

Baccalaureate of Science in Nursing



Nursing Student Handbook 2022/2023

Plymouth State University provides equal opportunity and affirmative action in education and employment for qualified persons regardless of race, color, religion, sex, national origin, age, disability, or veteran status.

Registration at the University assumes the student's acceptance of all published regulations, including

those that appear in this and all other publications. Plymouth State University reserves the right to make changes in curricula, degree requirements, course offerings, and all regulations when in the judgment of the faculty, the Chancellor, the President, or the Board of Trustees if such changes are in the best interest of the students and the University. The Baccalaureate of Science in Nursing Program Faculty reserve the right to review and make recommendations to revise this handbook annually. Should there be significant changes in policies and guidelines, students will be given copies of the changes.

The PSU Nursing Student Handbook is supplemental to the PSU Academic Catalog

Department of Nursing Bachelor of Science in Nursing Program

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Department of Nursing PSU Nursing Student Handbook 8/2021 DD, update 1/2022DD, 8/2022kc, 10/2022 kc

Accreditation

The Bachelor of Science in Nursing Program at Plymouth State University is accredited by the Commission on Collegiate Nursing Education (http://www.aacnnursing.org/CCNE).

Approval

The Plymouth State University Department of Nursing Bachelor of Science in Nursing Program has full approval of the New Hampshire Board of Nursing. https://www.oplc.nh.gov/new-hampshire-board-nursing

Welcome to Plymouth State University Nursing Program

Welcome to the wonderful world of nursing,

As you embark on the journey toward becoming a professional nurse Plymouth State Nursing will be here to guide you through the process. The role of the nurse is more than a job, it is a profession that embodies a contract with society to provide safe, evidenced based, compassionate care to all patients, in all settings. While at PSU, you will learn the science and the art of delivering nursing care. We, the nursing faculty and staff, will guide you through the hard work of acquiring vast knowledge of the human condition while coaching you to listen to the patient story. We will join you in your journey, celebrating the success and supporting you during the challenges. We wish you well.

Let the journey begin!

Donna

Dr. Donna Driscoll DNP, RN, CEN Director of Nursing Plymouth State University

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SECTION I DEPARTMENT OF NURSING



Department of Nursing Organizational Chart

President, Donald Birx PhD Provost and Vice President of Academic Affairs, Nathaniel Bowditch Director of Nursing, Donna Driscoll DNP, RN, CEN Karen Coughlin **Advisory Council** Academic Operations Manager Chantal Julie Cote Dawn Kerriann Tracia Julie Fagan Monahan, Reynolds O'Shana LaPlante DNP, RN, EdD, MSN, MSN, RN MSN, RN MSN APRN BSN, RN CNE RN Laura Rodgers MSN, RN-BC Adjunct Clinical Faculty

Nursing Program Mission, Vision, Program & Educational Philosophy, Cluster

Mission

The Department of Nursing's mission is to provide nursing curricula that supports excellence in nursing education. We educate future nursing leaders to provide innovative, high quality, accessible health care to the geographic regions of Plymouth and beyond, connecting with local and global health care communities. We teach practices that promote the health and well-being of diverse individuals, families, communities, populations, and systems. We graduate competent nurses who make sound clinical judgments, communicate effectively, and make decisions using the best evidence available, to practice in an interdisciplinary global healthcare environment.

Vision

The Department of Nursing's vision is to prepare nurses to deliver patient-centered care as members of an interdisciplinary team, emphasizing teamwork and collaboration, safety, evidence-based practice, quality improvement, and informatics.

Program Philosophy

The Plymouth State Nursing Program derives its philosophy from the Plymouth State University values and motto, *Ut Prosim: That I May Serve*. The Department of Nursing embraces innovative and creative approaches to interdisciplinary, culturally sensitive nursing practice. The faculty believe the purpose of a collegiate undergraduate education is to prepare the professional nurse whose practice is informed by theory and research to positively impact communities. The philosophy is further grounded in the competencies defined by the Nurse of the Future literature (MA Dept. of Higher Education, 2010) and the American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education.

Educational Philosophy

The PSU Nursing Department provides a supportive learning environment for nursing students in the classroom, clinical arena, and the greater community. The pursuit of a career in the profession of nursing implies a spirit of lifelong learning; in that vein, the Nursing Department seeks to partner with students and communities of interest to create a mutual teaching and learning continuum wherein we all learn from each other. This spirit of inquiry is encouraged through discovery of the arts and sciences of nursing, using a problem-solving approach, whereby students and faculty alike find meaning in their nursing practice, within a framework of mutual respect. The essence of nursing lies in service to people in need; the PSU motto embraces this spirit of service to our community.

Cluster: Plymouth State Nursing is in the Health & Human Enrichment Cluster

Program Goals

Based on the Mission, Vision, and Philosophy of the Department of Nursing, the following program goals have been identified. The program goals of the nursing program are to:

- 1. Prepare graduates to provide safe, evidence-based, patient-centered care that reflects ethical clinical judgement and inter-professional collaboration (NoF: Patient-Centered Care, Evidence-Based Practice, Teamwork and Collaboration, Safety) (EPO: 1, 4, 5, 6) (Essentials: I, II, III, IV, V, VI, VII, VIII, IX)
- 2. Provide an innovative program of study that is responsive to the changes in the healthcare environment (NoF: Quality Improvement) (EPO: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10) (Essentials: I, II, III, IV, V, VI, VII, VIII, IX)
- 3. Promote collaboration and partnerships within the communities of New Hampshire and the world beyond (NoF: Teamwork and Collaboration) (EPO: 2, 3, 4, 5, 6, 8, 9, 10) (Essentials: II, V, VI, IX)
- 4. Develop students' critical thinking skills, to solve problems encountered on the work unit, considering the health care system's technological resources, agency policies, and client/family needs, to deliver quality care. (NoF: Systems Based Practice & Informatics) (EPO: 2, 3, 4, 5, 6, 7,9) (Essentials: I, III, IV, V, VIII, IX)
- 5. Promote effective communication across all nursing practice settings, considering psychosocial, physiological, developmental, spiritual, cultural and educational concerns, in order to support positive client outcomes. (NoF: Communication & Leadership) (EPO: 1, 3, 4, 5, 8, 9, 10) (Essentials: I, VI, VII, IX)

End of Program Outcomes

At the end of the baccalaureate nursing curriculum, graduates will:

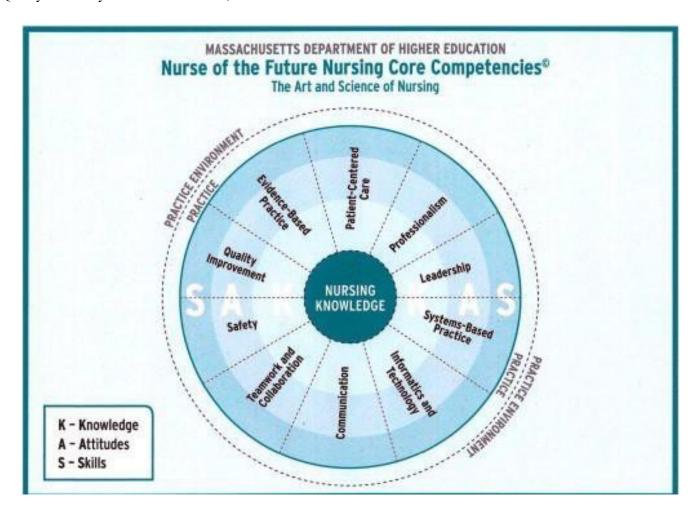
- 1. Demonstrate accountability for practicing nursing within established moral, legal, ethical, regulatory, and humanistic principles.
- 2. Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal quality and value.
- 3. Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.
- 4. Identify, evaluate, and use the best current evidence coupled with clinical expertise and consideration of patients' preferences, experience and values to make practice decisions.
- 5. Function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development.
- 6. Minimize risk of harm to patients and providers through both individual performance and system effectiveness.
- 7. Use data to monitor outcomes and care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care.
- 8. Influence the behavior of individuals or groups of individuals within their environment in a way that will facilitate the establishment and acquisition/achievement of shared goals.
- 9. Deliver holistic nursing care and advocate for health promotion and disease prevention strategies at the individual, family, community, and global levels.
 - Demonstrate effective communication skills with clients that foster mutual respect and shared decision making to enhance patient satisfaction and health outcomes.

Organizing Framework

The organizing framework of the nursing curriculum is derived from the philosophy and rooted in the competencies defined by the *Nurse of the Future*:

- Patient-Centered Care
- Evidence-Based Practice
- Teamwork and Collaboration
- Quality Improvement
- Leadership
- Informatics
- Professionalism
- Communication
- Systems-Based Practice
- Safety

The curriculum of the Department of Nursing reflects these competencies as well as professional nursing standards and guidelines. The curriculum incorporates knowledge and skills of both the standards of the American Nurses Association (Scope and Standards of Practice), the Essentials of Baccalaureate Education in Professional Nursing, AACN, Quality and Safety Education for Nurses, and the Nurse of the Future ©.



The nine Essentials of Baccalaureate Education are:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice

A solid base in liberal education provides the cornerstone for the practice and education of nurses.

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety

Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

Essential III: Scholarship for Evidence Based Practice

Professional nursing practice is grounded in the translation of current evidence into one's practice.

Essential IV: Information Management and Application of Patient Care Technology

Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

Essential V: Health Care Policy, Finance, and Regulatory Environments

Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes

Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

Essential VII: Clinical Prevention and Population Health

Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice

Essential VIII: Professionalism and Professional Values

Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.

Essential IX: Baccalaureate Generalist Nursing Practice

The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

SECTION II PROGRAM INFORMATION

Plymouth State University: Nursing Curriculum Sequencing Grid (Revised 2/2022) 2022/2023

SEMESTER 1 FALL-Y1	Taken	Credits	Semester/Total Credits
BI 2110 Human Anatomy/Physiology I *	Takell	3	Jemester/ rotal credits
BI 2130 Human Anatomy/Physiology I Lab*	+	1	
IS XXX The Wicked Problem		4	
PS 2015 Intro to Psych *	+	4	
Gen Ed		3	
Gen Ed		3	
SEMESTER 2 SPRING-Y1	DUNNING TO		Competer Credite 19
BI 2120 Human Anatomy/Physiology II *	RUNNING TO	3	Semester Credits 18
BI 2140 Human Anatomy/Physiology II Lab*		1	
MA 2300 Statistics I *		3	
EN 1400 Composition *		4	
Gen Ed		3/4	
SEMESTER 3 FALL-Y2	RUNNING TO		Semester Credits 14-15
PS 2055 Life-Span Development		4	
NR 2100 Foundations of Professional Nursing		3	
NR 2300 Biochemistry for Nurses		3	
Gen Ed		3/4	
Gen Ed		3/4	
SEMESTER 4 SPRING-Y2	RUNNING TO		Semester Credits 16-18
BI 2340 Microbiology for Nurses		4	
NR 2750 Pathophysiology		4	
NR 2550 Health Assessment		3	
Elective		3/4	
Elective		3	
SEMESTER 5 FALL-Y3	RUNNING TO	OTAL:	Semester Credits 16-18
NR 3020 Intro to Patient Centered Care (DICO)**		3	
NR 3150 Pharmacology		4	
NR 3052 Clinical Applications of Patient Centered Care**		4	
NR 3095 Evidence Based Practice Mental Health Nursing		2	
NR 3700 Clinical Applications of Psychiatric Mental Health Nursing		1	
SEMESTER 6 SPRING-Y3	RUNNING TO	OTAL:	Semester Credits 14
NR 3035 Nursing Care of Children**		2	
NR 3135 Clinical Applications of Pediatric Wellness and Illness**		1	
NR 3077 Clinical Applications of Community Based Care		1	
NR 4020 Global Health & Population Based Health Care (GACO)		3	
NR 3070 Health and Wellness of Older Adults (WECO)		3	
NR 3550 Clinical Applications of Health and Wellness of Older Adults		2	
SEMESTER 8 FALL-Y4	RUNNING TO		Semester Credits 12
NR 4000 Evidenced Based Practice in Med Surg Nursing**		4	
NR 4015 Maternal Newborn Care**		2	
NR 4100 Clinical Applications EBP Med Surg Nursing**		3	
NR 4150 Clinical Applications of Maternal Newborn Care**		1	
NR 4310 NCLEX-RN Success I		1	
NR 4600 Leadership, Collaboration, & Quality Health Care Systems (TECO)		3	
Elective		3/4	
SEMESTER 9 SPRING-Y4	RUNNING TO	OTAL:	Semester Credits 17-18
NR 4050 Nursing Leadership for Acute Care Nursing (INCO)**		3	
NR 4060 Research Process & EBP (QRCO) WRCO)		3	
NR 4360 NCLEX-RN-Success II		2	
NR 4082 Clinical Applications of Leadership & Quality Improvement**		6	
	RUNNING TO	OTAL:	Semester Credits 14

*pre-requisite **co-requisite

DIRECTIONS GENERAL ED COURSES				
Minimum of 16 credits required and 3 credits under each category				
Gen Eds	Course ID	Credits		
CTDI				
PPDI				
SSDI				
CHOICE				
CHOICE				

ELECTIVES			
Number will vary to reach 120 total credits for program completion			
Course ID	Credits		
	l .		

