University of North Carolina at Pembroke (UNCP)
Department of Nursing

Student Contract

I have received a copy of the University of North Carolina at Pembroke Department of Nursing 2014-2015 Student Handbook. I have had an opportunity to review and discuss its contents and I agree, as a student enrolled in the BSN program offered by the UNCP Department of Nursing, to adhere to the policies and guidelines set forth. The policies and procedures are subject to change during my course of study and it is my responsibility to keep abreast of these changes.

Name: ________________________________   Date: ___________________________
FORWARD

This 2014-2015 edition of the Student Handbook has been prepared to familiarize, you, the student, with the rules/regulations, responsibilities, and opportunities that exists in the University of North Carolina at Pembroke (UNCP) Department of Nursing. The purposes of the Student Handbook are to: a) provide guidance for new and continuing students, b) describe general policies and procedures of the nursing program, and c) inform students of their rights and responsibilities. This handbook should be used in conjunction with other printed materials distributed during orientation, registration or by faculty during the academic year as well as UNCP policies and procedures as outlined in the UNCP Academic Catalog and UNCP Student Handbook.

This handbook explains, in general, how the Department of Nursing operates; however, the faculty of the Department of Nursing reserves the right to alter the curriculum and educational policies as considered necessary for the progressive development of the program and to maintain academic standards. The Chair, Department of Nursing will notify students of changes and date effective via UNCP email.

Handbook Adopted: September 14, 1992
Handbook Revised: August 9, 1996; June 12, 1998; September 28, 2000; January 14, 2005; May 25, 2006; May 25, 2007; May 23, 2008; June 1, 2009; June 4, 2010; June 1, 2011; May 21, 2012; May 20, 2013; June 16, 2014
# TABLE OF CONTENTS

**CHAPTER 1: INTRODUCTION**
- Welcome from Department of Nursing Chair  
  Page 1
- General Information for BSN Students  
  Page 2
- Overview of the Department of Nursing  
  Page 3
- Meet the Faculty  
  Page 4
- Mission and Purpose  
  Page 7
- Vision Statement  
  Page 7
- Core Values  
  Page 7
- BSN Program Outcomes  
  Page 8
- Philosophy  
  Page 9
- Conceptual Framework  
  Page 11

**CHAPTER 2: ABOUT THE NURSING MAJOR**
- Pre-licensure BSN Option  
  Page 13
  - Admission Requirements  
    Page 13
  - Sample Plan of Study – Full-time Pre-Licensure  
    Page 14
- RN-BSN Completion Option  
  Page 15
  - Admission Requirements  
    Page 15
  - Validation of Previous Nursing Education  
    Page 16
  - Sample Plan of Study – RN-BSN  
    Page 16
- Process for Admission to the Nursing Major  
  Page 16
  - Transfer of Nursing Credit Courses  
    Page 17
- Student Records  
  Page 17

**CHAPTER 3: DEPARTMENT OF NURSING STANDARDS**
- Academic Standards for Progression  
  Page 18
- Core Performance Standards  
  Page 18
- Nursing Student Code of Academic and Professional Behavior  
  Page 20
  - Professional Code of Ethics  
    Page 21
  - Academic Credibility  
    Page 21
  - Unacceptable Academic Behavior  
    Page 22
  - Unacceptable Clinical Behavior  
    Page 23
  - Unsafe Professional Clinical Nursing Practice  
    Page 24
  - Unacceptable Personal Behavior  
    Page 24
  - Guiding Principles for Nursing Students in the Use of Social Media  
    Page 25
  - Procedure for Reporting Academic and Professional Behavior Misconduct  
    Page 26
  - Procedures for Delivering Sanctions  
    Page 27
  - Student Experience  
    Page 28
- Grading System & Grade Points  
  Page 29

**CHAPTER 4: DEPARTMENT OF NURSING POLICIES**
- Academic Assessment and Support Program  
  Page 30
- Academic Credibility  
  Page 35
- Academic Standards for Progression  
  Page 35
- Address, E-Mail, Telephone  
  Page 35
- Administrative Policy Changes  
  Page 35
- Advisement  
  Page 35
- Americans with Disabilities Act  
  Page 36
- Attendance  
  Page 36
- Auditing a Nursing Course  
  Page 36
- Communications within the Classroom and Clinical Settings  
  Page 37
<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>G</td>
<td>RELEASE TO SHARE BACKGROUND INFORMATION AND AGREEMENT TO REPORT FUTURE FELONY OR MISDEMEANOR CONVICTIONS</td>
<td>89</td>
</tr>
<tr>
<td>H</td>
<td>HEALTH INCIDENT REPORT POLICY</td>
<td>90</td>
</tr>
<tr>
<td>I</td>
<td>STUDENT MEDICATION ADMINISTRATION INCIDENT REPORT</td>
<td>91</td>
</tr>
<tr>
<td>J</td>
<td>NURSING STUDENT CODE OF ACADEMIC AND PROFESSIONAL BEHAVIOR</td>
<td>92</td>
</tr>
<tr>
<td>K</td>
<td>THE INTERNATIONAL PLEDGE FOR PROFESSIONAL NURSING</td>
<td>93</td>
</tr>
</tbody>
</table>
CHAPTER I
INTRODUCTION

WELCOME FROM THE NURSING CHAIR AND FACULTY

Welcome and Congratulations! Thank you for choosing the BSN Program at the University of North Carolina at Pembroke to begin your professional career in nursing. You have chosen one of the most rewarding, challenging, and respected professions available.

Nursing is both an art and a science. The art of nursing is concerned with the caring skills of individual nurses; the science of nursing is based on knowledge from the natural and behavioral sciences. Together the art and science of nursing provide insights for the profession in meeting its mission of providing for the health care needs of clients in home, community or institutional health care delivery settings. You will be learning both, as it relates to the client’s physical, psychological, sociological, cultural, and spiritual concerns.

You will have to study hard and build upon the knowledge from your previous classes. You will be actively seeking solutions to client problems through critical thinking and systematic investigation rather than passively assimilating or memorizing knowledge. Through the use of a decision making process called the nursing process you will make the transition from a college classroom student to a professional nursing student in the clinical setting. This will take a strong commitment to the nursing profession and a never-ending thirst for knowledge.

When you graduate from the nursing program, you will have a strong foundation upon which to continue your lifelong commitment to the nursing profession. You will be well-prepared for the many nursing opportunities available in the health care field and to make a difference in the lives of your clients, their families, and communities.

This Student Handbook has been designed to answer your questions about the program and provide information affecting your role as student. Please read this document at the beginning of your nursing program and refer back to it throughout your course of study. We hope that this handbook is helpful as you progress through the program.

We look forward to teaming with you to make your educational journey meaningful, rewarding, and successful as the Department of Nursing is “Striving for Excellence.” We hope you enjoy your journey as a nursing student at the University of North Carolina at Pembroke.

As the Chair of the Department of Nursing, I look forward to meeting each of you. Please call 910-521-6522 to schedule an appointment or email barbara.synowiez@uncp.edu, if you want to discuss your learning experience as well as share your joys and achievements.

Barbara B. Synowiez, PhD, MSN, RN
Chair and Professor
GENERAL INFORMATION FOR BSN STUDENTS

The Department of Nursing follows the policies of the University of North Carolina at Pembroke (UNCP) as outlined in the University Catalog and the Student Handbook. Policies outlined in this handbook are those specific to the baccalaureate nursing program that further clarify academic policies and procedures the nursing faculty have established for students in the major. It is intended to complement, not replace, the rules and regulations as set forth in the University Catalog and/or Student Handbook. It is your responsibility to become acquainted with the UNCP University policies. This handbook will be maintained on the Department of Nursing website; policy changes will be updated electronically. Students will be notified of changes and date effective via UNCP email.
OVERVIEW OF THE DEPARTMENT OF NURSING

The Department of Nursing builds on a rich heritage that began with the establishing of the Southeastern North Carolina Nursing Consortium in 1992, a joint RN-BSN completion program between UNCP and Fayetteville State University. The program was established to increase access to baccalaureate education for registered nurses who had graduated from associate degree nursing programs and hospital-based programs, to increase the number of minority nurses with BSNs, and to respond to the health care needs of citizens in the most underserved area of southeastern North Carolina. The Consortium was the first BSN program in North Carolina to receive Commission on Collegiate Nursing Education (CCNE) accreditation for 10 years with no recommendations. The Consortium separated August 1, 2004; at that time, the UNCP baccalaureate nursing program transitioned to a Department of Nursing within the University structure. The Department of Nursing is housed in the new state-of-the-art Health Sciences Building on the campus of UNCP.

In September 2004, the North Carolina Board of Nursing granted initial approval for the new pre-licensure BSN option to admit its first students in July 2005. The Board of Nursing approved 200 student positions for the pre-licensure BSN option. The pre-licensure BSN option has had seven graduating classes that have taken the NCLEX-RN® examination, achieving 100%, 100%, and 96% pass rate in the last three years respectively (2014 graduates have yet to take the NCLEX-RN® examination), thus, surpassing the North Carolina Board of Nursing and UNC General Administration benchmarks. The RN-BSN completion option is for the Registered Nurse (associate degree or diploma graduates) who wishes to complete a baccalaureate of science in nursing degree. The length of the program varies, depending on equivalent prerequisite courses completed, and choice of part-time or full-time enrollment. The RN-BSN completion option is offered through a combination of face-to-face and distance education courses. Since 2005, UNCP has offered RN-BSN completion and pre-licensure BSN educational programs in response to the critical need for baccalaureate-prepared nurses not only at the national and state level but also in southeastern North Carolina.

In February 2013, the UNC Board of Governors approved UNC Pembroke’s proposal to offer a Master of Science in Nursing program. The initial cohort of graduate students was admitted in the fall 2013 semester. The MSN program offers three educational tracks: nurse educator, clinical nurse leader, and rural case manager.

Since its beginning, the Department of Nursing has continued to grow in numbers of nursing majors and faculty. Graduates from the baccalaureate program are employed as professional nurses throughout the state and nation. Today, the Department of Nursing serves a population of over 500 nursing majors and employs 19 full-time faculty members.

The Department of Nursing is committed to national, specialized nursing accreditation that notes we are offering a program of quality, professional nursing education.

The Department of Nursing BSN program is accredited by the Commission on Collegiate Nursing Education Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036-1120; (202) 887-6791; http://www.aacn.nche.edu/Accreditation/index.htm. The Department of Nursing pre-licensure BSN program is fully approved by the North Carolina Board of Nursing. The Department of Nursing holds agency membership in the American Association of Colleges of Nursing.
<table>
<thead>
<tr>
<th>Name</th>
<th>Most Advanced Degree and Discipline</th>
<th>Other Degrees and Academic Credit</th>
<th>Other Qualifications or Experiences</th>
<th>Teaching Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barbara Synowiez</td>
<td>PhD – Education University of Pennsylvania</td>
<td>MSN – Nursing Duke University; BSN – Nursing UNC – Chapel Hill</td>
<td>Clinical nursing practice experience in nursing management, community health, and family nursing; Chair and BSN Coordinator at UNCP; Primary Care Clinical Specialist; In academia 37 years (taught in ADN, BSN, and MSN programs of nursing).</td>
<td>Nursing Research and Theory; Transition to Professional Nursing; Nursing Leadership; Capstone; Nurse Educator concentration in MSN program</td>
</tr>
<tr>
<td>Joyce Beard</td>
<td>MSN – Community Health UNC – Charlotte Nursing Education (Post Masters Certificate) UNC – Charlotte</td>
<td>BSN – Nursing UNC – Pembroke; ADN – Nursing Sandhills Community College</td>
<td>Clinical nursing practice experience as school nurse; National Certification as School Nurse, Certification as Clinical Specialist in Public and Community Health; Adjunct – U. of Phoenix and UNC-Pembroke prior to joining faculty full-time. Enrolled in terminal degree studies in nursing at the University of North Carolina - Greensboro in fall 2010. In academia 6 years.</td>
<td>Found. of Professional Nursing Practice Family Nursing I and II; Community Health Nursing</td>
</tr>
<tr>
<td>Cherry Beasley</td>
<td>PhD – Nursing East Carolina University</td>
<td>MS – Public Health Nursing UNC – Chapel Hill FNP University of South Carolina BSN – Nursing University of Michigan</td>
<td>Clinical nursing practice experience as FNP at UNCP Student Health Services. In academia 26 years; Certified Nurse Educator.</td>
<td>Found. of Professional Nursing Practice; Health Assessment; Pathophysiology; Community Health Nursing; Capstone; Focused Care; MSN program</td>
</tr>
<tr>
<td>Jennifer Coughenour</td>
<td>MSN – Nursing CNL University of South Alabama Nursing Education (Post Masters Certificate) University of South Alabama</td>
<td>BSN UNC-Pembroke; ADN Richmond Cmty College</td>
<td>Clinical nursing practice experience in women’s health and occupational health; leadership role as coordinator of mobile health clinic. Certified Clinical Nurse Leader. In academia 6 months.</td>
<td>Found. of Professional Nursing Practice; Family Nursing I; Community Health Nursing; Nursing Leadership; Focused Care</td>
</tr>
<tr>
<td>Dena Evans</td>
<td>EdD – Education North Carolina State University</td>
<td>MPH – Nursing UNC – Chapel Hill BSN – Nursing Gardner Webb ADN – Nursing Richmond Community College</td>
<td>Chair of Health Sciences, Richmond Community College; Clinical instructor ADN; enrolled in MSN program at UNC-Chapel Hill with Clinical Nurse Leader focus. In academia 15 years; Certified Nurse Educator.</td>
<td>Found. of Professional Nursing Practice; Community Health Nursing; Pharmacology; Nursing Leadership; Focused Care; MSN program</td>
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</tr>
<tr>
<td>Martha Hepler</td>
<td>Clinical Assistant Professor (full-time)</td>
<td>MSN – Nursing Education Duke University</td>
<td>BSN - Nursing Glenville State College/West Virginia University</td>
<td>Clinical nursing practice experience in labor and delivery and neonatal intensive care; Nursing instructor ADN; Director of Clinical Learning Center; In academia 10 years.</td>
</tr>
<tr>
<td>Jennifer Johnson</td>
<td>Assistant Professor (full-time)</td>
<td>DNP University of Alabama - Tuscaloosa</td>
<td>MSN – Nursing East Carolina University WHNP UNC-Chapel Hill BSN – Nursing Barton College</td>
<td>Clinical nursing practice experience in school and public health nursing; School-based clinic coordinator; Maternity care coordinator; Women’s Health Nurse Practitioner; Director, Undergraduate Programs; In academia 11 years.</td>
</tr>
<tr>
<td>Jennifer Jones-Locklear</td>
<td>Clinical Assistant Professor (full-time)</td>
<td>MSN – Nursing Education University of Phoenix</td>
<td>BSN - Nursing UNC Pembroke ADN Robeson Cmty College</td>
<td>Clinical nursing practice experience in psychiatry, emergency department, and home health; Nurse educator in staff development, practical and associate degree nursing. Enrolled in doctoral studies at East Carolina University. In academia 9 years.</td>
</tr>
<tr>
<td>Debbie Locklear</td>
<td>Clinical Assistant Professor (full-time)</td>
<td>MSN – Nursing Education University of Phoenix</td>
<td>BSN - Nursing UNC Pembroke ADN Robeson Cmty College</td>
<td>Clinical nursing practice experience in long-term care and urgent care. Has held leadership position as Director of Nursing of long-term care facility, house supervisor, and coordinator of physician network.</td>
</tr>
<tr>
<td>Astrid Oviedo</td>
<td>Assistant Professor (full-time)</td>
<td>MSN – Nursing Education UNC Greensboro</td>
<td>BSN North Valley College Foundation Philippines</td>
<td>Clinical nursing practice experience in medical-surgical nursing; tutor in pathophysiology and advanced pathophysiology; ADN adjunct clinical instructor. Enrolled in doctoral studies at UNC-Greensboro. In academia 1.5 years.</td>
</tr>
<tr>
<td>Katharine Rocklein</td>
<td>Assistant Professor (full-time)</td>
<td>DNP Loyola University</td>
<td>MSN Loyola University BSN Queen’s University at Kingston</td>
<td>Clinical nursing practice experience in medical-surgical and emergency nursing. In academia 2.5 years.</td>
</tr>
<tr>
<td>Joyce Stanley</td>
<td>Assistant Professor (full-time)</td>
<td>MSN – Nursing Emergency and Critical Care George Mason University</td>
<td>BSN – Nursing Clemson University</td>
<td>Clinical nursing practice experience in medical-surgical, critical care, and emergency nursing. Lieutenant Colonel US Army retired; Completed 9 credits in nursing education at ECU; LEC Coordinator. In academia 10 years.</td>
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<td>Teaching Responsibilities</td>
</tr>
</tbody>
</table>
| Misty Stone  
Clinical Assistant Professor (full-time) | MSN – Nursing Education  
Governors University | BSN  
UNC Wilmington  
ADN  
Southeastern Cmty College | Clinical nursing practice experience in home health; leadership experience as home health manager; nurse recruiter, ADN adjunct clinical instructor. In academia 1 year. | Found. of Professional Nursing Practice; Nutrition; Adult Hlth Nursing I and II; Focused Care |
| John Toth  
Assistant Professor (full-time) | MSN – Nursing Education  
Waynesburg University | BSN  
Duquesne University | Clinical nursing practice experience in cardiology; ADN adjunct clinical instructor; In academia 3 years. | Found. of Professional Nursing Practice; Adult Hlth Nursing I and II; Focused Care |
| Jennifer Twaddell  
Assistant Professor (full-time) | PhD – Nursing  
UNC Greensboro | MSN – Nursing Education  
Duke University  
BSN – Nursing  
Radford University | Clinical nursing practice experience in Level III Neonatal ICU; Neonatal Resuscitation Certified; Director, Graduate Program; In academia 10 years. | Found. of Professional Nursing Practice; Adult Hlth Nursing I and II; Health Assessment; Focused Care; MSN Program |
| Tiffany Tyson  
Assistant Professor (full-time) | DNP – Nursing  
Robert Morris University | MSN – FNP  
Duke University  
BSN  
Barton College | Clinical nursing practice experience in medical-surgical, oncology, telemetry, dermatology; FNP; In academia 1 year. | Found. of Professional Nursing Practice; Health Assessment; Family Nursing II; Psych/Mental Health; Pathophysiology |
| Aprel Ventura  
Assistant Professor (full-time) | MSN – Nursing Education  
Duke University | BSN – Nursing  
UNC Pembroke  
ADN  
Robeson Cmty College | Clinical nursing practice experience in medical-surgical and home health/hospice. Experience with high-fidelity patient simulators in nursing education. Nursing Instructor in ADN education. Enrolled in doctoral studies at East Carolina University; In academia 7 years; Certified Nurse Educator. | Nutrition; Adult Health Nursing I and II; Pathophysiology; Community Health Nursing; Focused Care |
MISSION and PURPOSE STATEMENT

The Department of Nursing is dedicated to carrying out the mission of the College of Arts and Sciences and the University of North Carolina at Pembroke. As an integral academic unit of the University, the Department of Nursing is committed to the tripartite roles of teaching, research, and community service that contribute to the cultural, intellectual, and social development of professional nurses in North Carolina and the nation. Students are provided the opportunity to obtain a multicultural education that is grounded in the arts, sciences and humanities; that is congruent with standards for professional nursing practice; and that prepares them for lifelong learning, professional development, and service to others.

The primary purposes of the UNCP Department of Nursing program are to (a) provide accessible, seamless, high-quality undergraduate and graduate nursing education to diverse student populations in order to create leaders in professional nursing practice, and (b) prepare graduates to provide safe, high-quality, cost-effective professional nursing services, to improve health across the life span, for individuals, families, groups, and communities in a variety of settings.

VISION STATEMENT

The vision of the Department of Nursing is to achieve regional distinction as a leader of excellence in our nursing educational programs and in scholarship, service, and community engagement.

CORE VALUES

Professionalism is characterized by the adoption of core values as part of a nurse’s commitment to competency, compassion in practice, and the highest standards of professional performance in the ethical conduct of nursing. The core values shared by the faculty include:

• Caring - We strive to be compassionate, sensitive, and considerate in all our interpersonal interactions and to better understand and respond to the needs of our diverse community.
• Excellence - We seek to achieve the highest possible quality in our educational programs and in our teaching, research, scholarship, service, and community engagement.
• Inquiry: We engage in the discovery, translation, application, integration, and dissemination of knowledge that contributes to the advancement of evidence-based professional nursing education and practice.
• Teamwork - We work collaboratively, value the contributions of all, and develop and maintain productive working relationships.
• Diversity - We promote a climate of diversity among faculty, staff, and students because it is vital to the community we serve.
• Transparency - We maintain open and honest organizational and interpersonal communication.
• Respect - We create a positive environment by treating all individuals with mutual respect and sensitivity, recognizing the importance of their contributions and diversity.
• Accountability – We foster a culture of responsibility for our decisions, our actions and our results.
BSN PROGRAM OUTCOMES

The baccalaureate program prepares the graduate to:

1. Integrate evidence-based knowledge from nursing, the arts and humanities, and bio-psycho-social sciences to shape the practice of professional nursing.

2. Utilize the nursing process to demonstrate critical thinking and clinical reasoning skills for the delivery of safe, client-centered care across the lifespan for individuals, families, groups, and communities.

3. Demonstrate competence in the nursing roles of provider of care, designer/manager/coordinator of care, and member of a profession to continuously improve the quality and safety of an ever-changing and complex healthcare environment.

4. Integrate principles of leadership, management, health care policy, and client safety into the provision and oversight of nursing practice across health care settings.

5. Practice inter- and intra-professional communication and collaboration through the use of oral, written, and technological communication strategies to facilitate safe, quality client-centered care.

6. Integrate knowledge and skills related to client care technologies and global health information systems to facilitate clinical decision making and the delivery of safe effective nursing care.

7. Provide holistic nursing care to promote, restore, and maintain the maximum human potential of individuals, families, groups, and communities across the lifespan.

8. Adhere to ethical, legal, regulatory mandates and professional standards for the delivery of safe, client-centered care through individual performance and inter-professional collaboration in an ever-changing healthcare environment.

9. Assume responsibility for own decisions and actions in the practice of professional nursing.

10. Demonstrate professional behaviors that integrate altruism, autonomy, integrity, social justice and respect for diversity and human dignity with recipients of nursing care and members of healthcare system.

11. Accept accountability for continual lifelong learning, personal and professional growth and commitment to the advancement of the nursing profession.

The faculty has adopted the American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education for Professional Nursing Practice (2008) as the primary professional standards to guide the BSN curriculum. The relationship between the BSN program outcomes and the Essentials of Baccalaureate Education for Professional Nursing Practice is displayed on the following page. In addition, the faculty uses Nursing: Scope and Standards of Practice (ANA, 2010), the Code of Ethics for Nurses with Interpretive Statements (ANA, 2001), the North Carolina Nursing Practice Act and the Institute of Medicine (IOM) Report the Future of Nursing: Leading Change, Advancing Health (2010) to also guide the BSN curriculum.
<table>
<thead>
<tr>
<th>Essentials of Baccalaureate Education for Professional Nursing Practice</th>
<th>UNCP BSN Program Outcomes</th>
</tr>
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<tbody>
<tr>
<td>Liberal Education for Baccalaureate Generalist Nursing Practice – “A solid base in liberal education provides the cornerstone for the practice and education of nurses.”</td>
<td>1, 2, 3, 4, 7, 9, 10</td>
</tr>
<tr>
<td>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.”</td>
<td>1, 2, 3, 4, 5, 6, 7, 8, 11</td>
</tr>
<tr>
<td>Scholarship for Evidence Based Practice – “Professional nursing practice is grounded in the translation of current evidence into one’s practice.”</td>
<td>1, 2, 3, 6, 7, 8, 9, 11</td>
</tr>
<tr>
<td>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.”</td>
<td>1, 3, 5, 6, 9, 10</td>
</tr>
<tr>
<td>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.”</td>
<td>2, 4, 5, 7, 8, 9, 10, 11</td>
</tr>
<tr>
<td>Inter-professional Communication and Collaboration for Improving Patient Health Outcomes – “Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.”</td>
<td>5, 7, 8, 9, 10, 11</td>
</tr>
<tr>
<td>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.”</td>
<td>1, 7, 9, 10</td>
</tr>
<tr>
<td>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.”</td>
<td>2, 4, 7, 9, 10</td>
</tr>
<tr>
<td>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,” and “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.”</td>
<td>1, 2, 3, 4, 5, 7, 8, 9, 10, 11</td>
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**PHILOSOPHY**

We believe that persons, existing as individuals, families, groups, and communities, are complex and diverse biological, psychological, social, cultural and spiritual beings. Humans are unique, possess dignity, worth, respect, and have the capacity for compassion and caring for others, and the right to self-determination. Humans have the right of choice; thus, they are accountable for their actions. As continually developing beings, humans adapt to or modify an ever-changing environment as they strive toward a state of self-actualization.

