation. By implementing conceptual learning, students will become more engaged in the learning process. Courses will include learner-centered activities that will help the student gain a deeper understanding of the relationship among concepts and exemplars. This process will facilitate better clinical reasoning and allow the student to transfer knowledge to various situations.

Concepts for the Individual, Nursing and Healthcare Domains

“All learners do not need to learn all course content; all learners do need to learn the core concepts.” K. Bain, PhD

<table>
<thead>
<tr>
<th>Category</th>
<th>Concept</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biophysical</td>
<td>Acid-base balance</td>
<td>Regulation of acidity and alkalinity in body fluids and conditions that contribute to imbalances. (1)</td>
</tr>
<tr>
<td></td>
<td>Cellular regulation</td>
<td>The functions cells perform to maintain homeostasis and conditions that contribute to alterations. (6)</td>
</tr>
<tr>
<td></td>
<td>Comfort</td>
<td>Is defined by the individual and may vary depending on the context. It requires that the individual be satisfied in the following domains of physical, psychological, social, spiritual, and/or environmental. (23)</td>
</tr>
<tr>
<td></td>
<td>Elimination</td>
<td>The secretion and excretion of body wastes from the kidneys and intestines and their alterations. (1)</td>
</tr>
<tr>
<td></td>
<td>Fluids and electrolytes</td>
<td>Processes that regulate the balance of water and electrolytes and conditions that contribute to imbalances. (1)</td>
</tr>
<tr>
<td></td>
<td>Immunity</td>
<td>The body’s natural or induced response to infections and the conditions associated with its response. (1)</td>
</tr>
<tr>
<td></td>
<td>Infection</td>
<td>The invasion of body tissue by microorganisms with the potential to cause illness or disease. (1)</td>
</tr>
<tr>
<td></td>
<td>Inflammation</td>
<td>An adaptive response to what the body sees as harmful, such as an allergen, illness, or injury. Inflammation is typically characterized by pain, heat, redness, and swelling. (1)</td>
</tr>
<tr>
<td></td>
<td>Intracranial</td>
<td>Processes that impact intracranial compensation and adaptive neurological function. (18)</td>
</tr>
<tr>
<td></td>
<td>Metabolism</td>
<td>All physical and chemical changes that take place to sustain life and conditions that contribute to imbalances. (1)</td>
</tr>
<tr>
<td></td>
<td>Mobility</td>
<td>The body’s function of movement. The musculoskeletal system is composed of the bones that serve as the body’s framework and attachment sires of muscles, tendons, and ligaments. Innervated by the nervous system, contraction and relaxation of muscles allow movement at the joints. (21)</td>
</tr>
<tr>
<td>Category</td>
<td>Concept</td>
<td>Definition</td>
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</tr>
<tr>
<td>Biophysical (continued)</td>
<td>Nutrition</td>
<td>The process, by which the body ingests, absorbs, transports, uses, and eliminates nutrients in food. (21)</td>
</tr>
<tr>
<td></td>
<td>Oxygenation</td>
<td>Mechanisms that facilitate or impair the body’s ability to supply oxygen to the blood. (1)</td>
</tr>
<tr>
<td></td>
<td>Perfusion</td>
<td>Mechanisms that facilitate or impair circulation of blood through tissue. (1)</td>
</tr>
<tr>
<td></td>
<td>Peripheral nerve regulation</td>
<td>Processes that impact the neural structures that lie outside the brain and spinal cord. (27)</td>
</tr>
<tr>
<td></td>
<td>Reproduction</td>
<td>The process of conception, gestation and childbirth. (1)</td>
</tr>
<tr>
<td></td>
<td>Sensory perception</td>
<td>Receiving and interpreting stimuli form the environment &amp; utilizing the sense organs and factors contributing to impaired response. (1)</td>
</tr>
<tr>
<td></td>
<td>Sexuality</td>
<td>The sum of the physical, functional, and psychological attributes that are expressed by one’s gender identity and sexual behavior, whether or not related to the sex organs or to procreation. (16)</td>
</tr>
<tr>
<td></td>
<td>Thermoregulation</td>
<td>The homeostatic process that balances heat production and heat loss to maintain the body’s temperature. (21)</td>
</tr>
<tr>
<td></td>
<td>Tissue integrity</td>
<td>Mechanisms that facilitate or impair skin and mucous membrane intactness. (1)</td>
</tr>
<tr>
<td>Development</td>
<td>Growth and development</td>
<td>Growth is an increase in physical size, and development is an orderly sequence of functions and capabilities that progress from simple to complex. (13)</td>
</tr>
<tr>
<td>Psychological</td>
<td>Accountability</td>
<td>An obligation or willingness to accept responsibility. This is an initial step needed to change behavior. (8)</td>
</tr>
<tr>
<td></td>
<td>Addiction behaviors</td>
<td>Compulsive, uncontrollable dependence on a chemical substance, habit, or practice to such a degree that cessation causes severe emotional, mental, or physiologic reactions. (16)</td>
</tr>
<tr>
<td></td>
<td>Affect</td>
<td>The immediate and observable emotional expression of mood, which people communicate verbally and nonverbally; the outward manifestation of what the individual is feeling. (21)</td>
</tr>
<tr>
<td></td>
<td>Cognition</td>
<td>The brain’s ability to process, retain, and use information. These abilities include reasoning, judgment, perception, attention, comprehension, and memory. These abilities are necessary to solve problems, learn new information, and interpret the environment. (28)</td>
</tr>
<tr>
<td></td>
<td>Coping</td>
<td>A state in which a person experiences, or is at risk to experience, an inability to manage internal or environmental stressors adequately due to inadequate resources (physical, psychological, behavioral, and/or cognitive). (4)</td>
</tr>
<tr>
<td></td>
<td>Crisis</td>
<td>Is an event or situation in an individual’s life that cannot be managed through the usual coping skills. Types of events or situations include developmental, situational and social. (28)</td>
</tr>
<tr>
<td></td>
<td>Culture</td>
<td>The knowledge and values shared by a society. (8)</td>
</tr>
<tr>
<td></td>
<td>Diversity</td>
<td>Recognizing differences among “persons, ideas, values and ethnicities,” while affirming the uniqueness of individuals. (19)</td>
</tr>
<tr>
<td>Category</td>
<td>Concept</td>
<td>Definition</td>
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</tr>
<tr>
<td>Psychological (continued)</td>
<td>Family</td>
<td>Two or more individuals who depend on one another for emotional, physical, and/or financial support. (8)</td>
</tr>
<tr>
<td></td>
<td>Grief and loss</td>
<td>Loss is an actual or potential situation in which something that is valued becomes altered or no longer available. Grief is the subjective emotion and normal response to a loss. (21) (28)</td>
</tr>
<tr>
<td></td>
<td>Mood</td>
<td>A sustained emotional state and how one feels subjectively. (21)</td>
</tr>
<tr>
<td></td>
<td>Mood disorders</td>
<td>A group of mental disorders involving a disturbance of mood, accompanied by either a full or partial manic or depressive syndrome that is not due to any other mental disorder. Mood refers to a prolonged emotion that colors the whole psychic life; it generally involves either depression or elation; e.g., manic episode, major depressive episode, bipolar disorders, and depressive disorder (see separate entries for each). (25)</td>
</tr>
<tr>
<td>Self</td>
<td></td>
<td>The sum of mind and body that constitutes the identity of a person. (27)</td>
</tr>
<tr>
<td>Social functioning</td>
<td></td>
<td>The ability of the individual to interact in the normal or usual way in society; can be used as a measure of quality of care. (5)</td>
</tr>
<tr>
<td>Spirituality</td>
<td></td>
<td>An experience of feeling of being alive, purposeful, and fulfilled with the ability to make sense of life circumstance, beliefs about the universe, feelings of transcendence, joy, hopefulness and love. (2)</td>
</tr>
<tr>
<td>Stress</td>
<td></td>
<td>A complex experience felt internally that makes a person feel a loss or threat of loss; bodily or mental tension. (8)</td>
</tr>
<tr>
<td>Violence</td>
<td></td>
<td>Communication or a behavior which threatens or demonstrates harm to self or others. (1)</td>
</tr>
</tbody>
</table>

**NURSING DOMAIN**

<table>
<thead>
<tr>
<th>Category</th>
<th>Concept</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td></td>
<td>A holistic, systematic, and continuous collection, analysis, and synthesis of relevant data for the purpose of appraising the individual’s health status. (22)</td>
</tr>
<tr>
<td>Nursing Concepts</td>
<td>Caring interventions</td>
<td>Caring interventions are those nursing behaviors and actions that assist clients in meeting their needs. These interventions are based on a knowledge and understanding of the natural sciences, behavioral sciences, nursing theory, nursing research and past nursing experiences. Caring is the “being with” and “doing for” that assist clients to achieve the desired results. Caring behaviors are nurturing, protective, compassionate, and person centered. Caring creates an environment of hope and trust, where client choices related to cultural values, beliefs, and lifestyles are respected. (17)</td>
</tr>
<tr>
<td>Clinical decision making</td>
<td></td>
<td>“Interpretation or conclusion about a patient’s needs, concerns, or health problems, and/or the decision to take action (or not), use or modify standard approaches, or improvise new ones as deemed appropriate by the patient’s response.” (26)</td>
</tr>
<tr>
<td>Collaboration</td>
<td></td>
<td>“Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.” (22)</td>
</tr>
<tr>
<td>Communication</td>
<td></td>
<td>The exchange of thoughts, messages or information through verbal and nonverbal methods. (8)</td>
</tr>
<tr>
<td>Category</td>
<td>Concept</td>
<td>Definition</td>
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</tr>
<tr>
<td>Nursing Concepts (continued)</td>
<td>Influence</td>
<td>The power or capacity to cause an effect in indirect or intangible ways. (8)</td>
</tr>
<tr>
<td></td>
<td>Life-long learner</td>
<td>The ability to understand and monitor one’s own thinking during one’s lifespan. (9)</td>
</tr>
<tr>
<td></td>
<td>Patient-centered care</td>
<td>“Recognize the patient or designee as the source on control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.” (22)</td>
</tr>
<tr>
<td></td>
<td>Professionalism</td>
<td>“The conduct, aims, or qualities that characterize or mark a profession.” (8)</td>
</tr>
<tr>
<td></td>
<td>Professional behaviors</td>
<td>Professional behaviors are characterized by a commitment to the profession of nursing. The student adheres to standards of professional practice, is accountable for her/his own actions and behaviors, and practices nursing within legal, ethical, and regulatory frameworks. Professional behaviors also include a concern for others, as demonstrated by caring, valuing the profession of nursing, and participating in ongoing professional development. (18)</td>
</tr>
<tr>
<td></td>
<td>Role transition</td>
<td>Gradual development in a new role. (8)</td>
</tr>
<tr>
<td></td>
<td>Safety</td>
<td>Preventing inadvertent pain, injury, or loss. (8)</td>
</tr>
<tr>
<td></td>
<td>Self-management of care</td>
<td>The systematic provision of education and supportive interventions to increase patient’s skills and confidence in managing their own health problems, including regular assessment of progress and problems, goal-setting, and problem-solving approaches. (8)</td>
</tr>
<tr>
<td></td>
<td>Teaching</td>
<td>A system of activities intended to produce learning. (21)</td>
</tr>
<tr>
<td></td>
<td>Teaching and learning</td>
<td>Facilitator/facilitation of the acquisition of knowledge through learning. (1)</td>
</tr>
</tbody>
</table>