Student Organizations and Committees

PSU Student Nurses Association

Student nurses are encouraged to participate in professional nursing organizations and activities. Time and location of membership meetings are determined by the Executive Board. An Executive Board member's term shall last from the second Friday in April to the second Friday in April of the following year. At each annual March meeting of the Student Nurses Association, new executive board members will be elected.

Student representatives to the Curriculum Committee (one from each class is encouraged) are selected through the Student Nurses Association and represent the student body as liaisons regarding the nursing program curriculum. Liaisons are asked to take an active role in shaping the curriculum and the voice of the liaisons is a valued aspect in decision-making.

The executive board members are also part of the Nursing Department Advisory Board.

Sigma Theta Tau International Eta Iota Chapter

Mission

The mission of the Honor Society of Nursing, Sigma Theta Tau International (STTI) is advancing world health and celebrating nursing excellence in scholarship, leadership, and service.

Vision

The vision of the Honor Society of Nursing, Sigma Theta Tau International is to be the global organization of choice for nursing.

Membership to Eta Iota at Large Chapter is open to students enrolled in the Plymouth State University undergraduate nursing program, and who meet the following criteria, are invited to join.

- a. Have completed ½ of the nursing curriculum.
- b. Achieve academic excellence (at schools where a 4.0 grade point average system is used, this equates to a 3.0 or higher);
- c. Rank in the upper 35 percentile of the graduating class.
- d. Meet the expectation of academic integrity

Student Awards

The Academic Excellence Award is awarded to a graduating student with the highest over-all GPA.

The Clinical Excellence Award is awarded to a graduating student who:

- Establishes caring interpersonal relationships with clients.
- Functions as a client advocate in clinical interventions.
- Displays a knowledge base necessary for strong critical thinking behaviors in client interactions.
- Displays creativity during clinical experiences.
- Exhibits a high degree of clinical accountability and responsibility.
- Provides clinical role modeling behaviors for peers.
- Possesses strong communication skills in the clinical setting.
- Exhibits leadership skills in peer and community relations.

The Nurse of the Future Award is awarded to a graduating student who demonstrates the following:

- Exemplary knowledge, skills, and attitudes as they relate to all of the nurse of the future competencies, but leadership.
- Strong leadership skills that can influence future nursing workforce force initiatives. These may include
 service in leadership capacities in the Student Nurses Association; service on Department and University
 committees; community activities; leadership, support, and sharing of special expertise with student peers,
 or other activities that represent service and commitment to the betterment of society and their chosen
 profession.

Nursing Faculty Award for Outstanding Achievement is presented during convocation and goes to a student who has overcome personal and/or academic challenges and blossomed as a student of nursing at Plymouth State University. The deserving student of this award has not only engaged in but has taken charge of their own learning, utilized campus and community resources to their fullest potential, and demonstrates a passion for nursing in his or her academic and personal endeavors.

The Director's Award is awarded to a graduating student. The Director will select this student with input from the faculty. This student will:

- Exemplify outstanding academic and professional achievement.
- Be a senior student anticipating of degree requirements.
- Have outstanding overall academic and clinical achievement.
- Exhibit leadership in pre-professional (e.g., leadership in the Student Nurses Association; service on department or college committees; community activities) or professional activities (in the case of RN students, New Hampshire Nurses Association or other nursing specialty activities; nursing service to the community)

SECTION III POLICIES & PROCEDURES

Core Performance Standards and Functional Abilities for Admission in The Bachelor of Science in Nursing Program

All applicants and continuing students must meet the core performance standards and functional abilities.

Standard 1. Critical Thinking and Mental Abilities: Must have critical thinking ability sufficient for clinical judgment. Examples of necessary functional abilities associated with this standard include (not an all-inclusive list): Has the ability to interpret, investigate, communicate, and comprehend complex situations; identify cause and effect relative to clinical situations; ability to make decisions and assess situations under varying degrees of stress; must be able to read and comprehend detailed charts, reports, journal articles, books, etc.; capable of performing all arithmetic functions (addition, subtraction, multiplication, division, ratios, and simple algebraic equations).

Standard 2. Communication and Interpersonal Abilities: Must be able to read, write, speak and comprehend English with sufficient skill to communicate effectively verbally and nonverbally. Must have interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds. Examples of necessary functional abilities associated with the standard include (not all-inclusive): Has the ability to establish rapport with clients and their families, peers, agency personnel, and faculty; explain treatment procedures; initiate health teaching; and document and interpret nursing actions and client responses.

Standard 3. Physical Abilities: Must have physical abilities sufficient to move from room to room and maneuver in small spaces and gross and fine motor abilities sufficient to provide safe and effective nursing care. Examples of necessary functional abilities associated with the standard include (not all- inclusive): able to move around in client's room, work spaces, treatment areas and administer CPR; calibrate and use equipment; position and transfer clients; capable of lifting up to 50 pounds independently; capable of pushing up to 200 pounds independently; capable of reaching 18 inches above head without the use of mechanical devices to elevate themselves; capable of sitting, standing, walking for extended periods of time; experience no limitations when bending, stooping, sitting, standing, walking (i.e., uses no mechanical devices to assist themselves which would impede the safety of a client); ability to move to and respond to an emergency situation in a timely manner; and able to document in a clear legible manner.

Standard 4. Hearing: Auditory ability sufficient to monitor and assess health needs. Examples of necessary functional abilities associated with this standard include (not all-inclusive): Able to hear auscultator sounds, monitor alarms, and emergency signals; able to hear soft whispers of clients and families; able to tolerate loud noise for extended periods of time. Assistive devices must correct hearing to this degree and must be worn at all times during clinical practice.

Standard 5. Vision: Must have the visual ability sufficient for observation, assessment, and intervention necessary for nursing care. Examples of necessary functional abilities associated with this standard include (not all-inclusive): Observe client responses, accurately read equipment, gauges, and monitors; vision correctable to 20/40, normal depth perception, and ability to distinguish colors; and ability to tolerate offensive visual situations.

Standard 6. Smell: Smelling ability sufficient to monitor and assess health needs. Examples of necessary functional abilities associated with this standard include (not-all inclusive): Have ability to differentiate between various types of smells and odors, and ability to tolerate offensive odors.

Student Behavioral Expectations

1. Student Code of Conduct

Plymouth State University Department of Nursing regards students as adults and expects them to accept responsibility for their behavior, whether acting individually or in a group. Students are expected to be considerate of the rights of others and conduct themselves in a manner that is consistent with the values embraced by the University and reflected in its various policies, contracts, rules, and regulations. Consumption of alcohol or use of tobacco products while in PSU Nursing uniform is prohibited. For information regarding student conduct please refer to: https://www.plymouth.edu/office/dean-of-students/student-rights-and-code-of-conduct/

2. PSU Department of Nursing endorses a culture of civility and respect and expects students to display civil and professional behaviors at all times. Student behaviors and/or performance should promote a healthy environment and not present a danger (or reasonable assumption of danger) to a student/person/client/faculty.

Students should understand that their behavior in and out of the classroom will have positive and negative consequences for themselves and others. Students have a responsibility to:

- a. take learning seriously: attend class, be prepared, participate in discussions, ask questions, and complete assignments on time.
- b. treat faculty, staff, and fellow students with respect.
- c. contribute to the enrichment of the University and the larger community.
- d. protect and preserve property belonging to others and the University.
- e. be aware of how lifestyle choices affect academic success and personal growth.
- f. be knowledgeable of and comply with the University policies as outlined in the Student Handbook, University Catalog, and course syllabi.

3. Personal Responsibility

Each student must honor his/her responsibilities and modify behavior to be in compliance with the above stated expectations as requested by the institution and/or members of this learning community.

Inclement Weather

- 1. In case of inclement weather, decisions about canceling or delaying classes will be made as follows:
 - a. If classes are cancelled according to the PSU main website, then classes or clinical practica will be cancelled.
 - b. If classes are delayed according to the PSU main website, then classes or clinical practica will be delayed as follows:
 - i. Class delays: In the event there is a delay of PSU classes that meet for three hours or more, class will meet at the time the University opens.
 - ii. Clinical delays: In the event there is a delay of PSU classes, clinical will meet at the time the University opens.
 - c. If school is cancelled or delayed in the town that a clinical practicum is located, then the practicum shall also be cancelled or delayed.
 - d. Faculty reserves the right to cancel or delay a clinical practica with consideration of safe travel.
 - e. In the case that students anticipate leaving for a clinical practica prior to an official announcement

- from PSU, the clinical instructor shall contact the students regarding cancellation of the practica if necessary.
- f. Often nursing students are traveling, or preparing to travel, to clinical practica before inclement weather announcements are made. If a student perceives that the weather situation poses a threat to their personal safety, the student has the right to determine that travel is unsafe and should contact their course instructor.

Advisement Policy

The responsibility for completion of requirements for the degree lies with the student. Students and their nursing advisor are responsible for evaluating progress toward the degree and for interpreting and applying major requirements. Each semester, students must consult with their advisor prior to registration. During the advising session, the student and nursing faculty advisor shall agree upon a planned schedule of courses to promote completion of the nursing degree in a timely manner. At that time, the student will also be given their personal PIN needed for course registration. For additional information about advisement policies, please refer to the PSU website: https://www.plymouth.edu/office/undergraduate-advising/

Admission

1. Admission to the Nursing Program. Admission to the Nursing program is competitive and is not guaranteed. Students must be admitted to the University and to the Nursing program. See Nursing Admissions page: https://www.plymouth.edu/department/nursing/nursing-admissions/

The following criteria must be met in order to be considered for admission into the Nursing Program:

- a. Submit either an ATI TEAS V score at the "Proficient" level or above (to learn more about preparing for the test, please go to https://www1.atitesting.com/Solutions/pre-program/teas-for-nursing-and-allied-health.aspx), or a revised SAT (taken as of March 2016) with a minimum score of 1080, with a minimum score of 500 in the Evidence Based Reading and Writing component and the Math component or ACT with a score of 21 or better. Waived for fall of 2020 and 2021 due to the pandemic, continues through 2022
- **b.** Completion of high school chemistry and biology class
- **c.** GPA of 3.0 in High School science courses.
- **d.** GPA of 3.0 or greater in all high school courses combined
- e. Demonstration of math proficiency.
- **f.** Average to strong writing skills, demonstrated in the application essay.

2. Transfer Policy.

- a. This policy pertains to students requesting *internal transfer*, as a change of major, *external transfer*, from another institution or readmission to the program. (also see Readmissions policy)
- b. Currently, each cohort of nursing majors is limited; therefore, very few openings are expected yearly. Students requesting transfer may apply to the nursing department following these guidelines.
 - i. Procedure:

The following criteria must be met in order to be considered for admission. Applications are only valid for the year in which they are submitted.

- Score *proficient* or above on the TEAS V exam;
- Meet all progression requirements to begin the nursing sequence in the fall of the year requesting admission;
- Achieve a grade of 2.67 (B-) in all pre-requisite courses.

- c. Transfer Application Process:
 - Change of Major (internal transfer) applicants and PSU alumni must submit a letter of request, addressed to <u>psu-aprnursing@plymouth.edu</u>, addressed to the chair of the APR committee, by May 1St of the year requesting admission.
 - ii. **PSU alumni** must also contact the admissions office to discuss transfer credits.
 - iii. *External transfer* applicants must submit all required documents by May 1st, addressed to the PSU Admissions Dept.
 - iv. The Department of Nursing Admission, Progression & Retention Committee, applying a rubric, will review all transfer applications. Email: PSU-APRnursing@plymouth.edu

Selection is based on:

v.

- 1. Space available, according to the following priority order:
 - o Students returning from an approved leave of absence (LOA)
 - o Change of major students and PSU alumni (internal transfer)
 - o External transfer applicants
 - o Students applying for readmission
- 2. Meeting all progression requirements is required to enter the third nursing **semester** (see nursing curriculum).
- 3. If two or more students meet all progression requirements equally, admission will be based firstly on cumulative GPA in all prerequisite science courses taken, and secondly on the TEAS V score (higher is better).
- 4. Internal transfer students can request to be placed on a waiting list for the fall semester in the year they applied.
- vi. Applicants will be notified by June 15th of the decision. Wait list students will be notified as spaces open up until the fall add/ drop period closes in the year they apply.