We believe that persons live in and interact with the environment, and each is affected by the other. The environment is the totality of all conditions and circumstances that surround and have an impact on the development and adaptive functions of individuals, families, groups, and communities. The interrelationships of factors in the environment, both internal and external to individuals, families, groups and communities, create a milieu in which these systems grow and change; thus, influencing their state of health.
We believe that health is an essential ingredient for optimal quality of life. Health is a dynamic state of being influenced by biological, psychological, social, and cultural factors. Humans take deliberate actions to accomplish health goals, to achieve a high-level of well being, and to care for self and/or others. Well-being is a perception of health and human existence, and is influenced by lifestyles and human experiences within the context of culture and society. Attaining and maintaining health and well being are the responsibility of a society and its members as a whole. Every individual, family, group, and community has the right to access nursing and health care within the parameters of available health resources.

We believe that nursing is an aesthetic art, a scientific discipline, and a practice profession accountable to society for responding to its health needs. Nursing is characterized by providing unique, specialized, and caring health services, in collaboration with individuals, families, groups, and communities, for the promotion, maintenance, and restoration of optimal health and well-being.

We believe that professional nursing is a dynamic process that evolves as the nurse intervenes and addresses needs of individuals, families, groups, and communities. Professional nursing includes interrelated theoretical and practice components. The theoretical component involves the synthesis and application of knowledge from nursing, physical, social, biological, and behavioral sciences as well as the humanities. Clinical inquiry, reasoning, and decision-making, effective interpersonal, oral, written, and technological communication strategies, and psychomotor skills characterize the practice component. Professional nurses function independently and interdependently in a variety of settings and are ethically and legally accountable for the quality of their practice.

We believe that professional nursing education, built on a foundation of liberal arts, sciences, and humanities, guides the learner to attain competencies required for professional nursing practice. Nursing education acknowledges that learners are a student population with diverse cultural backgrounds, learning styles, abilities, educational experiences. The design of the undergraduate and graduate programs recognizes learner’s previous education, life and work experiences as well as individual student values. During the educational process, students have multiple opportunities to enhance their self-awareness; to promote professional identification, commitment, and collegiality; to synthesize and apply knowledge; to be introduced to and build upon psychomotor skills; and to internalize the results of changes in attitudes, values, thoughts, and behaviors. Baccalaureate education prepares graduates to function as generalists in any healthcare setting and in the roles of provider of care, designer/manager/coordinator of care, and member of the nursing profession. Graduate education builds upon the generalist foundation of baccalaureate education to prepare nurses for advanced practice roles in a variety of settings. It serves as a pathway for expanding the understanding of the nursing metaparadigm by providing for the integration of advanced knowledge, theory, and research. It provides experiences in leadership, evidence-based practice, health policy development, and the development of role competence in a specialized area of nursing practice to meet the current and future health needs of diverse populations in an ever-changing healthcare environment. Education is a life-long process and it is the responsibility of each professional nurse to seek life-long educational opportunities.

We believe that learning is a dynamic process that results in a change in attitude, values, thoughts, and behavior. Each student is unique and learning is influenced by needs, style of learning, age, and past experiences. The student is responsible for learning and must be self-directed and motivated for learning to occur. Learning occurs through the development of critical thinking, active inquiry, clinical reasoning and decision-making, and active participation in the educational process. Faculty has the responsibility to design learning activities that are innovative, multi-sensory, and progressing from simple to complex. Faculty and students share the responsibility for creating an educational climate that fosters intellectual inquiry, freedom of expression, critical thinking and creativity, and facilitates the development of
learner potential. In the teaching/learning process, faculty is responsible for functioning as facilitators, resource persons, and role models, providing educational opportunities for the nursing profession without regard to race, age, creed, color or national origin.

**CONCEPTUAL FRAMEWORK**

The conceptual framework has been designed to provide organization to the nursing curriculum by serving as a guide for the selection of nursing content, ordering of courses, and sequencing of learning experiences. There are seven (7) major concepts that are central to the conceptual framework for the curriculum. These concepts, adapted from the *Essentials of Baccalaureate Education* (AACN, 1998, 2008), *the Essentials of Master’s Education in Nursing* (AACN, 2011), and the ANA *Nursing: Scope and Standards of Nursing Practice* (2010) are defined as follows:

**Person**

Person includes the learner, individuals, families, groups, and communities. Human beings are unique individuals who have dignity, worth, and respect. They possess the capacity for compassion and caring for others and the right to self-determination. Humans are complex, diverse, whole and unified beings whose physical, psychological, sociocultural and spiritual needs are integrated and inseparable. Throughout the life span, humans adapt to or modify an ever-changing environment as they strive to meet their needs and attain optimal health and development.

**Environment**

Environment is the total of both internal and external conditions and circumstances that have an impact on the development and adaptive functions of individuals, families, groups, and communities. Environment includes physical, chemical, biological, psychological, social, spiritual, and cultural factors that interact with and influence humans and their state of health.

**Health/Well-Being**

Health represents a dynamic state of being resulting from the interactions of humans and their internal and external environments. Well-being is a perception of health and human existence, and is influenced by lifestyles and human experiences within the context of culture and society as a whole. Humans strive to attain a high quality of life by integrating environmental factors, maximizing their potential, and engaging in health promotion, risk reduction, illness prevention, and rehabilitation activities. Optimum health and well being allows individuals, families, groups, and communities to advance beyond basic needs, and to focus energies on interpersonal, spiritual, social relationships, and self-fulfillment. An individual’s state of health can vary from optimum well being to illness, disease, and dysfunction and change throughout the life span.

**Professional Nursing**

Professional nursing is a dynamic process that evolves as the nurse interacts with individuals, families, groups, and communities to meet potential or actual health care needs. Based on the desired outcomes, professional nurses intervene to promote health and well being, prevent illness, and assist with self-care activities that contribute to recovery or with activities that result in a peaceful death.

**Caring**

Caring is “central to professional nursing practice and encompasses the nurse’s empathy for, connection to, and being with the patient, as well as the ability to translate these affective characteristics into
compassionate, sensitive, and patient-centered care” (AACN, 2008, p. 26). Caring is providing assistance to and expressing concern for others to enhance their well being and promote healthy growth and development. Essential components of the caring process include knowledge, communication, self-awareness and development, and the professional values of altruism, autonomy, human dignity, integrity, and social justice.

**Inquiry**

Inquiry is the seeking of information, knowledge, and truth through the processes of questioning, studying, exploring, or examining. It includes the use of the nursing process, scientific method, research process, information technology and critical thinking. Critical thinking is a deliberate and systematic process that “underlies independent and interdependent decision making” (AACN, 2008, p. 36) and involves “questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application, and creativity” (AACN, 1998, p.9).

**Professional Nursing Practice**

Professional nursing practice includes evidence-based therapeutic nursing interventions for the purpose of health promotion, risk reduction, illness prevention, and rehabilitation with individuals, families, groups, and communities. In clinical practice, the professional nurse uses the nursing process to interact with clients in achieving mutual goals. The nursing process is a deliberate and systematic approach that consists of assessment, diagnosis, planning, implementation and evaluation. Application of the nursing process requires sensitivity to differences between the values of clients and those of the nurse.

The professional nurse engages in three interrelated roles. As a provider of care, the professional nurse provides direct and indirect care for diverse populations across the healthcare continuum. Clinical judgments are made using critical thinking and clinical reasoning within a cultural, legal, ethical, and regulatory framework (AACN, 2008, p. 8). The role is based upon professional knowledge, skills, and attitudes related to client-centered care, evidence-based practice, teamwork and collaboration, quality improvement, safety, and informatics (QSEN, 2007). As a designer/manager/ coordinator of care, the professional nurse functions autonomously and interdependently within inter- and intra-professional health care teams. Nurses are accountable for their professional practice and image as well as for client outcomes related to their own and delegated nursing care. This role is based upon professional knowledge, skills and attitudes related to organization, delegation, supervision, collaboration, and leadership to promote high quality, cost-effective care within the context of client values and preferences (AACN, 2008, p. 9). As a member of the nursing profession, the nurse possesses a professional identity and is accountable for one’s professional nursing image. This role is based on strong critical reasoning, clinical judgment, communication, and assessment skills. As an advocate for high quality care for all clients and the advancement of the nursing profession, the professional nurse assumes an active role in the policy processes that shape health care delivery and systems of care. The professional nurse is committed to self-analysis, reflection, life-long learning, and continuous professional development to maintain competence in professional nursing practice (AACN, 2008, p. 9).

Professional nurses with master’s degrees are prepared with broad knowledge and practice expertise “for flexible leadership and critical action within complex, changing systems, including health, educational, and organizational systems. They are equipped with valuable knowledge and skills in order to lead change, promote health, and elevate care to diverse populations in various roles and settings” (AACN, 2011, p. 3) and commit to life-long learning. Professional nurses prepared at the master’s level assume a leadership role in promoting evidence-based nursing practice and contribute to the enhancement of nursing as a profession through their practice, teaching, scholarship, and service.
CHAPTER II
ABOUT THE NURSING MAJOR

The Department of Nursing provides both a pre-licensure BSN and an RN to BSN course of study.

PRE-LICENSURE BSN OPTION

The Pre-licensure BSN option is 4½ academic years in length and encompasses two phases. The first phase is comprised of 62 semester credit hours of lower-division work, including liberal arts and nursing prerequisites. The broad educational background in the physical, social, and behavioral sciences afforded by this phase provides the foundation for the nursing major. The second phase is comprised of 62 semester credit hours of upper-division work in the nursing major and is completed within the Department of Nursing. Taken during the junior and senior years, these courses are designed to prepare the baccalaureate nurses for practice in a variety of settings.

Students are admitted to the baccalaureate nursing program at the upper division level. Lower division courses must be completed before beginning nursing courses. The first nursing courses begin in the second summer session preceding the junior year. The nursing curriculum includes both didactic and clinical experiences for students to develop a beginning level of competency and independence in the provision of quality professional nursing services, across the life span, for individuals, families, groups, and communities. Integrated throughout the nursing curriculum are concepts and skills most critical to the delivery of professional nursing services to culturally diverse rural populations.

The Bachelor of Science in Nursing will be awarded to students who successfully complete both phases of the requirements for the degree. Degree recipients will then be eligible to take the NCLEX-RN licensure examination administered by the National Council of State Boards of Nursing. A registered nurse (RN) license will be awarded upon a successful “Pass” on NCLEX-RN and satisfaction of other Board of Nursing licensure requirements.

Admission Requirements

1. Admission to UNCP by meeting general requirements for admission as a regular degree seeking student.
2. Successful completion of all 62 hours of general education nursing core (46 hours) and pre-requisite nursing major (16 hours) courses with a grade of C or better prior to Summer Session II of the year of admission.
3. A cumulative GPA of 2.8 (4.0=A) in all post high school work. Each student’s total GPA is calculated on all transferable college courses attempted at all accredited institutions of higher education according to the UNCP Admissions Office guidelines.
4. A cumulative GPA of 2.8 (4.0=A) in the following courses: College Algebra, CHEM I and Lab, CHEM II and Lab, Microbiology, Anatomy I and Anatomy II.
5. Physical, mental, and emotional health that enables a student to participate in and complete the program (see departmental policies).
6. Submission of a supplemental application to the Department of Nursing by February 1 of the year the applicant plans to enter the BSN program. All applicants will be notified of acceptance status no later than April.
**Requirements for Pre-licensure BSN Option**

<table>
<thead>
<tr>
<th>General Education and Support Courses</th>
<th>Sem. Hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Composition: ENG 1050, 1060</td>
<td>6</td>
</tr>
<tr>
<td>Arts and Humanities: restricted selection*, PHI 1010 required</td>
<td>12</td>
</tr>
<tr>
<td>General Education Electives: SPE 1020 (all freshmen are required to take this course unless they test out of it; those who test out will need another 3 hours from General Education elective options)</td>
<td>3</td>
</tr>
<tr>
<td>Social Sciences: PSY 1010, SOC 1020 recommended, restricted selection*</td>
<td>9</td>
</tr>
<tr>
<td>Natural Sciences/Math: CHM 1400, 1410; CHM Lab 1120, 1130; MAT 1070 or higher</td>
<td>11</td>
</tr>
<tr>
<td>Physical Education: restricted selection*</td>
<td>2</td>
</tr>
<tr>
<td>Anatomy and Physiology: BIO 2110, 2120</td>
<td>8</td>
</tr>
<tr>
<td>Microbiology: BIO 3150</td>
<td>4</td>
</tr>
<tr>
<td>Biology: BIO 1000</td>
<td>3</td>
</tr>
<tr>
<td>Statistics: PSY 2080, SOC 3600, or MAT 2100</td>
<td>3</td>
</tr>
<tr>
<td>Health Technology and Informatics: NUR 2000</td>
<td>1</td>
</tr>
</tbody>
</table>

**Required Nursing Courses**

| NUR 3010, 3030, 3040, 3050, 3100, 3150, 3200, 3250, 3450, 3500, 4000, 4120, 4150, 4350, 4450, 4510 | 62 |

**Total: 124**

* Refer to General Education Requirements section of the University catalog for restricted elective choices.

**Sample Plan of Study for Full-Time Student (Pre-licensure BSN Option)**

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
<th>Spring</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summer Between Sophomore and Junior Year- Begin Nursing Major Courses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intro. To Professional Nursing (NUR 3010)</td>
<td>2 cr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Found. of Nursing Practice (NUR 3030)</td>
<td>4 cr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6 cr.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Junior Year – Nursing Major Courses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutrition for Clinical Practice (NUR 3040)</td>
<td>2 cr.</td>
<td>Pathophysiology (NUR 3250)</td>
<td>3 cr.</td>
</tr>
<tr>
<td>Pharmacology (NUR 3050)</td>
<td>3 cr.</td>
<td>Family Nursing I (NUR 3450)</td>
<td>5 cr.</td>
</tr>
<tr>
<td>Transcultural Nursing (NUR 3100)</td>
<td>3 cr.</td>
<td>Family Nursing II (NUR 3500)</td>
<td>5 cr.</td>
</tr>
<tr>
<td>Adult Health Nursing I (NUR 3150)</td>
<td>5 cr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Assessment (NUR 3200)</td>
<td>3 cr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16 cr.</strong></td>
<td><strong>Total</strong></td>
<td><strong>13 cr</strong></td>
</tr>
<tr>
<td><strong>Senior Year – Nursing Major Courses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Research and Theory (NUR 4000)</td>
<td>3 cr.</td>
<td>Nursing Leadership (NUR 4120)</td>
<td>5 cr.</td>
</tr>
<tr>
<td>Psych/Mental Health Nursing (NUR 4150)</td>
<td>5 cr.</td>
<td>Adult Nursing II (NUR 4450)</td>
<td>6 cr.</td>
</tr>
<tr>
<td>Community Health Nursing (NUR 4350)</td>
<td>5 cr.</td>
<td>Capstone (NUR 4510)</td>
<td>3 cr.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13 cr.</strong></td>
<td><strong>Total</strong></td>
<td><strong>14 cr</strong></td>
</tr>
</tbody>
</table>
RN-BSN COMPLETION OPTION

The RN-BSN accelerated completion option is designed for registered nurses who wish to earn the baccalaureate nursing degree. Building on competencies attained by the registered nurse, the program extends the student’s knowledge, skills, attitudes, and scope of practice for expanded career opportunities, enhances personal and professional satisfaction, and develops a foundation for further study in graduate nursing education.

Admission Requirements

1. Be admitted to UNCP by meeting general requirements for admission as a regular degree-seeking student.
2. Present evidence of having earned an Associate Degree in Nursing or a Hospital Diploma in nursing, from an accredited program.
3. Have a current, valid North Carolina nursing license or a license with multistate practice privileges by authority of the Nurse Licensure Compact.
4. Successfully complete all but 9 semester hours of the 62 hours of general education nursing core (46 hours) and prerequisite nursing major (16 hours) courses (grade of C or better) prior to enrolling in the first nursing course.
5. A cumulative GPA of 2.8 (4.0=A) in all post high school work. Each student’s total GPA is calculated on all transferable college courses attempted at all accredited institutions of higher education according to the UNCP Admissions Office guidelines.
6. A cumulative GPA of 2.8 (4.0=A) in the following courses: College Algebra, CHEM I and Lab, CHEM II and Lab, Microbiology, Anatomy I and Anatomy II.

Requirements for a Bachelor of Science in Nursing (BSN) Degree for RNs (RN-BSN Completion Option)

<table>
<thead>
<tr>
<th>General Education and Support Courses</th>
<th>Sem. Hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Composition: ENG 1050, 1060</td>
<td>6</td>
</tr>
<tr>
<td>Humanities/Speech: restricted selection*, PHI 1010 required</td>
<td>12</td>
</tr>
<tr>
<td>Social Sciences: PSY 1010, SOC 1020 recommended; restricted selection*</td>
<td>9</td>
</tr>
<tr>
<td>Natural Sciences/Math: CHM 1120, 1130, 1400, 1410; MAT 1070 or higher</td>
<td>11</td>
</tr>
<tr>
<td>Physical Education: restricted selection*</td>
<td></td>
</tr>
<tr>
<td>Anatomy and Physiology: BIO 2110, 2120</td>
<td>1</td>
</tr>
<tr>
<td>Microbiology: BIO 3150</td>
<td>8</td>
</tr>
<tr>
<td>Statistics: MAT 2100, PSY 2080, SOC 3600, CRJ 3600, or SWK 3600</td>
<td>4</td>
</tr>
<tr>
<td>Health Technology and Informatics: NUR 2000</td>
<td>1</td>
</tr>
<tr>
<td>Validation of Previous Nursing Education</td>
<td>30</td>
</tr>
<tr>
<td>Required Nursing Courses</td>
<td>31</td>
</tr>
<tr>
<td>NUR 3000, 3100, 3200, 3250, 3300, 4000, 4120, 4350, 4550</td>
<td></td>
</tr>
<tr>
<td>General Electives</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>124</strong></td>
</tr>
</tbody>
</table>

* Refer to General Education Requirements section of the University catalog for restricted elective choices.
Validation of Previous Nursing Education

All RN-BSN students are granted 30 credits toward graduation after the completion of NUR 3000 and NUR 3200. These two courses validate lower level division nursing courses taken in an ADN or diploma program of nursing. The thirty semester credit hours are entered on the student’s official University transcript. See Appendix A for a copy of the validation form. The table below provides a sample plan of study for the RN-BSN Accelerated Completion Option. However, RN-BSN students may choose a slower paced option for their studies. It is encouraged that RN-BSN students develop an individualized plan of study with the RN-BSN Coordinator so that family, employment, and school responsibilities may be managed adequately and provide the student with the greatest opportunity for success.

Sample Plan of Study for RN-BSN Accelerated Completion Track

<table>
<thead>
<tr>
<th>Two Semester RN-BSN Plan</th>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session I - Fall</td>
<td>NUR 3000</td>
<td>Transition to Professional Nursing</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 3100</td>
<td>Transcultural Nursing</td>
<td>3</td>
</tr>
<tr>
<td>Session II - Fall</td>
<td>NUR 3200</td>
<td>Health Assessment Across the Lifespan</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 3250</td>
<td>Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>Session III - Spring</td>
<td>NUR 4000</td>
<td>Nursing Research and Theory</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 4120</td>
<td>Leadership in Nursing</td>
<td>5</td>
</tr>
<tr>
<td>Semester IV - Spring</td>
<td>NUR 3300</td>
<td>Gerontological Nursing</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 4350</td>
<td>Community Health Nursing</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>NUR 4550</td>
<td>Capstone – Professional Nursing Issues</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Three Semester RN-BSN Plan</th>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session I - Fall</td>
<td>NUR 3000</td>
<td>Transition to Professional Nursing</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 3100</td>
<td>Transcultural Nursing</td>
<td>3</td>
</tr>
<tr>
<td>Session II - Fall</td>
<td>NUR 3200</td>
<td>Health Assessment Across the Lifespan</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 3250</td>
<td>Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>Session III – Spring</td>
<td>NUR 4000</td>
<td>Nursing Research and Theory</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 4120</td>
<td>Leadership in Nursing</td>
<td>5</td>
</tr>
<tr>
<td>Session IV – Spring</td>
<td>NUR 4350</td>
<td>Community Health Nursing</td>
<td>5</td>
</tr>
<tr>
<td>Session V – Summer</td>
<td>NUR 3300</td>
<td>Gerontological Nursing</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NUR 4550</td>
<td>Capstone – Professional Nursing Issues</td>
<td>3</td>
</tr>
</tbody>
</table>

PROCESS FOR ADMISSION TO THE NURSING MAJOR

The Department of Nursing Admissions Committee, in collaboration with the Chair, reviews all pre-licensure BSN applications and student grades for admission to the nursing major. Letters of admission, placement on alternate list, and denial are generated from the Office of the Department of Nursing Chair. Once admitted, all communication regarding registration and requirements for enrolling in
nursing courses are distributed through this office. For the RN-BSN completion option, the RN-BSN Coordinator, in collaboration with the Chair, reviews all applications and student grades for admission. The Office of the Department of Nursing Chair changes each newly admitted student’s major from the PREN university code to either the GNUR (pre-licensure BSN students) or the NURS code (RN-BSN students). If needed, a Department of Nursing advisor will be assigned.

Students who wish to transfer to the UNCP Department of Nursing from another nursing program must be eligible to return to the transferring nursing program in order to be eligible for admission to the nursing program.

**Transfer of Nursing Course Credits**

The student who has taken nursing courses in other accredited baccalaureate programs may request transfer of the credits into the UNCP nursing program.

- The student will request transfer of nursing credits through the Office of Department of Nursing Chair.
- The student must supply course syllabi from previous institutions at time of request.
- The Chair, if needed, will solicit from appropriate faculty members, an evaluation of equivalence to Department of Nursing courses and a decision as to acceptance or rejection of the credits.
- The Chair will receive the transfer decision, record the transfer and communicate the decision to the registrar’s office and the student.

**STUDENT RECORDS**

The Office of the UNCP Registrar maintains all official grades and records of students. However, the Department of Nursing maintains official information specific to enrollment in the nursing program. This includes all health information required by clinical agencies such as copies of CPR cards, immunizations, professional liability insurance, and health insurance coverage. All student clinical evaluations are filed at the end of each semester. Reference letters and enrollment verification letters are also copied and put in the Department of Nursing file. Information on criminal background checks and chemical substance abuse testing are kept in a separate and confidential file.