**HEALTHCARE DOMAIN**

<table>
<thead>
<tr>
<th>Category</th>
<th>Concept</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy</td>
<td></td>
<td>Is to speak up or act in the cause of another in support of individuals, families, systems, communities, and issues. (12)</td>
</tr>
<tr>
<td>Healthcare Concepts</td>
<td>Care management</td>
<td>Healthcare services and programs designed to help individual with certain long-term conditions better manage their overall care and treatment. (3)</td>
</tr>
<tr>
<td></td>
<td>Case management</td>
<td>A system of management that facilitates effective care delivery and outcomes for patients. (8)</td>
</tr>
<tr>
<td></td>
<td>Educator</td>
<td>Educators facilitate learning, facilitate learner development and socialization, use assessment and evaluation strategies, participate in curriculum design and evaluation of program outcomes, function as a change agent and leader, pursue continuous quality improvement in the nurse educator role, engage in scholarship, function with the educational environment. (20)</td>
</tr>
<tr>
<td></td>
<td>Epidemiology</td>
<td>The science that explains the strength of association between exposures and health effects in humans. (24)</td>
</tr>
<tr>
<td></td>
<td>Ethics</td>
<td>Ethics is a code or guide about the rightness or wrongness of behaviors. Ethical behaviors guide the nurse in supporting the principles of autonomy, beneficence, justice, and truth. (8)</td>
</tr>
<tr>
<td></td>
<td>Evidence-based practice</td>
<td>A process to solve problems in clinical practice using the best evidence, clinical experience, and patient preferences and values. (14)</td>
</tr>
<tr>
<td>Category</td>
<td>Concept</td>
<td>Definition</td>
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<tr>
<td>Healthcare Concepts</td>
<td>Environmental health</td>
<td>Addresses all the physical, chemical, and biological factors external to a person, and all the related factors impacting behaviors. It encompasses the assessment and control of those environmental factors that can potentially affect health. It is targeted towards preventing disease and creating health-supportive environments. (30)</td>
</tr>
<tr>
<td></td>
<td>Global health</td>
<td>A field of study, research, and practice based on improving health and achieving equity in health for all people worldwide. Global health problems, issues, and concerns that transcend national boundaries, may be influenced by circumstance or experiences in other countries, and are best addressed by cooperative actions and solutions. (10)</td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td>“Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” (29)</td>
</tr>
<tr>
<td></td>
<td>Health care systems</td>
<td>A group of interacting people and processes that deliver safe and effective patient care with quality, equal access, and cost effectiveness. (12)</td>
</tr>
<tr>
<td></td>
<td>Health policy</td>
<td>Actions and decisions by government bodies or professional organizations that influence the actions and decision of organizations and individuals within the health care system. (21)</td>
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<tr>
<td></td>
<td>Health promotion</td>
<td>Effort to stop the development of disease; includes treatment to prevent a disease from progressing further and causing complications. (8)</td>
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<tr>
<td></td>
<td>Holism</td>
<td>Holism is the culture of human caring in nursing and health care that affirms the human person as the synergy of unique and complex attributes, values, and behaviors, influenced by that individual’s environment, social norms, cultural values, physical characteristics, experiences, religious beliefs and practices, and moral and ethical constructs, within the context of a wellness-illness continuum. (19)</td>
</tr>
<tr>
<td></td>
<td>Informatics</td>
<td>An integration of nursing science, computer science, and information science to manage and communicate data, information, knowledge, and wisdom in nursing practice. (8)</td>
</tr>
<tr>
<td></td>
<td>Legal issues</td>
<td>Rights, responsibilities and scope of nursing practice as defined by the state Nursing Practice Acts, as well as public and civil laws. (1)</td>
</tr>
<tr>
<td></td>
<td>Population health</td>
<td>The health outcomes of a group of individuals, including the distribution of such outcomes within the group. The field of population health includes health outcomes, patterns of health determinants, and policies and interventions that link these two. (11)</td>
</tr>
<tr>
<td></td>
<td>Power</td>
<td>The ability to influence decisions and have an impact on issues that matter. (8)</td>
</tr>
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<td></td>
<td>Quality improvement</td>
<td>An organized approach to identify errors and hazards in care, as well as improve care overall. (8)</td>
</tr>
<tr>
<td></td>
<td>Research</td>
<td>Investigation or experimentation aimed at the discovery and interpretation of facts about a particular subject. (8)</td>
</tr>
<tr>
<td></td>
<td>Triage</td>
<td>Means “sorting.” Triage is a continuous process in which client priorities are reassigned as needed treatments, time, and the condition of the client changes. (21)</td>
</tr>
<tr>
<td>Category</td>
<td>Concept</td>
<td>Definition</td>
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<tr>
<td>Healthcare Concepts (continued)</td>
<td>Underserved population</td>
<td>Populations living in the United States who do not have adequate access to health care services. They may share one or more of these characteristics: poor; uninsured; have limited English language proficiency and/or lack familiarity with the healthcare delivery system; or live in locations where providers are not readily available to meet their needs. (15)</td>
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<td></td>
<td>Vulnerable populations</td>
<td>A subgroup of the population that is more likely to develop health problems as a result of exposure to risk or to have worse outcomes from these health problems than the rest of the population. (24)</td>
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References


Revised 6/18/2013
Part B
School of Nursing
General Policies and Procedures
SECTION I: SCHOOL OF NURSING REQUIREMENTS

I. GENERAL GUIDELINES FOR ALL SCHOOL OF NURSING STUDENTS

A. Weber State University Policies:
   1. **WSU DISCRIMINATION AND HARASSMENT POLICY (PPM 3-32)**. Weber State University is committed to providing an environment free from harassment and other forms of discrimination based upon race, color, ethnic background, national origin, religion, creed, age, lack of American citizenship, disability, status of veteran of the Vietnam era, sexual orientation or preference, or gender, including sexual/gender harassment. Such an environment is a necessary part of a healthy learning and working atmosphere because such discrimination undermines the sense of human dignity and sense of belonging of all people in an environment.

   2. **DISABILITY STATEMENT**
   Any student requiring accommodations or services due to a disability must contact Services for Students with Disabilities (SSD) in Room 181 of the Student Services Center (or Room 221 at the Davis Campus). SSD can also arrange to provide course materials in alternative formats upon request. Contact SSD by phone at 801-626-6413 (Ogden Campus) or 801-395-3524 (Davis Campus); or by email at ssd@weber.edu

B. Students must pay required tuition and fees by the dates outlined in the WSU Catalog. NOTE: Failure to meet these established deadlines may result in the student losing his/her place in a specific nursing course/program.

C. Students **MAY NOT** register for courses scheduled to be taught on a campus different from the campus to which they were formally accepted. Students with extenuating circumstances may request a change in campus. Permission is granted by program director and depends on space availability, etc.

D. Students are covered by Weber State University liability/malpractice insurance once they are registered in a course. NOTE: Students may not attend/participate in any nursing courses prior to being admitted to WSU and registering.

E. WSU School of Nursing dates and deadlines override Continuing Education, online, or other university guidelines.
   NOTE: Support courses must be completed and the grades posted two weeks prior to nursing orientation.

F. Students will have access to their syllabi in the online learning management system and Student Handbook prior to first day of class.

G. Both the university and the School of Nursing expect that students study 2-4 hours per week for each credit hour of enrolled courses.
II. FUNCTIONAL REQUIREMENTS FOR STUDENT SUCCESS

The School of Nursing Essential Requirements act as a guide for both students and faculty in the School of Nursing to understand and communicate the necessary functions required for a student in the School of Nursing. Students are required to meet all of the essential requirements. The essential requirements include functions necessary for starting, continuing, and graduating from the School of Nursing programs. If for any reason during the course of the Associate of Applied, Associate, Baccalaureate, and Master of Science Degree programs, you are unable to perform any of these functions, you will be academically withdrawn from the program.

After reading and reviewing the essential requirements, you will sign and return an essential requirements form to the School of Nursing before starting your program of study. The form is a permanent part of your School of Nursing student file.