Grading/Progression/Readmission

1. Nursing Department Grading Policy.

Letter Grade	Numeric Grade	Letter Grade	Numeric Grade
A	94-100	C	73-75
A-	90-93	C-	70-72
B+	86-89	D+	66-69
В	83-85	D	63-65
B-	80-82	D-	60-62
C+	76-79	F	59 and below

There will be no rounding up of grades; whereby, 80% (2.67) is the minimum passing grade for the nursing program, all grades will be derived from a calculation out to two decimal places to the hundredth.

2. Student Progression:

- a. Students must earn a grade of a B- (minimum numeric score of 80) or higher in all nursing prerequisite, co-requisite and required nursing (NR) courses and a PASS in all nursing (NR) clinical courses in order to progress in the program.
- b. A student who fails to achieve a minimum grade of B- in any nursing pre-requisite or co requisite courses must repeat the course and achieve a grade of B- or better to be eligible enroll in their subsequent nursing courses.
- c. If a student does not successfully repeat the pre-requisite or corequisite course with a grade of B- or better prior to the start of their next sequenced nursing course as part of their cohort progression, they

- are dismissed from the Nursing major. They may retake the pre/ co-requisite course one time and must successfully (B- or better) complete the course in order to reapply to the nursing major
- d. If a student does not meet the minimum grade (B- or better) in any two pre-requisite and/or corequisite courses they are dismissed from the nursing program and are not eligible to reapply.
- e. If a student does not meet the required minimum grade in any **one** nursing (NR) course, the student is dismissed from the Nursing major and may petition one time in writing for readmission if applicable. (See Readmission Policy).
- 3. Students must complete the program of all required nursing courses within five years of commencing nursing (NR) courses (significant extenuating circumstances such as medical issues, family issues, etc. will be reviewed on an individual



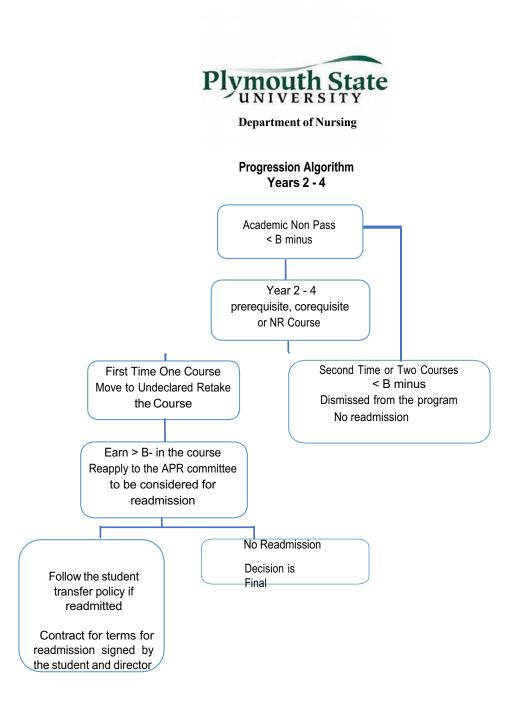
Department of Nursing

Progression Algorithm Year One

A&P I, II Pscyh, Statistics May repeat one course only. If lower than B- on two courses Dismissed



Must earn a B- or better on the course prior to Fall semester the next year.



3. Readmission: Nursing students requesting readmission to the PSU Nursing Program following dismissal for any reason may apply to the Admission, Progression & Retention Committee one time to be considered for readmission. Potential readmit students must reapply by submitting a letter to the Committee, formally requesting readmission to the program, which should address the reason(s) for their dismissal and identify a plan(s) for successful completion of the program, should the student be readmitted. The Committee will then require an interview with the potential student to review his/her proposals and explore the potential for the student's future success in the Program. If the student is granted readmission to the PSU Nursing Program, certain conditions may apply. If the APR Committee deems it necessary for the readmitted student to audit previously taken courses to support future success, the student will be expected to complete the required audited course(s) with a grade of at least an 80.00 (passing grade for nursing courses), with all course requirements completed as described in the course syllabus. Readmitted students will be required to agree to all terms of readmission as stated in their readmission letter, prior to readmission. The student will return a signed copy of the readmission letter to the Director of Nursing within 14 days after receipt of the readmission letter. Should the readmitted student fail to achieve a passing grade in any NR courses, including audited and clinical courses, or fail to meet other stipulations for readmission, the student will be permanently dismissed from the Program.

Admission, readmission request deadlines:

- For Re-entry in fall, date is May 1st
- For re-entry in spring, date is Oct. 1st
- a. In addition to the above, the following conditions must be met:
 - a. A course in which the student does not meet the minimum progression grade (B-) must be successfully repeated **before** enrolling in any subsequent nursing course.
 - b. Students who are granted readmission and subsequently fail to progress in the program will be permanently dismissed from the Nursing Program.
 - c. A student reapplying to the Nursing Program may additionally need to reapply to the University. Please see University readmission policies found in the Academic Catalog.
 - d. Students may reapply to the nursing program one time. If their readmission is denied they may appeal to the Office of Academic Affairs.

4. Progression in Clinical

All clinical courses are graded as Pass/Non-Pass. In order to progress, students must pass both the theory and clinical components of all courses with identified pre and co-requisites. Competencies identified in bold on all Clinical Evaluation Instruments are expected to be demonstrated at all times, and inability to demonstrate as such puts a student at risk of receiving a non-pass.

- a. NR 3052: If 50% of competencies are not met at the Developing or Satisfactory Level by the midsemester evaluation period, students will be considered "at risk" of not passing. ALL competencies need to be met at the Developing or Satisfactory Level by the end of the clinical experience during summative evaluation period. Any student performing at the Need Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.
- b. NR 4082: If 50% of competencies are not met at the Developing or Satisfactory Level by the midsemester evaluation period, students will be considered "at risk" of not passing. ALL competencies need to be met at the Developing or Satisfactory Level by the end of the semester during the summative evaluation period to receive a PASS for the course. Any student performing at the Needs Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.

c. NR 3054, NR 3057, NR 3059, NR 4055, NR 4057: If 50% of competencies are not met at the Developing or Satisfactory Level by the mid-semester evaluation period, students will be considered "at risk" of not passing. All competencies need to be met at the Developing or Satisfactory Level by the end of the semester during the summative evaluation period to receive a PASS for the course. Any student performing at the Needs Improvement or Unsatisfactory level at the end of the assigned clinical hours will not pass.



Department of Nursing

Clinical Non-Pass

Egregious Safety Concerns

Dismissal
No Option to Reapply

Unmet clinical performance expectations after remediation and/or inability to consistently demonstrate expected clinical behaviors

Dismissal

May Reapply to APR Committee One Time

Consider for Readmission

Follow the Internal Transfer Student Policy

Contract for terms for readmission signed by the student and director

No Readmission

Decision is final

Nursing MSC 58 17 High Street Plymouth, NH 03264 T(603)535-2115 F(603)535-2117

5. The Clinical Warning Process is applicable to all clinical courses and clinical attendance requirements.

The Process:

- The faculty or preceptor communicates with the student regarding clinical expectations and/ or unmet expected clinical performance. This can be in the form of a policy, syllabus, conversation or email.
- If a student has not made the necessary adjustment to meet the clinical requirements, in a specified time frame designated by the faculty, the next step is a verbal warning. This can be in the form of a conversation or email.
- If the situation is not remedied by the student in a specified time frame designated by the faculty, the next step is a written clinical warning. This warning puts the student at risk of a non-pass in clinical if the situation is not remedied in a specified time frame, designated by the faculty.
- If a student receives a second written clinical warning they will concurrently receive a non-pass for the clinical course.
- Egregious safety concerns or disregard for nursing department or host institution clinical policies precludes this process and is a clinical non-pass and potential dismissal from the program depending on the offense.

Attendance Policy

- 1. Nursing students are required to adhere to University's attendance policies. See current Undergraduate Academic Catalog for clarifications on excused and unexcused absences, and policies regarding computing grades for unexcused absences.
- 2. Class Attendance Policy: Class attendance is expected for all Plymouth State University Nursing theory classes. It is at the expectation of each faculty member to clarify class attendance policies in individual course syllabi.
- 3. Clinical/Lab Attendance Policy: It is expected that students will be present, on time, at all scheduled clinical experiences. Clinical competencies and course objectives are achieved through clinical learning. Missing clinical time places the student in jeopardy of not meeting clinical objectives and therefore clinical course failure may result. The faculty recognizes that reasonable accommodations must be made for excused absences (see PSU Undergraduate Class Attendance Policy for definition of excused absence).
- **4.** A healthcare provider's release stating that the student may resume clinical without restrictions (See Standard 3 under Core Performance Standards) is required if student is absent for three (3) or more consecutive days, or if absence required a hospital stay or surgical procedure, or for an official Medical Leave of Absence. SEE COVID-19 Appendix E

Clinical Absences

It is expected that students will be present, on time, at all scheduled clinical experiences. Clinical competencies and course objectives are achieved through clinical learning. Missing any clinical time places the student in jeopardy of not meeting clinical objectives and may not allow the instructor time to evaluate clinical performance, therfore clinical course failure may result. The student must contact the clinical instructor prior to the scheduled clinical start time.

Clinical absences are categorized as excused or unexcused.

Excused absences require that the student speaks to the clinical instructor prior to the absence and present professional documentation. Excused absences may be made up, if possible, depending on clinical site and instructor availability.

Unexcused absences (absences without supportive professional documentation) will not be made up. Students must recognize that unexcused absences place the student at risk of clinical course failure.

Assignment/Exam Policy

1. Assignment Due Dates:

Assignments and presentations for class, laboratory, and clinical courses are due by the assigned deadlines as stated in the course schedules of the course syllabi. The faculty must approve any exception to the due date in advance. It is the expectation of each faculty member to clarify grading of late assignments in course syllabi.

2. Examinations:

Examinations will only be administered on the dates and times scheduled. In the event of extenuating circumstances, the course faculty must approve alternate exam times in advance. If a student is absent from an

exam, the student may be administered an alternate version and/ or format exam that will assess the same content. Students who miss an exam for an unexcused absence are at risk for receiving a zero for that exam. All exams must be made up within 2 weeks of returning to class, and all subsequent exams will be administered as per the syllabus. Personal items such as cell phones (which must be turned to silent), personal calculators, other electronic devices, handbags, backpacks (etc.), are not permitted to be on person during exam time, except with prior Faculty Proctor approval. Students who violate this policy are at risk for receiving a zero for the exam. Students must have a laptop computer available for use for exams. Arrangements to borrow a computer through PSU Information Technology Department are the responsibility of the student in advance of the exam date. All teacher developed exams are administered using Respondus lockdown browser. All students must present to an exam with a computer with the functionality to employ the Respondus program during the exam.

Exams will be available for students to review with faculty throughout the course while it is running. Individual exam reviews are arranged through the course instructor. It is at the faculty's discretion if a group review is conducted. Exam review will occur after all students have taken the exam and the FINAL grades have been posted. Students DO NOT have permission to copy or print questions or answers from any exam or quiz. Students earning less than 80% on an exam should make an appointment with the faculty for an individual review of the exam.

3. Exam Blueprint

- Number of exams with NCLEX-RN style exam items per course will be 2 (minimum), and all courses will have a cumulative final exam with NCLEX-RN style exam items. Exception: All clinical courses, NR 3065, NR 4060, or when indicated on the course syllabus.
- Each nursing exam will have a minimum of 50 NCLEX-RN style exam items, and the final exam will have a minimum of 100 NCLEX-RN style exam items.
- Exam grades will be weighted as follows:
 - Unit Exams: combined weight will be between 50-60% of final grade calculation.
 - Cumulative Final: Will be between 20-30% of final grade calculation.
- The percentage of questions for each course/level of the program that will be written at the application/analysis levels are as follows:
 - 2000 level- at least 20%
 - 3000 level- at least 60%
 - 4000 level- at least 80%
- Scoring Exams:
 - Exam results will be available to students no sooner than 24 hours after and no later than 3 days after the exam has been closed
 - No partial credit will be given for alternate format items
 - · Grades for course exams are not rounded
 - All scores will be entered into the grade book to the second decimal point (hundredths)

4. Exam Review

Faculty have the option to do exam review during class time, one on one with the student at a mutually agreed upon designated time or by Exam Item Appeal

Exam Item Appeal Process

- In order to ensure consistency in follow-up on concerns that students have about certain exam items, students must use the Exam Item Appeal Form found in Appendix B.
- Students must submit the appeal form to the faculty member who administered the exam within 24 hours of grades being posted. Submissions beyond 24 hours will not be considered.
- The concerned student must identify the assigned course resource that contains the answer they chose and place this information in the appropriate section of the form, by providing the title of the resource and the page or slide number where the faculty can verify the information.

- Each item under appeal must be placed on a separate form. Only one student may affix their name to each form. If more than one student wants to appeal a question each must submit a form. Faculty will not discuss the appeal with any student without the form being completed and submitted according to these guidelines.
- The faculty has 24 hours to respond to the appeal.
- Should the appeal lead to an item grade change, that change will be applied to all test takers.