The Department of Nursing policy for the administration of student educational records is in accordance with the provisions of the *Family Educational Rights and Privacy Act (FERPA)*, also known as the *Buckley Amendment*. This policy provides that the student has a right of access to student educational records maintained by the university or any department within the university. The policy also protects the confidentiality of personally identifiable information in student records. Faculty, administrators, and staff are not permitted to talk with family members and/or friends regarding student performance unless the student has given written permission to do so.
CHAPTER III

DEPARTMENT OF NURSING STANDARDS

Nursing standards provide for the assessment of the student’s performance, progress, and achievement within the BSN program. Multiple criteria are used to determine successful completion of a course and/or readiness for progression to the next level. These criteria include: successful completion of theory coursework at or above a 76%, satisfactory clinical performance, successful demonstration of specific competencies, and benchmarking of ATI testing (pre-licensure BSN students only). In theory courses, academic and professional standards are assessed in various ways; performance is evaluated by examinations and/or written and oral assignments or other means specified in the course syllabi. In courses with a clinical component written clinical evaluations of performance are completed by the clinical instructors with input from preceptors (when applicable).

ACADEMIC STANDARDS FOR PROGRESSION

The following must be met in order to progress in the pre-licensure BSN option:

1. Maintain a cumulative grade point average of C (2.0) or higher.
2. Achieve a grade of C or higher in each nursing course before proceeding to the next nursing course.
3. Receive a P (pass) grade on the laboratory or clinical component of each nursing course that has either laboratory or clinical experience. A grade of F (fail) in any laboratory or clinical component will result in an F for the course.
4. Only one nursing course may be repeated one time during progression through the nursing program.
5. Maintain current CPR certification, TB (or x-ray) testing, evidence of Hepatitis B vaccination, health insurance, and professional liability insurance while enrolled in the nursing program.
6. Adhere to all policies of the University, Department of Nursing, and clinical agencies.

The following requirements must be met in order to progress in the RN-BSN completion option:

1. Have a current, valid North Carolina nursing license or a license with multistate practice privileges by authority of the Nurse Licensure Compact.
2. Maintain a cumulative grade point average of C (2.0) or higher.
3. Achieve a grade of C or higher in each nursing course before proceeding to the next nursing course.
4. Receive a P (pass) grade on the laboratory or clinical component of each nursing course that has either laboratory or clinical experience. A grade of F (fail) in any laboratory or clinical component will result in an F for the course.
5. Only one nursing course may be repeated one time during progression through the nursing program.
6. Maintain current CPR certification, TB (or x-ray) testing, evidence of Hepatitis B vaccination, health insurance, and professional liability insurance while enrolled in the nursing program.
7. Adhere to all policies of the University, Department of Nursing, and clinical agencies.

CORE PERFORMANCE STANDARDS

The practice of nursing is an applied discipline with cognitive, sensory, affective and motor components. All students must be able to perform the functions that are necessary for the safe practice of nursing with diverse nursing care recipients in a wide variety of settings and which are essential to the licensing requirements for nursing. Students must be capable of meeting the following core performance standards with or without reasonable accommodations in order to progress in the Nursing Program at
The University of North Carolina at Pembroke (UNCP). Each student will use these core performance standards in determining whether accommodations or modifications are necessary. Each of these standards is reflected in nursing course objectives and provides an objective measure for students, advisors and faculty to make informed decisions regarding whether the student is “qualified” to meet requirements.

If a student believes that she or he cannot meet one or more of the core performance standards without accommodations or modifications, it is appropriate for the student to take the responsibility of identifying her or his need for accommodation to Disability Support Services and the course instructor. Where possible, reasonable accommodations will be provided to those individuals with disabilities who have documented their disability with Disability Support Services and become eligible for services under the American with Disabilities Act. UNCP will make every reasonable effort to accommodate students with disabilities on a case-by-case and class-by-class nature to enable them to meet these standards and ensure that students are not denied the benefits of, or excluded from participation in or otherwise subjected to discrimination in this program.

The core performance standards for this program, adapted from the Southern Council on Collegiate Education for Nursing (SCCEN) Core Performance Standards (1993), are listed below along with examples of these standards. These examples are not inclusive of all expected abilities and should be used only for simple comparative purposes by applicants and students currently enrolled in this program.

1. Critical Thinking – Critical thinking sufficient for clinical judgment such that the student can begin to make clinical decisions, interpret assessment data correctly, identify appropriate nursing interventions, develop appropriate nursing care plans, evaluate the effectiveness of interventions and revise planned interventions when necessary.

2. Cognitive Ability – Ongoing capacity to learn new information and skills to provide safe nursing care such that the student can comprehend, measure, calculate, analyze and evaluate diverse forms of information, learn new skills and rationales for nursing care in a timely manner, and learn and adopt new methods of providing nursing care to reflect the dynamic nature of health care provision.

3. Interpersonal Skills – Interpersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural and intellectual backgrounds such that the student can begin to establish rapport and relate effectively with clients, their families and colleagues.

4. Communication Skills – Communication abilities sufficient for interaction with others in verbal and written form such that the student can follow verbal and written instructions, communicate nursing actions, interpret client responses, initiate health teaching, document and understand nursing activities, and consult with other health care providers in a professional manner.

5. Mobility – Physical abilities sufficient to move oneself from room to room, along hallways and in small or confined spaces such that the student can move around in clients’ rooms and bathrooms, into and out of work spaces and access treatment areas; procure needed emergency materials when indicated and to meet the physical demands of providing nursing care – lifting, moving, carrying, pushing and supporting clients, equipment and other objects independently.

6. Motor Skills – Gross and fine motor abilities sufficient to provide safe and effective nursing care such that the student can perform vital signs, CPR, physical assessment, calibrate and use equipment, hang IVs and tube feedings, draw and give injections and write or type to document nursing interventions and patient care.
7. Tactile – Tactile dexterity sufficient for physical assessment such that the student can successfully perform palpation, complete functions of physical examination and/or those related to therapeutic intervention, e.g. insertions of a catheter, giving injections.

8. Visual – Visual ability sufficient for observation and assessment necessary in nursing care such that the student can read charts, flowsheets, monitors, thermometers, observe and assess client health status and changes in skin color, pupils, wound healing and other observed changes or responses as well as draw up and administer medications.

9. Hearing – Auditory ability sufficient to monitor and assess health needs such that the student can auscultate blood pressure, breath sounds, heart sounds, bowel sounds, hear alarms, call bells, cries for help by clients and staff and converse with clients, families and co-workers as well as understand mechanically reproduced voices such as on audiotape.

10. Personal Behaviors – Maintains personal behaviors consistent with the Code of Ethics for Nurses With Interpretive Statements (2008) such that the student demonstrates personal responsibility, accountability, integrity and honesty, demonstrates respect for clients and their rights, and avoids behavior inconsistent with professional standards such as chemical dependency and abuse, engaging in or supporting criminal behavior.

The Faculty of the Department of Nursing reserves the right to withdraw, or deny admission, or graduation to any student who is determined to be unsuited for the study or practice of nursing.

NURSING STUDENT CODE OF ACADEMIC AND PROFESSIONAL BEHAVIOR

Introduction to Nursing Student Code of Academic and Professional Behavior

The professional education of students enrolled at the University of North Carolina Pembroke, Department of Nursing seeks to integrate ethical standards, professional integrity, sense of responsibility and self-discipline intrinsic to the discipline of nursing. The educational process in nursing is based on maintaining high academic and ethical standards.

The Nursing Student Code of Academic and Professional Behavior and Honor Code are based on the Department of Nursing shared core values defined in the Core Values Statement. Each member of the Department of Nursing community (students, faculty, or staff) is expected to hold self and others to the highest standards based on the values of caring, excellence, inquiry, teamwork, diversity, transparency, respect, and accountability.

The Nursing Student Code of Academic and Professional Behavior and Honor Code are applicable to all students enrolled in the Department of Nursing educational programs. Each student is obligated to refrain from violating academic and professional behaviors outlined in this document. Students are also required to comply with the University of North Carolina Pembroke Academic Honor Code (https://www.uncp.edu/student-life/student-services/student-affairs/academic-honor-code). Each student is given a copy of the Nursing Student Code of Academic and Professional Behavior and Honor Code at the time of enrollment. A form acknowledging that the student has received the copy and will abide by the Nursing Student Code of Academic and Professional Behavior and Honor Code must be signed by each student and returned to the Office of the Administrative Support Associate where it will be kept in the student’s file. Any questions should be addressed to faculty members, Director of Undergraduate Programs, Director of Graduate Programs, or Department of Nursing Chair. Students will be notified a minimum of two weeks prior to implementation of any revisions in the documents via University email.
**Professional Code of Ethics**

All students are expected to adopt the standards expected of professional nurses outlined in the American Nurses Association (2001) *Code of Ethics for Nurses with Interpretative Statement*. The code may be found at [http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses](http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses). Its hallmark is a sense of honor and integrity for all students, faculty, and clients. The nine major provisions of the Code of Ethics include:

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

**Academic Credibility**

The nursing faculty believes in an honest, open, trusting and forthright learning environment, which is the responsibility of both faculty and students. The faculty provides an atmosphere conducive to independent work and self-direction. Each student is expected to know and follow standards of academic honesty and integrity. Each student has the responsibility to know and observe the Nursing Student Code of Academic and Professional Behavior as well as the University of North Carolina Pembroke Academic Honor Code and is obliged not to violate the basic standards of both of these documents. All forms of academic dishonesty are prohibited and subject to severe disciplinary action. Each nursing faculty will outline expectations pertaining to these codes and/or special requirements or permission regarding academic honesty (e.g. such as clinical agency requirements of confidentiality and documentation).

Unacceptable academic behavior is divided into three categories: academic, clinical, and personal. The following list includes specific examples of unacceptable academic behavior; however, does not include all behaviors that may be violations of the Nursing Student Code of Academic and Professional Behavior and the UNCP Academic Honor Code. If a student has a question about academic dishonesty as related to cheating, plagiarism, fabrication and falsification, abuse of academic materials, or complicity in academic dishonesty, the student is required to check with the appropriate faculty immediately.
Unacceptable Academic Behavior

1. **Cheating:**
   Cheating means intentionally using or attempting to use unauthorized materials, information, notes, study aids or other devices in any academic exercise (for example, on a test). This definition includes both giving unauthorized information (in either oral or written form) and receiving such information during any academic exercise. Cheating as defined by the Department of Nursing includes, but is not limited to:
   a. Viewing or obtaining an exam or answers to an exam prior to its administration
   b. Unauthorized conversation of an exam’s content during or following its administration
   c. Making unauthorized copies of exams, including taking pictures of it
   d. Using an old exam to study when it was not circulated for this purpose by the instructor
   e. Developing or providing written, typed, or recorded notes of specific exam content or questions after taking an exam
   f. Distributing, obtaining, and/or reproducing a partial or full copy of an assignment, content specific to any exam, or actual exam without written consent from the instructor
   g. Providing any information about an exam to a student who has not yet taken the exam
   h. Revealing one’s own work to another student or observing another student’s work during an exam
   i. Working in groups or giving or receiving unauthorized assistance while taking in-class or online exams or other assignments (including, but not limited to, use of any type of unauthorized prompt, written notations, and unauthorized tactile, audio, or electronic memory prompts, including use of cell phones)
   j. Consulting unauthorized materials while out of the testing room (excused) (e.g., on a bathroom break)
   k. Substituting for another student, or permitting any other person to substitute for oneself, during any type of academic evaluation
   l. Altering a graded assignment or exam and returning it for additional credit

2. **Plagiarism:**
   Plagiarism is intentionally or knowingly presenting someone else’s words or ideas as one’s own. You avoid plagiarism by very carefully acknowledging the sources of ideas you use and by appropriately indicating any material that has been quoted (that is, by using quotation marks and properly acknowledging the source of the quote, usually with a clear reference source citation and page number). Plagiarism as defined by the Department of Nursing includes, but is not limited to:
   a. Improperly documenting words, quotations, ideas, or paraphrased passages taken from published or unpublished sources
   b. Submitting an unauthorized paper or assignment, in part or whole, as original work in one course when the paper or assignment, in part or whole, has received credit in another course
   c. Submitting the same or noticeably similar work of another person, such as that of a published author or classmate for an assignment
   d. Representing another student’s work as one’s own (e.g., exam, papers, lab data, concept maps, or other client evaluation documentation)

3. **Fabrication and Falsification:**
   This refers to intentional and unauthorized alteration or invention of any information or citation in an academic exercise. Falsification is a matter of altering information, while fabrication is a matter of inventing or counterfeiting information for use in any academic exercise. For example, a student who changes an answer on a test and claims that the item was incorrectly scored has falsified information. A student who makes up reference citations for a term paper has fabricated that
information. Fabrication and falsification as defined by the Department of Nursing includes, but is not limited to:
   a. Fabricating a citation, in whole or in part, that does not exist or that is not complete
   b. Adding ideas or information to a source that are not included in the source
   c. Citing a source in a reference list when the source was neither referred to nor cited in the body of paper
   d. Intentionally altering the meaning or applicability of data in any way
   e. Inventing data or statistical results to support findings, including documentation of assessment findings when the client was not fully assessed.

4. **Abuse of Academic Materials:**
   Here we mean intentionally or knowingly destroying, stealing, or making inaccessible library or other academic material. Remember that library materials are borrowed, not yours to keep. For example, a student who tears an article out of a journal in the library has abused library materials. Similarly, a student who intentionally damages a computer in a campus computer lab has violated this standard. Abuse of academic materials as defined by the Department of Nursing includes, but is not limited to:
   a. Marking, destroying, hiding, or stealing library or reference materials needed for common use by others
   b. Damaging or intentionally destroying a computer, or files or programs stored on a computer, in a campus computer lab
   c. Altering, stealing, or intentionally damaging another student's notes or other academic materials, to include equipment in the Clinical Learning Center

5. **Complicity in Academic Dishonesty:**
   Complicity means intentionally or knowingly helping or attempting to help another person to commit any act of academic dishonesty. For example, complicity would include allowing another student to look at test answers or to copy a paper. In a word, do not help someone else be dishonest *(UNCP 2013-2014 Student Handbook, p. 62).* Complicity in academic dishonesty as defined by the Department of Nursing includes, but is not limited to:
   a. Allowing another student to copy from your paper during an examination with your knowledge
   b. Writing, distributing, or reviewing exam questions or substantive information about material to be tested or thought to be tested before a scheduled academic evaluation
   c. Allowing another student to copy your paper or assignment for submission as their own, to include clinical evaluation and paperwork
   d. Working with others on an academic project or paper when students are expected to work on their own
   e. Answering any or all items on an exam for another student
   f. Signing a name other than your own on any academic work
   g. Discussing simulation or skills check-off experience with another student who has not completed the simulation or check-off

**Unacceptable Clinical Behavior**

The nursing faculty have a legal, ethical, academic, and professional responsibility to protect the public from unsafe nursing practice. It is within this context that the nursing faculty may discipline or dismiss a nursing student from nursing practice which threatens the safety of a client, a family member or significant other, another student, a faculty member, or other health and professional care provider. In addition, nursing students are subject to probation and dismissal from the university, as are all other
University students, in accordance with university policy. A nursing student may be dismissed from the program for any of the following reasons:

1. Unsafe clinical practice that reflects deliberate, negligent, omission or commission acts;
2. Physical or emotional disability or use of any drugs to a degree that interferes with ability to practice nursing;
3. Violations of Nursing Student Code of Academic and Professional Behavior;
4. Violations of UNCP’s Academic Honor Code;
5. Violations of clinical agency policies;
6. Excessive absences, tardiness, or not completing entire learning experiences;
7. Engaging in conduct that is incompatible with professional nursing practice;
8. Failure to obtain a grade of a “C” or higher in all nursing courses, including a repeated course; or
9. Disciplinary action by the Board of Nursing that issued the student’s license (RN-BSN students).

Only under unusual circumstances will a student who has been dismissed or voluntarily withdrew from the nursing program for the above reason(s), be allowed to reenter.

**Unsafe Professional Clinical Nursing Practice is defined as follows:**

An act or behavior of the type that violates the Nursing Practice Act, State of North Carolina (2009);
An act or behavior which violates the Code for Ethics for Nurses, American Nurses Association (2008);
An act or behavior or pattern of acts and/or behaviors which threaten the physical, emotional, mental, or environmental safety of a client, a family member or significant other, another student, a faculty member, or other health and professional care provider; Or an act or behavior that constitutes nursing practice for which a student is not authorized or educated to perform at the time of the incident.

**Unacceptable Personal Behavior**

1. Disruptive behavior
   a. This includes student behavior in a classroom or other learning environment (both on-and-off-campus locations), which interferes with the educational process and/or jeopardizes other’s safety. Such behavior includes, but is not limited to, obscenities, unreasonable interference with class discussion, making/receiving personal phone calls, text messages or pages during class, excessive tardiness, leaving and entering class in absence of notice to faculty member of illness or other extenuating circumstances, persisting in disruptive personal conversations with other class members, and verbal or physical threats. Also includes violating the University of North Carolina Pembroke Code of Conduct.

   a. Nursing students are expected to “maintain compassionate and caring relationships with colleagues and others with a commitment to the fair treatment of individuals, to integrity-preserving compromise, and to resolving conflict…This standard of conduct precludes any and all prejudicial actions, any form of harassment or threatening behavior, or disregard for the effect of one’s actions on others” (ANA Code, 2001, p.9).

3. Sexual and other unlawful harassment
   a. Violating the University of North Carolina Pembroke Sexual Harassment Policy and/or the Code of Conduct.

4. Commission of criminal activity
   a. Violating the North Carolina Board of Nursing Rules and Regulations or those of any other regulatory agency responsible for nursing licenses. This includes any illegal or criminal activity that would impact student’s ability to obtain or maintain a professional nursing license or employment in the nursing profession.
5. Acquiring or using drugs and alcohol
   a. Violating the Department of Nursing Chemical Substance Abuse and Impairment Policy for Nursing Students and/or the UNC Pembroke Drug and Alcohol Policy
6. Violating computer use policies
   a. Violating the UNC Pembroke Department of Information Technology (DoIT) Appropriate Use Policy that defines proper and ethical use of computers.
7. Hindering the investigation of a possible violation of the Nursing Student Code of Academic and Professional Behavior
   a. This includes making misleading or dishonest statements either orally or in writing, including e-mails; other falsification of information; altering, destroying or deleting relevant documents; and any other act that obstructs an investigation.

Guiding Principles for Nursing Students in the Use of Social Media

Social media are defined as Internet sites where people interact freely, sharing and discussing information about each other and their lives, using a multimedia mix of personal words, pictures, videos and audio (Curtis, 2013). Examples include but are not limited to Facebook, MySpace, LinkedIn, Wikipedia, Second Life, Flickr, blogs, podcasts, RSS feeds, Friendster.com, Allnurses.com, Twitter, and YouTube.

While the following principles may need to be modified as new technologies and social networking tools emerge, the spirit of the principles will remain the protection of sensitive and confidential information. Social media often spans traditional boundaries between professional and personal relationships and thus takes additional vigilance to make sure that one is protecting personal, professional, and university reputations. You are strongly encouraged to take advantage of privacy settings and to seek to separate your professional and personal information online (Harris, 2013). As students you will want to represent the University and the Department of Nursing in a fair, accurate and legal manner.

When publishing information on social media sites, remain aware that information may be public for anyone to see and can be traced back to you as an individual. Since social media typically enables two-way communications with your audience, you have less control about how materials you post will be used by others. Postings are in the public domain and are easily accessible by anyone including but not limited to reporters, parents, faculty members, law enforcement, predators, and potential employers. Even after it has been deleted, information once posted on a web site can sometimes be retrieved by persons with sufficient technical computer skills. Students should alert the Office of Police and Public Safety (910.521.6235) if they discover the existence of any site created by others that falsely appears to represent their identity.

The Department of Nursing ascribes to the recommendations for social media use published by the National Council of State Boards of Nursing (Spector, 2012, pp. 1-2). Students enrolled in the Department of Nursing will follow the following principles for use of social media.

1. Recognize that you have an ethical and legal obligation to maintain client, faculty and other student’s privacy and confidentiality at all times.
2. You must not transmit by way of any electronic media any client-related information or image that is reasonably anticipated to violate client rights to confidentially or privacy.
3. You must not transmit any electronic media, message or image that is reasonably anticipated to degrade or embarrass a client, fellow student, faculty member, UNC Pembroke or any clinical agency while enrolled in a UNC Pembroke nursing program of study.
4. You must not disseminate any information (including images, lab data, x-rays etc.) about a client or information gained while in a student-client relationship with anyone; unless there is a care-related need to disclose the information or other legal obligation to do so.

5. You must not identify clients by name, ID number, birth date or post or publish information that may lead to the identification of a client. Limiting access to postings through privacy settings is not sufficient to ensure privacy.

6. You must not refer to clients in a disparaging manner, even if they are not identified by name, number or other means.

7. You must not take photos or videos of clients on personal devices, including mobile devices, even with client approval.

8. You must maintain professional boundaries in the use of electronic media. You should follow the same behaviors online as you would in face-to-face contact.

9. You must consult employer and schools policies or an appropriate leader within the organization for guidance regarding work or school related postings.

10. You must promptly report any breach of these principles by others to the appropriate authority within the clinical agency and/or the Department of Nursing.

11. You must be aware of and comply with Department of Nursing and clinical agency policies regarding the use of agency or school owned computers, cameras, and other electronic devices and the use of personal devices in the workplace.

12. You must not transmit or post disparaging remarks about classmates, faculty, clinical agencies, staff nurses or other co-workers that is insulting, derogatory, negative or any posting could be construed as “bullying” related to peers, faculty, other professionals, or clinical agencies.

13. You must not transmit any information related to potential test content after taking an exam, potential test content prior to taking an exam, actual test or quiz questions, case studies, or answers to such nor post such items in any format, electronic or otherwise, outside of the context of your class.

14. You may not purchase or otherwise obtain test questions or test banks from nursing textbooks, which are to be available to faculty only. This is in violation of the textbook copyright and will be subject to legal repercussions as well as dismissal from the nursing program. You may not represent yourself online or otherwise as a nursing faculty member to obtain access to materials that are for faculty use only.

The Department of Nursing reserves the right, under the Nursing Student Code of Academic and Professional Behavior, to investigate and take disciplinary action, against any student whose posting of material on an internet site violates the University of North Carolina Pembroke policies, Department of Nursing policies, Nursing Student Code of Academic and Professional Behavior, HIPAA laws, and/or state or federal statutes.

Failure to abide by these principles by posting inappropriate material that violate this, other Department of Nursing, University of North Carolina at Pembroke, policies may result in sanctions under Personal Misconduct as outlined in the Nursing Student Code of Academic and Professional Behavior. Students found in violation of these principles will be subject to dismissal from the UNC Pembroke Department of Nursing.

**Procedure for Reporting Academic or Professional Behavior Misconduct**

All Department of Nursing faculty, administrators, staff, and students have a responsibility to report any reasonable suspicion that a student has violated the Nursing Student Code of Academic and Professional Behavior. A report must be made to the Director of Undergraduate Programs or Director of Graduate Programs (depending on level of student(s) involved. The appropriate Director will provide a report to the Chair, Department of Nursing. Anyone not sure of whether or not to report a suspicion should
consult with the Director, Undergraduate Programs or Director, Graduate Programs before making a decision not to report the suspicious behavior. All reports of suspected misconduct are confidential and the identity of anyone reporting misconduct is confidential.

All faculty members are required to report all incidents of academic misconduct (cheating, plagiarism, falsification and fabrication, abuse of academic material, and complicity in academic misconduct) and clinical misconduct that occur in their courses to the Director, Undergraduate Programs or Director, Graduate Programs (depending on level of course being taught). The Directors will provide a report to the Chair, Department of Nursing. Situations involving personal misconduct will be reported to and handled by the Department of Nursing Chair with input, as appropriate, from faculty, Directors, and officials from the University Office of Student Conduct. It is important that all faculty members report all misconduct so that there can be fairness in the application of the Nursing Student Code of Academic and Professional Behavior across the entire student body.