A. Essential Requirements of Intellect:
1. **Comparing** - Judging the readily observable functional, structural, or compositional characteristics (whether similar to or divergent from obvious standards) of data, people, or things.
2. **Copying** - Transcribing, entering, or posting data.
3. **Computing** - Performing arithmetic operations and reporting on and/or carrying out a prescribed action in relation to them.
4. **Compiling** - Gathering collating, or classifying information about data, people or things. Reporting and/or carrying out a prescribed action in relation to the evaluation is frequently involved.
5. **Analyzing** – After examining and evaluating data able to present alternative actions in relation to the evaluation is frequently involved.
6. **Coordinating** – Able to determine time, place and sequence of operations or action to be taken on the basis or analysis of data. May include prioritizing multiple responsibilities and/or accomplishing them simultaneously.
7. **Judgment** - Recognize potentially hazardous materials, equipment, and situations and proceed safely in order to minimize risk of injury to patients, self, and nearby individuals.
8. **Synthesizing** - To combine or integrate data to discover facts and/or develop knowledge or creative concepts and/or interpretations.
9. **Negotiating** - Exchanging ideas, information, and opinions with others to formulate policies and programs and/or jointly arrive at decided, conclusions, solutions or solve disputes.
10. **Adaptability**- Ability to be flexible and creative and adapt to professional and technical change Able to manage the use of time and to systematize actions in order to complete professional and technical tasks within realistic constraints. Able to provide professional and technical services while experiencing the stresses of task-related uncertainty (e.g. ambiguous directions, ambivalent preceptor), emergent demands (e.g. “stat” test orders), and a distracting environment (e.g. high noise levels, crowding, complex visual stimuli).
B. Essential Requirements of Observation:
1. **Near Acuity** - Clarity of vision at 20 inches or less with or without correction.
2. **Far Acuity** - Clarity of vision at 20 feet or more with or without correction.
3. **Depth Perception** – Ability to see depth and breathe. Three dimensional vision.
4. **Color Vision** - Ability to identify and distinguish colors.
5. **Field of Vision** – Ability to see area from right to left or up and down while fixed on one point.
6. **Fingering** - Picking, pinching or otherwise working primarily with fingers rather than with the whole hand or arm as in handling.
7. **Feeling** - Perceiving attributes of objects, such as size, shape, temperature or texture, by touching with skin, particularly that of fingertips).
8. **Hearing** - Perceiving the nature of sounds. Used to make fine discriminations in sounds, such as when making fine adjustments on running engines.

C. Essential Requirements of Communication:
1. **Talking** - Expressing or exchanging ideas by means of the spoken word. Talking is important for those activities in which nursing students must impact oral information to clients or to the public, and in those activities in which they convey detailed or important spoken instructions to other workers, accurately, loudly, or quickly.
2. **Hearing** - Perceiving the nature of sounds. Used for those activities which require ability to receive detailed information through oral communications, and to make fine discriminations in sounds.
3. **Communicating** - talking with and/or listening and/or signaling people to convey or exchange information; includes giving/receiving assignments and/or directions.
4. **Instructing** - teaching subject matter to others or training others through explanation, demonstration and supervised practice; or making recommendations on the basis of technical nursing specific knowledge.
5. **Interpersonal** - skills/behaviors-dealing with individuals with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them.
6. **Confidentiality**- the nursing student “promotes, advocates for, and strives to protect the health, safety, and rights of the patient” (ANA Code of Ethics, 2010) this includes keeping information gathered in practice or clinical learning environments including individual patient information, clinical facilities, and fellow student information undisclosed in personal and professional writings, social media, and general gossiping.

D. Essential Requirements of Movement:
1. **Standing**
2. **Walking**
3. **Sitting**
4. **Climbing** - Body agility is emphasized. Occasionally required to ascend or descend something such as a ladder using feet and legs and/or hands and arms.
5. **Balancing** - Maintaining body equilibrium to prevent falling when performing feats of agility such as assisting with transferring patients.

6. **Stooping** - Bending body downward and forward. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.

7. **Kneeling, Crouching and Crawling** – Often needed when assisting patients with dressing, bathing, or other personal cares. **(Kneeling:** Bending legs at knees to come to rest on knee or knees. **Crouching:** Bending downward and forward by bending legs and spine. **Crawling:** Moving about on hands and knees or hands and feet.)

8. **Reaching** - Extending hand(s) and arm(s) in any direction.

9. **Handling** - Seizing, holding, grasping, turning or otherwise working with hand or hands.

10. **Control of Others** - Seizing, holding, controlling, and/or otherwise subduing violent, assaultive, or physically threatening persons to defend oneself or prevent injury. This is an occasional necessity in the clinical area. Body strength and agility of all four limbs is necessary.

11. **Able to lift/ transfer/ move up to 50 pounds independently**

12. **Able to lift and move 51 to 100 pounds with assistance of another or mechanical lifting and moving devices.**

13. **Mechanical Ability** - Able to safely and accurately operate mechanical or powered medical equipment and moving and transferring equipment.

**E. Essential Requirements Related to the Learning Environment:**

1. **Exposure to Extreme Weather** – Students are expected to travel to the assigned clinical site which may involve exposure to hot, cold, wet, humid, or windy conditions caused by the weather.

2. **Extreme Heat and / or Cold Non-Weather related** – Occasionally in the clinical setting the temperature of the care environment may be adjusted for patient treatment and students would be expected to follow facility policy for appropriate dress and behavior if assigned to these areas.

3. **Wet and/or Humid** - Contact with water or other liquids or exposure to non-weather related humid conditions is a frequent occurrence.

4. **Atmospheric Conditions** - Exposure to conditions such as noxious odors such as patient care products and/ or body odors, some dust, powders or mists may be common.

5. **Hazards** – There are instances where students are exposed to situations with a definite risk of bodily injury, such as: proximity to moving mechanical parts, electrical current, radiation, and chemicals.

6. **Confined/Restricted Working Environment** – Nursing student clinical work is usually performed in small patient care bed areas, patient bathrooms, and small utility rooms. Medication rooms are small and may be locked. Some patient care units or nursing facilities are closed or locked providing safety and security for clients or fellow workers.

7. **Noise** – Able to function in a noisy distracting environment with many different auditory stimuli. Intercom sounds interspersed with machines beeping, phones
ringing, patient call light system alarms, individuals with varying assignments communicating with each other and technology at a central desk and at the patient bedside. Patients in their rooms with noisy equipment, television or radio on, and visitors talking. Patient families and visitors requesting information and services. Patients in the halls walking or moving from diagnostic tests or therapies.

*Satisfactory completion of the School of Nursing Programs demands your ability to meet the above requirements. If you are uncertain as to your ability with any of these essential functions, please consult with the School of Nursing Admissions and Advancements Committee.*
The School of Nursing Essential Requirements act as a guide for both students and faculty in the School of Nursing to understand and communicate the necessary functions required for a student in the School of Nursing. Students are required to meet all of the essential requirements. The essential requirements include functions necessary for starting, continuing, and graduating from the School of Nursing programs. If for any reason during the course of the Associate of Applied, Associate, Baccalaureate, and Master of Science Degree programs, you are unable to perform any of these functions, you will be academically withdrawn from the program.

After reading and reviewing the essential requirements, you will sign and return an essential requirements form to the School of Nursing before starting your program of study. The form is a permanent part of your School of Nursing student file.

I _____________________________ on this date __________________ have fully read and I understand these essential Requirements. I am aware that I will be withdrawn from my School of Nursing program of study, if unable to perform any of these functions.

Print your name: ______________________________________

Signed: _____________________________________________

Dated: ______________________________________________

**NOTE:**
*The signed original is a permanent part of the student file. Please file upon admission and before the start of the program of study.*
III. STUDENT ACADEMIC ADVISEMENT
   A. Each student is assigned a nursing academic advisor upon entering a nursing program.
      1. The advisor is available to the student for academic related advisement on individual program requirements and progress toward graduation.
      2. It is the responsibility of the student to schedule these required meetings with the advisor.
         a. Students must communicate with their advisor within the first two weeks of the semester in order to identify and correct problems.

   B. The student has the final responsibility for all coursework that is required for graduation.
      1. If a student wishes to discuss any particular course, he/she is to confer with the instructor of that course.
      2. Failure to meet with an advisor is documented and absolves faculty of any responsibility relative to advisement toward fulfillment of the student's graduation requirements.

IV. STUDENT DOCUMENTATION OR ENTRANCE PORTFOLIO
   A. A confidential, cumulative record (file) is kept on each student.
      1. Records of individual student conferences, warnings, disciplinary actions, and other relevant documents, will be maintained in the confidential cumulative record. These documents will be read and signed by the student and faculty prior to this record becoming a part of the student's cumulative record. Student signature does not establish agreement with information recorded on form, but indicates that the student has read and understands information, conditions of warning and/or discipline; and understands department response if conditions related to warning and/or disciplinary action are not fulfilled by student.
      2. Students seeking access to the confidential, cumulative file are referred to the student records section of the Weber State University Student Code and the Family Educational Rights and Privacy Act (FERPA) of 1974. Further information can be obtained from the office of the Registrar’s Office.

   B. Due to the importance of these portfolio documents and legal issues, no student will be cleared for clinical/lab experiences until his/her documents have been turned in. Progression is contingent on current documentation.

   C. In addition to advisement notes and other communication records, each student file contains documents, which each student must provide to the WSU School of Nursing. The following documents must be turned in to the appropriate program secretary:

      Items 1-6 are required for ALL programs
      1. Demographics Form
      2. Health and Accident Insurance Form
      3. Waiver of Health insurance if applicable
      4. Accesses and Confidentiality Form

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5. Copy of CNA Course Completion, CNA certificate, or CNA Recertification Letter or a copy of licenses as appropriate.

6. Transcripts

**Items 7-10 are required for programs that require clinical assignment**

7. Information and Immunization Form with copy of official immunization record
8. CPR Acknowledgment and copy of current CPR card.
9. Criminal Background Check (CBC) Form
10. Drug screen form.

V. POLICIES THAT APPLY TO STUDENTS IN PROGRAMS REQUIRING CLINICAL ASSIGNMENT

A. OSHA, IMMUNIZATIONS, FUNCTIONAL LIMITATIONS, HEALTH

1. OSHA Regulations:
   a. Students may, in the fulfillment of program required clinical practice, be exposed to bloodborne pathogens. Use of universal precautions is a standard for practice and expected of all students in the clinical setting.
   b. All students are required to comply with Federal Occupational Safety and Health Administration (OSHA) regulations and follow the WSU Bloodborne Pathogen Exposure Control Plan (available online at http://www.weber.edu/EHS/postexposure.html).
   c. Students who are allergic to latex need to notify the Campus Manager or Program Director and the clinical faculty so that provisions can be made.

2. Immunizations:
   a. Students are required to provide valid documentation from a healthcare provider on all the below listed required immunizations before starting any nursing courses. The student must provide a medical release if unable to meet immunization requirements. However, if unable to meet immunization requirements, clinical facilities may not allow student access to clinical experiences.
      1) For students who are not current with TB, they must obtain and provide proof of an initial 2-step TB skin test which involves an initial TB test followed with a second within 1-3 weeks. For all other students, the following is current information:
         a) Students must then obtain an annual TB test and be current through the second semester of each year.
         b) TB tests are available at the Student Health Center.
         c) Students who test positive for TB are required to have a chest X-ray (which must be “clear”). If chest X-ray is positive, student must provide valid documentation from a healthcare provider that the chest x-ray is not positive for TB.
      2) A rubella titer, 2 MMR immunizations, or MMR booster are required. Students who do not have evidence of measles immunization will be required to complete the vaccinations or have a rubella titer done to show immunity. The complete immunization
series may have to be repeated.