Grievance/Formal Complaints

The Department of Nursing policy related to student appeals, grievances, or complaints mirror the University policies. Examples of university policies and procedures that may relate to formal complaints include Bias Incidence, Citizen Complaint Process, Fair Grading Policy, Grade Appeals, FERPA, and Sexual Misconduct Policy.

For complaints that do not fall into the categories above, students or constituents are encouraged to attempt to resolve the issue or concern with the individual involved. If the situation cannot be resolved by that means, or if the nature of the problem precludes discussion with the individual, the matter may be brought to the attention of the Director. The director will attempt to resolve the matter. If these meetings do not provide a satisfactory solution, the issue may be taken to the appropriate office, department, or committee, for review.

University Policies

Students should refer to the PSU Academic Catalog pertaining to Academic Integrity requirements, Fair Grading, Grade Appeals, and FERPA Student Right to Privacy Policies, and Successful Completion and Graduation Requirements.

Clinical Requirements

1. Clinical Requirements and Documentation

Students must create an account thru Complio.com for tracking of required documentation for clinical attendance. All documentation listed below must be uploaded to the student's Complio account by **JUNE 1** each year, except for flu shot verification. Students who miss the June 1 deadline will receive a verbal clinical warning. In addition, this will jeopardize their timely attendance in clinical which may risk dismissal from the nursing program. The cost for the basic clinical requirements is covered in the nursing program fees. Students incur the costs associated with any additional drug screening tests as required by the program or the clinical agency.

- **Proof of CPR Certification**: Basic Life Support (BLS) **for the Healthcare Provider** through the American Heart Association or the American Red Cross. The certification must be maintained for the entire time that the student is registered and attending clinical courses.
- **Proof of Physical Exam:** Documentation must be provided annually using the Physical Exam Form provided in Complio under "Required Documents."
- **Proof of Health Insurance**: Personal health insurance is required for all nursing students while studying in the nursing program.

2. Proof of Immunizations as listed below:

i. **TB:** If you test negative for tuberculin exposure, you must submit a negative 2-step PPD (2 PPD's dated 7-21 days apart) or a negative IGRA (QuantiFERON or T-Spot). Annually thereafter, you must submit a new 1-step PPD or IGRA. If you let more than a year pass between tests, you may need to receive a new 2-step PPD or IGRA.

If you test positive for tuberculin exposure, you must submit a negative chest x-ray from within the last year. Once your chest x-ray is a year old, you must annually submit a TB clearance letter.

- ii. **MMR:** Proof of 2 documented MMR (Measles, Mumps and Rubella) vaccinations or immune status documented by titer.
- iii. **Varicella:** Proof of 2 documented Varicella vaccinations or immune status documented by titer or proof of having had Varicella.

iv. Hepatitis B:

You must submit A or B:

A) Positive hepatitus B titer. Though not required, you may also upload your 3 doses. If your titer is not positive, please receive a booster and submit your positive titer. If your repeat titer is still negative, receive the Hepatitus Booster Dose 2 and positive repeat titer; repeat process if titer is still negative by receiving Hepatitus B Booster Dose 3.

B) Hepatitis B declination. The declination can be electronically signed below. Note: You will be temporarily compliant as follows while you are in between doses.

- v. **TdAP/ Td:** Proof of documentation within 10 years of the most recent tetanus vaccination (Td). The CDC recommends a single dose of Tdap for healthcare personnel who have never received Tdap regardless of the time since their most recent Td vaccination.
- vi. **Flu Vaccine:** Proof of Seasonal Influenza Vaccination by October 1 unless otherwise required by your clinical agency. Students who decline vaccination must submit a waiver form that is completed and signed by their healthcare provider. This document is available in the required documents section of Complio.
- vii. See Covid Policy Appendix E

3. Drug Screening:

A medical/professional drug screen is required yearly. In some cases, depending on the clinical agency requirements, it may be required more frequently. Any additional drug screen charges are the responsibility of the student. A dilute negative or flagged positive drug screen result will not be accepted and requires a repeat drug screen to be completed within 24 hours of notification, at the student's expense of \$60.00. The repeat drug screen can be ordered by the student directly through Complio. If a testing site is not able to accommodate an appointment within 24 hours, the student may be asked to contact alternative sites to find an appointer sooner. The date and time of scheduled repeat drug screens must be communicated to the Clinical Coordinator.

• Maintaining Documentation:

Documentation of the requirements above must be kept up to date. It is the responsibility of the student to maintain current records and communicate updates to the Clinical Coordinator. Students who do not maintain current documentation will receive a clinical warning and not be permitted to attend clinical. All required documentation except flu vaccine must be submitted by June 1 each year. It is the student's responsibility to keep this record updated as needed if there is a change.

• Centralized Clinical Placement (CCP)Modules:

All modules on the CCP site must be completed annually after July 1st and prior to clinical orientation. Failure to complete the modules on time will result in a clinical warning and delay in attending clinical, which may place the student at risk for a non-pass and dismissal from the program.

4. Background Review

- a. **Purpose:** The Nursing Program is committed to providing the public with nurses and nursing students who demonstrate personal and professional behaviors consistent with the standards of the nursing profession. The purpose of nursing licensure is to safeguard life, health, and the public welfare of the people of this state. In order to protect the people of the State of New Hampshire from the unauthorized, unqualified, and improper application of services of individuals in the practice of nursing, a criminal background check on all nursing students and any nurse not licensed by the State of New Hampshire is required. The student is responsible for the payment required for the review.
- b. **Scope**: This policy applies to all pre-licensure undergraduate students.
- c. **Policy**: Satisfactory (no results) results of a background review are required to progress in the nursing program.
- d. **Requirement**: Students will be required to undergo background review per clinical agency requirements. This may include a federal background check, State of New Hampshire background check and Bureau of Elder Abuse Services (BEAS) check as well as fingerprinting.

e. Refusal: Refusal to provide consent for investigation will result in exclusion from nursing courses and termination from the nursing major.

f. Result Review:

- i. Background review information released to the Nursing Program will be used only for purposes of assisting in making decisions about continued matriculation in the nursing major. Certain convictions may be considered a disqualifying factor for continuation in the nursing major.
- ii. If a background review includes information that the student claims is untrue or inaccurate, these concerns must be addressed by the student to the Bureau of Criminal Identification for resolution.
- iii. Students have an obligation to report any criminal arrest and conviction including violation level offenses to the Director of Nursing within five (5) days of its occurrence. Failure to notify the Director may result in dismissal from the program.
- iv. The Director of Nursing will review the results of all background reviews. If adverse information deemed to be relevant to the applicant's suitability for nursing student status is obtained, the Director of Nursing will notify the student in writing.
- v. The student will have fourteen (14) days to respond to the information either in writing or, if appropriate, by meeting with the Director of Nursing.
- vi. If a student is disciplined through the PSU Judicial System, the student must notify the program chair within five (5) days.
- vii. Background reviews are non-transferrable from other schools or outside agencies.

g. Convictions:

- i. The existence of a conviction does not automatically terminate an individual from the nursing major. Relevant considerations may include, but are not limited to: the date, nature and number of convictions; the relationship the conviction bears to the duties and responsibilities of nursing; and successful efforts toward rehabilitation. Students who do not disclose criminal convictions on the Plymouth State University Common application and have a positive background review may not progress in the nursing program. Failure to disclose is done at the student's own risk.
- ii. Individuals who have been convicted of a felony or misdemeanor crime or have a pending criminal case must meet eligibility requirements for affiliating clinical facilities. This can be a lengthy process, so students need to begin this process early. Students must also meet the New Hampshire Board of Nursing requirements for licensure eligibility (see NH Board of Nursing web site). Progression and mandatory clinical placements in the nursing program may be contingent on a satisfactory (no result) background review. Clinical agencies may independently perform background reviews on students awaiting placement and do not have to accept a student with an unsatisfactory background review. In addition, clinical agencies may refuse students with certain convictions on their record. The nursing program will **not** secure alternate clinical placements for students who cannot be placed in an agency related to an unsatisfactory background review.

5. Other Clinical Requirements

- h. Clinical Assignments: Nursing education includes extensive hands-on experience in the clinical area. Students will be assigned to clinical agencies within the state of New Hampshire. Due to increasing competition for clinical placements, students must have a degree of flexibility, as clinical assignments may involve evenings or weekends.
- i. **Orientation:** Students must meet all annual agency orientation requirements to attend clinical. Students will be responsible for submitting all required clinical documentation by the date specified by the course Clinical Coordinator or his/her designee, each term. Much of this documentation will be done through the Central Clinical Placement Program (CCP). Students will be instructed in the

- procedures for completing required documentation each term. Incomplete documentation will mean a clinical warning for the student, and they may not attend clinical until the documentation is complete,
- j. **Transportation to Clinical Experiences**: Students are expected to provide their own transportation for all clinical experiences and to assume all costs incurred.
- k. **Badge Return**: Students shall return their badges per agency policy. Students who have not returned badges per agency requirement will receive an incomplete clinical grade until the badge is returned.

Nursing Simulation Lab Guidelines

The Simulation Lab is an essential component of nursing education. The Panther Simulation Medical Center consists of learning spaces that are designed to simulate the real-life clinical setting. The rooms and spaces are designed to dedicated areas of care. Simulation learning is intended to prepare and mirror clinical practice; therefore, students should arrive prepared to care for clients in the same manner they would arrive to the clinical space.

Open Lab is scheduled throughout the semester, please reference the lab calendar on the Panther Simulation Medical Center's Canvas page. Students are required to sign up for open lab at least 24 hours in advance and there is a cap of 10 students per hour. Open labs will have a featured learning activity see lab schedule for updates. The preregistration for open lab sessions can be found on the Panther Simulation Medical Center's Canvas page and registration is required. Students are encouraged to utilize open lab times to practice and enhance clinical skills.

Student & Faculty Guidelines for Simulation Lab Etiquette

- Perform hand hygiene prior to entering the simulation lab.
- The Professional Appearance Policy (see PSU Nursing Student Handbook) will be expected on lab days. Professional dress differs between a lab day and participation in open lab hours. If appropriate dress code is not followed, students will be sent home. Make up for missed time will be determined by the course instructor.
- Hair must be clean, neat and pulled back off the collar and face.
- Cell phones are not to be used during lab time and should be set to 'off' or 'silent' during simulations.
- Always use professional behavior and language. Patient care scenarios should be taken as realistically as possible.
- Follow standard precautions during simulation and adhere to clinical guidelines.
- All sharps must be disposed of in the red contaminated sharps containers available in the lab. Please notify the lab coordinator if these are full.
- Do not use ink or betadine on the manikins, place oral medications in manikins' mouths, or remove an IV catheter from a manikin unless instructed to do so.
- Clean up spills on the lab floor when they occur.
- Drinks & foods are not allowed in the simulation lab, near computers or models/manikins.
- Simulation equipment is only to be operated by personnel who have been trained to use such devices.
- Respect the confidentiality of your peers. What happens in the lab, stays in the lab.
- Students will not share details and activities with other students who have not yet participated in the simulation experience.
- Students will leave personal items outside the lab space, no lounging on equipment or bedding.
- No student will utilize the simulation space without permission from a faculty member or the lab coordinator.

Before leaving the lab, please return all chairs, and overbed tables to their proper place, straighten bed linens, return beds to the lowest position, and dispose of any waste. Return any supplies and equipment that you have

used while in the lab to its designated location. (Ask the lab coordinator if you need assistance). Log off the laptops and plug them in.