**Procedures for Delivering Sanctions**

When a report is made to a faculty member, or a faculty member observes academic, clinical, or personal behavior that constitutes a violation of the Nursing Student Code of Academic and Professional Behavior, that faculty member completes a Charge of Academic Dishonesty form. The faculty member, along with the appropriate Director, will meet with the student to discuss the behavior and possible sanctions. Possible sanctions for academic misconduct within the course include, but are not limited to: a formal warning or reprimand; a reduced grade (including F) for the assignment; and a reduced grade (including F) for the entire course. If the faculty member, appropriate Director, and the student agree with the sanction, and it has been reported to the Department of Nursing Chair, the matter is closed. The Charge of Academic Dishonesty form is filed with the Director, Student Conduct. If the student decides not to admit guilt or not accept the penalty, the faculty must take the case to the chairperson of the Campus Judicial Board, if any penalty is to be imposed. (*UNCP 2013-2014, Academic Catalog, p. 70-73*).

When a clinical incident occurs a nursing faculty believes may constitute unsafe nursing practice, she/he will immediately notify the student and instruct the student accordingly. The Department of Nursing Chair will be notified. For all unsafe nursing practices, a report will be completed in triplicate by the nursing faculty. The report will be given to the Department of Nursing Chair and to the involved nursing student. The student will sign all three copies indicating that he/she has been so informed and received a copy of the report. A copy will be filed in the nursing student’s record in the Department of Nursing. The nursing faculty and/or nursing student will file a clinical agency incident report (if appropriate depending on the nature of the incident and clinical agency policies).

A conference between the nursing student, nursing faculty and Department of Nursing Chair (if appropriate depending on the nature of the unsafe practice) will occur. The conference will be scheduled as soon as appropriate depending on the nature of the unsafe practice but no later than five school days following the incident. **Unsafe nursing practice will result in immediate dismissal from the clinical component; and therefore, failure of the nursing course and permanent exclusion from the Nursing Program.**

Situations involving personal misconduct will be handled by the Department of Nursing Chair with input, as appropriate, from faculty, Directors, and officials from the University Office of Student Conduct and/or Office of Public Safety. Possible sanctions regarding personal conduct include, but are not limited to, warning, counseling, restitution, apology, community service, disciplinary probation, suspension from the University, or expulsion from the University.
Student Experience

Being accused of a violation of academic or professional behavior is a stressful process for students. Students are encouraged to be completely honest in all discussions associated with this process and to take advantage of University resources. Any student has the right to due process in accordance with UNC Pembroke formal appeals process. The process is outlined in the UNCP Student Handbook (2013).

Each student will sign the Nursing Student Code of Academic and Professional Behavior Statement included in Appendix K after reviewing the policy.

References


Washington, DC: Author.


http://www2.uncp.edu/home/acurtis/Courses/ResourcesForCourses/SocialMediaWhatIsIt.html


Policy adopted June 12th, 2014
GRADING SYSTEM AND GRADE POINTS

UNCP uses a letter grade and plus-minus system for evaluating academic performance. UNCP allows each department to determine the numerical equivalent of the grading symbols. The nursing faculty has selected the following equivalent.

<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>Numeral Equivalent</th>
<th>Quality Points</th>
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<tr>
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<tr>
<td>A-</td>
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</tr>
<tr>
<td>W (Withdrawal)</td>
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<td>Attempted hours, not quality hours, not used to calculate GPA</td>
</tr>
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CHAPTER IV

DEPARTMENT OF NURSING POLICIES AND PROCEDURES

ACADEMIC ASSESSMENT AND SUPPORT PROGRAM

All pre-licensure BSN students are required to participate in the Department of Nursing’s Academic Assessment and Support Program. The program assists faculty and students in the identification of course content strengths as well as areas needing further study so that (1) students will have the greatest opportunity to successfully complete the nursing program and (2) graduates will have the nursing knowledge required for licensure and entry-level competence for professional nursing practice.

The Department of Nursing has chosen to use Assessment Technologies Institute (ATI)’s Assessment-Driven Review program which is designed to provide students with various learning tools that assists them in reviewing course content, identifying strengths and weaknesses, improving test taking abilities, and ultimately successfully passing the NCLEX-RN® for licensure. The program involves an assessment of reading, writing, mathematics, and science skills (TEAS) as well as critical thinking at the beginning of the program. In addition, an assessment of nursing knowledge is completed after core nursing courses, a comprehensive NCLEX-RN® readiness examination as well as an exit critical thinking assessment are administered in the senior year, prior to graduation (see testing timeline). Results of the content-specific course examinations, administered after core nursing courses, are used to assess content mastery and to identify those students who will be referred to the Learning Enhancement Center (LEC) for additional support sessions. Students purchase access to the comprehensive supplemental learning package through the University bookstore.

Student Responsibilities for Purchasing of Supplement Learning Packet

To purchase access to the ATI Supplemental Learning Packet materials and tests, students should:

- Go to the UNCP Bookstore and select the ATI package card located under the course number on the bookstore shelf
- Take the ATI package card to the cashier and pay as directed
- Keep the payment receipt so that you may show it to the course coordinator in order to get hard copies of study manuals provided by ATI
  - Note: Until payment is made, the ATI system will not allow you access to the Comprehensive Assessment and Review Program or to take exams.

Please Note: The ATI Supplemental Learning Packet access needs to be purchased by September 1 for fall courses and February 1 for spring courses. (Note: for seniors access to the comprehensive predictor practice test will be available before the holidays; however, access to the actual proctored tests will not occur until February 1)

Content-Specific Course Examinations

Proctored ATI content-specific course examinations will be given in the areas of: 1) fundamentals of nursing, 2) pharmacology, 3) medical/surgical nursing, 4) maternal/newborn nursing, 5) nursing care of children, 6) mental health, 7) community health, and 8) nursing leadership according to the testing timeline. The proctored ATI content-specific course exam grades will count for 10% of the final grade for the course in which it is administered (exception are critical thinking entrance and exit exams). ATI
content-specific course exam grades are not curved. The grades for the ATI content-specific course exam will be based on proficiency levels:

- Proficiency Level 3 – ATI exam grade 100%
- Proficiency Level 2 – ATI exam grade 90%
- Proficiency Level 1 - ATI exam grade 75%
- Below Proficiency Level 1 - ATI exam grade 70%

The date that the proctored ATI content-specific course exam will be given is identified in the appropriate course syllabus. The content-specific course exam will be taken online in one of the computer labs on the UNC Pembroke campus. Completion of the ATI content-specific course exam is a part of the course requirements. The proctored test may only be taken once and taken at the scheduled time prior to course final exam to be counted as part of the final course grade. An exception for scheduled time shall be allowed for an unexpected circumstance (major medical illness of self or immediate family member, funeral attendance of immediate family member, court appearances, and serious car accidents) that is documented by appropriate means. For students approved for additional test-taking time, the course coordinator needs to be notified 24 hours before the test for extended time to be given for the ATI content-specific course exam. ATI results for the content-specific proctored exam will be available when all of the students have completed the test.

**ATI Assessment Driven Review Program Guidelines**

As part of the overall testing program, students receive access to ATI electronic resources in the content areas of fundamentals of nursing, pharmacology, medical/surgical nursing, maternal/newborn nursing, nursing care of children, mental health, community health, and nursing leadership. Students have an opportunity to take the two course specific non-proctored or practice tests as many times as they wish prior to taking the course specific proctored assessment test at the end of each course. To achieve the best results from taking practice tests, it is recommended that students wait a minimum of 72 hours between practice sessions. **Students must achieve a minimum of 90% on one practice test, that has been completed at least 72 hours after a previous practice session, and bring their test result and diagnostic report as their “admission ticket” to the proctored assessment.**

Feedback about test results is provided to the students as part of the overall program. Students receive a detailed assessment of their individual performance on each test and scores for mastery of nursing content areas, nursing process, critical thinking phases, therapeutic intervention, communication skills and cognitive levels.

**Criterion Referenced Proficiency Levels Guidelines**

Performances on content-specific course mastery examinations are based on Criterion Referenced Proficiency Levels. The Criterion Referenced Proficiency Levels are as follows:

The student meeting the criterion established for Level 3 is:

- Very likely to exceed NCLEX standards in this content area.
- Demonstrates a higher than expected level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content.
- Exceed most expectations for performance in this content area.
- Demonstrates achievement of a level of competence needed for professional nursing practice in this content area that exceeds most expectations.
- Meets benchmark and does not require additional academic support in the content area.
The student meeting the criterion established for Level 2 is:
- Fairly certain to meet NCLEX standards in this content area.
- Demonstrates a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content.
- Exceed minimum expectations for performance in this content area.
- Demonstrates achievement of a satisfactory level of competence needed for professional nursing practice in this content area.
- Meets benchmark and does not require additional academic support in the content area.

The student meeting the criterion established for Level 1 is:
- Is likely to just meet NCLEX standards in this content area.
- Demonstrates the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content.
- Meets the absolute minimum expectations for performance in this content area.
- Demonstrates achievement of a minimum level of competence needed for professional nursing practice in this content area.
- Does not meet benchmark and requires mandatory academic support in the content area.

The student scoring below the Proficiency Level 1 recommended cut score did not meet the criterion established for Level 1.
- Does not meet benchmark and requires mandatory academic support in the content area.

Minimum scores for proficiency levels vary for each assessment in the RN Content Mastery Series. The National Standard Setting Study – ATI establishes each assessment score based on the NCLEX-RN® Test Plan.

**Parameters for Referral to Learning Enhancement Center (LEC)**

Students achieving Proficiency Level 2 or higher will be exempt from participating in the Department of Nursing academic support program. All students achieving Proficiency Level 1 or below Proficiency Level 1 on ATI content-specific course mastery examinations will be strongly encouraged to participate in the Department of Nursing year-round academic support program. Students achieving Proficiency Level 2 or above on the proctored course-specific assessment may also self-select to participate in the academic support program.

A variety of strategies for success may be used in the academic support process, including the case study approach to focus on clinical reasoning and decision making and application of the nursing process, selected components of ATI Content Mastery Series review modules, non-proctored online practice assessments, and course materials. The Department of Nursing LEC Coordinator is responsible for organizing the academic support process. Faculty members who are content experts in all of the covered areas will collaborate with the LEC Coordinator to facilitate the strategies for success.

Students enrolled in the academic support program (those below proficiency level 2) will develop an individualized plan for success with the LEC Coordinator. In the fall semester of the Junior Year, students will focus on study habits, test-taking strategies and fundamentals of nursing. In the spring semester of the Junior Year, students will focus on pharmacology and medical/surgical (adult health) nursing care. During summer between the junior and senior years, students will focus on maternal/newborn and nursing care of children. In the fall semester of the Senior Year, students will focus on psychiatric/mental health nursing and community health nursing as well as general review of previous content areas in preparation for the RN-Comprehensive Predictor Examination. A second
proctored course-specific examination will be available to students achieving below Proficiency level 2 according to the schedule below but will not be considered part of any course final grade:

<table>
<thead>
<tr>
<th>Second Proctored Testing Time</th>
<th>Content Mastery Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>May of Junior Year</td>
<td>Fundamentals</td>
</tr>
<tr>
<td>August between Junior and Senior Year</td>
<td>Maternal/Newborn Nursing Care of Children</td>
</tr>
<tr>
<td>October of Fall Semester Senior Year</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>Week 3 Spring Semester Senior Year</td>
<td>Psychiatric/Mental Health Nursing</td>
</tr>
<tr>
<td>Week 5 Spring Semester Senior Year</td>
<td>Community Health Nursing</td>
</tr>
<tr>
<td>Week 11 Spring Semester Senior Year</td>
<td>Leadership in Nursing</td>
</tr>
</tbody>
</table>

**ATI RN-Comprehensive Predictor Examination**

The RN-Comprehensive Predictor Examination will be used to evaluate the students’ synthesis of knowledge acquired throughout the nursing program. The proctored RN-Comprehensive Predictor examination will be taken online by students spring semester of the senior year while enrolled in NUR 4510 (refer to testing timeline) in a computer lab on the UNC Pembroke campus. For students approved for additional test-taking time, the course coordinator needs to be notified 24 hours before the test for extended time to be given for completion of the comprehensive predictor examination. Each student will be allowed to take the comprehensive predictor examination two times. The comprehensive predictor exam grade will count for 10% of the final course grade in NUR 4510.

The Benchmark for the RN-Comprehensive Predictor is a predicted probability score of 94% or greater. The first administration of the ATI RN-Comprehensive Predictor will occur during week # 6 of spring semester senior year. Students who achieve a 94% predicted probability score or higher on the 1st exam will have met the desired testing outcome for the ATI RN-Comprehensive Predictor in NUR 4510. All students are strongly encouraged to remediate in areas identified as needing further review.

Students who do not achieve a 94% predicted probability score or greater on the 1st exam are required to develop an academic support plan to include a focused review of topics missed identified in the predictor results with a NUR 4510 assigned faculty member as part of the course requirements and obtain approval to take the 2nd ATI RN-Comprehensive Predictor at the end of the 10th week of the spring semester senior year. Students who achieve a 94% predicted probability score or higher on their 2nd attempt will have met the desired testing outcome for the ATI RN-Comprehensive Predictor in NUR 4510.

For students who do not achieve a 94% predicted probability score or greater on their second attempt, the average of the two predicted probability scores is used to determine the 10% of the final course grade in NUR 4510. In the event that students elect not to take the 2nd ATI RN-Comprehensive Predictor, the predictability score earned on the 1st AT RN-Comprehensive Predictor is used to determine 10% of the final course grade in NUR 4510.

Students who do not achieve a 94% predicted probability score or greater on their 2nd attempt are encouraged to meet with the LEC coordinator to develop an individual plan for achieving success on the NCLEX-RN®. Individual tutoring (available through Virtual-ATI NCLEX Review program) is strongly encouraged prior to registering to take the NCLEX-RN® exam.

<table>
<thead>
<tr>
<th>Testing Timeline (Semester of study and completion of associated nursing course)</th>
<th>Assessment</th>
<th>Desired Testing Outcome</th>
<th>Department of Nursing Interventions if Testing Outcome &lt; Desired</th>
<th>Desired Program Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to orientation to nursing program</td>
<td>TEAS</td>
<td>Score at or above the national program mean</td>
<td>Notification of individual students and advisement to consider alternate plan of study; referral to Department of Nursing and campus learning resources</td>
<td>Early recognition of students at risk for academic difficulty in nursing program</td>
</tr>
<tr>
<td>During orientation to nursing program</td>
<td>ATI Self-Assessment Inventory</td>
<td></td>
<td></td>
<td>Early data about students’ learning style characteristics, thinking processes, work values, and professionalism</td>
</tr>
<tr>
<td>During orientation to nursing program</td>
<td>ATI Critical Thinking Skills Test</td>
<td>Score at or above the national program mean</td>
<td>Referral to Department of Nursing and campus learning resources</td>
<td>Early recognition of students at risk for academic difficulty in nursing program</td>
</tr>
<tr>
<td>First Fall Semester – NUR 3050 NUR 3150</td>
<td>Content Mastery Series: Pharmacology Fundamentals of Nursing</td>
<td>Proficiency level 2</td>
<td>Notification of individual students to establish remediation plan; feedback to faculty for possible course curricular modifications</td>
<td>NCLEX-RN first-time pass rate – minimum of 85% annually</td>
</tr>
<tr>
<td>First Spring Semester – NUR 3450 NUR 3500</td>
<td>Content Mastery Series: Maternal/Newborn Nursing; Nursing Care of Children</td>
<td>Proficiency level 2</td>
<td>Notification of individual students to establish remediation plan; feedback to faculty for possible course curricular modifications</td>
<td>NCLEX-RN first-time pass rate – minimum of 85% annually</td>
</tr>
<tr>
<td>Second Fall Semester – NUR 4150 NUR 4350</td>
<td>Content Mastery Series: Mental Health Nursing; Community Health Nursing</td>
<td>Proficiency level 2</td>
<td>Notification of individual students to establish remediation plan; feedback to faculty for possible course curricular modifications</td>
<td>NCLEX-RN first-time pass rate – minimum of 85% annually</td>
</tr>
<tr>
<td>Second Spring Semester – NUR 4120 NUR 4450</td>
<td>Content Mastery Series: Nursing Leadership Adult Health Nursing</td>
<td>Proficiency level 2</td>
<td>Notification of individual students to establish remediation plan; feedback to faculty for possible course curricular modifications</td>
<td>NCLEX-RN first-time pass rate – minimum of 85% annually</td>
</tr>
<tr>
<td>Weeks 6 and 10 (approximate) of Second Spring Semester – NUR 4510</td>
<td>Content Mastery Series: Comprehensive Predictor</td>
<td>Predictive probability score of 94% minimum</td>
<td>Notification of individual students to identify areas of weakness and establish remediation plan; feedback to faculty for possible course curricular modifications</td>
<td>NCLEX-RN first-time pass rate – minimum of 85% annually</td>
</tr>
<tr>
<td>End of Second Spring Semester</td>
<td>ATI Critical Thinking Skills Test</td>
<td>Score at or above the national program mean</td>
<td>Used for program outcome evaluation</td>
<td>Score at or above the national program mean</td>
</tr>
</tbody>
</table>
ACADEMIC CREDIBILITY
Refer to Chapter III for details.

ACADEMIC STANDARDS FOR PROGRESSION
Refer to Chapter III for details.

ADDRESS, EMAIL, TELEPHONE
At the time of registration and throughout a student’s enrollment in the UNCP Department of Nursing, it is the student’s responsibility to keep the University and Department of Nursing informed of current contact information. This is essential in order that official correspondence, schedules, scholarship notification, and emergency messages will not be delayed or lost. Students are held responsible for all communication from the Department of Nursing sent to them at the address or email last given. UNCP e-mails will be used by nursing faculty and administration to communicate pertinent information. It is expected that e-mails and Blackboard accounts required by many courses will be accessed by all students at least three (3) times weekly during the semester. Students will be held responsible for information distributed in this manner.

A change of address, phone, or email must be filed with the Department of Nursing Administrative Support Associate. Enrolled pre-licensure BSN students are asked to update with Ms. Mary Baynes, Room 340 A; Health Sciences Building on the UNCP campus. Please remember this will not update the official UNCP records – that will need to be done in the Office of the Registrar. The Address/Email/Telephone Change Form is located on the Office of the Registrar website.

ADMINISTRATIVE POLICY CHANGES
As stated earlier in this document the UNCP nursing faculty reserve the right to alter the curriculum and educational policies as considered necessary for the progressive development of the program and to maintain academic standards. The Chair of the Department of Nursing will notify each student of any changes in a letter or memo via UNCP email.

ADVISEMENT
New freshmen are advised by the staff of the Office of Student Academic Support and Retention and/or representatives from declared major department when registering for first semester courses, after which time they will be assigned faculty advisors (UNCP Academic Catalog, 2013-2014). The Office of Student Academic Support and Retention is designed to provide a support system for students through numerous programs and activities; academic advisement, career/major counseling, major declaration, and Early Alert consultation for those in jeopardy because of poor attendance/performance (UNCP Student Handbook, 2013-2014). In most cases, Freshman Seminar instructors become their students’ advisors. When a student declares a major, he or she will be assigned an advisor in the appropriate academic department. The advisor’s role is to assist the student in planning a suitable academic program and to maintain a record of progress during the student’s college career. However, the final responsibility for meeting all academic program requirements lies with the student. The Office of Student Academic Support and Retention also serves as a resource center for students who may wish to seek additional academic help.
The Department of Nursing takes the responsibility of advisement very seriously as we believe advising students will lead to successful completion of the requirement for the BSN. All faculty members serve as advisors for all students planning to enter the pre-licensure BSN option. Ms. Joyce Stanley serves as the advisor for all military-related students and Dr. Cherry Beasley serves as the advisor for all registered nurses planning to enter the RN-BSN completion option.

AMERICANS WITH DISABILITIES ACT (ADA)

The Department of Nursing is committed to providing reasonable accommodations for students with disabilities. Students with documented disabilities needing academic adjustments must contact Mary Helen Walker, Disability Support Services prior to or early in their program to determine if reasonable accommodations will be provided. Students must bring a letter from Disability Support Services to inform faculty of needed accommodations at the beginning of the semester. Students with disabilities like all other students in the nursing program must be able to continuously meet core performance standards and functional abilities established to ensure that all students meet the objectives of the nursing program. Students should be aware that the National Council of State Boards of Nursing and the individual state Board of Nursing are the sole authority for granting accommodations for the National Council Licensure Examination (NCLEX-RN®). The provision of accommodations by a nursing program does not ensure that any similar accommodations will be provided by the National Council of State Boards of Nursing.

ATTENDANCE

The nature of the Nursing Program is such that it is important for each student to attend every class, which includes campus and clinical laboratory, beginning with the first class session and including scheduled orientation sessions where appropriate. Each student is expected to adhere to the attendance policy outlined in each nursing course syllabus and the catalog of the University. Faculty in each nursing course may outline additional attendance policies that are in accordance with the policies of the Department of Nursing and/or clinical agencies. Regular class attendance is important to the educational experience of each student and to academic integrity of the university curriculum. If a student is unable to attend class (campus laboratory or clinical); anticipates being late; or anticipates not being able to stay for the entire learning experience, it is the responsibility of the student to contact the faculty and the clinical agency prior to the scheduled learning experience. No matter what the cause, an absence from class or clinical does not relieve a student from any course requirement. It is the student’s responsibility to stay informed concerning all assignments or class material.

Please note: Only individuals who are officially enrolled in a nursing course may attend class, campus laboratory and/or clinical laboratory. Any others must have special permission in advance from the appropriate nursing course faculty. The Chair must be notified of the request and reason, in writing, of any visitor who is in the classroom setting for reasons other than instruction.

AUDITING A NURSING COURSE

The nursing chair will consider, on an individual basis, allowing students who are currently enrolled or who have been previously enrolled in the nursing program to audit a nursing course. Students who are returning may be required to audit courses according to the Department of Nursing Withdrawal from and Readmission to the Nursing Program Policy (see pages 54-56 of the Handbook). The Department grants permission to audit only the class component of a nursing course or in some selected cases the campus laboratory component; permission is not granted to audit the clinical component of the nursing
courses in accordance with the policies of the university. Nursing students who desire or are required to audit a nursing course must comply with the following outlined procedure:

1. Discuss with student’s nursing academic advisor and/or nursing faculty who will refer the student’s request to the Nursing Chair.
2. Permission must be obtained from the Nursing Chair.
3. Permission must be obtained from the appropriate nursing course faculty.
4. Permission must be obtained from the Office of Academic Affairs.
5. The established fee charged by the university must be paid.

COMMUNICATIONS WITHIN THE CLASSROOM AND CLINICAL SETTINGS

For each course the course guidelines and requirements are presented each semester using the format appropriate for the method of course delivery (such as on-line if course is distance learning). Professional behavior and common courtesy are required in the class and clinical settings at all time. As students progress through the curriculum, they are preparing for transition into professional life. Some behaviors expected in the classroom/clinical setting parallel many behaviors expected in the work place. Professional behavior in the classroom and/or clinical setting includes but is not limited to:

- Attending class and clinical on time
- Notifying professor when unable to attend class or clinical
- Completing reading assignments before class
- Making appropriate verbal contributions to class
- Maintaining appropriate demeanor during class for example:
  - Remaining in classroom until class is dismissed
  - Returning from breaks on time
  - Staying awake in class
  - Refraining from having side conversations
  - Attending to speaker during class time
  - Allowing others to hear and learn
  - Leaving cell phones and/or beepers in off position
  - Using laptop computers or tablets for only class related actions

COPY PAPER

Each student is responsible for providing his/her own paper to use in printers located in the Computer Lab in Room 258 of the Health Sciences Building. The Department of Nursing provides the cartridges for the ink replacement needed in the printers.