3) Students must have a current TdaP (Tetanus, Diphtheria and Pertussis vaccination (within the past 10 years). TdaP should replace a single dose of TD for adults aged 19-64 years who have not received a dose of TdaP previously. TD will then be boosted every 10 years. Students who are not current will be required to obtain the vaccination.

4) The three-injection series Hepatitis B vaccine (completed or in progress) and/or titer is required for all students.

5) Students must provide month & year of when they had chicken pox (varicella) OR dates of 1st and 2nd varicella injections, OR date of varicella titer.

6) Flu combo vaccines are required in the fall of every year.

3. Functional limitation or injury:
A student who is functionally limited must notify appropriate nursing faculty and administration as soon as possible. The student and appropriate faculty will meet to develop guidelines delineating the student’s plan to complete course requirements pre- and post-limitation.

4. Health:
a. Students are considered interns while in clinical settings. As such, students are "volunteer workers" of the sponsoring institution of higher education and are eligible to receive Workman's Compensation benefits for only bloodborne exposures acquired during clinical time.
   1) Students are advised to be enrolled in a personal health insurance plan.
   2) Students who do not choose to carry health insurance must sign a waiver.

b. Should a student be injured during a clinical experience or have his/her health endangered, it should be reported immediately to the instructor and to the appropriate cooperating agency personnel. An incident report will be filed. Students are responsible for any expenses not covered by Workmen’s Compensation incurred due to injury or illness in the college or clinical area.

c. A student missing a class/lab/clinical experience for any health-related issue may be required to submit a release from their healthcare provider prior to attending further class/lab/clinical experiences.

B. BASIC LIFE SUPPORT (BLS) - CLASS C (HEALTH CARE PROVIDER)
1. Documentation of expertise in cardiopulmonary resuscitation (CPR) must be kept current.
a. CPR certification must cover you through the academic year for which you are admitted.
b. Students will not be permitted in the agency areas without current CPR.
c. The only acceptable CPR certification is the American Heart Association
C. CRIMINAL BACKGROUND CHECK (CBC)

1. PURPOSE:
   a. This screening process has been mandated by the WSU School of Nursing in an effort to more effectively protect the safety and well-being of patients, clients, and residents of those facilities, and is fully supported by the Dumke College of Health Professions Executive Committee, the nursing faculty, and the School of Nursing’s Advisory Committees.
   b. The WSU School of Nursing enters into Affiliation Agreements with multiple healthcare facilities throughout the state. These agreements provide WSU School of Nursing students and faculty authorized access to facility resources and patients. In response to stipulations contained within one or more of these Agreements, the WSU School of Nursing requires students admitted to a nursing program submit to a FBI criminal background check.

2. POLICY:
   “Admission and progression in a WSU School of Nursing Program is contingent upon submission of a satisfactory background check. If the background check reveals a history of criminal actions, the student may not be admitted to or allowed to progress within the program. The student will not be entitled to any refunds of tuition dollars or other fees.” In addition, students are required to attest, each semester, that their original background check is valid.

   Students who interrupt their progression in any nursing program of study that requires clinical assignment and are not continuously registered, must repeat and pass FBI background check prior to enrolling in any nursing courses.

3. PROCEDURES:
   All students who wish to apply for admission to a WSU School of Nursing program are informed in writing that they are required to submit to a FBI CBC (takes place after admissions).
   a. The following written statement, as well as instructions for obtaining the CBC, are found in both the admission and acceptance packets: “If the record reveals prior criminal convictions, it may affect eligibility to begin and/or remain in a nursing program. Actions which would preclude an individual from admission to, or continuance in a nursing program include: aggravated assault, spouse or child abuse, sexual predatory behavior, financial related crimes such as identity theft, and issue of moral turpitude (reference Utah Department of Professional Licensing). This list is not inclusive of all criminal convictions that will prevent program admission and/or progression, and the department reserves the right to review each student’s record on an individual basis.
   b. If background check documents criminal actions, it may be required of the student to obtain official verification that the charge(s) have been
c. Students are provided an instructional document providing step-by-step instructions for obtaining a FBI CBC.
d. Students are responsible for the expense associated with this documentation. This information is in the instructional document.
e. Disclaimer included in the admission and orientation packet states: "Students are encouraged to have their criminal record expunged prior to seeking CBC."
f. Persons convicted of felonies must refer to the Utah Nurse Practice Act (58-31b-302-7a & b and 58-31b-302-9a&b) and may not be allowed to enter/progress in any of the nursing programs.
g. Students whose CBC reveals evidence of prior convictions may be reviewed on a case-by-case basis to determine if they will be allowed to enter/progress in any of the nursing programs.
h. Students who have committed a felony, but have successfully petitioned to reduce the conviction to a misdemeanor charge, will be reviewed on a case-by-case basis to determine if they will be allowed to enter/progress in a nursing program.
i. Students already progressing in a nursing program are required to report any pending criminal charge(s) at the time that they occur (this includes throughout the entirety of their nursing educational program).
j. The WSU School of Nursing reserves the right to require a student with a pending criminal charge to withdraw from all nursing classes until the courts have made a decision regarding the criminal actions.
k. If criminal charge(s) are dismissed, a student may be considered for reentry.
l. If the courts determine that the charges are valid and a conviction is made, either misdemeanor or felony, a student’s CBC will be reviewed on a case-by-case basis.
m. Information obtained in the CBC will be disclosed on a need-to-know basis to instructors and administrators.

D. DRUG SCREEN
1. PURPOSE:
   a. This screening process has been mandated by the WSU School of Nursing in an effort to more effectively protect the safety and well-being of the patients, clients, and residents of those facilities, and is fully supported by the Dumke College of Health Professions (DCHP) Executive Committee, the nursing faculty, and the School of Nursing’s Advisory Committees.
   b. The WSU School of Nursing enters into Affiliation Agreements with multiple healthcare facilities throughout the state. These agreements provide WSU School of Nursing students and faculty authorized access to facility resources and patients. In response to stipulations contained within one or more of these Agreements, the WSU School of Nursing requires students admitted to a nursing program to submit to a urine drug screen analysis for the presence of mind altering substance(s).
In order to remain in compliance and good standing with our partners in healthcare delivery, the WSU School of Nursing has contracted with Intermountain WorkMed to perform the required urine drug screen on students entering a program. Intermountain WorkMed is an approved testing site, which meets standards of testing and reporting of results to the department.

2. POLICY:
"Admission and progression in a WSU School of Nursing program is contingent upon submission of a urine drug screen analysis. If the urine drug screen reveals any substances (prescribed or non-prescribed), the student may not be admitted to or allowed to progress within the program. The student will not be entitled to any refunds of tuition dollars or other fees." In addition, students are required to attest, each semester, that their original background check is valid.

Students who interrupt their progression in any nursing program of study that requires clinical assignment and are not continuously registered, must repeat and pass urine drug screen prior to enrolling in any nursing courses.

3. PROCEDURE:
All students who wish to apply for admission to WSU School of Nursing program are informed in writing that they are required to submit to, and pass, a urine drug screen.
   a. The following written information and instructions are found in the both the admission and acceptance packets: "If drug test reveals the presence of controlled substances (prescribed or non-prescribed), it may affect eligibility to enter as, and/or remain a student in a WSU School of Nursing program."
   b. Students are provided instructions providing for obtaining the urine drug screen at an approved testing facility.
   c. A student is responsible for the cost of the urine drug screen.
   d. If a student’s results return indicating a “dilute” sample, testing must be repeated at the student’s expense.
   e. A second “dilute” test result will be interpreted as a positive screen, and the student may not be allowed to enter and/or continue in the program.
   f. A student who refuses to submit to the urine drug screen or who does not have the screening performed by the date indicated on the admission form may forfeit his/her position.
   g. Positive drug screen results are automatically sent to a Medical Review Officer (MRO) for further evaluation and clearance. This automatic "Review Process" by the MRO will result in an additional charge of $40.00 paid by the student at the collection site where original collection took place. The MRO review will not take place until after the $40.00 fee has been paid. Failure to proceed with the MRO process, either by not paying or by not providing information requested by the MRO, may result in dismissal from the program.
h. The WSU School of Nursing reserves the right to ask any student to submit to additional drug testing. This request will occur if a student appears to be intoxicated or under the influence of drugs, narcotics, or chemicals. Nursing faculty, in consultation with program administrators and/or additional health care professionals, are authorized to make this determination. If it is determined that a student is impaired, in order to avoid a potential threat or risk to the public health, safety, or welfare, a student will be required to leave the clinical setting (arrangements will be made to ensure the safety of the impaired student). The cost of additional urine drug screens will be the responsibility of the student.

i. A student who wishes to file a grievance in response to the WSU School of Nursing's decision based on the results of his/her urine drug screen are referred to WSU Policy Section 6-23 thru 33: Student due process policy and procedures.
The WSU School of Nursing (SON) has strict policies to any violation of the academic integrity policy in any form, which violations may be subject to an appropriate sanction or penalty. Academic integrity violations at WSU SON are classified into two levels called nonseparable and separable. Nonseparable violations are less severe violations for which the possible sanctions do not include suspension or expulsion from the School of Nursing; separable violations are more severe violations for which the possible sanctions include suspension or expulsion. Whether a given violation is classified as nonseparable or separable depends on a number of factors including: the nature and importance of the academic exercise; the degree of premeditation or planning; the extent of dishonest or malicious intent; the academic experience of the student; and whether the violation is a first-time or repeat offense.

- Students are expected to conduct themselves in a manner free from any suspicion of dishonesty or cheating.
- Students are expected to have a working knowledge of what plagiarism entails, the purpose of internet-based plagiarism tools, and ensure that all work is referenced correctly.
  - For WSU SON internet-based plagiarism tool, a students’ paper resulting in 21% or greater will result in one of the following two actions: (1) based on course/assignment details, student may take the opportunity to read plagiarism report and rewrite to lower the percentage, or (2) based on results of internet-based plagiarism tool, faculty may proceed with Academic Integrity Policy on violations and sanctions.