- Any equipment borrowed from the Simulation Lab must be signed out with a faculty member or the lab coordinator.
- Report any incidents or malfunctions of simulation lab equipment to the lab coordinator. If they are not immediately available, send a detailed email describing what is wrong with the item and put a note on the item for the next user.
- Select clinical supply items are re-used to offset lab costs and environmental impact (example saline flushes or IV tubing). Please save items identified for reuse in each lab.
- Anyone disregarding the guidelines for simulation lab etiquette will be asked to leave the shared space.
- SEE APPENDIX E FOR COVID-19 MODIFICATIONS FOR LAB

Impaired Nursing Practice

- 1. **Definition:** *Impaired Nursing Practice* is the inability to implement safe care, including demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients as a result of illness or a mental health condition or physical condition related to substance use, misuse, or abuse. If the instructor or agency staff suspect impairment, a student will be dismissed from clinical. Medical or Mental Health clearance may be required before returning to clinical.
- 2. **Substance Use/Misuse**. Substance use or misuse while engaged in any nursing student or clinical experience is strictly prohibited.
- 3. Student's Agreement to Submit to Drug Testing by Affiliating Clinical Agencies and to Consent to Release of Test Results to University Officials
 - a. For all affiliating clinical agencies that require nursing students to be subject to the agency's drug/alcohol testing policies, the student may be tested in accordance with the affiliating agency's policies.
 - b. Prior to being assigned to an affiliating clinical agency and as a pre-requisite for placement at any affiliating clinical agency, the nursing student shall a) submit to any drug/alcohol testing required by the affiliating clinical agency; and b) to release a copy of any and all drug/alcohol test results to the Department of Nursing Director. Failure to do so shall be grounds for non-placement at an affiliating clinical agency and may result in dismissal from the program.
 - c. The cost for the initial testing is covered in the program fees. The cost of any additional drug/alcohol testing required by affiliating clinical agencies shall be borne by the student or affiliating clinical agency, as determined by the affiliating clinical agency. Neither the University nor the Department of Nursing, or any of its officers or employees, shall absorb drug/alcohol testing costs arising out of any nursing student's placement at an affiliating clinical agency.
 - d. A positive substance abuse test may result in delayed progression or dismissal from the program on the basis that the student is not able to meet the course objectives for classroom and/or clinical experiences. In addition, the student will be reported to the Dean of Students in accord with university policy. The Director of the Department of Nursing will notify a student who has a positive drug test.
 - e. If a student tests positive for a prescribed drug, however, the person must obtain a written statement from a qualified physician stating that the drug level is within prescribed limits and that the level does not indicate abuse. The physician must indicate that the drug will not interfere with safe practice in the clinical area.
 - f. A student's failure to submit to a required drug screen, or attempting to tamper with,

intentionally dilute, contaminate, or switch a sample will result in the student being dismissed from the program.

- 4. **Random or Incident Related Drug Screening.** To be in compliance with the University's contractual agreement with clinical agencies, students may be screened for substance abuse prior to engaging in any clinical activity (see Drug Screening policy), or at any time deemed necessary by the Director of the Nursing Program. Duty to Notify of Drug/Alcohol Arrests and Convictions & Disclosure of Drug Use
 - i. A violation by any nursing student of any state or federal statute, or regulation established pursuant to such statute, pertaining to the manufacture, improper possession, sale, use, or distribution of a drug or alcohol is strictly prohibited. Such violation, if substantiated, will result in the student's dismissal from the Department of Nursing. A nursing student who fails to notify the Director of the Department of Nursing within five (5) days of a legal arrest /conviction for any such violation may be subject to dismissal from the Department of Nursing.
 - ii. Nursing students determined by appropriate Department of Nursing officials to have violated these prescriptions may be dismissed from the Department of Nursing.
 - iii. Failure to provide the above required information, past legal convictions for activities related to illegal or legally controlled substances, and/or information or evidence that reasonably establishes a past pattern of chemical substance abuse will be grounds for dismissal from the program. However, prior convictions related to chemical substances will be considered along with all other information pertaining to the individual, and will not produce automatic dismissal from the program. Discovery that false or fraudulent or misleading information was provided prior to matriculation will be grounds for dismissal from the program.
- 5. Student Self---Disclosure of Prohibited Substance Use. A student who self-identifies use of a prohibited substance or alcohol or drug abuse, and is requesting help to deal with the problem, should contact the Director of the Department of Nursing. The Director may institute the drug testing procedure. The cost of all drug/alcohol testing required by the Department of Nursing shall be borne by the student.
- 6. Confidentiality. All drug testing results will be treated by the Department of Nursing as information that is received in confidence and shall not be disclosed to third parties unless: disclosure is required by law; the information is needed by appropriate school officials to perform their job functions; disclosure is needed to override public health and safety concerns; or the student has consented in writing to the release of the information. The Department and the University shall have the right to use and disclose the results of drug testing required by this policy in connection with internal academic purposes, and in connection with the defense of any student grievance and any claims filed by a student, or by his/her personal representative, in any court of law or with any state or federal administrative agency.
- 7. **Impairment due to Suspected Use/Misuse.** Whenever a nursing student's academic or clinical performance is considered to be impaired, the University reserves the right to require the student to submit to drug testing. This policy describes the procedure to follow if impairment is suspected or evidenced in the clinical or resource laboratory setting or if the student tests positive in a pre-entrance or random drug screen. Impairment of a health care professional is the inability or impending inability to practice according to accepted standards as a result of substance use, abuse, or dependency

a. Suspected Impairment Procedure

- g. Faculty will document student's performance using the Unusual Occurrence Form (see Appendix C) and submit it to the Nursing Department Director.
- h. Faculty will inform the Nursing Department Director immediately.
- i. Faculty will inform the student of the reason(s) that she/he be removed from patient care.

- j. If the student smells of alcohol or drug abuse is suspected, a random drug screening will be performed. Failure to consent to a drug or alcohol test will result in immediate suspension from the nursing program and can result in dismissal from the program.
- k. The student must arrange for alternate transportation from the clinical agency.
- l. The student is responsible for all expenses incurred.
- m. The student and the Director will meet to review the incident within three (3) business days.
- n. The Director may seek input from campus personnel such as the VPAA, LADAC, and Criminal Justice Department Head or others as needed.
- o. If test results are positive, the student may be suspended or dismissed from the nursing program.
- p. The student will be referred to the PSU Nursing Student Handbook for judicial policy/grievance procedures.
- 2. Procedures for Readmission after Positive Drug Test: A student who has been dismissed from the nursing major due to a positive drug test may be considered for readmission if the following conditions are met*:
 - a. Student may be required to go to drug treatment: If so, submission of a verifiable letter from a recognized drug treatment agency stating that the student has successfully completed a substance abuse treatment program.
 - b. Submission to a drug test prior to readmission. This drug test will be at the student's expense. A positive drug test will result in ineligibility for readmission.
 - c. Submission to drug tests as requested by the Director of Nursing or clinical agencies after readmission, as deemed appropriate by either.
 - *Other conditions for readmission may be required and are dependent on the situation.
- 3. **Incidence of Reoccurrence after Readmission**: A student who is readmitted to the nursing program and thereafter tests positive for any drug/alcohol test or is otherwise determined to have engaged in substance abuse as defined herein will be permanently dismissed from the program and will be ineligible for readmission. Furthermore, the student will be ineligible to receive a letter of good standing from the nursing program.
- **4. Appeal Process**: A nursing student may appeal the decision to dismiss or not readmit a student through the established University Grievance Procedure.

Professional Appearance Policy

- 1. Personal appearance is a critical factor in the professional image of a baccalaureate nurse. Unless otherwise stated, students are required to wear the official uniform while in the clinical area, including the nursing lab. Uniforms shall be obtained from an approved Nursing Department source.
- 2. Requirements for both men and women:
 - a. Uniform:
 - i. Approved green scrub top and green or black scrub pants. Embroidered PSU logo will be on the front of the top.
 - ii. A white laboratory coat or green scrub jacket may be worn with the uniform. No sweatshirts, sweaters or vests are permitted.
 - iii. Students may wear a plain white or black shirt under their scrub top.
 - iv. Clothing must be clean and free of stains, rips, or wrinkles.

- b. Hair: Must be clean, neat, and pulled back off the collar and face.
- c. **Facial Hair:** Beards and mustaches must be clean, neat, short and neatly trimmed. Male students without full beards must be neatly shaven when in the clinical area.
- d. **Jewelry:** Single small non-dangling earrings are acceptable in each earlobe. No other visible piercings are allowed in the clinical area. No bracelets. Wedding rings are allowed or a single plain band.
- e. Fingernails: Should be short, with no artificial nails, no tips, and no polish.
- f. Scents: No colognes, perfumes or cigarette/tobacco odors.
- g. **Shoes and socks:** Plain white or black clean and polished professional, leather shoes (no canvas) with closed toe and heel. Socks must be worn.
- **3. Student Identification in Clinical:** PSU name badge and/or Clinical Agency Photo ID (where required) must be worn any time a student is functioning as a student in places other than Plymouth State University.
- **4. Equipment for Clinical Experiences:** Students are required to have the following items: Stethoscope (with bell and diaphragm), nursing scissors, penlight, black ink pen, and wristwatch with a second hand.
- **5. Alcohol and Tobacco:** Consumption of alcohol or use of tobacco products while in PSU Nursing uniform is prohibited.

Confidentiality Policy

- 1. Under Health Information, Portability, and Accountability Act (HIPAA) the law protects client personal information. Students are to always maintain the confidentiality of all clients. For clinical agencies students will be asked to sign agency specific confidentiality forms. No information with patient identifiers should ever leave the clinical agency in written or verbal form.
- 2. A breach in patient confidentiality may result in failure of the course and dismissal from the program. Under HIPAA laws, civil fines may be applied by the clinical agency.
- 3. In order to document care using computerized systems in health care facilities, student social security numbers may be released to an authorized individual.

Position on Unsafe Clinical Practice

- 1. The PSU Nursing Program adheres to the State of New Hampshire Nurse Practice Act (RSA 326-B).
- 2. Clinical nursing faculty have the responsibility of determining when a student can practice at a safe level and when a student is unable to function at a safe level in the clinical area. If the instructor or clinical agency determines that a student is unsafe to practice, the instructor has the obligation to remove the student from clinical practice.
- 3. Depending on the nature of the safety issue, the student may be asked to leave the clinical site. If dismissal for the remainder of the course is warranted, the student may receive a failing grade for the course if they are unable to meet clinical course objectives.
- 4. Safety violations include, but are not limited to: misconduct, dishonesty, blatant disregard for PSU or agency policies and procedures, failure to maintain one's self in an alert and sober manner and not be impaired by drugs or alcohol, and failure to maintain professional comportment.
- 5. The consequences of unsafe behavior are determined by the nature of the behavior exhibited and the situation in which it occurs.
- 6. If alcohol or other drugs are suspected by the faculty and/or have the potential or have led to unsafe practice, the

Unusual Clinical Occurrences

- 1. If it is deemed that a student has practiced in the clinical environment in an unsafe manner the faculty:
 - a. Will complete an Unusual Occurrence Report Form (see Appendix C) and submit it to Nursing Department Director.
 - b. May dismiss the student from clinical.
 - c. Will contact the Nursing Department Director within 24 hours of any incident requiring the dismissal of the student from a clinical setting.
 - d. Will schedule a conference with the student, the clinical instructor, and the Nursing Department Director, within 48 hours of the incident.
- 2. The student will have the opportunity to explain or defend the unsafe behavior and an appropriate plan will be developed.
- 3. Repeated unsafe behaviors or failure to correct an unsafe behavior may result in dismissal from the program.
- 4. The Nursing Program has both the right and responsibility to dismiss from the program any student whose health, conduct or academic standing make it unsafe for that student to remain in a nursing course or the nursing major.

5. Other Unusual Student Occurrences:

- a. In the event that a student becomes ill or injured in the clinical setting, it is expected that the faculty will submit an Unusual Occurrence Report (see Appendix C) in writing within 24 hours to the Department of Nursing Director. In addition, faculty will follow the clinical agency policy regarding the occurrence. Included in the report should be the name of the student, agency and unit, date, and time incident occurred, and details of situation including description of student's symptoms, behavior and/or injury sustained, and treatment received. A statement of follow-up care should be included when appropriate. After review by the Nursing Director, a copy of the incident should be placed in the student's file.
- b. Patient Safety Situations
 - i. Efforts should be made to trend data on hazards, errors, and near misses by nursing students in the clinical setting.
 - ii. In the event that a student is involved in a patient care incident where safety was compromised a report should be completed according to the policy of the clinical agency. The student should also complete within 24 hours an Unusual Occurrence Report (see Appendix C) and within 7 days to complete a Root Cause Analysis (see appendix D) of the incident and submit it to their Clinical Instructor.
 - iii. Clinical Instructor will submit reports to Director of Nursing.

Risk for Body Fluid Exposure Policy

- 1. Because of the direct involvement with patients, all nurses and nursing students are at risk for exposure to body fluids, which may be infected with Hepatitis, HIV, or other infectious diseases. In the event that a student is exposed to body fluids in the clinical setting, the following steps should be followed:
 - a. Initiate the agency antiseptic/emergency procedures following exposure.
 - b. Notify the faculty and/or preceptor immediately.
 - c. Initiate the agency protocol for exposure.
 - d. Consider post-exposure prophylaxis as defined by Centers for Disease Control (CDC).
 - e. The faculty must document the clinical incident using the "Unusual Occurrence Report Form" (see Appendix C) and submit to the director of the department of nursing.

2. The student is responsible for all costs incurred as a result of the exposure incident.

Cellular Phones and Technology Devices

- 1. Students with cellular phones/ Smart Watches and/or beepers are to turn them off or to silent mode during class and during any clinical practica, whether on campus, in the hospital, or in community-based learning experiences.
- 2. Texting during class or clinical sessions is inappropriate and distracts from the learning experience.
- 3. Cell phones/ Smart Watches may not be allowed in clinical per agency policy. Any use of cell phones/ Smart Watches during clinical must be for professional purposes only.
- 4. Cellphones/ Smart Watches must be on silent or off and must not be on person during all exams. If a student is found to have a cell phone or other smart electronic device on their person, this will be considered a breach of academic integrity.