DISMISSAL FROM THE PROGRAM

Refer to Chapter IV – Department of Nursing Standards

DISTANCE LEARNING

Distance learning is a teaching/learning modality in which the instructor and the student are separated by time and/or place for more than the majority of the learning (greater than 51%) The nursing faculty will structure learning experiences and possible evaluation of learning in other than a face-to-face environment. Distance education can be accomplished through use of a variety of media including compressed video and web-based learning. However, the faculty has the same commitment to instructional quality and effectiveness as for face-to-face instruction. Technology is used in most
courses. Online, distance education and web-enhanced courses are available in the RN-BSN completion option. Quality distance learning is active learning. In order to achieve this, the faculty design activities that:

- Encourages and maximizes contacts between students and faculty,
- Promotes collaboration among students,
- Stresses time-on-task;
- Sets standards for student performance, and
- Respects diversity of learners and learning needs.

As with all quality instruction, the learning objectives determine learning activities. Course faculty members determine the amount of time needed in various learning activities. Students will be notified at the beginning of the course requirements. In general, students need a basic mastery of computer skills to participate in these course offerings. Computers are available for student use on each university campus. Students are encouraged to visit the computer support site found on the University’s web-page for additional information and support.

EMPLOYMENT

Many students who are enrolled in the Department of Nursing find that they need to work; however, it is often difficult to accommodate the demands of academic and work schedules concurrently. Where possible, it is the intent of the faculty to encourage students to balance the demands of school and work in a way that promotes optimal learning and healthy lifestyles.

To this end, students should not be employed at a level that will compromise their academic progress. While the Department of Nursing cannot control how much students work outside of their student role, the faculty do get involved when outside employment interferes with academic responsibilities and performance.

Full-time pre-licensure BSN students are encouraged to limit their work activities outside of school as much as possible to insure they can meet their academic responsibilities. Experience has shown that full-time undergraduate nursing students who attempt to work at greater than 30 percent time (15 hours per week) are likely to jeopardize academic performance.

Full-time RN-BSN students are also encouraged to make work decisions judiciously. Some students find that they can be both full-time employed and a full-time student because the courses in the RN-BSN program are offered either in the evening or online. This works best for those who are able to adjust their work schedules to meet the schedule of classes, and are able to complete the required coursework, clinical and labs for each class. All students for whom a reduction in employed hours may create a hardship are encouraged to seek funds to support their educational program. The University's Financial Aid Office (521-6255) is available to assist with the pursuit of public scholarship funds as well as federal grants and loans.

Funding support from the Department of Nursing is limited; applications for the nursing endowed scholarships are available in the offices of the Administrative Support Associate. Funds from endowed nursing scholarships, if available, are disbursed each fall semester.
EQUIPMENT AND SUPPLIES

Any student who checks out equipment and supplies from the program is responsible and accountable for its return by the deadline date and before final course grades can be given. All equipment and supplies must be returned in the same condition as when checked out; each student is financially responsible for any damage to equipment and supplies checked out in the name that occurs during use. Equipment and supplies are to be returned to the Department of Nursing administrative support staff.

GRADING POLICY

Standards for Passing

A minimum grade of C (76%) is required for passing in the didactic portion of all required nursing courses and for progression in the nursing program. For courses with a clinical component, a “Pass” in clinical is also required to progress in the nursing program.

Calculation of didactic course grades involves a two-step process:

1. The grade will be determined according to the result of the weighted average of all tests; no further calculations will be completed. If the weighted average of all test grades is less than 76%, the student does not pass the course. The grade for the course will be the letter grade equivalent to the cumulative test grades.

2. If the average of the tests is 76% or higher, then all other graded course work (e.g., papers and other assignments) will be included with the tests to arrive at the overall course grade. Faculty will calculate the final grade according to all graded course requirements and weighting specified in the syllabus. The grade for the course will be the letter grade equivalent to the cumulative course work grades.

In nursing courses, all grade calculations during the semester will be rounded to two decimal places (i.e. 93.589 – 93.59). For the final course grade there will be no rounding (i.e. 91.67 = B+, 75.99 = C-).

Make-up work or extra credit will not be provided.

The final grade, on any required assignment that is submitted LATE, will be reduced by five percent (5%) for each day the assignment is late. Example: Student earned a 100 on an assignment; however, the paper was turned in 2 days late thus, the final grade for the assignment will be 90.

Grading Scale for the Department of Nursing

<table>
<thead>
<tr>
<th>Grade</th>
<th>Numeric Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>100-94</td>
</tr>
<tr>
<td>A-</td>
<td>93-92</td>
</tr>
<tr>
<td>B+</td>
<td>91-89</td>
</tr>
<tr>
<td>B</td>
<td>88-86</td>
</tr>
<tr>
<td>B-</td>
<td>85-83</td>
</tr>
<tr>
<td>C</td>
<td>82-80</td>
</tr>
<tr>
<td>C+</td>
<td>79-76</td>
</tr>
<tr>
<td>C-</td>
<td>75-73</td>
</tr>
<tr>
<td>D</td>
<td>69-67</td>
</tr>
<tr>
<td>D+</td>
<td>66-64</td>
</tr>
<tr>
<td>D-</td>
<td>63 and below</td>
</tr>
<tr>
<td>F</td>
<td>63 and below</td>
</tr>
</tbody>
</table>

Revised and approved: May 2007

MATHEMATICS AND DRUG CALCULATIONS GUIDELINES

Nurses are legally and ethically responsible for providing safe and competent care to the clients they serve. Recent research findings as well as concerns of nursing faculty stress the increased need for improved patient safety. One of the major areas of concern is the safe administration of all types of medications in healthcare settings. Thus, the Department of Nursing requires that all nursing students
assume accountability for the safe administration of medications as students in preparation for their professional role.

As you progress through the nursing program you will be taught how to administer medications competently and safely. The achievement of this goal requires the development of skills in basic mathematics and conversion measurement systems for the accurate calculation of medication dosages to ensure that the safety of clients is not compromised. Therefore, you will be required to demonstrate continuing and growing competence in medication calculations specific to various clinical areas by means of a series of formative tests.

The Department of Nursing Mathematics and Drug Calculations Policy provides an easy-to-follow format for preparing for the multiple mathematics and drug administration tests throughout the nursing program. By completing the required readings and assignments as outlined, you will soon find that it is easy to learn and apply drug calculations used in nursing practice today.

**Steps to Success:**

1. Purchase the clinical calculations textbook that will be used during your nursing program: Morris, D.G. (2014). *Calculate with confidence* (6th ed.). St. Louis, MO: Mosby.
2. Complete assignments as outlined under required actions prior to first day of class on the following grid.
3. Attend Learning Enhancement Center support sessions, use supplemental readings and practice problems provided, as well the online resources. Also seek additional assistance from course faculty and/or the Learning Enhancement Center (LEC) Coordinator.
4. Bring textbook to class on the first day of each semester to show evidence of completed practice problems with all calculations shown.
5. Put the testing date on your calendar when given to you by course faculty.
<table>
<thead>
<tr>
<th>Course</th>
<th>Expected Outcome</th>
<th>Required Actions</th>
</tr>
</thead>
</table>
| Knowledge from Prerequisite  |                                                                                   | 1. Complete Unit I Math Review (Chapters 1-5) and Unit II (Chapters 6-9) on your own.  
| Coursework                   | 2. Answer all practice and chapter review problems; show all work.                 | 3. Contact LEC if additional assistance is needed.                                                                                             |
| NUR 3150 Adult Health Nursing I | Medication Calculations: 80%                                                      | 1. Read Unit III (Chapter 10-15); Unit IV (17, 20 and 21)  
|                               | If <80% - referral to LEC Schedule Test # 2 if needed                             | 2. Answer all practice and chapter review problems; show all work.  
|                              |                                                                                   | 3. Review previous Chapters 1-9 and chapter review problems.  
|                              |                                                                                   | 4. Attend LEC support sessions.                                                                                                                  |
|                              | Complete assignment over the holiday break prior to beginning of spring semester    | 1. Read Unit IV (Chapters 18-19); Unit V (Chapter 22, 24 [select problems] and 25)  
| junior year                   |                                                                                   | 2. Answer all practice and chapter review problems (except chapter 24); show all work.  
|                              |                                                                                   | 3. Complete study packet for select problems from Chapter 24; show all work.                                                               |
| NUR 3450 Family Nursing I     | Medication Calculations: 85%                                                      | 1. Come to LEC support session with questions regarding Chapters 18-19, 22, 24 as assigned, and 25.  
|                              | If <85% - referral to LEC Schedule Test # 2 if needed                             | 2. Review previous Chapters 1-15, 17, 20, 21 and chapter review problems.                                                                    |
|                              | Complete assignment over the summer prior to beginning of fall semester senior year| 1. Read Community Health Study Packet distributed at the end of spring semester.  
|                              |                                                                                   | 2. Answer all practice problems; show all work.                                                                                               |
| NUR 4350 Community Health Nursing | Medication Calculations: 90%                                                      | 1. Attend LEC support session; come with questions regarding assignment.  
|                              | If <90% - referral to LEC Schedule Test # 2 if needed                             | 2. Review previous Chapters 1-15, 17-22, 24 (as assigned) and 25 and chapter review problems.                                              |
|                              | Complete assignment over the holiday break prior to spring semester senior year    | 1. Read Unit V (Chapters 23-24 - remainder).  
|                              |                                                                                   | 2. Answer all practice and chapter review problems; show all work.                                                                            |
| NUR 4450 Adult Health Nursing II | Medication Calculations: 95%                                                      | 1. Attend LEC support session; come with questions regarding assignment.  
|                              | If <95% - referral to LEC Schedule Test # 2 if needed                             | 2. Review all previous Chapters 1-15, 17-22, 24-25 and chapter review problems.                                                            |
MATHEMATICS AND DRUG CALCULATIONS POLICY

Overall Goal:
Prior to participating in clinical experiences each semester, each student is expected to perform basic math and common dosage calculations necessary for safe medication administration.

Specific Requirements:
- Students will purchase the required clinical calculations textbook that will be utilized throughout the nursing program.
- Students must have the Mathematics and Drug Calculations Guide available for use each semester.
- Students are expected to work independently.
- Students are permitted to use only basic function calculators provided by the Department of Nursing. No exceptions to this requirement will be allowed.
- **Students will show work and write down answer (answer must be labeled), rounded to the place value specified on the exam.**
- The following dosage calculation rules will be followed by faculty when determining how the calculation is to be rounded:
  a. Amounts less than 1 will be written with a zero to the left of the decimal (for example 0.25).
  b. Extra zeros will NOT be placed at the right of the decimal point at the end.
  c. Rounding for multiple step calculations will be done ONLY at the end according to the guidelines outlined below:
    - All tablets in calculation problems are considered to be scored in half, so round tablets to the nearest half of a tablet.
    - Volumes 1 mL or over will be rounded to the nearest tenth (one place).
    - Volumes less than 1 mL will be rounded to the nearest hundredth (two places).
    - Milligrams will be rounded to the nearest hundredth (two places).
    - Pediatric and neonatal calculations, including IV infusion problems solving for mL/hr, will be rounded to the nearest hundredth (two places) (exception is IV infusion calculations requiring gtt/min).
    - Adult IV infusion calculations requiring mL/hr will be rounded to the nearest tenth (one place)
    - Pediatric, neonatal, and adult IV infusion calculation problems solving for gtt/min will be rounded to nearest whole number due to inability to infuse part of a drop
    - Weights in kilograms and pounds (adults/children/neonates) will be rounded to the nearest hundredth (two places).
    - When reconstituting IV medications for addition to IVPB only add fluid amount if greater than or equal to 10mL.
  - **Rounding of special measurements**
    a. Centimeters and inches will be rounded to the nearest tenth (one place).

Expected Outcomes:
- **During New Student Orientation,** students will be given a session on beginning medical terminology and abbreviations, as well as, a review on basics covered in the Morris text – chapters 1-9. Upon completion, students will identify areas of weakness and develop a plan for remediation.
- **During clinical-based nursing courses (NUR 3150, NUR 3450, NUR 4350 and NUR 4450),** students will be given a 20-item medication calculations test according to the following comprehensive test blueprint:
<table>
<thead>
<tr>
<th># of Questions</th>
<th>Types of Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-5</td>
<td>Interpreting medication orders and standard abbreviations needed for dosage calculations (NUR 3150 and beyond)</td>
</tr>
<tr>
<td>2-5</td>
<td>Converting within and between standard measurement systems (metric, household and apothecary) (NUR 3150 and beyond)</td>
</tr>
<tr>
<td>5</td>
<td>Calculating dosages for administration of medications by common routes (oral, liquid, and/or injectable) (NUR 3150 and beyond)</td>
</tr>
<tr>
<td>3</td>
<td>Calculating infusion rates and times for intravenous administration (NUR 3150 and beyond)</td>
</tr>
<tr>
<td>2</td>
<td>Calculating dosages for administration of medications in tightly controlled situations (dosages based on patient’s clinical data, such as weight) (NUR 3450 and beyond).</td>
</tr>
<tr>
<td>2-5</td>
<td>Instructor’s choice (from any of the categories, dictated by level of students and the demands of their clinical settings)</td>
</tr>
</tbody>
</table>

Procedure:
1. Course Coordinator(s), for upcoming semester clinical course(s), will remind students of review guide requirements at the end of current semester either in person or in writing. Students are to review the material, and come to the next course prepared for a test on required material. Students are strongly encouraged to attend Learning Enhancement Center (LEC) support sessions relating to this content.
2. Prior to initial testing in each course, an LEC session will be conducted by the LEC Coordinator to review the material. Students are expected to come having reviewed the assigned material and prepared to actively participate.
3. All medication calculation tests will be written by the LEC Coordinator to ensure thoroughness of the test and progression of difficulty in the curriculum. Individual course teams will be responsible for writing drug calculations for each unit test.
4. A medication calculation test will be given during the first week of each semester (except for NUR 3150, when it will be given after clinical lab experiences related to medication administration). Because the level of experience and the complexity of clinical experiences (Elliott and Joyce, 2005) should increase with progression through the curriculum (Johnson and Johnson, 2002), a passing score for the medication calculations test will increase with each semester through the curriculum (a process described as scaffolding, whereby students build on previously learned material), beginning with NUR 3150. One test will be given per semester associated with the following clinical courses. Passing scores are outlined below:
   - 80% for NUR 3150
   - 85% for NUR 3450
   - 90% for NUR 4350
   - 95% for NUR 4450
5. Any student who fails to attain the required score on the first test will be allowed to attend clinical, but will not be allowed to give medications. The clinical day will be counted as incomplete/unsatisfactory. The student will be referred to the LEC coordinator for review and remediation.
6. The second and final test will be given during the second week of the semester (at least 5 business days after the first test). Failure to achieve a passing score on this test will result in immediate clinical failure which constitutes a failure of the course and withdrawal from any other clinical course concurrently enrolled in during the same semester. A C- in the course will be recorded on the University transcript. Prior to re-enrollment in the course during the next academic year, the student will be required to complete a learning contract with the LEC. The student will remain enrolled in non-clinical courses for the semester.
7. All clinical courses (with exception of NUR 3030) will have 5 drug calculation questions written at the appropriate level of the course on each unit test during the semester. NUR 3030 will have 5 questions related to basic math - fractions, decimals, percentages, ratios/proportion, and/or systems of measurement.

References:


POLICY ON MAKE-UP EXAMINATIONS

Make-up exams are a courtesy that is extended to students by their instructors. An instructor is never obligated to provide a make-up exam for any student. Permission to make up an exam will be granted only under very specific or dire circumstances.

- Any student who will miss an exam due to required participation in a University-sanctioned activity, e.g., membership on a University athletic team in scheduled competition, must notify the instructor in advance of the absence and provide documentation of the absence at that time. The date and time of the makeup exam will be determined at the time that the student informs the instructor of the impending absence.

- If a student is unable to take an exam due to unexpected circumstances, the student or their responsible designee (immediate family or significant other) must notify the instructor in person or by telephone within 24 hours of the exam. E-mail notification is unacceptable. Unexpected circumstances shall be defined as, major medical illness of self or immediate family member, funeral attendance, court appearances, and serious car accidents. Having to work, waking up late, or making personal travel plans that coincide with an exam date are not considered extreme circumstances and will not be considered for make-up exams.

Proper documentation of the circumstances surrounding the student's absence from the original exam must be provided prior to the makeup exam being administered. **Failure to provide proper documentation shall be construed as the student's failure to take the relevant examination and will receive a score of zero for that exam.**

Examples of proper documentation include the following:
- absences due to medical reasons, a doctor's excuse specifically covering the time during which the exam was scheduled or paper was due;
- absences due to funeral attendance, a copy of the relevant obituary;
- court appearances, copies of court documents showing the required date and time of appearance;
- automobile accidents, copies of relevant police reports and towing bills showing the exact date of the accident.

Make-up exams will be given at a time negotiated between the student and course coordinator.
Students must come to the office of the Administrative Support Associate for nursing in the Health Sciences Building or program coordinator (Sandhills or Richmond) and sign up for the exam. The student will be taken to a room reserved for testing. Students will not be allowed to take book-bags, cell phones or other items into the testing room. Students must arrive in time to conclude their exam by the stopping time designated. Should a student be unable to take the exam at the designated time, he/she is encouraged to call the course instructor to make other arrangements.

Instructors who wish to give a make-up exam should bring the test to the proper office, place the exam in the envelope provided, and fill out the instructions completely. The instructor should not seal the envelope. The student will seal the envelope after he/she has completed the exam.

PORTFOLIOS

The Department of Nursing requires that all nursing students complete a professional portfolio by the time of graduation. The purpose of requiring a portfolio is to give the student a creative means through which to assess effectiveness of course material, both didactic and clinical, as well as educational objectives within the BSN program. See Appendix B for specific portfolio guidelines.

PREPARATION FOR NCLEX-RN® EXAMINATION

The Department of Nursing Chair and/or the NUR 4510 Course Coordinator meets with graduating pre-licensure seniors in the spring semester, others as needed, to discuss the online licensure application process. These includes the NCLEX-RN® application, the Criminal Background Check information, and the instructions concerning the North Carolina State Board of Nursing application or for the state in which the graduate chooses to become licensed. Students are solely responsible for the contents, completion, and timely submission of the licensure application. Students are also solely responsible for contacting the Board of Nursing, in the state in which examination is to be taken, with any questions related to the contents, completion and timely submission of the application.

PROCESS FOR ADDRESSING FACULTY, COURSE, AND STUDENT-RELATED CONCERNS

During their nursing educational experience, students may have concerns about a particular course, clinical experience, faculty teaching style, and/or potential peer relationships. All students, enrolled in the Department of Nursing, who believe they are experiencing one of these situations, have a right to address the situation. It is also important to recognize that the faculty and administrators have rights in these situations as well. Dealing with issues and concerns is an important part of students’ professional development.

Basically there are three types of concerns or issues; those dealing with (1) a specific course, (2) a faculty member in the Department of Nursing, and (3) peer-to-peer relationship concerns. The most effective approach in dealing with these concerns is at the level closest to the problem. The primary point of contact for addressing concerns related to a course is the faculty member who teaches in the course. The primary point of contact for addressing issues related to a faculty member is the faculty member. The primary point of contact for addressing peer-related issues is directly with the peer(s), themselves.

Occasionally students may choose, for a variety of reasons, to seek assistance from someone outside the process as outlined. When students do so, the individual contacted should listen to the concerns, inform
them of the appropriate procedure for dealing with the concern, and identify with the student the appropriate person(s) to contact and process to follow.

**Guiding principles**

- Issues should be addressed and resolved at the lowest level possible.
- Concerns and issues need to be presented in a constructive manner and with objective data.
- Faculty members have a right to be informed by a student about issues that involve them.
- Attempts will be made to help the student gain the support needed to handle the situation.
- Students may bring a support person with them as they discuss issues although the support person may not participate in the discussions and may not be a legal counsel.
- While there are multiple potential entry points in the Department of Nursing that a student may use to address a situation, the general flow chart which outlines the process for addressing course-related issues will be followed.

**I. Steps to Resolving Concerns Related to Course or Faculty Related Issues:**

When addressing concerns about course or faculty related issues, students should follow the recommended steps as depicted in the attached flow chart. In addition, the following process will apply:

- Student issues or concerns related to a faculty member should first be discussed directly with the faculty member. If, following the discussion, no resolution is achieved; student (s) should bring concerns to the Director, Undergraduate Programs.

- Student issues or concerns related to a course or clinical practice should first be discussed with the course or clinical faculty member. If, following the discussion, no resolution is achieved; the Course Coordinator will become involved. Should the situation not be resolved at the Course Coordinator level, the Director, Undergraduate Programs will become involved. Preferably, this would be accomplished in a meeting that includes the faculty member and other relevant parties.

- The Director, Undergraduate Programs is to inform the Chair, Department of Nursing of any unresolved faculty or course related concerns.

**II. Steps for Resolving Peer Relationship Concerns:**

When addressing concerns about peer-to-peer relationship issues, the following steps to resolve the conflict will be utilized:

- Student issues or concerns related to a peer or peers should first be addressed directly with the peer(s). If following the discussion, no resolution is achieved, the student(s) will be instructed to contact the Office of Student Affairs, and the appropriate University policies will apply. Please refer to the University student handbook for additional information.

- In the case of an escalated peer-to-peer conflict, the faculty member(s) will follow appropriate classroom management techniques, to attempt to contain the issue. If this faculty intervention does not resolve the conflict, the appropriate campus police or law enforcement agency will be notified, as well as the Office of Student Affairs. In addition, the Department Chair will be notified immediately. All appropriate University discipline policies will apply.

- If a student conflict occurs in a clinical setting or agency, the appropriate facility policy/policies will apply. In addition, the Department Chair will be notified immediately. It should be
understood that escalated verbal or physical altercations, violence and/or disruptive student behavior in a clinical setting would be sufficient grounds for immediate dismissal from the nursing program.

**Figure 1: PROCESS FOR ADDRESSING COURSE AND FACULTY-RELATED CONCERNS**

![Diagram of process flow](image)

Adapted from The University of North Carolina at Chapel Hill School of Nursing, 2007

**RECORDING OF CLASS OR LECTURE**

Students should request permission from each course instructor to audio or videotape classroom lectures.

**SCHOLARLY PAPERS/COURSE-RELATED WRITTEN WORK GUIDELINES**

UNCP Department of Nursing uses the 6th edition of the *Publication Manual of the American Psychological Association* (hereafter referred to as the APA Manual) as a guide for writing papers course-related written work. Appendix C includes specific **Guidelines for Scholarly Papers** which have been extracted from the APA Manual to help you complete your course-related written work. This document is not a substitute for the APA Manual. Students are responsible for reading, understanding, and applying guidelines in the APA Manual. Page numbers have been provided as a reference where the specific information can be found in the APA Manual; students are encouraged to refer to these specific sources.
Preparation of written work should contribute to clear communications. Good writing is an art and craft. Correct grammar facilitates clear communication. Ideas should be developed clearly and logically. Papers with numerous grammatical errors, poor sentence structure, and improper documentation can lose points. A writing center is available on campus if a student needs assistance. To reach them, the e-mail address is writing@uncp.edu and the telephone number is (910) 521-6168.

All scholarly papers must be submitted electronically. Any paper that is found to be plagiarized will result in an automatic F in the course. An Academic Honor Code report will be completed; a copy will be placed in the student’s record and the original will be submitted to the Student Affairs office.