I. LEVELS OF VIOLATIONS AND SANCTIONS

A. NONSEPARABLE VIOLATIONS

1. Nonseparable violations are less serious violations of academic integrity. They may occur because of inexperience or lack of understanding of the principles of academic integrity and are often characterized by a relatively low degree of premeditation or planning and the absence of malicious intent on the part of the student committing the violation. These violations are generally quite limited in extent, occur on a minor assignment or quiz or constitute a small portion of a major assignment and/or represent a small percentage of the total course work.

2. Below are a few examples of violations that are most often considered nonseparable, at least when committed by an undergraduate student as a first-time offense. This list is not exhaustive and classification of a given violation as separable or nonseparable is always heavily dependent on the specific facts and circumstances of the violation.
   - Persistent improper citation without dishonest intent.
   - Plagiarism on a minor assignment or a very limited portion of a major
assignment.

• Unpremeditated cheating on a quiz or minor examination.
• Unauthorized collaboration with another student on a homework assignment.
• Citing a source that does not exist or that one hasn’t read on a minor assignment.
• Making up a small number of data points on a laboratory exercise.
• Signing in for another student via attendance sheet or clicker in a course in which attendance counts toward the grade.

3. However, an alleged second nonseparable violation shall be treated as an alleged separable violation. Moreover, some violations that would be considered nonseparable for an undergraduate student may be treated as separable for a graduate student.

4. Sanctions for nonseparable violations include, but are not limited to one or more of the following, and do not include suspension or expulsion.

• Required participation in a noncredit workshop or seminar on ethics or academic integrity.
• An assigned paper or research project related to ethics or academic integrity.
• A make-up assignment that may be more difficult than the original assignment.
• No credit for the original assignment.
• A failing grade on the assignment.
• A failing grade for the course.
• Disciplinary warning or probation.

**B. SEPARABLE VIOLATIONS**

1. Separable violations are very serious violations of academic integrity that affect a more significant portion of the course work compared to nonseparable violations. Separable violations are often characterized by, substantial premeditation or planning and clearly dishonest or malicious intent on the part of the student committing the violation.

2. Below are some examples of violations that are most often considered separable. Again, the list is certainly not exhaustive and classification of a given violation as separable or nonseparable is always heavily dependent on the exact facts and circumstances of the violation.

• A second nonseparable violation.
• Substantial plagiarism on a major assignment.
• Copying or using unauthorized materials, devices, or collaboration on a major exam.
• Having a substitute take an examination.
• Making up or falsifying evidence or data or other source materials for a
major assignment, including falsification by selectively omitting or altering data that do not support one’s claims or conclusions.
- Facilitating dishonesty by another student on a major exam or assignment.
- Intentionally destroying or obstructing another student’s work.
- Knowingly violating research or professional ethics.
- Any violation involving potentially criminal activity.

3. Sanctions for separable violations include, but are not limited to, one or more of the following, and may, but need not, involve suspension or expulsion:
- A grade of E for the course.
- Disciplinary probation.
- Dismissal from a departmental or school honors program.
- Denial of access to internships or research programs.
- Loss of appointment to academically based positions (ex: NSNA president).
- Loss of departmental/graduate program endorsements for internal and external fellowship support and employment opportunities.
- Removal of fellowship or scholarship support.
- Suspension for one or more semesters.
- Dismissal from the School of Nursing.

II. GUIDELINES
A. The recommendations for sanctions at each level are not binding, but are intended as guidelines for WSU School of Nursing. For both nonseparable and separable violations, the severity of the sanction imposed should be proportional to the severity of the violation committed.

B. Sanctions for a given violation may be imposed differently on those with more or with less experience; thus, violations of academic integrity by graduate students may be penalized more severely than the same violations by inexperienced undergraduate students. In particular, violations that would be considered nonseparable for an undergraduate student may be treated as a separable violation for a graduate student.

III. DOCUMENTING AND REPORTING VIOLATIONS
A. All sanctions, whether nonseparable or separable, will be documented and reported in the following manner:
   1. A face-to-face meeting will be held between the involved faculty, the student with whom there is a problem and the program director (as needed).
   2. Following the meeting a letter will be written that covers the discussion held and details on the violation and sanction agreed upon.
   3. A copy of this letter will be placed in the students file and cc’d to the appropriate program director and the department chair.
SECTION III: PROFESSIONAL CONDUCT/BEHAVIOR

In addition to content knowledge, it is important for nursing students to develop professional behaviors, attitudes, and values. Failure in any of these endeavors will result in poor nursing care to vulnerable populations.

As such, development of these behaviors, attitudes, and values will be part of the earned grade in both theory and clinical courses. Failure in this development will negatively impact course grades and may result in the student failing the course.

*Students must not work the night prior to any clinical experience, this includes the preceptorship experience.

*Technology Use in the Clinical Setting (Cell phones, tablets, laptops, etc.)
Clinical days are up to 12 hour focused learning periods. Rarely in today’s technology world are any of us out of contact with family or friends for an extended time. Not using the phone to talk, text, send emails, check or send Facebook posts, or tweets may require one to SIGNIFICANTLY change behavior.

Things nursing students must do before clinical starts:
1. Educate friends and family that clinical time is a NO CONTACT time.
2. Changing the contact and supervision of children and teens during clinical days. This is necessary and requires forethought and planning. Parents often use the cell phone as an adjunct to child care-tracking children and teenager activities by frequent phone / text communication. Nursing students are not able to monitor and advise children or teens whether they are sick or well during assigned clinical times.
3. Provide emergency numbers to family along with the definition of an emergency. Forgetting to take the hamburger out of the freezer is NOT an emergency. Brother yelling at sister or vice versa is NOT an emergency. These are problems that you have your planned childcare or back-up parent prepared to handle until you are back at home.
4. Always have a copy the clinical faculty member’s cell phone number (many students write it on a label or piece of tape and stick it to the back of the WSU badge).
5. Have a card or another sticky and give your instructor’s contact information (cell phone and email) to your assigned nurse. (If there is an emergency the nurse can contact your instructor.)

Staff, patients, and family members interpret cell phone use and texting as social / outside of work behavior so NEVER use a cell phone at the nurses’ station, hallways, and patient rooms. Formal complaints made by patients and family members to facilities where they have felt that they did not receive adequate and timely care are very serious. One complaint specifically cited a Weber State University School of Nursing student using a cell phone at the nurses’ station while a family member waited to alert them to a patient need.

Cell phones, tablets, and laptops are turned TOTALLY OFF during clinical (this does not mean airplane mode or vibrate it means turned off). If you need to contact your instructor during clinical you must first ask to use the facility’s phone if that is impossible, you may...
excuse yourself to the break room and call your instructor. If the facility you are working in has a “no cell phone” policy please leave you cell phone turned off in your backpack or jacket that is left in the break room or preferably in your vehicle. DO NOT use your cell phone at any time or any place in that facility.

SON COMPETENCIES and EXPECTED PROFESSIONAL CONDUCT/BEHAVIORS:

I. Patient-centered care:
   A. Respect and encourage patient values.
   B. Seek learning opportunities with patients who represent all aspects of human diversity.
   C. Recognize personal attitudes about working with patients from different ethnic, cultural, and social backgrounds.
   D. Support patient-centered care for individuals and groups whose values differ from own.
   E. Recognize boundaries of therapeutic relationships. Show proper courtesy.
   F. Exhibit positive attitude including enthusiasm, motivation, dedication, commitment, showing initiative, and showing an appropriate sense of humor.
   G. Empower patients and families appropriately.
   H. Attend all clinicals on time; complete assignments on time. Do not leave clinical without faculty authorization.
   I. Maintain professional attire including appropriate uniform, shoes, etc. Uniform is to be clean and neat. When appropriate, all students, while in university sponsored clinical activities, will wear the required uniform and patch designated by the School of Nursing. All uniforms must be neat, clean, and ironed. If a difference exists between WSU SON policies and facility policies, the WSU SON will conform to the facility policies.
      1. Students wishing to wear a shirt under their scrub top must comply with the following guidelines:
         a. The shirt must be solid white or black.
         b. The shirt must not have any logos or printing on it.
      2. Students are not permitted to wear sweatshirts or hoodies, over their nursing uniform.
      3. Name tag must be visible while in the clinical setting.
      4. OSHA requires that shoes must be leather or leather-like material that can be wiped clean in the event of an exposure or must wear shoe covers. No open toed, open backed or shoes with holes will be permitted (i.e. CROC-like style).
      5. The official designated picture ID name tag is required as part of the uniform and must be purchased by students. Some facilities require facility ID's to be worn in addition to School of Nursing ID's. Students will comply with facility expectations.
   J. Grooming and personal hygiene are an essential part of professional behavior. Physical appearance is to be neat and clean. A student may be asked to leave the facility for any issues concerning grooming or hygiene at the discretion of the faculty.
      1. Clothing should not have any holes, rips, or tears.
      2. Do not wear strong perfume or colognes.
3. Visible body piercing is not permitted except for piercing of the ears. Ear jewelry should not be excessive (maximum of two conservative earrings per ear).

4. Hairstyles are to be conservative, clean, and neat; and should not inadvertently make contact with patients.
   a. Hair longer than shoulder-length must be securely pulled back when attending clinical.
   b. Mustaches and beards should be short, clean, and neatly trimmed.
   c. Hair color should be conservative and natural looking.

5. Students should maintain short, clean fingernails. No artificial nails or wraps are allowed.

6. Visible tattoos and body piercings should be covered while in clinical.

II. Teamwork and Collaboration:
   A. Demonstrate awareness of own strengths and limitations as a team member.
   B. Value perspectives and expertise of all health team members.
   C. Value different styles of communication used by patients, families, and peers.
   D. Contribute to resolution of conflict and disagreement.
   E. Be open to ideas, feedback, and constructive criticism.
   F. Demonstrate professional interpersonal skills.
   G. Take responsibility for own academic performance.
   H. While in the classroom, be respectful towards faculty and classmates.
      1. Keep cell phones turned off.
      2. When working online, refrain from using online as a forum to complain about other students, faculty, or the program.
      3. Do not use attacking or demeaning comments when reviewing work of peers.
         All online comments and postings should be done in a professional manner.