ATI Student Assessment and Review Policy

What does ATI offer?

Assessment Technologies Institute (ATI) offers an assessment-driven comprehensive review program designed to enhance student NCLEX® success.

The comprehensive ATI review program offers multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. In combination with the nursing program content, these ATI tools assist students in preparing effectively, helping increase their confidence and familiarity with nursing content.

Students can access ATI information and orientation resources from the ATI student homepage. Students enrolled in NR 2100 will be guided through the ATI orientation. It is highly recommended that students spend time navigating through these orientation materials.

Students can find ATI Tutorial, Practice Assessment, and Proctored Assessment schedules and dates in course syllabi.

Modular Study

ATI provides Review Modules in print and eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement coursework. Instructors may assign these ATI resources during a given course as part of active learning and/or remediation following assessments.

Tutorials

ATI offers unique Tutorials designed to teach nursing students how to think like a nurse, take a nursing assessment, and make sound clinical decisions.

With Learning System 3.0, students can assess their knowledge through pre-set quizzes, build a customized quiz that focuses on specific categories, or test category-specific comprehension in an adaptive quizzing environment.

Nurse Logic

This is an excellent way to learn the basics of how nurses think and make decisions.

Learning System

Offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide are embedded throughout the Learning System tests to help students understand the content.

Assessments

There are practice assessments available for students and standardized proctored assessments that may be scheduled during courses. These assessments will help students identify what they know, and more importantly, identify content areas requiring remediation (called *Topics to Review*).

Focused Review/Active Learning Templates/Remediation Flashcards

Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood (as determined on an ATI assessment).

Remediation tools are intended to help the student review vital information to be successful in courses and on the NCLEX®. The student's individual performance profile will contain a listing of the topics to review. The student can remediate using the *Focused Review*, which includes links to ATI books, media clips, and active learning templates. When the student has completed their first round of remediation following practice assessments, they can take a post-remediation quiz which provides similar questions on identified content gaps. Upon completion of the quiz, the student can review their knowledge gaps and study updated E-book content. The post-remediation quiz is intended to provide feedback on the impact of remediation.

The instructor has online access to detailed information about when ATI resources are accessed and the amount of time spent in assessments, focused reviews, and tutorials by each student. Students may be required (per syllabus) to provide documentation that required ATI work was completed using the "My Transcript" feature under "My Results" of the ATI Student Home Page and/or submitting written Remediation Templates as required.

To earn points identified in the ATI Student Assessment and Review policy for each practice assessment, students will complete the remediation provided following the first attempt of practice assessments A and B. Once completed, students will take the post-remediation quiz (if available) and complete the follow-up remediation before the scheduled proctored assessment.

Faculty Responsibility

- a. Assist students to set up an account with ATI in NR 2100
- b. Coordinate distribution of the ATI Bundle to students in NR 2100
- c. Coordinate scheduling of computer-administered Proctored Assessments
- d. Convey via course syllabi due dates and required ATI assignments, including Practice Assessments, Proctored Assessment, and plan for remediation using the ATI Focused Review tools, Remediation Flashcards, and Active Learning Templates.

Student Responsibility

- a. Students will complete all required ATI assignments, including but not limited to ATI Practice Tutorials and Practice Assessments, Proctored Assessments, and remediation using ATI's Focused Review tab (see Table 1 below). The requirement of remediation deliverables may vary by course. The student must refer to the course syllabus for due dates and details.
- b. Completion of the designated Practice Tutorials, Practice Assessment(s), Proctored Assessment(s), and remediation using Focused Review (if required) is a course requirement. If any required component is missed, students will receive a zero for that

portion of the ATI Grade per the ATI rubric. For example, if any required element of practice assessment A or B or practice remediation requirement is not completed by the due date, the student will not earn 4 points in the Practice Assessment category.

<u>Proficiency Levels:</u> Below is a description of what each *Proficiency Level* means:

- **Proficiency Level 3** indicates a student is likely to **exceed** NCLEX-RN in this content area. Students are encouraged to engage in continuous focused review to maintain and improve their knowledge of this content.
- **Proficiency Level 2** indicates a student is fairly certain to **meet** NCLEX-RN standards in this content area. Students are required to engage in continuous focused review in order to improve their knowledge of this content.
- **Proficiency Level 1** indicates a student is likely to **just meet** NCLEX-RN standards in this content area. Students are required to develop and complete a rigorous plan of focused review in order to achieve a firmer grasp of this content.
- Below Proficiency Level 1- indicates a need for a thorough review of this content area. Students are strongly encouraged to develop and complete an intensive plan for focused review. Students at this level are expected to fully remediate according to the instructor's directions.

Remediation

Remediation is a process of reviewing content not answered correctly on an ATI Tutorial, Practice Assessment, or Proctored Assessment. This helps the students increase proficiency in identified areas of knowledge deficit. **Remediation and Focused Review are course requirements.** Students must refer to the course syllabus for requirements. Students may be required to submit proof of completion of all ATI assigned components, including remediation, to earn points.

Grading and Remediation for the RN Comprehensive Predictor Assessment (see Table 2)

For specific grading and remediation policies for the RN Comprehensive Predictor Assessment, please see the NR 4073 course syllabus.

	ATI Content Mastery Series Grading Rubric Summary	Points
Practice Assessments	Note	
ATI Practice A Focused Review and	All elements must be completed and submitted by the due date to earn 4 points. No partial credit.	
Remediation ATI Practice B	Practice Assessment A, focused review & remediation; Practice Assessment B, focused review & remediation	4 Points
Focused Review and Remediation	-	
Assessments	Level 3 = 4 points	
ATI Proctored	Level $2 = 3$ points	
Assessment A	Level $1 = 1$ point Below Level $1 = 0$ points	0-4 Points
Focused Review and Remediation	Focused Review & Remediation (per syllabus) must be completed by the due date.	2 Points
ATI Proctored B (mandatory for below level 1, level 1; recommended for level 2)	 If Below Level 1 or Level 1 on Proctored A, Proctored B is required. A student who achieves a different Level on Proctored B will earn the higher of the two scores. If Level 2 on Proctored A, Proctored B is recommended. 	Up to 4 Points Possible*

	 *If Level 3 on Proctored A, additional points are <i>not</i> awarded. Example: A student who achieves Level 1 on Proctored A, and achieves Level 3 on Proctored B, will earn a the higher of the two scores (100% vs. 70%). 	
Total Points		Maximum of 10
Final Grade in Gradebook	10/10 Points = 100% 8/10 = 80% 6/10 = 60% 9/10 Points = 90% 7/10 = 70%	Points

Table 1 ATI CONTENT MASTERY SERIES GRADING RUBRIC

(The grade earned is 10% of the final course grade)

ATI CONTENT MASTERY SERIES GRADING RUBRIC

Specij	fic due dates and re	equirements per cou	urse syllabi			
PRACTICE ASSESSMENT						
	4 pc	oints				
Complete Practi	ice Assessment A	Complete Practi	ice Assessment B			
	liation:		liation:			
Minimum 1-hour Focused	l Review on initial attempt	Minimum 1-hour Focused	Review on initial attempt			
For each topic missed, comple	ete an active learning template	For each topic missed, comple	ete an active learning template			
	syllabus) as part of the required		syllabus) as part of the required			
remediatio	n process.*	remediatio	n process.*			
Take Post Study Quiz (if avail	able)** and complete an active	Take Post Study Quiz (if avail	able)** and complete an active			
	ion flashcard (per syllabus) for	learning template or remediation flashcard (per syllabus) for				
each topi	ic missed.	each topic missed.				
	per the course syllabus (Practice A, Ren					
completed by the	e due date to receive 4 points. Please ref					
	STANDARDIZED PROC	CTORED ASSESSMENT				
Level 3 = 4 points	Level 2 = 3 points	Level 1 = 1 point	Below Level 1 = 0 points			
Remediation = 2 points:	Remediation = 2 points:	Remediation = 2 points:	Remediation = 2 points:			
Minimum 1-hour Focused	Minimum 2-hour Focused	Minimum 3-hour Focused	Minimum 4-hour Focused			
Review	Review	Review	Review			
For each topic missed,	For each topic missed,	For each topic missed,	For each topic missed,			
complete an active learning	complete an active learning	complete an active learning	complete an active learning			
template or remediation	template or remediation	template or remediation	template or remediation			
flashcard (per syllabus) as	flashcard (per syllabus) as	flashcard (per syllabus) as	flashcard (per syllabus) as			
part of the required	part of the required	part of the required	part of the required			
remediation process.*	remediation process.*	remediation process.*	remediation process.*			

10/10 points	9/10 Points	7/10 Points	6/10 Points	
=100 points	= 90 points	= 70 points	= 60 points	
	Proctored Asses	ssment Retake***		
No retake required	No retake required	Retake required	Retake required	

Handwritten Active Learning Templates (ALTs)

Please note that the 1st attempt of any practice assessment will have the rationales turned off by the instructor.

Table 2 COMPREHENSIVE PREDICTOR ASSESSMENT GRADING RUBRIC

COMPREHENSIVE ASSESSMENT GRADING RUBRIC

Specific due dates and requirements per course syllabi

PRACTICE ASSESSMENT

4 points					
Complete Practice Assessment A	Complete Practice Assessment B				
Remediation:	Remediation:				
Minimum 1-hour Focused Review on initial attempt	Minimum 1-hour Focused Review on initial attempt				
For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as part of the required remediation process.*	For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as part of the required remediation process.*				
Take Post Study Quiz (if available)** and complete an active	Take Post Study Quiz (if available)** and complete an active				
learning template or remediation flashcard (per syllabus) for	learning template or remediation flashcard (per syllabus) for				
each topic missed.	each topic missed.				
Please note all elements required per the course syllabus (Practice A. Rer	mediation Practice B Remediation Focused Review and Quizzes must be				

completed by the due date to receive 4 points. Please refer to the course syllabus for course-specific requirements.

STANDARDIZED PROCTORED ASSESSMENT

95% or above Passing predictability = 4 points	90% or above Passing predictability = 3 points	85% or above Passing predictability = 1 point	84% or below Passing predictability = 0 points
Remediation = 2 points:			
Minimum 1-hour Focused Review	Minimum 2-hour Focused Review	Minimum 3-hour Focused Review	Minimum 4-hour Focused Review
For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as	For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as	For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as	For each topic missed, complete an active learning template or remediation flashcard (per syllabus) as

Post-study quiz questions may be provided to a student based on specific student knowledge gaps. (Major Content Areas 75% or less. 0 to 50 items

possible for additional remediation).

*** If a student meets the program benchmark on the retake, that student can earn the higher of the two scores (for example, a Level 1 student who earns a Level 2, will earn the higher of the two scores, i.e., 90% vs. 70%).

part of the required remediation process.*			part of the required remediation process.*
10/10 points	9/10 Points	7/10 Points	6/10 Points
=100 points	= 90 points	= 70 points	= 60 points

Proctored Assessment Retake***

Per Syllabus	Per Syllabus	Per Syllabus	Per Syllabus

Handwritten Active Learning Templates (ALTs)

Please note that the 1st attempt of any practice assessment will have the rationales turned off by the instructor.

^{**} Post-study quiz questions may be provided to a student based on specific student knowledge gaps. (Major Content Areas 75% or less. 0 to 50 items possible for additional remediation).

*** If the program requires a retake of a Proctored Assessment and a student meets the program benchmark on the retake, that student can earn an

additional percentage point (for example, a Level 1 student can now earn 8 points).

Medication Administration Competency

Math skills for dosage calculations are a major component in safe preparation and administration of medication as well as in educating patients and families. This medication administration competency program will facilitate students in meeting these high standards through a semester-to-semester approach of increasing expectations. The following elements are required:

- a. In NR 2100 students will be introduced to Dosage Calculation 2.0 Series (see ATI Policy). One assessment will be given to assess basic clinical calculations at 10% of overall grade.
- b. In NR 3020 students will have three attempts to pass a math calculation assessment prior to administering medication in clinical. Students must achieve a score of at least 90% on the assessment to pass, and the score will be entered into the gradebook toward the course total. If a 2nd or 3rd attempt is needed to pass the assessment with at least a 90%, the scores will be averaged and that value will be entered into the gradebook. Safe medication administration is an expectation for demonstrating clinical competency in NR 3052. Failure to pass the required math calculation assessment after three attempts may prohibit the student from administering medication in the clinical setting, and the student is therefore at risk of not passing the NR 3052 clinical course.
- c. In NR 3020, NR 3035, NR 3070, NR 3150, NR 4015, NR 3092, NR 3094, NR 4050: 10% of exam questions will relate to clinical calculations.
- d. Students will be assessed via competency checklist on rights of medication administration during scheduled lab time.
- e. Students will consistently demonstrate safe medication administration in all clinical settings.