TESTING GUIDELINES

Classroom Testing Procedures

The following guidelines apply to all classroom testing environments:

1. If a class section has 20 or more students, a minimum of two faculty proctors will be present at each scheduled examination. Large groups of students may require additional proctors.
2. If a student is 15 minutes late for an exam, including the final, the student will not be permitted to take the exam at that time. Additional testing time will not be provided in the event of tardiness for any exam.
3. All belongings must be placed at the front of the testing room at the start of the testing session. Pagers and cell phones must be set to the off position. Students will bring #2 pencils for test taking.
4. Students will be seated in every other seat on every other row of the testing room, as directed by proctors. If students must sit in adjacent seats, same test items may be in a different order or proctors will provide cover sheets for use by students.
5. The proctor(s) will list number of questions on exam and length of time for exam on board.
6. Students are strongly encouraged to take care of all comfort needs prior to entering the testing room. In the rare instance when a student needs to leave the testing room during an examination to go to the restroom, the student should come forward and hand her/his exam and answer sheet to the faculty and reclaim the exam upon returning to resume testing. Only one student will be allowed to leave the examination site at a time.
7. Students are responsible for marking their answer sheets correctly and completing the test during the time scheduled. Students are responsible for maintaining confidentiality of their test responses.
8. If students have questions regarding test items, they should raise their hands and a proctor will come to their seat to answer the question.
9. The student who completes a test prior to the end of the scheduled exam period should bring the test, answer sheet, and cover sheet to the proctor. Once an exam has been turned in and the student has exited the testing room, the student will not be allowed back into the testing room. Students are asked to leave the testing area as a consideration to those still testing.
10. Students will be given notice when there are 10 minutes remaining in the testing period.
11. At the end of the testing period, all remaining students will be instructed to turn in their tests, answer sheets, cover sheets, and pencils.

Test Feedback Process

Test feedback is one of many ways of learning and serves as a source of formative evaluation for students. The purpose is to provide feedback to students in regard to items missed or answered.
incorrectly. It is not a time for negotiation about test items and providing feedback to faculty about the examination process.

1. Test feedback will be provided to students after each unit exam, during the first 20 minutes of the class following the date of the exam.
2. There will be no test review of the final examination for any course.
3. Tests will be returned to students for test review and will be returned to faculty after the review.
4. Students may not write notes or use tape recorders during test review sessions. All belongings must be placed at the front of the room prior to the review session.
5. Students, wishing to review their test in more detail or have questions about a test item, may schedule an appointment with the course coordinator. No debate of test items will occur during the review.
6. Any student who has a concern related to test grading must contact the Course Coordinator via email within 3 business days after test review, excluding the final exam. After that time, grades become final.
7. Course faculty may choose to provide additional teacher-directed test feedback for students who are performing poorly on course exams.
8. Scantron sheets will not be retrieved for students after they have been handed in, so that students can—double check what they marked. Scantron sheets will not be made available to students for test feedback or verification of test grades.
9. Course faculty will establish a time for review of all course tests prior to the final examination. Students will be allowed to review all course tests for no more than 20 minutes/test.

WITHDRAWAL FROM AND READMISSION TO THE NURSING PROGRAM

The Department of Nursing complies with UNCP’s policies and procedures for withdrawal from the University. Students who withdraw from the university are required to comply with the procedure for withdrawing from the nursing program as well. Failure to do so will affect the student’s readmission into the program.

The nursing curriculum is sequenced to facilitate student learning and allow for the development of cumulative knowledge and clinical competence. The ability to accommodate out-of-sequence students is restricted in a limited access program. For a student who has withdrawn from any nursing course or from the nursing major for any reason (personal or academic) and/or fail to earn a minimum grade of C in a required nursing course, there may be a one year delay before the student will be able to repeat the nursing course and/or progress in the nursing program. A student may be readmitted only once following withdrawal from the nursing major for any reason (personal or academic).

Time Limitation: Student Absent from Department of Nursing Less than One Calendar Year

Specific guidelines for readmission to the Department of Nursing within one year of withdrawal or failure to earn a minimum grade of C in a required nursing course include the following:
1. Course repetition policies
   - Only one (1) nursing course may be repeated.
   - The course must be repeated within the next academic year.
   - The course must be repeated successfully (2.0) prior to taking other nursing courses.
   - A student who fails to earn a minimum grade of C in two nursing courses will be dismissed from the nursing program and not allowed to return.
2. Any student readmitted to the nursing program will be required to:
   - Complete University readmission requirements
Complete the Department of Nursing Readmission Application by August 1 for readmission in spring semester and by January 1 for readmission in fall semester. See Appendix D for Readmission Form.

Establish a Learning Contract for Establishing Competency by collaborating with the Learning Enhancement Center Coordinator (pre-licensure BSN students) or the RN-BSN Coordinator (RN-BSN students). See Appendix E for Learning Contract Template.

Meet all of the objectives outlined in the Learning Contract for Establishing Competency prior to enrolling in desired semester.

3. A readmitted student must meet graduation requirements in effect at the time of readmission and follow the baccalaureate degree nursing policies in effect for that academic year.

4. A student must have a cumulative grade point average of 2.50 for readmission consideration.

Time Limitation: Student Absent from Department of Nursing More Than One Calendar Year but Less than Two Calendar Years

For a student who has not been enrolled in either the pre-licensure BSN or RN-BSN nursing tract for more than one year but less than two years must meet University readmission requirements and reapply to the Department of Nursing. The Chair will review the status of each student seeking readmission and consult with nursing faculty and/or the University administration as deemed appropriate. As a result of this review, the student may be required to repeat selected courses or complete competency testing as part of a Learning Contract for Establishing Competency for program completion. Readmission is based on a competitive application portfolio, availability of qualified faculty and/or campus and clinical laboratory space.

Specific guidelines for consideration of readmission to the Department of Nursing for a student who has not been enrolled in either the pre-licensure BSN or RN-BSN nursing tract for more than one year but less than two years include the following:

1. Course repetition policies
   - Only one (1) nursing course may be repeated.
   - The course must be repeated within the next academic year.
   - The course must be repeated successfully (2.0) prior to taking other nursing courses.
   - A student who fails to earn a minimum grade of C in two nursing courses will be dismissed from the nursing program.

2. Any student readmitted to the nursing program will be required to:
   - Complete University readmission requirements
   - Complete the Department of Nursing Readmission Application by August 1 for readmission in spring semester and by January 1 for readmission in fall semester. See Appendix D for Readmission Form.
   - Establish a Learning Contract for Establishing Competency by collaborating with the Learning Enhancement Center Coordinator (pre-licensure BSN students) or the RN-BSN Coordinator (RN-BSN students). See Appendix E for Learning Contract Template.
   - Meet all of the objectives outlined in the Learning Contract for Establishing Competency prior to enrolling in desired semester.

3. A readmitted student must meet graduation requirements in effect at the time of readmission and follow the baccalaureate degree nursing policies in effect for that academic year.

4. A student must have a cumulative grade point average of 2.50 for readmission consideration.

Time Limitation: Student Absent from Department of Nursing More Than Two Calendar Years

A student who has been absent from the Department of Nursing for more than more than two years must meet University readmission requirements and reapply to the Department of Nursing. Admission decisions
will be based on a competitive application process with other applicants seeking admission to the Department of Nursing. No special considerations will be given to a student previously enrolled in the program.

Alternate Readmission Process

For a student who withdrew from the pre-licensure nursing major for any reason (personal or academic) or was dismissed due to academic reasons and subsequently earned an Associate Degree in Nursing or Hospital Diploma in nursing from an accredited program may enroll in the RN-BSN completion track. Specific guidelines for admission include the following:

1. Be admitted to UNCP by meeting general requirements for admission as a regular degree seeking student.
2. Present evidence of having earned an Associate Degree in Nursing or a Hospital Diploma in nursing, from an accredited program.
3. Have a current, valid North Carolina nursing license or a license with multistate practice privileges by authority of the Nurse Licensure Compact.
4. A cumulative GPA of 2.8 (4.0=A) in all post high school work. Each student’s total GPA is calculated on all transferable college courses attempted at all accredited institutions of higher education according to the UNCP Admissions Office guidelines.
5. A cumulative GPA of 2.8 in the following mathematics and science courses: MAT 1070 or higher, BIO 2110, BIO 2120, BIO 3150, CHM 1400, CHM 1410, CHM 1120, and CHM 1130.

Approved: August 2009
CHAPTER V
DEPARTMENT OF NURSING CLINICAL POLICIES

CHEMICAL SUBSTANCE ABUSE AND IMPAIRMENT TESTING POLICY FOR STUDENTS

The Department of Nursing of the University of North Carolina at Pembroke is committed to providing a safe, healthy, and productive academic environment for its students, faculty, and staff, as well as providing a safe clinical setting for students, clients, and employees of affiliated clinical agencies. Therefore, students must remain free from the use, sale, distribution or possession of any illegal drug and must also remain free of impairment related to the use of drugs or alcohol. For obvious health and safety concerns, all students enrolled in programs offered by the Department of Nursing must participate in clinical education activities in full control of their manual dexterity and skills, mental faculties, and judgment. The presence of alcohol and/or drugs, lawfully prescribed or otherwise, which interfere with the student’s judgment or motor coordination in a healthcare setting poses an unacceptable risk to clients, faculty, other students, the University, and affiliated clinical agencies (i.e., hospitals, skilled nursing facilities, health systems, and other healthcare organizations involved with student education and with which the University has a clinical affiliation agreement in place). To ensure client safety, comply with clinical agency policies, and the North Carolina Board of Nursing policy (21 NCAC 36.0320 [d]), the Department of Nursing has adopted a chemical substance abuse and impairment testing policy.

The policy provides for drug testing upon entry to the Nursing major and when there is reasonable suspicion of drug and/or alcohol abuse on the part of a student. Students who exhibit chemically impaired behavior in the classroom or clinical setting, or who violate state or federal law governing alcohol and drugs, will be subject to disciplinary action, up to and including dismissal from the Program. The policy may be reviewed in its entirety in Appendix F. In addition, all students enrolled in the Department of Nursing must sign the Acknowledgement and Consent Form contained in the policy. The signed form attests to the student’s acknowledgement of the provisions of the policy and the student’s consent to undergo any drug and or alcohol testing required by the policy.

CLINICAL and LABORATORY ATTENDANCE

Students are expected to attend all clinical and laboratory experiences. Students are to be prompt, prepared, and appropriately attired. If a student must miss time due to illness or personal emergency, s/he must contact the clinical faculty personally prior to the beginning of the clinical experience. Leaving a message or e-mail for the faculty is not acceptable. This is a professional responsibility which must be assumed by the individual student and will be taken into consideration in the evaluation of clinical performance. The clinical instructor may deny clinical experience for the following reasons:

- Student is unprepared for client care.
- Student appears either physically and/or psychologically ill.
- Student appears to be under the influence of alcohol and/or drugs.
- Student is unaware of his/her own limitations or fails to seek help when he/she recognizes his/her limitations.
- Student is unkempt, unclean, and/or with inappropriate attire.
- Student actions, in addition to the ones listed above that are deemed unprofessional, unsafe, or inappropriate (for example, pattern of tardiness for the clinical experience).
A student missing a clinical experience, for any reason, is responsible for making up the experience as determined by the individual clinical instructor in consultation with the course coordinator. If a student is unable to demonstrate competency in clinical objectives, the student will receive a failing grade for the clinical practicum which results in failure of the associated course. Once a student is informed that s/he is failing a clinical course withdrawal from that course is no longer an option.

**CLINICAL REQUIREMENTS BSN STUDENTS**

Students enrolled in a nursing course with a clinical component are responsible for providing the course coordinator documentation of:

1. Current CPR provider certification (see detailed Policy).
2. Current/annual PPD (students with a positive PPD, should provide evidence of a negative chest x-ray).
3. Current professional liability coverage of at least $1,000,000 per incident and $3,000,000 aggregate.
4. Current health insurance coverage.
5. Current unrestricted license as a registered nurse (RN-BSN students only).

**CLINICAL DRESS AND PERSONAL APPEARANCE**

The image projected by the student is a reflection of his/her personal image as well as the University of North Carolina at Pembroke student body and the nursing profession as a whole. Professional appearance in the clinical setting identifies the nursing student and promotes client confidence in skills of the student nurse. Good judgment should be exercised when making decisions as to what is appropriate in a given clinical experience. If an agency has specific requirements not covered by these guidelines, student must conform to those requirements. Violations may result in dismissal of student from the clinical setting with an unexcused absence and repeated behavior may place student at risk for failure of clinical portion of course.

**Uniform**

1. The uniform is white with no ornamentation. Other appropriate colors may be worn as specified by the clinical instructor, especially in pediatric settings. Top and elastic waist pants may be purchased from the Department of Nursing designated uniform vendor. Dress or skirt/blouse uniforms cover the knees. Pants are to be ankle length. The uniform should have two front or side pockets that are deep and wide enough to carry essential clinical articles (such as pens, note pads, scissors, and stethoscope) and short or three quarter length sleeves.

2. An official UNCP name pin stating name and status is worn at all times in the clinical setting, including time spent in scrubs, unless otherwise instructed. Many agencies will require you to wear the agency ID badge as well.

3. An official UNCP student patch is to be sewn on the upper right sleeve of each uniform and lab coat. The student patch is only worn when in the student role.

4. A white sweater or warm-up jacket may be worn as deemed appropriate by the clinical instructor.

5. Undergarments are to be worn and should not be visible through the uniform. Undergarments with designs are not worn with the uniform. Slips are worn with dresses/skirts. Male students must wear a white, round-neck, short-sleeved t-shirt under uniform top.
Footwear
1. White leather or simulated leather shoes nursing or running are required. Shoes with high tops, high heels, open toes or backs are not permitted in the clinical setting. If running shoes are worn, must be all white leather with white laces. Plain white socks or hose are to be worn with pants and white hose are to be worn with dresses or skirts.

Labcoats
1. A knee length white lab coat is worn over street clothing when the student is in client care areas, when touring clinical facilities, or when obtaining client assignments. Neat, clean, and appropriate street clothing may be worn with a labcoat in community health nursing or as specified by the clinical instructor. Jeans, shorts, halter tops, sweat pants, tights, mini skirts, low riders, crop tops, clothing with logos, tennis shoes, and sandals are inappropriate clothing for any clinical setting.

Professional Street Clothes
1. Men: Dress slacks and dress shirt, preferably with tie and labcoat
2. Women: Dress slacks or a skirt and blouse or appropriate dress with flat shoes or low heels and labcoat. Hose or socks must be worn (socks only with slacks).
3. Students are required to follow the guidelines outlined under “Jewelry, cosmetics, hair and nails” when in professional street clothes.
4. Students may be required to wear a Department of Nursing polo shirt with khaki slacks to select community engagement activities. The polo shirt will be available at the University Bookstore.

Jewelry, Cosmetics, Hair, and Nails
1. No jewelry with exception of wedding bands and/or one small pair, plain stud earrings may be worn in the clinical area.
2. No body piercing jewelry on face; all body tattoos and other piercing jewelry must be hidden.
3. Make-up should be simple and conservative.
4. Fragrances should not be worn in clinical settings. Students may not enter clinical setting smelling of tobacco products.
5. Finger nails need to be short, clean and neatly manicured. No fingernail polish. No acrylic nails.
6. Hair should be clean and neatly groomed. Hair that is shoulder-length or longer must be secured up and off the collar in a manner that is both professional-looking and should not interfere with client care. Highlights and dyes should be natural colors only. Beards, mustaches, and sideburns are kept clean and neatly trimmed.
7. No gum chewing permitted during clinical.

Cell Phones
1. Cell phones and beepers are not permitted in the clinical area.

Equipment
1. As part of the standard uniform, students need the equipment: watch with second hand, bandage scissors, black ballpoint pens, stethoscope, penlight, pencil, and small notebook.
CLINICAL PLACEMENT

In the pre-licensure BSN program, students are provided detailed information on clinical placement by the course coordinator at the beginning of each clinical course. Clinical placement varies depending on the focus and objectives of specific courses. The Program uses a Preceptorship Model for clinical placement in the RN-BSN completion option. This model allows flexibility of selecting clinical setting based course objectives, student’s goals and the needs of the clinical setting. No student may participate in a clinical unit where he/she is employed full-time as a registered nurse.

Students are responsible for their own transportation to clinical sites beginning in the first semester of the pre-licensure BSN program. In addition, RN-BSN students are responsible for their own transportation to clinical sites when they enroll in clinical nursing courses. Clinical sites are generally located within 1½ hours from the UNCP campus.

Each student is required to know and follow emergency measures in case of fire, cardiopulmonary arrest, and other disasters, for each clinical facility to which the student is assigned. If an orientation to the facility is required, the student is expected to attend prior to clinical experience.

CONFIDENTIALITY STATEMENT

A nurse is effective only as long as he/she is trusted. Breaking a co-worker, friend, or patient’s trust and/or inappropriately revealing privileged information can result in harm and can also damage the reputation and career of the person who violated the trust. We must be committed to helping each other recognize subtle and sometimes seemingly accepted situations that devalue another human being by breaching confidential and/or privileged information. Client (recipient of care) confidentiality must be maintained at all times. Client records are not to be photocopied under ANY circumstances. Students may not remove from clinical setting any part of a medical record.

Confidentiality of patient information and individual rights to privacy and safe care are also included under the Department of Nursing Code of Ethics and Professional Behavior, as well as in the federal Health Insurance Portability and Accountability Act (HIPAA). The following guidelines are to be followed by all nursing students at UNCP. Breaching one of these guidelines is a serious behavior and may result in the person’s dismissal from the nursing program.

1. We believe in the Patient’s Right to Privacy; thus, student will not be forced to take care of patients that are so personally known that the patient, student, or faculty is made to feel uncomfortable.
2. Personal information about the patient is limited to the assigned student/instructor and healthcare workers who are personally involved in the patients care.
3. Post-conference and classroom discussions should not use names of patients or reveal personal information not related to nursing care. Refer to client by initials only.
4. Discussion of patient, including patient’s diagnosis, sex, behavior, family, etc. in any public area such as hallways, elevators, cafeteria, parking lot or elsewhere is a breach of confidentiality.
5. Discussion of privileged information in public areas such as doctor/nurse relationships, family conflicts, overheard hospital/agency gossip, institutional variants, etc. is a break in privileged confidentiality.
6. Ethical and philosophical concerns can be discussed with the instructor in the hospital/agency setting or in private campus settings, and/or discussed through established University/hospital/agency grievance procedures.
7. Reading charts or requesting information on any patient other than those in your care is a breach in the patient’s right to privacy.
8. Using a patient’s name on any written material except hospital records requiring such name is a breach to patients’ right to privacy.
9. No audiotape, photograph or videotape will be made of a patient without permission from the faculty and the patient.

**CPR CERTIFICATION REQUIREMENTS**

A Basic Life Support (BLS) cardiopulmonary resuscitation (CPR) course specifically for health care providers (*not* lay people) is required. The Department of Nursing requires that students complete The American Heart Association course; after successful completion of the course certification is valid for two years. Pre-licensure BSN students must submit a photocopy of their current, valid certification card (front and back) to Mary Baynes, Administrative Associate in the Department of Nursing on the Southeastern Regional Medical Center campus. RN-BSN students must submit a photocopy of their current, valid certification card to Brenda McPherson, Administrative Associate in the Department of Nursing on the UNC-Pembroke main campus.

Current CPR certification must be maintained throughout your enrollment in the School in Nursing. Permitting your CPR certification to lapse will result in immediate restriction from the clinical setting, thus jeopardize your standing in the program.

**CRIMINAL HISTORY DATABASE CHECKS**

In order to comply with clinical agency Memoranda of Agreements, effective June 1, 2008, the UNCP Department of Nursing will require all students enrolled in clinical nursing courses to provide the results of a Criminal History Database Check before participation in clinical activities in order to help ensure patient safety. The Criminal History Database Check shall be performed on students: 1) at the initiation of this policy, or 2) upon program matriculation, or 3) upon program re-entry subsequent to a leave of absence or program withdrawal greater than one year in length. All offers of admission to the School of Nursing issued subsequent to June 2008 state the applicant’s admission is contingent upon the results of the Database Check. Any student who fails to comply with this requirement may not enroll in the Department of Nursing.

Students in the pre-licensure BSN option must have the results submitted prior to enrolling in the required 3000-level nursing courses. For RN-BSN students, results must be submitted prior to beginning any nursing course with a clinical component (by July 1 for fall semester, by December 1 for spring semester, or May for summer session).

The Criminal History Database Check is to be performed by Certiphi Screening, Inc. Certiphi Screening, Inc is a background check service that does screening exclusively for the healthcare community. The database check will meet the following criteria:

- Database check must be completed within the 60 days immediately preceding policy initiation, program matriculation or re-matriculation.
  - Exception: Checks for student admitted within 72 hours of the first day of class may be “in process” by student’s matriculation date but must be concluded within five (5) business days following the first day of class.
- Database check must cover the past seven (7) years, or the time period since the student’s 18th birthday, whichever is less. International students must include the time since they entered the United States or the past seven (7) years, whichever is less.
• Database check must cover all states where the student has lived or worked during the last seven (7) years or since turning 18 years of age.
• Database check must address all felony and misdemeanor crimes (except minor traffic related violations) and include a Sexual Offender/Predator Registry check.
• The vendor must provide a paper or electronic copy of the report directly to the Department of Nursing.

Students must sign a “Release to Share Criminal History Database Information and Agreement to Report Future Felony or Misdemeanor Convictions” form (see Appendix G) which allows the Department to share information obtained in the Database Check with clinical agencies for the purpose of securing a clinical placement as part of the student’s educational experience. Students must agree to report any felony or misdemeanor charges and convictions (excluding minor traffic related violations), which occur during their enrollment in the Department of Nursing to the Coordinator, Learning Enhancement Center. Failure to report in a timely (within 10 business days) and complete manner will be considered a violation of the Honor Code and will be reported to the student Judiciary System, and may serve as grounds for dismissal from the Department of Nursing.

The Department of Nursing agrees to use the student information only for the process of admission screening and obtaining educational placements for students in clinical agencies. If the Database Check reveals an event of concern, the Coordinator, Learning Enhancement Center will discuss the issue directly and immediately with the student prior to sharing the information with the clinical agency.

The Department of Nursing in consultation with University officials makes the final decision as to whether a student with a positive check may proceed to matriculation. The clinical agency makes the final decision about whether a student will be placed at that site. Acceptance into the nursing program may be rescinded or enrollment terminated based on the results of the criminal history database check.

HEALTH INCIDENT REPORT POLICY

Any health incident, defined as any actual or potential injury or health risk, that occurs to a student in any teaching environment within the Department of Nursing or its affiliated clinical agencies must be documented and reported by the faculty member.

In the case of a student injury during a Department of Nursing clinical or class, the safety and well-being of the student is the first priority.
1. The student must IMMEDIATELY notify the faculty member responsible for the class or clinical. If it is a precepted experience, then the nurse preceptor must be notified.
2. The policies of the occupational or employee health department of the clinical agency will be followed.
3. If the student has sustained a serious injury or has been exposed to blood, body fluids, or hazardous materials, then time is of the utmost importance and the student should receive prompt treatment through the qualified health care provider of his/her choice or the emergency department of his/her choice.
4. All students are required to carry personal health insurance.

The following guidelines are to be followed when completing health incident reports.
1. The faculty member must be aware of the contractual agreement between the Department of Nursing and the clinical agency. In general, one should notify the clinical facility supervisor or administrator on call that the incident has occurred and complete the documentation required by the facility.
2. The faculty member must complete the Department of Nursing **Health Incident Report Form** (see Appendix H) within 24 hours, which includes a clear statement of the incident that occurred, who was involved, action that was taken, and any plan for follow-up. Documentation about the incident should be objective and contain factual information only.