III. Evidence-based practice:
   A. Value the need for continuous improvement in clinical practice based on new knowledge.
   B. Acknowledge own limitations in knowledge and clinical expertise.
   C. Seek appropriate help as needed.

IV. Quality Improvement:
   A. Value own and others’ contributions to outcomes of care
   B. Identify gaps between local and best practice.
   C. Seek supplemental learning opportunities.
   D. Assume personal responsibility for actions and consequences.

V. Safety:
   A. Demonstrate effective use of technology that supports safety and quality.
   B. Consistent use of strategies to reduce risk of harm to self and others.
   C. Students are not permitted to transport patients via private vehicles per WSU legal counsel. If this policy is not complied with, a student will assume full liability if an
incident occurs. Violation of this policy will result in dismissal from the program.

D. Children are not allowed in classes, labs or clinical facilities.

E. The nursing student is expected to acknowledge and comply with the administrative authority of the assigned clinical faculty while practicing in the clinical setting.

VI. Informatics:


B. Protect confidentiality.
   1. No pictures will be taken while in a school setting and are not legally allowed to be uploaded to any social media, EVER. This includes classes, clinical, lab, and other classmates. Any pictures taken while at WSU requires a signed photo release.
   2. Confidentiality includes protecting ALL patient information.
   3. Confidentiality extends to protecting the student learning environment.

SCHOOL OF NURSING RESPONSE TO VIOLATION OF PROFESSIONAL CONDUCT/BEHAVIOR:

When behaviors, attitudes, and values are found to be inconsistent with the professional expectations of the School of Nursing, the following actions will be taken:

First offense: Student and faculty member will meet face-to-face. The faculty will identify problematic behavior, help the student identify ways to improve, and provide documentation to level directors using the Academic/Behavioral Documentation Form. The faculty will also review appropriate professional behaviors as outlined in the WSU Nursing Student Handbook and clarify any concerns the student may have.

Second offense (whether a repeat of the previous problematic behavior or as a result of new concerns): A face-to-face meeting with student, faculty, and Program Director/Campus Coordinator will be scheduled. The faculty will identify problematic behavior, help the student identify ways to improve, and provide documentation to Level Directors using the Academic/Behavioral Documentation Form. Level Directors will maintain a file on the student for the remainder of that students’ academic tenure in the WSU School of Nursing. A mandatory 5% deduction of the letter grade for the course will be applied.

Third offense (whether a repeat of the previous problematic behavior or as a result of new concerns): A face-to-face meeting with student, faculty, and Program Director/Campus Coordinator will be scheduled. The faculty will identify problematic behavior, help the student identify ways to improve, and provide documentation to Level Directors and SON Chair using the Academic/Behavioral Documentation Form. Level Directors will maintain a file on the student for the remainder of that students’ academic tenure in the WSU School of Nursing. A mandatory 10% deduction of the letter grade for the course will be applied.

Students are expected to adhere to all policies in the WSU School of Nursing Student Handbook.
and WSU Student Code Manual.

Above competency information is adapted from the following website:

**UNPROFESSIONAL CONDUCT RELATED TO STUDENT PRACTICE OF NURSING**
(Nurse Practice Act, 58-31b-502 and 58-31b-503)

Students are also held responsible for professional behavior as set forth by the Utah Nurse Practice Act. Please go to the following website and review the information in section 58-31b-502 and 58-31b-503. http://www.dopl.utah.gov/laws/58-31b.pdf
SECTION IV: UNSATISFACTORY STUDENT PERFORMANCE / DUE PROCESS

I. READMISSION/REAPPLICATION/LEAVE OF ABSENCE/DISMISSAL FROM PROGRAM.

A. Readmission to a nursing program. Students who have been terminated or who have officially withdrawn from a nursing program may be considered for readmission within the following program completion guidelines. Consideration for readmission to a nursing program requires a student to submit a letter requesting readmission to the program prior to application deadline. The letter requesting consideration for readmission must be addressed to the School of Nursing Admissions and Advancement Committee. Each case is considered individually and a student is not guaranteed readmission.

Readmission to a specific nursing level of a nursing program is considered under the following conditions:
1. A student in good academic standing who voluntarily withdraws from a program will be granted inactive status and considered for readmission by the Admissions and Advancement Committee. Readmission to a nursing program is not guaranteed and will be granted on a space available basis.
2. Students who have been placed on an involuntary Leave of Absence from a program may request to resume program progression at the earliest possible time at assigned campus. Each student's case will be reviewed by the Admissions & Advancement Committee only after receipt of all documentation requested of the student.
3. A student experiencing a non-disciplinary Leave of Absence will be permitted, upon resolution of circumstances that prompted the non-disciplinary Leave of Absence, to resume program progression at the earliest opportunity (progression based on “space availability”).

B. Students enrolled in programs that require clinical assignments who exit a nursing program will need to repeat the drug screen and background check prior to readmission.

C. Reapplication to a nursing program.
1. Students who fail two (2) or more courses may not apply for readmission but must apply for admission through the standard application process.
2. Students will be considered for admission with all other applicants.

D. Leave of absence from a nursing program may include but is not limited to the following with approval from the Admissions and Advancement Committee:
1. Illness
2. Family matters
3. Active duty commitment
4. Religious commitment
5. Financial difficulties
E. Dismissal from the nursing program may include but is not limited to the following examples:
   1. Failed 2 or more courses or terminated for cause. A UW grade constitutes failure of a course.
   2. Unethical or unsafe conduct.

II. WEBER STATE UNIVERSITY STUDENT DUE PROCESS POLICY (PPM 6-22)
The purpose of due process is to afford students all rights guaranteed to citizens by the Constitution and laws of the United States and the state of Utah. Students are obliged to obey these laws as well as rules and regulations of Weber State University and recognized standards of the program and profession for which they are being educated.

Problems between a student and the University generally are in the areas of academics or misconduct. Students should refer to the Weber State University Policy and Procedure Manual (6-22) when confronted with concerns about their rights and appropriate due process procedure.

Students are encouraged to consult with their faculty when they feel they are having problems meeting program goals, objectives, or academic requirements.

III. PROCESS OF RESOLUTION
The WSU Policy & Procedure Manual (6-22) provides students the opportunity to appeal decisions concerning clinical/academic performance sanctions and/or misconduct warning.

A. Informal resolution.
   1. Initial conference with faculty.
   2. If no resolution can be reached, referral of problem to Program Level/Campus Manager.
   3. If no resolution can be reached, referral of problem to School of Nursing Chair.
   4. If no resolution can be reached, referral of problem to Dean, Dumke College of Health Professions.
   5. If an informal resolution cannot be reached, any party in the dispute may request a formal appeal.

B. Formal appeal
   1. Contact the Due Process Officer and initiate the hearing process. See WSU Policy & Procedure Manual or check http://www.weber.edu/ppm/Policies/6-22_StudentCode.html
SECTION V: RESOURCES FOR STUDENT SUPPORT

The following resources are available to all WSU School of Nursing students. Outreach student access is provided through cooperative agreements with local educational and/or community resources. Student communication and/or information exchange is available to all students via the Internet. Students will be directed by their campus coordinator on specific access information.

A. WEBER STATE WILDCAT EMAIL ACCOUNT
All students are assigned a computer Wildcat e-mail account. It is the student’s responsibility to choose a confidential password for the account immediately. Communication from the program and individual faculty will occur through the Wildcat e-mail account ONLY. Due to FERPA regulations, personal e-mail addresses will not be recognized. However, a student can forward e-mail from Wildcat to his/her personal e-mail account.

B. FINANCIAL AID/SCHOLARSHIPS
All WSU nursing students, no matter the campus location, obtain Financial Aid from the WSU Financial Aid Office. All financial aid applications are submitted to the Financial Aids Office, Student Services Building (626-7569) or by going online at www.weber.edu.

In order to be qualified to be awarded a nursing scholarship, nursing students must complete one semester of the nursing program. Students must first complete the online WSU Scholarship application to be eligible to apply for any nursing scholarships, and to receive current scholarship information.

C. NURSING ORGANIZATIONS AND ACTIVITIES
All students are encouraged to participate in professional activities and join their respective professional organizations: the National Student Nurses Association (NSNA) and the Utah Student Nurses Association (USNA). A faculty member will serve as advisor for NSNA/USNA on each nursing program campus. Students in the BSN and MSN programs are strongly encouraged to join and participate in Utah Nurses Association (UNA) and American Nurses Association (ANA).
SECTION VI:
STUDENT ACADEMIC/BEHAVIORAL DOCUMENTATION FORM
Weber State University School of Nursing  
Academic/Behavioral Documentation Form

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<tr>
<th>Student Name:</th>
<th>Faculty:</th>
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This document represents a binding, written agreement between the nursing program and the student that identifies the following:
1. Unsatisfactory student performance.
2. A written plan for correction of unsatisfactory student performance.
3. Documentation of student’s performance related to plan of correction.

Documentation of all student contracts will remain as a permanent record in the student’s School of Nursing academic file.

Type of Occurrence: **Academic**

- [ ] Non-separable Violations
- [ ] Separable Violations

**Conduct/Behavioral**

- [ ] First Offense
- [ ] Second Offense
- [ ] Third Offense

**Description of unsatisfactory student performance (attach a separate page if needed):**

**Written plan for correction of unsatisfactory student performance (attach a separate page if needed):**

I understand the terms of this agreement and understand that failure to fulfill the identified plan for correction may result in either suspension and/or expulsion from the WSU School of Nursing. Furthermore, I have been informed of my WSU student right to due process and have been provided information regarding WSU student process procedures.

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<td>Program Director Signature:</td>
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**Final Outcome:**

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Weber State University

Dumke College of Health Professions

School of Nursing

Part C

Master of Science in Nursing

Program Specific Policies and Information

Revised
April 3, 2014
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SECTION 1

GENERAL GUIDELINES AND POLICIES

1. A Student Handbook is listed as a required text for all students and can be accessed online at the MSN student bulletin website. Students are responsible for understanding the information provided in this handbook. Students are required to follow the guidelines and policies outlined.

2. Students are expected to attend face to face classes from 8:00 a.m.- 6:00 p.m. Students who miss either student orientation, or the first week of face-to-face courses in the semester without permission from the MSN director may be dropped from all MSN courses and must re-apply to the MSN program during the next application period.