 Unsafe medication administration will result in a clinical warning and the potential for clinical non-pass and dismissal.

Clinical Remediation Program

The purpose of this policy is to define the Clinical Remediation Program process including responsibilities of all those involved. The Nursing Department Remediation Program was created to support students in meeting clinical requirements and demonstrating competencies.

1. Remediation Process:

- a. Referral to the Course Coordinator for remediation will occur when:
 - i. A student's performance indicates that they are not meeting one or more of the clinical competencies at a developing level or higher
 - ii. Risk for a grade of non-pass
 - iii. One Clinical Warning
- b. Faculty Responsibility: Complete the Clinical Remediation Referral form and forward it to the Course Coordinator and student prior to remediation.
- c. Student Responsibility:
 - i. Contact the Course Coordinator within 48 hours of receiving notice of referral to set up a specific time to discuss remediation.
 - ii. Attend the remediation session prepared by having reviewed the appropriate literature in the skills book (including reviewing appropriate skills checklists), medical/surgical text, or medication reference text.
 - iii. Bring a copy of the Clinical Remediation Referral form to the remediation session.
 - iv. Following the remediation session, complete the self-evaluation portion (part 2) of the Clinical Remediation Referral form and return to your clinical instructor.
- d. Course Coordinator Responsibility:
 - i. Collaborate with the referring clinical faculty to create the remediation plan and designate a time with

- referred student.
- ii. Following the remediation, complete instructor feedback portion of the Clinical Remediation Referral form.
- iii. Forward a copy of the completed form, following remediation, to the referring clinical instructor and the remediated student.
- iv. If the clinical instructor is also the course coordinator they may request another faculty member or the director to assist with the remediation.
- v. Assure a copy of the referral is placed in student's EAB file.

Students Administration of Intravenous Medications in Clinical

- 1. All peripheral intravenous (IV) medications and central line medications and flushes must be administered under the direct supervision of clinical instructor/preceptor throughout the program.
- 2. Intravenous Secondary Infusions (IVPB) and change of flow rates to continuous IV medications can only be done under the direct supervision of a clinical instructor or preceptor.
- 3. Intravenous push (IVP) medications can only be administered at the instructor/ preceptor discretion in NR 3054, NR 3057, NR 3059, NR 3094, NR 4057, and NR 4082 clinical under the direct supervision of the clinical instructor or preceptor.
- 4. Below is a list of the medications that students are **never** permitted to administer via Intravenous push. This list is not exhaustive and additional drugs may be added subject to current evidence and agency policy. Failure to comply with this policy will result in a non-pass for the clinical course and dismissal from the program. Clinical instructor's may add additional medications specific to their clinical specialty/patient population.

Students are never permitted to administer the following medications as intravenous push (IVP):

- Adenosine
- Diltiazem
- Amiodarone
- Digoxin
- Atropine
- Lidocaine
- Pronestyl
- Epinephrine
- Isuprel
- Insulin
- Mexitil
- Bretylium
- Brevibloc
- Propofol
- Verapamil
- Tissue Plasminogen Activator (TPA)
- Heparin
- Metoprolol
- Nitrates
- Chemotherapy

Students are not allowed to hang blood products, they are encouraged to observe and assist with IV line priming of blood tubing and following administration standards for patient care.

SECTION IV LICENSURE

Licensure

Upon successful completion of the Nursing Program, graduates will be eligible to apply to take the National Council Licensure Examination (NCLEX-RN) for licensure as a Registered Nurse (RN).

Each licensure applicant shall furnish to a State Board of Nursing satisfactory evidence of the following:

- Completion of a course of study in an approved nursing education program.
- Satisfaction of other qualification requirements as the BON may prescribe.

Costs for examination and licensure are the responsibility of the student.

The **student** is responsible for obtaining the necessary forms and requirements from that state in which he/she plans to apply for initial licensure. Information for licensure throughout the United States can be obtained at https://www.ncsbn.org/index.htm.

SECTION V APPENDICES

Appendix A

ANA Code of Ethics for Nurses

- 1. The nurse, practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- 2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
- 3. The nurse promotes, advocates for, and strives to protect the rights, health, and safety of the patient.
- 4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
- 5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
- 6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.
- 7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- 8. The nurse collaborates with other health professionals and the public, to protect human rights, promote health diplomacy, and reduce health disparities
- 9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Copyright: American Nurses Association, Code of Ethics for Nurses with Interpretive Statements, Silver Spring, MD: American Nurses Publishing, 2015 retrieved at: http://www.nursingworld.org/DocumentVault/Ethics_1/Code-of-Ethics•for-Nurses.html

Appendix B

EXAM ITEM APPEAL FORM

Date:	
Student Name:	<u> </u>
Course Number and Title:	
Quiz/Test Item Number:	
Quiz/Test Item text:	
Keyed Answer:	
Student Answer:	
Rationale for your answer: (must include where your answer is sother course materials assigned for the current course)	found in the text, PowerPoint or
NOTE: this form must be submitted within 24 hours of grade Submissions after that time will not be considered. Faculty wiappeal form to make a final decision.	s being posted on Moodle. Il have 24 hours after receipt of



Unusual Occurrence Report Form

THIS FORM AS AN ADJUNCT TO THE UNUSUAL OCCURRENCE REGARDINGUNUSUAL OCCURRENCES.	CES POLICY; PLEASE SEE ENTIRE POLICY FOR SPECIFIC INSTRUCTIONS
Date of Unusual Occurrence:	Time of Unusual Occurrence:
Date of Chasaar Securiones.	Time of Chasaar Counterior.
Place of Unusual Occurrence; Agency/ Unit:	Name and Contact Information of Person Completing
	Form:
Student's Name and Contact Information:	
Student's Name and Contact Information.	
State the facts of Who What Where When Why	, and How of the unusual occurrence/incident happened including
	/or injury and treatment received. (Use additional sheets of paper
if necessary).	
Follow up Care (if necessary):	
Please return this form to: Director, PSU Nursing D	opertment
,	•
17 Highland St, MSC 58	Flymouth INT U3204
For PSU Nursing Department Office Use On	nly
Date PSU Nursing Department received report:	Date Report Filed:
Date 130 Nursing Department received report:	Date Report Flied:
Action Taken:	

Appendix D Root Cause Analysis

Name of Person Completing This Form:

Date:

Description of event:

What happened?

Where did process go wrong? What steps were involved in (contributed to) the event?

What are the usual steps in the process (es)?

Why do you think it happened?

Human Factors

- 1. What role did human performance play in this event?
- 2. Whathuman factors were relevant to this case? I.e. fatigue, staff illness, noise, temperature, scheduling, personal problems, stress, rushing, cognitive errors?
- 3. Were distractions or interruptions a factor in this case?

Communication among staff / Informationavailability

- 1. Was communication adequate and timely in this event?
- 2. Are there obstacles to communication relating to this event?
- 3. Was the needed information available, accurate, and complete?
- 4. Was patient identification an issue in this case?
- 5. Does the medical record documentation adequately provide a clear picture of what happened?
- 6. Were there issues related to continuity of care?

Aspects of care and care planning:

- 1. Whatissues related to physical or behavioral assessment were a factor in this event?
- 2. What policies or procedure relate to the level and frequency of observation and monitoring?
- 3. Did the level and frequency of patient observation or monitoring meet standard of care?
- 4. What issues relating to philosophy of care or care planning had an impact on this case?

Staffing

- 1. How did staffing levels compare with ideal levels? (Give #s)
- 2. Was workload a factor in this event?
- 3. How are staffing contingencies handled?

Training/Competency/

- 1. Were issues relating to staff training or staff competency a factor in this event? Is training provided prior to the start of theworkprocess?
- 2. Was an individual performing in a situation for which they were inappropriately trained or prepared?
- 3. How is staffperformance assessed? Arecompetencies documented?
- 4. Aretheresults of training monitored over time?
- 5. Is there a program to identify what training is needed?

Supervision of Staff and Credentialing (Includes physicians in training)

- 1. Was supervision of staff an issue in this case?
- 2. Was the staff physician involved in the case in a timely way?
- 3. Are there issues related to credentialing?

Adequacyof TechnologicalSupport

1. Was technological support adequate?

Equipment/ Equipment Maintenance/Management

- 1. Whatequipment / products wereinvolved in thiscase/event?
- 2. Didequipment/ productsfunctionproperly?
- 3. Did alarms, monitoring systems function properly?
- 4. Was equipment used as designed?
- 5. Has staff been adequately trained in the use of the equipment / products?
- 6. Was equipmentmaintenance an issue?
- 7. Is there a maintenanceprogram?

Environmentalaspects

- 1. Was the work area or environment designed to support the function for which it was being used? (i.e space, privacy, safety, access)
- 2. Does the work environment provide physical stressors for staff? (i.e. temperature, noise, improper lighting)
- 3. Does thework environment meetcurrent codes, specifications, and regulations?
- 4. Whatsystems are in place to identify environmental risks?
- 5. Whatsecurity systems and processes relate to this event? Werethereissues related to security systems and processes?
- 6. Whatemergency and failure modes responses have been tested? (safetyevaluations, disaster drills, etc. ?)

ControlofMedications:Storage/Access

1. Was storage or access to medications an issue?

Labeling of Medication

1. Waslabelingmedications(manufacturer or HCMC labeling) an issue?

Leadership:

- 1. To what degree is the culture conducive to risk identification and reduction?
- 2. What are the barriers to communication of potential risk factors?
- 3. How is the prevention of adverse outcomes communicated as a high priority?

Other questions:

- 1. Are there any other factors that influenced this outcome?
- 2. Werethereuncontrollableexternalfactors?
- 3. What can be done to protect against the uncontrollable factors?
- 4. What other areas or services are impacted (might have a similar event)?

Communication with Patient/Family

- 1. Was communication withpatient and family adequate?
- 2. Was there disclosure regarding theuntowardoutcome, details of the event?

Summary of Root Causes and contributing factors:



Fall 2022

Nursing Simulation Laboratory COVID-19 Policy & Procedure has been put in place to protect students, faculty, standardized patients, and staff from potential exposures. This plan considers that people may be able to spread COVID-19 even if they do not show symptoms. The COVID-19 Policy is consistent with current practices happening at our community clinical partner agencies.

Consideration is given to lower the impact in the simulation lab of the potential spread, prevent and reduce transmission among people in the lab environment while maintaining a safe and healthy learning atmosphere.

Control measures to eliminate or extremely limit the risk of exposure include: Signage and tables will be placed in hallway prior to arrival in the simulation lab. Students, faculty, Standardized patients and Staff will be prompted to stop, read the signs and do the following:

Prior to entering the sim- lab students, staff, faculty and standardized patients will do the following things

- 1. Hand Hygiene- Gel hand sanitizer provided
- 2. Symptom Check, temperature, and sign in (see symptoms below).
- Don a surgical mask (masks provided).
 Masks are required in all nursing simulation medical center lab areas.
- 4. Wipe laptop down with provided wipes in designated area

Symptom Check Includes: Do you have any of the following symptoms?

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. Anyone can have mild to severe symptoms.

Possible symptoms include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache

COVID-19 Simulation Lab Policy/Procedure

Associate Clinical Professor & Director of Simulation, Dawn Monahan, MSN, RN August 2022.



- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19 (CDC.gov, updated 8/11/22, retrieved 8/18/2022).

Students are encouraged to do the following: Have fun, learn, ask questions and use safe behavior.

Students will not be allowed to participate in simulation labs without adhering to this protocol. Students will be sent home if they arrive in the simulation lab with any signs or symptoms mentioned previously.

Students may be sent to seek medical advice, advised to self- quarantine and to notify the Director of Nursing with any symptoms.

Current CDD guidelines are as follows regarding positive Covid-19 testing (8/11/22):

- Individuals testing positive should isolate for 5 days and may return to activities if no symptoms or fever for 24 hours wearing a high-quality mask for 10 days.
- Individuals testing positive should avoid high risk individuals regardless of mask status for 10 days
- Individuals who have two consecutive rapid negative Covid-19 results after 5 days can resume normal activities without masking.

CDC.gov



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Title: Plymouth State University's Respirator Policy, Nursing Department



PURPOSE:

To establish a Respirator Use Policy regarding the proper fit, use and care of respirators by Nursing students and instructors during clinical learning experiences.

OBJECTIVE:

The primary objective is to protect Nursing students and instructors from airborne infectious disease contaminants to safely engage in clinical learning experiences.

DEPARTMENT RESPONSIBILITY

- Respirators shall be provided by The Plymouth State University Nursing Department when such equipment is necessary to protect the student and instructor.
- 2. The Plymouth State University Nursing Department shall provide the respirators that are applicable and suitable for infectious disease prevention.

3.