3. The faculty member should forward the completed health incident report within 24 hours to the Chair of the Department or designee.

Approved: September 2007

**PREGNANCY**

A student who is pregnant may continue in clinical practice as long as her health status is satisfactory and she is able to complete her clinical assignment. A note from her health care provider indicating safety of participation in clinical activities may be required. Students who are pregnant should consult with their faculty member well in advance of their clinical assignment. Clinical agencies may have policies that determine the placement of students during pregnancy; assignments should be made accordingly.

**SIGNING CLINICAL RECORDS**

All clients' records and other official clinical agency forms used in providing care to clients are to be signed as in the following example or as otherwise indicated by the clinical agency: *John J. Doe, NS, UNCP*. All professional notations will be made in black ink.

**STUDENT MEDICATION ADMINISTRATION INCIDENT REPORT POLICY**

The following definitions of medication incident and medication discrepancy apply when completing this report.

1. **Medication incident**: an event which involves an error in the administration of a drug to a patient, or lack of administration of a prescribed drug to a patient.

2. **Medication discrepancy**: an event which does not involve the actual administration of a drug to a patient, but where an error in the medication process has been detected and corrected before reaching the patient.

The following guidelines are to be followed when completing medication incident reports:

1. Documentation about the incident should be objective and contain factual information only. The **Student Medication Incident Report** (see Appendix I) does not replace the organization’s incident reporting form.

2. The incident report is to be completed by the student and faculty or preceptor who were directly involved within 24 hours. When a student is under the supervision of a preceptor/instructor, the Course Coordinator is to be notified of the incident as soon as possible.

3. The report will be sent to the Course Coordinator and copied to the Chair or designee within 24 hours of the incident.

4. The original of the report will be maintained in the Chair’s or designee’s office and a copy of the incident is to be placed in the student’s file.

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CHAPTER VI

KEY DEPARTMENT OF NURSING STUDENT RESOURCES

CLINICAL LEARNING CENTER

The Clinical Learning Center is a state-of-the-art facility located on the 2ND floor of the Health Sciences Building on the UNCP campus for both pre-licensure and RN-BSN students. The Clinical Learning Center offers the latest technology in simulation housed within seven individual laboratories - Basic Care, Advanced Care, Pediatric, Maternal/Child, Psych/Mental Health, Health Assessment, and the Howard and Brenda A. Brooks Home Simulation Apartment. Each lab is equipped for student simulation learning related to healthcare situations with clients of diverse cultures across the lifespan. The Clinical Learning Center is available to students twelve hours a day, six days a week. Students may also make appointments with the Clinical Learning Center Coordinator, Ms. Martha Hepler by self-referring via the Center website or be referred by a faculty member.

- **Basic Care Lab** – The lab is equipped with eight advanced care bed units and a nursing station, to simulate hospital/clinic environment, and a variety of practice models. Each bed site is equipped with wall connections for O2 and suction and connections for a PC. Students utilize this area to learn and practice bed bathing, occupied and unoccupied bed making, transferring and positioning, intravenous line insertion, intramuscular and subcutaneous injection, and urinary catheterization, among many other skills. Attached to this lab is a medication preparation area with sink, cabinets and room for a mobile medication cart.

- **Advanced Care Lab** – When students enter the Advanced Care Lab, they are greeted by two SimMan high-fidelity simulator, portable and advanced patient simulators for team training. SimMan has realistic anatomy and clinical functionality. SimMan provides simulation-based education to challenge and test students’ clinical and decision-making skills during realistic patient care scenarios (http://www.laerdal.com/). Additionally, the Lab is equipped with eight advanced care bed units and other adult mannequins. There are two ceiling-mounted video cameras in the room for the recording of student clinical based experiences.

- **Maternal/Child Lab** - The Maternal/Child Lab is equipped with two laboring beds and special obstetrical mannequins. There are an additional four advanced care bed units, a nursing stations, newborn radiant warmer, neonatal intensive care unit isolette, and numerous bassinettes. There are two ceiling-mounted video cameras in the room for the recording of student clinical based experiences.

- **Pediatric Lab** – The lab is equipped with six pediatric bed units as well as pediatric high-fidelity mannequins. Mannequins have audible and programmable capabilities to enhance student learning. The lab features equipment used to assist premature and sick infants as well as what is expected normally. SimBaby is an advanced simulator for training in infant emergencies. It is portable and equipped for infant/patient simulation for team training. SimBaby has realistic anatomy and clinical functionality that enables simulation training. SimBaby includes software with video debriefing and an interactive technologically advanced manikin allowing learners to practice the emergency treatment of pediatric patients. A recent addition to the lab is the high-fidelity PediaSIM mannequin. PediaSIM automatically responds to student interventions and represents a true-to-life response, specifically isolating critical breakdowns in skill acquisition and critical thinking. There are two ceiling-mounted video cameras in the room for the recording of student clinical based experiences.

- **Howard and Brenda B. Brooks Home Care Simulation Apartment** - The lab simulates a fully-functioning apartment style home so that high-tech nursing can be practiced in a low-tech
environment. The home care lab has a dining area, living area, bedroom area, and a home-style handicapped accessible bathroom. As a result of the generosity of the Brooks family, the home care suite is furnished with furniture and needed equipment so that students are able to practice nursing skills in a home-like setting before actually venturing out into the real clinical setting visit clients in their homes.

- **Psych/Mental Health Lab** – The lab is equipped with five private interview rooms plus a group room for simulating group meetings and other group activities with students. Each room is equipped with ceiling-mounted video and recording equipment for use in simulating clinical based experiences.

- **Health Assessment Lab** - The lab is equipped with eight complete exam units and multiple simulation practice models. Privacy is provided with curtains and drapes, just as in a doctor’s office. Students can practice on each other in a private, hands-on clinical setting with new examination tables, mounted ophthalmoscopes and otoscopes and the convenience of instructors available when needed. Learning occurs in a realistic setting which reinforces correct techniques and procedures. There are two ceiling-mounted video cameras in the room for the recording of student clinical based experiences.

**LEARNING ENHANCEMENT CENTER**

The *Learning Enhancement Center (LEC)* opened in 2008 in an effort to provide comprehensive academic and social support services to all pre-nursing majors as well as students enrolled in the pre-licensure BSN program and RN-BSN completion option. The Center is located on the 2nd floor of the Health Sciences Building on the UNCP campus. Students may make appointments with the Learning Enhancement Center Coordinator, Ms. Joyce Stanley by self-referring via the Center website or be referred by a faculty member.

The mission of the *Learning Enhancement Center* to create a culturally responsive learning environment so that (1) students will have the greatest opportunity to successfully complete the nursing program and (2) graduates will be have the nursing knowledge required for licensure and entry-level competence for professional nursing practice. The goals of the LEC are to improve the overall retention rate of students enrolled in the baccalaureate nursing program and to achieve a minimum of 90% passage rate per year of graduates on the NCLEX-RN exam on their first attempt, in order to increase the number of professional nurses capable of providing competent, quality, culturally-specific health care to diverse populations in their rural, underserved communities.

The following is a list of some of the academic and social support services available through the LEC:

**Academic Support:**

- Pre-nursing assessments of academically oriented exams such as math, reading, grammar, vocabulary, chemistry, anatomy and physiology and biology. This is accomplished through the use of Testing of Essential Academic Skills (TEAS) developed by Assessment Technologies Institute (ATI). TEAS is a computer-based product designed to predict the academic readiness of applicants prior to admission into a program of study in nursing. The four subsets are math, science, English and reading.

- Assessment of each student’s individual learning styles through the computer-based ATI Self-Assessment Inventory. Students are provided a printout describing how to study in nursing school based on their individual learning style.

- Academic advising and development of individual plans of study for all pre-nursing students upon admission to UNCP by pre-nursing advisor until students matriculate into the nursing
major. At the time of matriculation, students will be assigned a nursing major academic advisor who will be the academic advisor throughout major coursework.

- Tutoring is available during flexible hours and is provided in individual and/or group settings according to students’ preferences.
- Academic counseling for a range of study skills such as goal setting, time management, reading skills, note taking, test preparation, test-taking strategies, and solving problems creatively. A monthly calendar of activities is located on the LEC website.
- Skills workshops for vocabulary and reading comprehension, meds test preparation and NCLEX blueprint testing. Writing assistance may be provided related to stages of writing, organizing ideas, clarifying thoughts, and APA format guidelines.
- Progress testing for each competency in the nursing major. Testing is useful in identifying participants’ strengths and weaknesses prior to or concurrent with entry into the remaining portion of the nursing curriculum. Individual and/or group tutoring in nursing subject matter is provided for those needing additional support. A comprehensive exam is administered near to completion of the program to measure students’ preparedness for the NCLEX-RN®. Additional academic support is provided in nursing subject matter as needed.
- NCLEX-RN® review course, offered either face-to-face or online, in preparation for professional licensure for senior pre-licensure BSN students. This is accomplished through products developed in conjunction with Assessment Technologies Institute (ATI) or other vendors selected by students.

Social Support:

- “New Nursing Student Orientation” program for newly admitted students to pre-licensure BSN program
- “Family Orientation” program for families of newly admitted students to the pre-licensure BSN program. The family orientation gives students an opportunity to bring their families to campus to meet the faculty, meet other student families, learn about the importance of their support role throughout the period of enrollment, and tour the academic facilities, including the clinical learning center which houses the high-tech simulation equipment.
- Student counseling/referral on issues such as difficulty adjusting to nursing school, faculty-student conflicts, peer relationships, distress due to conflicts with family, friends or partner, poor self esteem or self-confidence, depression, social anxiety, academic anxiety, and stress management.
Strategies for Nursing School Success

Your journey in nursing school will be different from any other educational journey you have taken so far. In the very short time, you will be prepared to sit for the NCLEX-RN® licensing exam and to begin your professional nursing career. As a professional nurse you will be fully responsible and accountable for the lives and well-being of individuals, families, groups, and/or communities. This awesome responsibility requires a rigorous and challenging education. The strategies highlighted below include lessons learned from those who have walked in your shoes in the past.

Keep Up – Don’t Get Behind
Students must learn to organize and manage time effectively. This is by far one of the most important things to do. Nursing courses are all very fast paced and if you let yourself get behind, you will have great difficulty catching up. Students who have failed courses have so many times said that they let themselves get too far behind and could not catch up. Procrastinating about studying and completing assignments may have worked for you in previous courses, but it will not work in nursing courses. There are simply too many complex concepts and topics to learn . . . and they build on each other.

Learn for Keeps – No “Brain Dumping” Between Exams and Courses
Every unit in every nursing course is built on previous units and/or courses. You must make an effort to learn and retain knowledge and skills from every course and carry them into the next courses with you. It will very likely require some review of older course material from time to time … Keep your books and notes to aid in such review. Remember, the NCLEX-RN® licensing exam tests on all aspects of nursing, from basic foundations to complex conditions and thinking. The program of learning is interrelated and cumulative, meaning that understanding of previous material is required in order to learn new concepts, topics and skills throughout the curriculum.

Be Present, Mentally and Physically
The nursing curriculum is complex and challenging, as it must be to prepare you to become a professional nurse responsible for the health and welfare (the lives) of other people. All course and program requirements must be fulfilled since every assignment and requirement is developed to assist in establishing a firm basis upon which to build nursing knowledge, skills and competencies. Prepare for class and actively participate in all class discussions and activities … you will learn the most doing this.

Learn for Deep Understanding – Exams are designed according to NCLEX-RN® Examination
Strategies you have used successfully in previous courses often do not work in nursing courses. This comes as a great shock to many new nursing students. It is because in nursing, you are learning facts and concepts in order to solve problems and make application in clinical practice - not simply to recall information verbatim. You can learn all the facts in the world, but you must use those facts to think critically and make decisions in different situations to be successful in nursing. Your faculty has
designed classes and clinical to help you learn to use knowledge for **thinking**. Give your best effort to each and every assignment and activity so you can learn to think using what you learn. There are several cognitive (“thinking”) levels – remembering, understanding, applying, analyzing, and creating. “**Remembering**” is the lowest level and “**Creating**” is the highest. **The NCLEX-RN® licensing examination is 85% or more “applying” and “analyzing” levels of thinking.** Your exams in nursing school are modeled after the NCLEX-RN® examination; thus, 85% or more of test questions will be at the applying and analyzing level of thinking; 15% will be at the remembering and understanding level of thinking. The table below defines the cognitive levels and illustrates how they will be tested.

<table>
<thead>
<tr>
<th>Cognitive Level</th>
<th>Definition</th>
<th>Activity Examples</th>
<th>% of Exam Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remembering</td>
<td>Retrieving, recognizing, and recalling relevant knowledge from long-term memory.</td>
<td>List, Name, Label, Identify, Show, Define, Recognize, Recall, State</td>
<td>15% or less of exam items</td>
</tr>
<tr>
<td>Understanding</td>
<td>Constructing meaning from oral, written, and graphic messages through interpreting, exemplifying, classifying, summarizing, inferring, comparing, and explaining.</td>
<td>Summarize, Explain, Put into your own words, Describe, Paraphrase, Interpret, and Give example.</td>
<td></td>
</tr>
<tr>
<td>Applying</td>
<td>Carrying out or using a procedure through executing, or implementing.</td>
<td>Apply, Put into practice, Solve, Demonstrate, Illustrate, Calculate, Use, Classify.</td>
<td>85% or more of exam items</td>
</tr>
<tr>
<td>Analyzing</td>
<td>Breaking material into constituent parts, determining how the parts relate to one another and to an overall structure or purpose through differentiating, organizing, and attributing.</td>
<td>Analyze, Organize, Deduce, Compare &amp; Contrast, Choose, Distinguish, Differentiate</td>
<td></td>
</tr>
</tbody>
</table>

**Aim High**

A **76% average for all exams (weighted average of unit and final exam scores) in each nursing course is required in order to pass.** Other course assignment grades will be added after you have earned a 76% weighted average on all tests to determine the final course grade. This is because all nursing exams are modeled after the NCLEX-RN® licensing exam. **Your goal, however, should be to score 83% or higher on all exams.** If your goal is 83%, you are setting your goal at a level that sets you up for continued success in the program, the benchmarking of the ATI Content Mastery Exams, ATI Comprehensive Predictor, and ultimately the NCLEX-RN® examination.

**Find the Most Effective Study Strategies for You**

We all have learning style preferences …ways we learn best. Determine what works for you. There is a **huge difference** between “**Studying Long and Hard**” and “**Studying Effectively**”. Your goal is to figure out how to study effectively. Below are some strategies students before you have found especially helpful.

1. Prepare well for class and clinical experiences … be prepared to ask questions to clarify things you have difficulty understanding.
2. Attend & actively participate in all classes and clinical experiences … they are designed to help you learn to “think like a nurse” … not merely to “spit out facts” you could read in a book.
3. **Active studying** is more effective than **passive studying**. Active studying includes any activity that makes you interact with the material in some way. For example, making flash cards, recopying notes and adding material from the text, writing or verbalizing a concept or procedure.
as if explaining it to someone else, drawing diagrams that link concepts, highlighting major points in a text and adding notes, making notes in the margins of texts, etc. Passive study includes activities in which material is simply presented for you to see or hear. For example, simply reading text or watching videos without any other activity.

4. **Figure out your preferred learning styles.** Most of us learn using all three … but usually one or two styles will be preferred.
   - **Auditory:** If you learn well by “listening”, you may want to tape record classes. Always request permission from each course instructor. Ask questions in class to clarify concepts. You can also explain terms and concepts out loud to someone else (not in class, of course) to hear yourself.
   - **Visual:** If you learn well by “seeing”, learn to take notes that will be meaningful to you. Do not try to write down every word the instructor says - you will be so focused on writing you won’t get any meaning. Draw diagrams and make notes in your book. Watch videos. After class, rewrite your notes and add important points from the book or other resources. This engages you with the material in a visual way.
   - **Kinesthetic:** If you learn well by “touching and feeling” things, you might benefit from making flash cards, using hands-on games, or other such activities to help you learn.

5. **Study groups** may be effective for some students while others find individual study more profitable and efficient. Try both ways and see what works best for you.

6. **Pick a quiet place for study.** A quiet place will help you to concentrate and eliminate distractions.

**Schedule a Little “Me” Time**

This cannot be stressed enough. Set aside at least 30 minutes a day to take care of yourself. It is important to plan time to eat regularly, rest, sleep, relax and recharge. **Nursing is physically and mentally demanding.** Try to maintain a nutritious diet, including breakfast prior to class and clinical experiences. Making time for yourself will, in the long run, help you be a happier, more balanced, whole person and a better student, too!

**Balancing Nursing School and Work/Family Life**

Preparing for a career in nursing is in itself challenging; it becomes even more so when you are balancing school with work/family life or both. Keys to success are **preparation, organization** and **dedication.** Having a good support system and the ability to say “no” when needed are also helpful.

Adapted from Columbus State University School of Nursing, 2013
CHAPTER VII

SCHOLARSHIPS AND AWARDS

NURSING SCHOLARSHIPS

Nursing students qualify for grants, loans and scholarships distributed by the UNCP Financial Aid Office. In addition, students who have been admitted to the BSN program are eligible to apply for the North Carolina Nurse Scholars Scholarship and Loan Program. The NC Nurse Scholars Commission administers this competitive program. Information is available in the UNCP Financial Aid Office, the Department of Nursing, and the website of the College Foundation of North Carolina. Nursing students may also apply for any of the following scholarships by contacting the Department of Nursing directly:

1. **Bladen We Care / Anne C Nye Endowed Scholarship**
   Bladen We Care endowed this scholarship for Bladen County residents who wants to earn a BSN. Individuals interested in this scholarship must complete an application and, if awarded, agree to work in Bladen County for two years following graduation.

2. **Cape Fear Valley Health System Nursing Scholarship**
   The Cape Fear Valley Health System has provided monies to assist students enrolled in the BSN program. Individuals interested in this scholarship must complete an application and, if awarded, agree to work for Cape Fear Valley Health System in Fayetteville, NC for each year financial assistance is received.

3. **The Campbell Soup Company Student Nursing Scholarship Program**
   The Campbell Soup Company endowed this scholarship to be used for nursing scholarships for minority students. The recipient must have been accepted into the UNCP BSN program.

4. **Caring Touch Endowed Scholarship**
   Ms. Donna Lowery, CEO and President of Caring Touch Home Health Care endowed this scholarship to assist students enrolled in the University BSN program who are in financial need.

5. **David Weinstein Endowed Scholarship**
   Senator David Weinstein endowed this scholarship to assist students enrolled in the University nursing program who are well-rounded students as evidenced by their involvement in University and community service and activities.

6. **H. Gail Davis Endowed Nursing Scholarship**
   The Patient Care Services Department of Southeastern Regional Medical Center (SRMC) endowed a nursing scholarship at to honor H. Gail Davis and her commitment to nursing and to SRMC. Ms. Davis retired from SRMC in December 2005 after a long and accomplished nursing career at the hospital. Because of the generosity of the Patient Care Services Department scholarship assistance is available to students wanting to embark on a professional nursing career.

7. **Joan H. Wallace North Carolina Society of the Daughters of the American Revolution American Indian Committee Endowed Nursing Scholarship**
   Ms. Joan H. Wallace, a nurse for 50 years endowed a nursing scholarship at UNCP to honor the Daughters of the American Revolution (DAR) and her Native American heritage. The scholarship provides financial assistance to an American Indian nursing student with demonstrated financial need. The recipient must have been accepted into the UNCP’s undergraduate nursing program and demonstrate ability and promise in the profession.
8. **The Mary McKenzie Edwards Endowed Scholarship in Nursing Fund**

Ms. Mary Ann Elliott endowed this scholarship in memory of her mother, Mary McKenzie Edwards. This scholarship is to assist students enrolled in the University BSN program who are in financial need. Students must be residents of Robeson County and, while Native Americans may receive priority, the scholarship awards are available to all nursing students. Students must be in good academic standing in the Department of Nursing.

Additional information about nursing scholarships may be found at [www.discovernursing.org](http://www.discovernursing.org).

**AWARDS**

The Department of Nursing offers four student awards:

1. **The Nursing Excellence Nursing Award** is presented annually to the nursing student who has a GPA equal to or greater than 3.50 with a minimal of 45 hours earned at UNCP, who exemplifies the BSN philosophy for the program, and who demonstrates excellence in professional practice. Nursing faculty selects the recipient of this award.

2. **The Nursing Practice Award** (originally established as the Dorothea Orem Award) was begun by UNCP alumni in 1996. The recipient of this award is a UNCP Nursing student who has demonstrated excellence in theory and application of nursing theories and concepts including the six professional roles and has demonstrated nursing vision and leadership in applying theory-based nursing practice. Nursing faculty selects the recipient of this award.

3. **The Association of Nursing Students Leadership Award** is presented annually to a member of the Association of Nursing Students who most exemplifies leadership among the membership. Members of the Association of Nursing Students select the recipient of this award.

4. **The Scotland Memorial Hospital Nursing Service Award** is presented annually to the nursing student who best meets the criteria of scholastic ability, professionalism, interpersonal relationship skills, and caring attitude. The award is presented by a representative from Scotland Memorial Hospital nursing service. Nursing faculty selects the recipient of this award.

**HONORS**

The university policies govern the rules for graduation with honors. Consult the *University Catalog* and *Student Handbook*. 


CHAPTER VIII

STUDENT ORGANIZATIONS/ACTIVITIES

ASSOCIATION OF NURSING STUDENTS

Association of Nursing Students (ANS) is the student nurse's professional organization as the American Nurses' Association is the graduate's professional organization. ANS operates on a local, regional, state and national level. On the local and region level, programs are provided during the year on various subjects of interest to the student nurse. There are opportunities to participate in community health projects that provide a service to the community, as well as a chance for nursing students to utilize and gain knowledge and skills. In addition, ANS encourages student nurses to become involved in legislative activities concerning health care, nursing education and nursing practice. On the state and national levels, annual conventions are held to promote the development of the student nurse as a health professional. Programs are provided that represent fundamental and current professional interests and concerns.

PINNING AND RECOGNITION CEREMONY

Students who have completed all of the nursing requirements for the pre-licensure/RN-BSN program can participate in the pinning and recognition ceremony. Students may purchase a nursing pin designed by the first nursing class, which represents the unique heritage of the institution. The International Pledge for Professional Nursing (see Appendix J) is recited by all students and registered nurses at the close of the Pinning Ceremony.

GRADUATION

The University governs graduation requirements. The Department of Nursing complies with all standards. Students should consult the university calendar and student handbook for specific information and deadlines regarding applying for graduation.
APPENDIX A

RN-BSN PROGRAM VALIDATION CREDIT FORM

Student Name ________________________________ ID Number___________________

Address______________________________________________________________

Nursing Program Attended ________________________________________________

Graduation Date ________________________________________________________

This student has successfully completed two nursing courses in the BSN program, which validates lower level division nursing courses taken in the above nursing program. Thirty semester credit hours will be entered on the official transcript of The University of North Carolina at Pembroke.

*Introduction to Professional Nursing (NUR 3000), 3 semester credit hours validates nursing theory.*

Grade earned _______________________ Semester/Year____________________________

*Health Assessment across the Lifespan, (NUR 3200), 3 semester credit hours validates nursing clinical.*

Grade earned_________________________ Semester/Year__________________________

Approved_________________________________________ Date ____________________

Chair, Department of Nursing

Approved _________________________________________ Date ____________________

Registrar
APPENDIX B

Student Portfolio Guidelines

**Definition:** Portfolios are purposeful collections of various works measuring problem solving, critical thinking, and clinical decision making skills representative of a student’s progress, efforts, and achievements during a course or program of study.