3. All MSN courses must be passed at the 80% (B-) level. All non-MSN courses must be passed with a C (73%) or above. A minimum cumulative GPA of 3.0 is required to graduate. Students are allowed to repeat only one MSN course. After a second MSN course failure, students will be dismissed from the graduate program.

4. Completion of the personal student portfolio is required prior to registration for MSN courses. Specific requirements related to the full application are obtained from the MSN program secretary.* Please update your portfolio each semester/year as appropriate. E-mail the program secretary with updated information.

5. In the completion of scholarly work, students are required to format course assignments, as appropriate, using the most current addition of the Manual for the American Psychological Association publication guidelines.

6. MSN Residency Course Dress Code Policy:

   - Students are responsible to understand dress and grooming policies for clinical residencies.
   - Weber State University students are diverse and we respect preferences relative to personal appearance.
   - Weber State has a reputation for high caliber students and graduates. The appearance of our students in the community should reflect that excellent reputation.
   - Clothing should be modest, clean, pressed, and in good repair (without holes, rips, or tears).
   - Clothing should not distract from the professional image of a graduate nursing student.
   - Weber State identification badges should be worn in the clinical/residency environments and must be visible on the upper torso area.
   - ID badges should have no stickers or pins of any kind attached.
   - Graduate students should dress appropriately for the residency environment. Students may inquire with their preceptor with regard to the dress code for the specific facility.
• Students are expected to practice personal hygiene, including being free of strong perfume or body odor.
• Hair should be neat and clean.
• Beard and mustaches are to be neatly trimmed.
• Students may be asked to cover tattoos while in the residency environment that may be deemed unprofessional or distracting.
• Students should select and wear jewelry that does not create a distraction. Visible body piercing is not permitted except for ear piercing.
• No artificial fingernails
• The following clothing is not acceptable for the residency environment:
  - Jeans
  - Bib Overalls
  - Mini Skirts
  - Hats of any type
  - T-shirts of any kind
  - Sweat pants/shirts
  - Tight or revealing clothing
  - Tank tops of any style

7. IN-CLASS ETIQUETTE
   • Cell phones and pagers should be in silent mode.
   • No texting or use of a Blackberry, smart-phone, i-Pad, laptop, or other electronic communication device during in-class activities without faculty permission.
   • As per WSU policy, please, no children in class.

SECTION 2
HYBRID DELIVERY

1. The MSN Program uses the “hybrid” method of course delivery. The hybrid teaching-learning modality supports the accomplishment of the program goals employing a combination of the traditional face-to-face classroom pedagogy combined with asynchronous online learning activities and faculty-student interaction. This teaching format allows for the convenience of online classes balanced with in-class interaction with professors. Students learn theory online, and then travel to the Ogden, Utah campus for scheduled daylong interactions with faculty focused on application activities.

2. MSN students will attend three on campus face-to-face meetings per semester.

3. Attendance on the first day of class is mandatory. This meeting provides important instruction and guidance for the course.
SECTION 3
ADMISSION CRITERIA

Current admission criteria can be accessed at http://www.weber.edu/Nursing/degrees_and_programs/master/checklist.html

Application Deadline
Students are admitted to begin the MSN Program of study for fall semester. Applications must be completed and submitted by March 1st. Applications are available online at http://www.weber.edu/Nursing/degrees_and_programs/master/application.html

Registration Information

Consult the Weber State University Catalog for information concerning eligibility, registration materials, registration process, changes in registration, financial aid registration requirements, verification of enrollment status, and withdrawal or discontinuance.

After admission, MSN students will coordinate with the MSN Program secretary. The secretary will ensure that all profile documents are complete and will then provide departmental approval for registration. All students must have departmental clearance prior to registration.

Students must make tuition/fees payment within the stated deadlines or they may be dropped from course registration.

NOTE:
1. Part-time Status: Prior to changing program status, changes in status must be conveyed in writing to the MSN Program Director and the student’s academic advisor. Students are strongly encouraged to avoid part-time status. As MSN courses are offered in a structured sequence, changes in a student’s status may require the student to wait one or more semesters before the missed required course(s) will be available. In addition, full-time students have priority over part-time students in course registration and admission.

2. Inactive Status: Students admitted to the MSN program, but unable to sequentially complete the program-of-study, may request, to be designated as inactive. This request must be submitted, in writing, to the MSN Program Director.

When an “inactive” student is ready to resume MSN course work, the student must request, in writing, to be re-designated as “active status”. This request must be received prior to March 1st. This request should be addressed to the MSN Program Director.

A student may retain the status of “inactive” for a maximum of two years. However, if the student is not re-designated to “active status” by the end of two years, the student will be automatically withdrawn from the MSN Program. Following the passage of two years, a student who desires to resume participation in the MSN Program will be required to repeat the formal MSN Program application and admission process.
3. A student will be automatically withdrawn from the MSN Program if he or she has been admitted but fails to register for the MSN classes by the designated WSU deadline for registration.

4. A student who stops participating in MSN coursework, and fails to notify their MSN faculty Academic Advisor and the MSN Program Director of the desire to change to an inactive “status”, will be automatically withdrawn from the MSN Program.

5. Due to the possibility of MSN Program curriculum revisions and/or developments, a student who changes his or her status to “part-time status” or “inactive status” may, upon re-designation to “active status” within the MSN Program, be required to complete additional program requirements.

6. A student who has been designated “withdrawn” from the MSN Program, whether the withdrawal was voluntary or involuntary, will be required to repeat the formal MSN Program application process.

**Graduation**

1. A total of 40 credit hours are required for graduation. These include thirty-six (36) theory credits and four (4) MSN Project Credits.

2. Based upon the Accreditation Commission for Education in nursing, MSN students are required to complete coursework and the MSN Project within a total of three (3) academic years of official admission to the MSN Program. The period of time as an “inactive” student is not included in the three (3) academic year completion requirement. All MSN Program requirements should be completed within three (3) years following admission to the program. MSN Program coursework/credits older than six academic years will not apply toward graduation.

**SECTION 4  
CURRICULUM DESCRIPTION**

The Weber State University School of Nursing Master of Science in Nursing Degree (MSN) curriculum is designed to prepare the graduate to practice in advanced nursing roles. The MSN program is designed to educate nurse administrators and nurse educators employed within a variety of academic and healthcare institutions.

The MSN Program is comprised of a total of 40 nursing credits. The MSN Core Curriculum represents 15 nursing credits, followed by 21 nursing credits in either the Nurse Administrator Concentration (track) or Nurse Educator Concentration (Track), and 4 credits for completion of a the Master’s Project requirement.
SECTION 5
CURRICULUM PATTERN

Prerequisite  Advanced College Writing (*pre-approval required*)  3 cr

Core MSN Program Curriculum

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6100</td>
<td>Research Methods</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6141</td>
<td>Advanced Nursing Theory</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6180</td>
<td>Improving Patient Care and Nursing Practice Through Information Systems and Technology</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6120</td>
<td>Research Statistics</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6160</td>
<td>Evidence-Based Practice</td>
<td>3 cr</td>
</tr>
</tbody>
</table>

Nurse Administrator Curriculum

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6200</td>
<td>Theoretical Foundations of Nursing Administration</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6324</td>
<td>Financial Issues in Nursing Administration</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6340</td>
<td>Quality Improvement, Patient Safety, and Risk</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6360</td>
<td>Scope and Practice of Nursing Administration</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6380</td>
<td>Retaining and Developing a Competent Workforce in Nursing</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6400</td>
<td>Nursing Administrator Residency</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6800</td>
<td>Master’s Project (Development and Implementation)</td>
<td>4 cr</td>
</tr>
</tbody>
</table>

Nurse Educator Curriculum

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6500</td>
<td>Theoretical Foundations of Nursing Education</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6520</td>
<td>Curriculum Development for Nurse Educators</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6540</td>
<td>Measurement of Competence and Outcomes in Nursing Education</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6560</td>
<td>Socialization in the Role of Nursing Educator</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6580</td>
<td>Clinical Nursing Instruction in Higher Education and Community Settings</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6600</td>
<td>Nursing Instruction in Higher Education and Community Settings</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6700</td>
<td>Teaching Residency</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6800</td>
<td>Master’s Project (Development and Implementation)</td>
<td>4 cr</td>
</tr>
</tbody>
</table>

Elective Courses

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6850*</td>
<td>MSN Project Development and Implementation Extension Course</td>
<td>1 cr</td>
</tr>
</tbody>
</table>
*This course is for students who have completed all course requirements for MSN, but have not completed the MSN project. Students must register for a minimum of one credit of MSN 6850 to remain enrolled in the MSN program.

**SECTION 6**  
**FULL TIME STUDY PLAN (NURSE EDUCATOR TRACK)**

<table>
<thead>
<tr>
<th>Semester One</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6100 Research Methods</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6141 Advanced Nursing Theory</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6180 Information Systems</td>
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</table>

<table>
<thead>
<tr>
<th>Semester Two</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6120 Research Statistics</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6160 Evidence-Based Practice I</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6500 Theoretical Foundations: Education</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6800 I Master’s Project</td>
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</table>

<table>
<thead>
<tr>
<th>Semester Three</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6520 Curriculum Development</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6540 Measuring Competence in Education</td>
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</tr>
<tr>
<td>MSN 6560 Socialization in the Role of Nurse Educator</td>
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</tr>
<tr>
<td>MSN 6800 II Master’s Project</td>
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<table>
<thead>
<tr>
<th>Semester Four</th>
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<tbody>
<tr>
<td>MSN 6580 Clinical Nursing Instruction</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6600 Nursing Instruction in Higher Ed</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6700 Nurse Educator Residency</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6800 III Master’s Project</td>
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**FULL TIME STUDY PLAN (NURSE ADMINISTRATOR TRACK)**

<table>
<thead>
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</thead>
<tbody>
<tr>
<td>MSN 6100 Research Methods</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6141 Advanced Nursing Theory</td>
<td>3 cr</td>
</tr>
<tr>
<td>MSN 6180 Information Systems</td>
<td>3 cr</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Semester Two</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN 6120 Research Statistics</td>
<td>3 cr</td>
</tr>
</tbody>
</table>
SECTION 7
ADVISEMENT POLICY & PROCESS

Student Responsibilities

1. Students will be assigned a graduate program advisor upon entry into the program. The MSN Department secretary will provide the name of the assigned advisor to students.