1. Protection against aerosols include:

- M. tuberculosis
- Novel Flu
- SARS-CoV-2
- Ribavirin, Pentamidine

2. **PPE is required when:**



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- Entering patient rooms with suspected or confirmed airborne infection
- Aerosol generating procedures
- As directed by your site contact when on rotation
- 4. The Plymouth State University Nursing Department in collaboration with the Office of Environmental Health & Safety, shall be responsible for the establishment and maintenance of a respiratory protection program that shall meet the requirements of OSHA- 29 CFR 1910.134 Respiratory Protection.
- 5. A respirator wearer shall be permitted to leave the hazardous area for any respiratory-related cause. Reasons may include but are not limited to the following:
 - failure of the respirator to provide adequate protection;
 - malfunction of the respirator;
 - detection of leakage of air contaminant into the respirator;
 - increase in resistance of respirator during breathing;
 - severe discomfort in wearing the respirator;
 - illness of the respirator wearer, including: sensation of dizziness, nausea, weakness, breathing difficulty, coughing, sneezing, vomiting, fever, and chills.
 - to wash his/her face and the respirator face piece to minimize skin irritation;
 - to take periodic breaks in an uncontaminated area.

Malfunctions of respiratory protective equipment shall be investigated by the employer to determine the cause and to assure corrective measures are taken. Suspected manufacturing defects should be reported to the manufacturer and certifying agency.

REPSPIRATOR WEARER RESPONSIBILITY

- 1. The wearer shall use the provided respiratory protection in accordance with PSU's instructions, the manufacturer's instructions, as well as the training received.
- 2. The wearer shall guard against all damage to the respirator.



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- If a respirator malfunction occurs, the wearer shall immediately leave the contaminated area and report the malfunction to his/her clinical instructor and The Plymouth State University Nursing Department. The Nursing Department will then report this to the Office of Environmental Health and Safety.
- 4. The wearer shall report any change in his/her medical status that may impact their ability to wear a respirator safely.
- 5. The wearer shall report any changes at their clinical site that may affect this policy to the Nursing Clinical Coordinator or designee.

PROGRAM COORDINATION

 The coordinators of the Respirator Program shall be the Nursing Clinical Coordinator, or designee and the PSU Director of Environmental Health & Safety, or designee. It is the responsibility of the coordinators to assure that the elements outlined in this program are adhered to by all affected students and instructors of The Plymouth State University Nursing Program.

Responsibilities include:

- Working with clinical partners to identify areas or tasks requiring respiratory protection.
- Evaluation of areas where respiratory protection is required.
- Selection of appropriate level of respiratory protection.
- -Provide employee and student training in the use, selection, storage and maintenance of respiratory protection equipment.
- Evaluate employees and students for suitability for respirator use and provide adequate fit testing procedures.
- Coordinate the respirator inspection process if applicable.
- Perform annual evaluation of the respirator program.
- -Maintain documentation on equipment certification and inspection if applicable, as well as training for employees and students.

MEDICAL MONITORING



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 An OSHA Respiratory Medical Clearance Form must be completed by each student and instructor and reviewed by a Medical Authority (MD, DO, APRN, PA, RN) before fit tested for a respirator. The Medical Authority reviewing the clearance form will not be the same party completing the fit testing.

STUDENT/INSTRUCTOR TRAINING PROGRAM

- 1. Respirator users shall be instructed and trained in the proper use of respirators and their limitations.
- 2. The respirator seal must be checked prior to entering the contaminated work area. Failure to do so may result in leakage which voids or limits protection. The work area is to be left immediately if breathing becomes difficult, dizziness or other distress occurs, or if any odor, taste, or irritation is noticeable. Never alter or modify respirators.
- Respirators, even when worn conscientiously, do not provide the wearer with 100% protection. The protection is, however, increased when the wearer has an understanding of the warnings and limitations of these devices.

RESPIRATOR SLECTION PROCESS

The selection of the proper type(s) of respirator(s) shall be based upon:

- Infectious disease prevention
- Respirator guidelines set by partnering clinical agencies
- PSU's Office of Environmental Health and Safety and,
- PSU's Nursing Program

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Currently only N95 respirators are approved for this program. N95 respirators are as follows:

- 3M 1870+ N95 *Primary Option*
- 3M 8210 N95 Secondary Option
- Patriot 9280 N95 Small Option



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N95 Respirators are recommended for single use only and should be disposed of in a regular trash receptacle. The only time this recommendation changes is if there is a severe PPE shortage (for example COVID-19 pandemic).

TRAINING

Each respirator wearer shall be given documented training and retraining, which shall include explanations and discussions of:

- -the respiratory hazard and the effect on the wearer if the respirator is not used properly;
- the engineering and administrative controls being used and the need for respirators to provide protection;
- the reason for selecting a particular type of respirator;
- the function, capabilities, and limitations of the selected respirator;
- -the method of donning the respirator and checking its fit and operation;
- the proper wearing of the respirator;
- respirator maintenance, inspection, and storage;
- recognizing and handling emergency situations;
- applicable governmental regulations for specific substances.

Below are some resources regarding respiratory protection & fit testing:

- OSHA Respiratory Protection Standard (29 CFR 1910.134)
- 3M Fit Test Kit Training Video

ILC Dover Sentinel XL HP PAPR Training Video

3M Helping You Wear it Right 1870 User Instructions and Seal Check

RESPIRATOR FIT

Each person shall be fit tested before being assigned a respirator. Each person using a respirator shall conduct a user seal check of the respirator by appropriate means each time the respirator is donned or adjusted. All respirator fit testing must be documented.

MAINTENANCE, INSPECTION, AND STORAGE

Maintenance shall be carried out in accordance with the manufacturer's instruction and on a schedule that ensures that each respirator wearer is



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provided with a respirator that is clean, sanitary, and in good operating condition. Each respirator shall be inspected by the wearer prior to its use to ensure that it is in proper working condition. Respirators shall be stored in a convenient, clean, and sanitary location.

PROGRAM DOCUMENTATION

All documents produced to meet the documentation requirements of this program (wearer training, fit testing, equipment inspection etc.) shall be kept with the Nursing Clinical Coordinator, or designee.

SPECIAL CONSIDERATIONS

Every respirator wearer shall receive instructions on fit including demonstrations and practice in how the respirator should be worn, how to adjust it, and how to determine if it fits properly. Respirators shall not be worn when conditions prevent a bad face seal. Such conditions may be a growth of beard, sideburns, a skull cap that projects under the face piece, or temple pieces on glasses. Also, the absence of one or both dentures can seriously affect the fit of a face piece. Also, contact lenses should not be worn with a respirator.

Factors preventing a good seal include but are not limited to:

- Facial Hair
- Skull cap
- Facial bone structure
- Dentures
- Facial scars
- Eyeglasses
- *Plymouth State Nursing Students and Instructors will be required to be clean shaven to ensure proper respirator fit for the duration of the clinical learning experience.

FIT TESTING

- NEGATIVE AND POSITIVE USER SEAL CHECK –
- These instructions are for N95 use only. If another type of respirator is being used, please contact The Nursing Department Coordinator or



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designee <u>prior to</u> use. Please follow the manufacturer's instructions when completing a user seal check.

- Both positive pressure and negative pressure fit checks must be performed by the wearer after donning a respirator
- Before beginning a user seal check, place the respirator on your face so that the nose piece covers the bridge of your nose, while the bottom of the respirator cups your chin. Your mouth and nose should be covered by the respirator.
- Place and pull the top strap over your head and position it high on the back of the head.
- Then pull the bottom strap over your head and position it below your ears or around your neck.
- o Adjust the fit to ensure it is comfortable and positioned properly.
- Mold the nose area to the shape of your nose by pushing inward while moving your fingertips down both sides of the nose piece.
- o Always use two hands when molding the nose piece.
- Pinching the nosepiece with one hand may result in improper fit and less effective performance.

Positive Pressure User Seal Check: Place palm of hand over the middle panel of the respirator. Gently exhale to create slight pressure inside the face piece. Check the respirator seal by listening and feeling for leakage of air from the face piece. If you feel air on your face, eyes or if you feel air escaping then you do not have a tight fit. If leakage is detected, reposition the respirator on the face and/or readjust the tension of the headbands. Ensure the respirator fits snugly around the face. Repeat until a satisfactory seal is obtained. If you are unable to create a seal, please contact your clinical instructor or the unit manager immediately. Negative Pressure User Seal Check: Place palms of hands over the middle panel and inhale gently to create negative pressure inside face piece. If your respirator has a cartridge (inhalation ports) cover those with your hands. Hold breath for five to ten seconds. As the face piece collapses slightly, check the respirator seal by listening and felling for leakage of air from the face piece. If you feel air on your face, eyes or if you feel air escaping than you do not have a tight fit. If leakage is detected, reposition the respirator on the face and/or readiust the tension of the headbands. Ensure the respirator fits snuggly around the face. Repeat until a satisfactory seal is obtained.

Qualitative fit testing must be performed initially for all respirator wearers and again on an annual basis or if the person's facial contour changes. Qualitative fit



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testing is performed to test the seal of the face piece. This will be completed by the Program Coordinator or designee.

Particulates-

The 3M FT-10 (sweet) and 3M FT-30 (bitter) Qualitative Fit Testing Kit shall be used and the included Manufacturer Instructions shall be followed.

RESPIRATOR STORAGE

 Respirators must be stored where they are protected from conditions that could alter the shape of the mask. Avoid storing respirators in areas of high heat, direct sunlight, extreme cold, very dusty environments, excessive moisture, or where objects may fall or be place on top of the respirator.

REFERENCES And RELATED DOCUMENTATION

- OSHA Respiratory Protection Standard (29 CFR 1910.134)
- 3M Fit Test Kit Training Video
- ILC Dover Sentinel XL HP PAPR Training Video
- Respirator Medical Clearance Form

REVISION HISTORY

REVISIO	N HISTORY:	
REV	DATE	DESCRIPTION OF CHANGE
Α	7/20/22	Initial issue. Created policy for PSU's nursing department, specifically for N95 usage during off site clinicals.

PSU Department of Nursing Professionalism Rubric

Meets Professional Expectations		Developing Professional Expectations	Does Not Meet Professional Expectations	
Preparedness	 Consistently participates in discussions and answers questions Demonstrates critical thinking by asking questions to synthesize understanding of content 	Usually participates in discussions and can answer some questions Asks questions to increase understanding of topic	 Does not participate in discussions Cannot answer content questions Does not ask questions 	
Time Management	 Attends all classes and clinicals on time Completes and submits work on time 	 Gives advance notice for 1 late or missed class or clinical Notifies instructor of one late assignment 	 Late or absent to class or clinical more than once Missed assignments without notification 	
Quality of work	 Work exceeds minimum requirements Strives for best effort on work Takes initiative to improve work when given feedback 	Required elements of work are adequate Feedback is given multiple times before work is improved	 Work remains incomplete after feedback Work reflects minimal effort Resists feedback, blames circumstances, or does not respond 	
Teamwork	 Stays on task to complete activity Involves team members equally in activities Makes clear and significant contributions to team projects 	Supports team leader in activities Completes assigned portion independent of other team members	 Does not engage in group activities Does not participate or contribute equally during team projects 	
Respectfulness	 Respects faculty, peers, and learning environment through behaviors Follows program policies for technology Regulates own responses to positively impact teamwork and communication Verbal and/or written communication is professional 	 Respects faculty, peers, and learning environment but may disrupt own learning through distractions Follows program policies for technology Regulates own responses to positively impact teamwork and communication Verbal and/or written communication is casual 	 Disrespects faculty, peers, and learning environment through distracting behavior Disrupts own learning through inattention Does not follow program policies for technology Unable to regulate own responses or they negatively impact teamwork and communication Verbal and/or written communication is rude 	
Ethical behavior	 Is always honest in word and action Adheres to program policies on ethical conduct and integrity 	 Is always honest in word and action Adheres to program policies on ethical conduct and integrity 	 Is dishonest in word or action Knowingly violates program policies on ethical conduct and integrity 	
Self-reflection	 Seeks and accepts feedback Demonstrates self-reflection with insight on challenges and strategies Applies feedback to improve own work or behavior 	Accepts instructor feedback Demonstrates self-reflection with attempt to identify challenges and strategies Attempts to apply feedback to improve own work or behavior	 Resists or becomes defensive to feedback Demonstrates minimal awareness of challenges and strategies Blames others or situation for outcomes Does not apply feedback to improve own work or behavior 	
Motivation and Grit	 Demonstrates perseverance and drive to succeed Applies effort to overcome challenges Encourages others to stay motivated and persevere 	 Requires support from others to stay motivated Becomes distracted from goals when stressed Rebounds toward goal with minimal assistance 	 Demonstrates minimal perseverance or internal motivation to reach goals Remains distracted during challenging situations Blames others or circumstances for not reaching goals 	

Section IV. Student Acknowledgement

StudentAcknowledgement of the PSUNursing Student Handbook will be completed each year prior toattending clinical as assigned in the Typhon tracker.