2. Students will access the graduation evaluation through the e-Weber portal, student area. Guidelines are provided to access personal degree evaluation and/or transcripts (See Procedure for accessing degree evaluation below).

3. Students will print two copies of the Degree Evaluation from Cat tracks. They will keep one copy for their personal records and will give one copy to their academic advisor. Students will sign the copy that they will give to their advisor.

4. On or before week three of the semester, students will email their advisor stating that they have completed the review and detailing any identified problems. Each student will make an appointment to meet with an advisor on campus or by phone each semester.

5. When attending the second face-to-face class meeting on campus each semester, students will leave a signed copy of their graduation evaluation form with their advisor. Students may also give the advisement form to the department secretary (room 420b). Faculty will compare
the completed form to the records in the student file. The faculty advisor will then contact students by phone or email regarding any issues.

6. For any consultation, students should make an appointment to meet in person, by phone, or virtual interview, with their advisor.

7. Students are strongly encouraged to complete a “Degree Evaluation” each semester until graduation.

8. The MSN student is ultimately responsible to ensure that all MSN program requirements are fulfilled.

Procedure for Accessing Degree Evaluation

1. Go to e-Weber portal and choose “current student”. Use Wildcat ID and password to login.

2. Go to student services tab; find the box with title “Cattracks.”

3. Select “Cattracks Degree Evaluation and Planning Tool.” For information about using the tool, click on the FAQ link.

4. Select the “Degree Evaluation” Tab.

5. Print two copies of the Degree Evaluation Form. Sign one copy to give to your advisor.

6. Email your advisor that you have completed your review and then turn in signed Faculty form to your advisor.

SECTION 8
COMMUNICATION WITH STUDENTS

1. Each student enrolled in the MSN program is required to establish and maintain a WildCat E-mail account through the Weber State University e-Portal. This will be the only electronic option for receiving information from faculty or the MSN Program Administrative Office. Students should call WSU Technical support for problems with e-mail accounts (ext. 7777).

2. Set up an e-mail account by going to http://departments.weber.edu/it/eservices/ and following the links and instructions. If you have questions or concerns, contact the MSN Program secretary. Check your Wildcat E-mail frequently for important information.

3. Each student enrolled in the MSN program will be asked to check the MSN Bulletin Board Website throughout each semester of enrollment for MSN Program information and updates.
SECTION 9
SCHOLARSHIP INFORMATION

School of Nursing scholarships are available to MSN students. Need-based scholarship information and applications can be obtained through the WSU Scholarship Office, http://weber.edu/scholarships/, by accessing the Student bulletin Board, www.weber.edu/Nursing/happening/bulletinboard.html, or by contacting the Scholarship Office directly:

Financial Aid and Scholarship Office
120 Student Service Center
1136 University Circle
Ogden, Utah 84408-1136
Phone: 801-626-7569
Fax: 801-626-7408

SECTION 10
MSN RESIDENCY EXPERIENCES

Students enrolled in either the administrator or educator specialty tracks are required to complete 85 hours of residency. Students should be planning the hours required for residency well before they enroll in the residency course.

- Think about where you would like to do your residency and with whom within the first semester in the program.
- Frequently your goals will dictate where you should plan your residency experience. For instance, if your background is in community-based organizations and you want to be exposed to more complex and diverse organizations then you may want to consider an urban setting for your residency experience.
- In your professional life, you may have seen someone whose style you admired or who had talents that you could learn from. This person could potentially be your preceptor.
- For administrator students, the preceptor candidate must have a master’s degree in a related field with a minimum of a BSN in nursing. Administration experience is also required. Refer to the Residency Handbook for more details about qualifications and responsibilities.
- For educator students, the preceptor candidate must have a minimum of a master’s degree in nursing education. Education experience is also required. Refer to the Residency Handbook for more details about qualifications and responsibilities.
- The preceptor may not be someone who evaluates you in your work role. Therefore, no direct accountability line should exist between you and your preceptor.
- We, the faculty, strongly suggest that you look for a preceptor outside of your home organization. The experiences you will have and the perspectives you will discover will expand your portfolio, and make for a more challenging experience.
SECTION 11
MSN PROJECT REQUIREMENTS

The MSN Scholarly Project is graduation requirement for completion of The WSU Master of Science Nursing Program. The MSN Project is a self-directed, faculty-supported learning activity that is under the guidance of a MSN Project Chair and MSN6800-I, 6800-II, and 6800-III instructor(s). The MSN Project is a thorough study of a specific topic that results in a written synthesis of the literature and the integration of the information into a culminating program or product that addresses an identified issue or need.

SECTION 12
OUTCOMES AND LEARNING COMPETENCIES FOR THE MASTER OF SCIENCE PREPARED NURSE

The MSN program outcomes and student learning competencies were developed using nationally established national nursing standards and guidelines. These publications include the 2005 PEW Health Professions Commission Report, the American Association of Colleges of Nursing 2000, the American Nurses Association 2004: Scope and Standards for Nurse Administrators, Quality and Safety Education for Nurses (2010), and the National League for Nursing 2005: Scope of Practice for Academic Nurse Educators. The WSU MSN Program Outcomes are:

Outcome #1  80% of MSN students will graduate from their programs within 150% of the stated length of the program.

Outcome #2  80% of MSN graduates seeking employment will be involved in role related professional practice within 6-12 months of graduation.

Outcome #3  80% of MSN graduate respondents will rate their overall satisfaction with their program of learning at or above 3.0 out of 5.0 on the SON End of Program Evaluation Surveys.

Outcome #4  80% of MSN graduate respondents will rate their overall program of learning satisfaction at or above 3.0 out of 5.0 on the SON Alumni Survey.

Outcome #5  80% of nursing employers will rate their overall satisfaction with WSU MSN graduates at or above 3.0 out of 5.0 on the SON Employer Survey.
<table>
<thead>
<tr>
<th>SCHOOL OF NURSING CORE COMPETENCIES</th>
<th>MSN Core Competencies</th>
<th>MSN Nurse Educator Track Competencies</th>
<th>MSN Nurse Administrator Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Centered Care</td>
<td>Patient Centered Care</td>
<td>Patient Centered Care</td>
<td>Patient-Centered Care</td>
</tr>
<tr>
<td>Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patients’ preferences, values, and needs.</td>
<td>Create and direct collaborative patient care environments that promote the development of nursing expertise that includes the patient perspective.</td>
<td>Design level-appropriate contemporary program outcomes and curricula that prepare graduates to function effectively in the healthcare environment with a focus on the patient.</td>
<td>Design and establish the professional practice environment and associated staffing that support interdisciplinary roles, innovative workflow models, and patient-centered care.</td>
</tr>
<tr>
<td>Teamwork &amp; Collaboration</td>
<td>Teamwork &amp; Collaboration</td>
<td>Teamwork &amp; Collaboration</td>
<td>Teamwork &amp; Collaboration</td>
</tr>
<tr>
<td>Function effectively within nursing and inter-professional teams, fostering communication, mutual respect, and shared decision-making to achieve quality patient care.</td>
<td>Apply advanced communication strategies to support high-functioning interdisciplinary teams that support high quality, safe patient care.</td>
<td>Participates in interdisciplinary efforts to contribute to the professional standing of nursing and address the healthcare education needs in local, national, and international arenas.</td>
<td>Design high functioning interdisciplinary care teams and lead initiatives to improve patient care.</td>
</tr>
<tr>
<td>Evidence-Based Practice (EBP)</td>
<td>Evidence-Based Practice (EBP)</td>
<td>Evidence-Based Practice (EBP)</td>
<td>Evidence-Based Practice (EBP)</td>
</tr>
<tr>
<td>Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.</td>
<td>Evaluate available evidence, expert opinion, and patient preferences to determine best practice. Evaluate the feasibility and appropriate evaluation methods for planned EBP interventions.</td>
<td>Uses evidence to support best practices in teaching andragogy as well as the development of educational experiences.</td>
<td>Establish standards utilizing evidence based practice as the foundation of nursing practice and patient care delivery.</td>
</tr>
<tr>
<td>Quality Improvement</td>
<td>Quality Improvement</td>
<td>Quality Improvement</td>
<td>Quality Improvement</td>
</tr>
<tr>
<td>Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems, including participating in healthcare policy.</td>
<td>Develop policies and processes based on identification of best practice that improve the quality and safety of nursing care provided by health care systems.</td>
<td>Incorporates quality improvement strategies in the development and evaluation of educational programs.</td>
<td>Develop efficient patient care models and policies that ensure high quality care and compliance with regulatory requirements.</td>
</tr>
<tr>
<td>SCHOOL OF NURSING CORE COMPETENCIES</td>
<td>MSN Core Competencies</td>
<td>MSN Nurse Educator Track Competencies</td>
<td>MSN Nurse Administrator Competencies</td>
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<tr>
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<tr>
<td><strong>Patient Safety</strong></td>
<td><strong>Patient Safety</strong></td>
<td><strong>Patient Safety</strong></td>
<td><strong>Patient Safety</strong></td>
</tr>
<tr>
<td>Minimize risk of harm to patients and providers through both system effectiveness and individual performance</td>
<td>Incorporate patient safety principles into the development of comprehensive patient safety goals and safety education for nurses.</td>
<td>Incorporates national patient safety resources that promote patient and provider safety in the practice arena.</td>
<td>Develop a culture of safety inclusive of the interdisciplinary care team, the patient, and the family. Incorporate transparency and provide tools and resources for the creation of a safe culture.</td>
</tr>
<tr>
<td><strong>Informatics</strong></td>
<td><strong>Informatics</strong></td>
<td><strong>Informatics</strong></td>
<td><strong>Informatics</strong></td>
</tr>
<tr>
<td>Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.</td>
<td>Formulate policies, processes, and/or educational plans that leverage information technology to optimize information management, reduce errors, and support clinical decision-making.</td>
<td>Utilizes information technology to support educational practice and incorporates the use of informatics to improve quality healthcare and innovative teaching.</td>
<td>Recommend and optimize information technologies to support evidence based nursing practice, clinical decision making, and administrative functions.</td>
</tr>
</tbody>
</table>