**Purpose:** The stated purpose of requiring a portfolio is to give the student a creative means through which to assess effectiveness of course material, both didactic and clinical, as well as educational objectives within the BSN program. Creativity involves flexibility, imagination, intuition, spontaneity, and reflection.

**Reflection:** After each course, it is suggested the student reflect on course achievements, document progress on educational outcomes and role development, and update their personal goals. According to the literature, reflection allows students to see their strengths and weaknesses in order to understand what and how they have or have not learned. Through reflection, students will see their self-growth by noting how particular learning activities and the new knowledge gained from the activities will impact their future as nurses. The North Carolina State Board of Nursing adopted the reflective practice approach for licensure renewal in 2006 and therefore students need to start thinking reflectively as students. The student will also have a complete portfolio at the end of their course of study to present to prospective employers showing their growth as a student.

**Evaluation:** Each student will be responsible for compiling his/her own portfolio. Student portfolios will be evaluated for the following elements associated with the educational outcomes for the program; utilization of evidence-based practice, critical thinking skills, practice in the professional nursing roles in clinical courses, effective communication skills, utilization of the nursing process, professionalism, and cultural competence. Students should select 3 to 4 assignments to include in their portfolio, in addition to those required in NUR 4510 or NUR 4550, and reflect upon why they are included and how they meet the areas of evaluation. This allows students to include assignments they particularly enjoyed or did well on and to exclude topics they were not fond of or on which they did not do well. It also leaves room for students to include photographs, notes from patients or preceptors, and innovative technology pieces that will further individualize their portfolio. Examples of questions to guide student reflection are:

1. What did I learn from this activity?
2. How will this new knowledge impact me as a nurse?
3. Has this activity changed my way of thinking with regards to nursing/nursing practice or the chosen topic?

Students are urged to have two copies of their portfolio on disk as one will be kept in the Nursing Department and the other is their personal copy. The Faculty Portfolio Evaluation Tool will be completed while students are taking NUR 4510 or NUR 4550.

The artifacts to include in the portfolio must reflect the students’ understanding of and ability to apply quality and safety standards across the lifespan. Artifacts should be chosen which reflect client/family centered care, collaboration and teamwork, evidence-based practice, quality improvement initiatives, safety and the application of informatics to communicate, manage knowledge, mitigate error and support decision making. Artifacts should be selected which demonstrate progression from novice to advanced beginner and which represent efforts throughout the entirety of the program. Students should
keep in mind when selecting artifacts that each entry is part of the entire portfolio. The entry and reflection makes a powerful statement about you as an individual and a professional. When determining if something should be included in your portfolio, ask yourself, “What would including this item add that has not already been said or shown?” The following questions may also be of assistance:

1. What do I want my portfolio to demonstrate about me as a nurse?
2. What are my characteristics as a nurse?
3. What have I learned that I can display in my portfolio?
4. What directions for my future growth and development does my self-evaluation suggest that can be shown in my portfolio?
5. What distinguishing remarks have been made by others, such as professors, peers, nurse colleagues, and patients, about me that can be included?
6. What overall impression do I want to give a reviewer about me as a nurse?

Examples of artifacts which may reflect these standards include, but are not limited to:

- Initial Philosophy of Nursing Paper (required)
- Concept Maps
- Plan-Do-Study-Act Project
- Critique of Research Article
- Final Health Assessment Write-Up
- Self-Reflections
- Revised Philosophy of Nursing Paper (required)
- Issues in Nursing Paper(s)

Artifacts from NUR 4510/4550 that must be part of the portfolio include:

- Resume
  Include a resume with a separate page of references. Recommendations may or may not be included. Contents of resume to include:
  - Professional objectives
  - Education (reverse chronological order)
  - Work experience (reverse chronological order)
  - Professional memberships/activities
  - Special skills (foreign language, computer, etc.)
  - Honors/awards/certifications
  - Community activities

- Philosophy of Nursing
  Update your personal philosophy of nursing written in NUR 3010 identifying your values and beliefs. Contents to include:
  - Beliefs about nursing (Metapardigm)
  - Values that are basic to practice
  - How “you” view and practice nursing
  - Theory or model that informs your position

- Professional Long-term and Short-term Goals
  Include professional long-term and short-term goals. Contents to include:
  - Long-term (3-5 year projection)
  - Short-term (6 months - 1 year projection)
  - Realistic (congruent with academic preparation and work experience)
  - Action-oriented
  - Time line identified
APPENDIX C

Guidelines for Scholarly Writing

The purpose of this handout is to provide students a “quick reference” of common rules and reference formats of APA style that all nursing faculty require as minimal standards for assignments. The Department of Nursing chose the APA (American Psychological Association) referencing style as a standard because it is most commonly used to cite sources within the social sciences. The most recent Publication Manual of the American Psychological Association (6th ed.) is to be used in conjunction with these guidelines. The APA manual provides a comprehensive reference guide to writing using APA style, organization, and content.

Paper Format (covered in 1st chapter of the Publication Manual)

- **Margins:** One inch on all sides (top, bottom, left, right)
- **Font Size and Type:** 12-pt. font (Times Roman is acceptable typefaces)
- **Spacing:** Double-space throughout the paper.
- **Alignment:** Flush left (creating uneven right margin)
- **Paragraph Indentation:** 5-7 spaces
- **Pagination:** The page number appears one inch from the right edge of the paper in the page header of every page (use the automatic function of your word processing program to generate headers and page numbers for your paper). The only pages that are not numbered are Figures.
- **Page Header:** Page headers are used to identify manuscript pages during the editorial process. Use the “header” feature of the word-processing program to insert the running head and page number. Set the header at the beginning of the document by selecting “Edit Header” and then select “Different First Page.” Insert the page number by using the automatic function. Insert “Running head” and left align. When typing the Abstract page, enter a new page header with only the shortened title, delete “Running head” on this page. For the remainder of the paper, the header will be like that typed on the Abstract page.
- **Abbreviations:** Use abbreviations sparingly. The first time an abbreviation is used, state the complete name and place the abbreviation in parentheses, e.g. American Heart Association (AHA). Thereafter, the abbreviation may be used without further explanation (do not switch between the abbreviated and written-out forms of a term).
- **Order of Pages:** Title Page, Abstract, Body of Paper, References, Tables, Figures, and Appendices. (see page 229-230 in manual)

**Title Page** (see example on next page)

- **Pagination:** The Title Page is page 1. Place page number in upper right hand corner of page.
- **Key Elements:** Paper title, author(s), author affiliation(s), and running head.
- **Paper Title:** Uppercase and lowercase letters, centered on the page.
- **Author(s):** Uppercase and lowercase letters, centered and double spaced below the title.
- **Institutional affiliation:** Uppercase and lowercase letters, centered and double spaced below the author(s).
- **Running head:** An abbreviated version of paper title. The running head is typed flush left (all uppercase) following the words "Running head:" in the page header. It should not exceed 50 characters, including punctuation and spacing.
- After typing the title, author’s name(s) and affiliation, center this information vertically on the page.
Abstract (a one-paragraph brief summary of the entire paper. It includes the purpose, results, and conclusions drawn by the author. Usually written after the body of the paper is completed)

- **Pagination:** Abstract begins on a new page (page 2).
- **Heading:** Abstract (centered on the first line below the page header)
- **Format:** Abstract is to be written in modified block format double-spaced below the abstract heading. The abstract should be between 150 - 250 words. All numbers in the abstract (except those beginning a sentence) should be typed as digits rather than words.
- In opening sentence, describe the topic or problem addressed in the paper. Use the remaining words to clarify idea and to explain results or conclusions.

Body of Paper (all papers begin with an introduction, development of concepts, and end with a summary/conclusions statement)

- **Pagination:** Body of the paper begins on a new page (page 3). Subsections of the body of the paper do not begin on new pages.
- **Title:** Title of the paper (in uppercase and lowercase letters) is centered on the first line below the page header.
- **Introduction:** Introduction (which is not labeled) begins double-spaced below the paper title. In the introduction, the author introduces the topic of the paper in a couple of paragraphs.
- **Headings:** Headings are used to organize the document and reflect the relative importance of sections. See pages 62-63 in APA manual.
  - All topics of equal importance have the same level of heading throughout the manuscript. Avoid having one subsection heading and subsection within a section, just as you would in an outline. Each heading level is numbered and the heading structure follows the same top-down progression.
  - If only one level of heading is needed, use level1; for a paper with two levels of heading, use levels 1 and 2; if three levels are needed, use levels 1, 2, and 3, and so on through level 5.
- **Development of Concepts:** In this section the author discusses the essential content for the paper, which is usually outlined in course guidelines as well as the literature relevant to the subject of the paper using a clear, logical writing style and correct grammar and spelling. Include reference citations in text.
• **Summary/Conclusion:** In the summary/conclusion, the author states the main points of the paper and discusses how the stated purpose was accomplished. The author leaves the reader with a clear understanding of what he/she wants the reader to have learned or understood from reading the paper.

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<th>Format</th>
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<td>5</td>
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</tbody>
</table>

**In-Text Citations**

APA guidelines require that the writer give credit to the originator of information used. Referencing citations in text are found on pages 174-179 of the *Publication Manual* (6th ed.).

Each reference cited in the text must appear in the reference list, and each entry in the reference list must be cited in the text.

Generally, give the following information: author, year of publication, and page number for any direct quote. For paraphrases, give the author and year of publication, though it is suggested that page number be provided. Use p. (or pp. for multiple pages) before the page numbers in in-text citations.

Two kinds of material are cited only in text: references to classical works (Bible, Qur’an) and references for personal communications.

**Quotes Less Than 40 Words**

Formatting short quotations is covered on pages 170-174 in the *Publication Manual*. Short quotations should be incorporated into the text and enclosed by double quotation marks (" ").

**Single Author**

- If there is no publication date, cite the author’s last name followed by a comma and n.d. (for no date).
- If you include the author's name as part of the sentence, give the year in parenthesis directly after the author's name, and put the page number in parenthesis after the quote.
- If you include the author's name and date of publication as part of the sentence in which you use a direct quote, put the page number in parenthesis after the quote.
• If you refer to the same text more than once within one paragraph, give the author's name, date, and page number only the first time you cite the source. After the first time, just give the author's name and page number (if it is different from the prior page number). If you cite the same text in two different paragraphs, include the full reference information in both paragraphs.

• If you are using several different works to illustrate one point, you may find it necessary to cite two or more works written by different authors with different dates. In that situation, organize the information alphabetically by the authors' last names, and separate each block of information with a semicolon. Put all the names inside one set of parenthesis.

### Multiple Authors

• When a source has two authors, give both last names every time. Within the parenthetical citation, use “&” between the authors' names. If you use their names in the sentence, write out “and” between their names.

• When a source has three, four or five authors, cite all the authors’ last names and the year the first time the reference occurs. For later references to the same source in the same paragraph, cite only the first author’s last name followed by *et al.* You do not need the year if it is in the same paragraph as the prior reference. If it is a repeated reference in a separate paragraph, cite the first author's last name followed by *et al.* and the year.

• If a source has 6 or more authors, use the first author's name, *et al.*, date and page number.

• To cite a group author (e.g. association, organization, or government agency) you should spell out the full name for the first reference, give the abbreviation that you will use in brackets ([ ]), then use the abbreviation for later references.

### Citations for Interviews and Personal Communication

• Personal interviews and personal communications (email, group discussions, electronic bulletin boards, telephone conversations) are NOT mentioned at the end of the paper on the list of references. However, they are cited in-text throughout the paper.

  - For personal communication, give author's full name (*first and middle initials* followed by *last name*), kind of communication, followed by date of communication.

### Citations for Works with No Authors

• If there is a work with no author named, cite the first few words of the title followed by a comma and the date. Use quotation marks around the title of an article or chapter; italicize the title of a book, brochure, or report.

• If the author is listed as "Anonymous," cite the word *Anonymous* followed by a comma and the date.

### Secondary Sources

• If you are reading one source, and it refers to something from another source, you need to reflect that in your in-text citations. List only the source you have read in the References list. For example, if you read a book by Polit and Hungler, and they referred to a study by Green (but you did not read Green's study yourself), then you need to cite your source as follows:

  - Green's study of early childhood language acquisition (as cited in Polit and Beck, 2010) shows that important language learning happens before the age of five.

### Electronic Source Citations

• For in-text web citations, follow the author/year format, if the author and date are available. For quotations, give page numbers or paragraph numbers (where there are no page numbers). Use either ¶ or *para.* as an abbreviation for paragraph. Example: "Allergies may be caused by dust, dust mites, pollen, or mold" (Kendal, 2000, ¶ 4).
Quotes of 40 Words or More
• A quotation of 40 or more words should appear (without quotation marks) apart from the surrounding text, in block format, with each line indented five spaces from the left margin. Quote is to be double-spaced.
• Formatting long quotations is covered on pages 170-174 in the Publication Manual.

Reference Format (Check for more information about listing references on pages 198 – 215 in the Publication Manual.)
• Provides information necessary to identify and retrieve each source.
• Include only the sources that were cited in the paper.
• Each entry contains: author, year of publication, title, and publishing data.

Placement of the List:
• The reference list should be on a separate page, numbered sequentially with the rest of the paper.
• Title the reference list page, References.

Spacing and Organization:
• Each entry should start on a new line and should be double-spaced.
• The references must be listed in alphabetical order, by author's last name, or by first significant word of the article title (if no author). See page 181 for rules in special cases.
• Do not indent the first line, but the second line, and subsequent lines must be indented five spaces (hanging indent).
• Use one space after a colon, comma, semicolon or period. Use one space after any sentence-ending punctuation.

Information and Punctuation:
• When writing authors' names, use the author's last name, first initial, and middle initial, if any.
• Use commas to separate authors, to separate surnames and initials, and suffixes (e.g., Jr. and III). See example 24 on page 204 in Publication Manual.
• If there is more than one author, use an ampersand (&) before the last author's name.
• Place date of publication in parenthesis after the name information (If there is no available date, put n.d. in parenthesis after the name information). Follow the date with a period after the parenthesis.
• For book and article titles, capitalize only the first word of the title, the first word after a colon, and proper names.
• Italicize the title of longer works, like books, magazines, newspapers, periodicals or journals that contain the cited articles.
• Include volume numbers as part of the title (type in italics).
• Do not underline, italicize, or put quotes around titles of shorter works, like article titles.
• Do not abbreviate publication months; write out the full month name.
• Use the abbreviation p. or pp. before newspaper page numbers only. Do not use p. or pp. before page numbers for magazines, journals, or books.
• List all pages used, even if they are not continuous (32, 46-47).

References for Books:
• For books, there are four main parts to the reference:
  o author. (year of publication).
  o title of the book.
  o publication information
    ▪ place of publication
    ▪ publisher
Each of the four parts ends with a period followed by a space.

**References for Articles:**
- Citations for periodical articles have four main parts:
  - Author.
  - (date of publication). - most magazine and newspaper articles, use the year followed by a comma and the month. Do not abbreviate the month. If it is a daily publication, also include the day.
  - Title of the article.
  - Publication information. - (generally the *periodical title*, *volume number*, and page number). The volume number should be a part of the periodical title. Use pp. or p. before the page numbers for newspaper and encyclopedia articles only.

**Electronic Sources:**
- Include the same elements, in the same order, as you would for a reference to a fixed-media source and add as much electronic retrieval information as needed for others to locate the sources you cited.
- The DOI System
  - Provides a means of persistent identification for managing information on digital networks.
  - For electronic versions based on a print source (as in PDF), give inclusive page numbers for the article cited.
  - Provide the DOI, if one is assigned, in the following format – doi: XXXXXXXXXXX
    - When the DOI is used, no further retrieval information is needed to identify or locate the content.
  - If no DOI has been assigned to the content, use the URL of the journal or of the book or report published.
    - If you are accessing the article from a private database, you may need to do a quick web search to locate the URL
    - It is not necessary to include database information
    - Do not include retrieval dates

**Nonprint Media Sources (film – motion picture, television broadcast, cassette, musical recording):**
- For most non-print media, there are five main parts to the reference:
  - Writer/director/producer's last name followed by a comma, then first initial followed by a period.
  - In parenthesis, write the person's title (producer, director, writer) followed by a period.
  - (date of publication). -- should be the year it was produced and released to the public.
  - *Title of media* [type of media].
  - Publication information. - generally includes city of publication and publisher.

**Tables and Figures** (Tables follow the reference list and figures follow tables in sequence. Tables have headers and page numbers while figures have neither.)
- The first part of a table is the **table number**. Tables are numbered with Arabic numerals in the order of appearance.
- The next part is the **table title**. The table title should be upper and lowercased, left aligned, following the table number and on the same line with it.
- Next is the **first horizontal line** of the table, which separates the table title from the column headings.
- Use upper and lowercase letters in the title and the **column headings**. The column heading is the label which is centered over each column.
- A **second horizontal line** separates the column headings from the **table data**.
- The table is ended with a **final horizontal line**. Any **table notes** should follow this last line.
These three horizontal lines are the only lines which are required for an APA style table. In some cases additional horizontal lines may be used for clarification (American Psychological Association, 2009).

- Strict APA style does not allow the use of vertical lines. Check with your instructor if you want to use vertical lines in a table.
- The entire table is double spaced, just like the rest of the paper.

**Appendices** (Appendices are useful if the detailed description of certain material is distracting or inappropriate to the body of the paper. Include an appendix only if it helps the reader to understand or evaluate the points expressed in the paper.)

- **Pagination:** Each Appendix begins on a separate page.
- **Heading:** If there is only one appendix, Appendix is centered on the first line below the manuscript page header. If there is more than one appendix, use Appendix A (B, C, etc.).

Please Note: The material in this document is adapted from the *Publication Manual of the American Psychological Association* (6th ed). This document is a supplement to and not a replacement for the manual. All students must have personal copies of the manual. Additional recommended resources include: [http://www.apastyle.org](http://www.apastyle.org)
[http://owl.english.purdue.edu/owl/resource/560/01/](http://owl.english.purdue.edu/owl/resource/560/01/)
[http://apa.org/journals/webref.html](http://apa.org/journals/webref.html)
APPENDIX D
The University of North Carolina at Pembroke
Department of Nursing

APPLICATION FOR READMISSION

Name: ______________________________________________________

Last First Middle Maiden

Full name when previously enrolled: ______________________________________________________

Present Address: __________________________________________________________

Street

City State Zip code

Telephone: Home Cell Work

Banner ID Number: ________________________________

In Case of Emergency Contact: ______________________________________________________

Name Relationship

Contact’s phone number: Home Cell Work

Date (class) previously enrolled: ___________________ Anticipated Readmission Date: ______________

Nursing courses successfully completed: ______________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Steps taken to enhance success on readmission:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I certify that all information provided on this application is true and accurate.

Signature: ___________________________ Date: ___________________
APPENDIX E

Learning Contract for Establishing Competency

<table>
<thead>
<tr>
<th>Learning Objectives (What am I going to learn or increase competency in?)</th>
<th>Strategies and Resources (How am I going to learn or increase competency in it?)</th>
<th>Target Completion Date (When will I finish?)</th>
<th>Evidence of Accomplishment (How will I know when I have learned or increased competency in it?)</th>
<th>Verification/Evaluation (How will I prove or demonstrate that I have learned it?)</th>
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APPENDIX F

Chemical Substance Abuse and Impairment Testing Policy for Students

I. Policy Statement

The Department of Nursing of the University of North Carolina - Pembroke is committed to providing a safe, healthy, and productive academic environment for its students, faculty, and staff, as well as providing a safe clinical setting for students, clients, and employees of affiliated clinical agencies. Therefore, students must remain free from the use, sale, distribution or possession of any illegal drug and must also remain free of impairment related to the use of drugs or alcohol. For obvious health and safety concerns, all students enrolled in programs offered by the Department of Nursing must participate in clinical education activities in full control of their manual dexterity and skills, mental faculties, and judgment. The presence of alcohol and/or drugs, lawfully prescribed or otherwise, which interfere with the student’s judgment or motor coordination in a healthcare setting poses an unacceptable risk to clients, faculty, other students, the University, and affiliated clinical agencies (i.e., hospitals, skilled nursing facilities, health systems, and other healthcare organizations involved with student education and with which the University has a clinical affiliation agreement in place). To ensure client safety, comply with clinical agency policies, and the North Carolina Board of Nursing policy (21 NCAC 36.0320 [d]), the Department of Nursing has adopted a chemical substance abuse and impairment testing policy.

II. Definitions

A. Nursing student – Any full-time or part-time student admitted to the Department of Nursing which includes all degree programs.

B. Chemical substance abuse – The use of illegal/non-prescribed substances or alcohol that impairs performance when engaging in any learning activity including classes, laboratory, and/or delivery of client care in a clinical setting.

C. Chemical substance abuse testing - The scientific analysis of urine, blood, breath, saliva, hair, tissue, and other specimens of the human body for the purpose of detecting a drug or alcohol. For the purposes of this policy, two types of testing may occur:

   1. Pre-clinical testing – Chemical substance testing conducted on all students prior to engaging in a clinical experience and/or providing direct client care at an affiliated clinical agency.

   2. Reasonable suspicion testing – Chemical substance testing conducted on a student because individualized and objective evidence exists to support the conclusion that a student (1) has engaged in the use of alcohol and/or illegal drugs in violation of applicable policies, laws, and regulations; or (2) appears to be impaired. Facts that could give rise to reasonable suspicion include, without limitation: observed possession or use of illegal drugs or alcohol; the odor of alcohol or drugs; impaired behavior such as slurred speech; decreased motor coordination; difficulty in maintaining balance; marked changes in personality or academic performance or behavior; reports of observed drug or alcohol use; an arrest or conviction for a drug
or alcohol related offense; positive pre-clinical or other drug tests; or newly discovered evidence of drug test tampering.

D. Impaired - A person’s mental or physical capabilities are reduced below their normal levels (with or without any reasonable accommodation for disability). An impaired student, by virtue of his/her use of alcohol or illegal drugs, exhibits deteriorated motor/psychomotor function, reduced conceptual/integrative/synthetic thought processes, and/or diminished judgment and attentiveness compared with previous observations of the student’s conduct and performance. For purposes of this policy, the term impaired shall also mean addiction and/or physical or mental dependence upon alcohol, legal or illegal drugs.

E. Illegal drug - For purposes of this policy means (a) any drug which is not legally obtainable; (b) any drug which is legally obtainable but has not been legally obtained; (c) any prescribed drug not being used for the prescribed purpose, in the prescribed dosage and manner, or by the person for whom it was prescribed; (d) any over-the-counter drug being used at a dosage other than the recommended dosage, or being used for a purpose other than the purpose intended by the manufacturer; and (e) any drug being used in a manner that is not consistent with established medical practice standards. Specific drugs screened for abuse include: alcohol, amphetamines, barbiturates, benzodiazepines, cocaine, marijuana (THC), methadone, methamphetamines, opiates, oxycodone, phencyclidine (PCP).

III. Procedure

A. Agreement to Submit to Chemical Substance Abuse Testing

A student participating in a Department of Nursing degree program must agree to submit to pre-clinical testing and reasonable suspicion testing when circumstances warrant such testing. The student shall sign an acknowledgment and consent form (Attachment A) that evidences the student’s consent to: (a) comply with the Department of Nursing policies pertaining to alcohol and illegal drugs; (b) comply with all policies and regulations of affiliated clinical agencies pertaining to alcohol and illegal drugs; (c) submit to pre-clinical testing, reasonable suspicion drug testing under this policy, and in the event an affiliated clinical agency requires random drug testing pursuant to its policies, to submit to random drug testing; and (d) authorize the disclosure of drug testing results to the Chair of the Department of Nursing. The Department of Nursing will maintain on file a signed acknowledgment and consent to chemical substance screening from each student. Refusal to sign the acknowledgment and consent form shall be grounds for non-placement in clinical experiences and subsequent dismissal from the nursing degree program. A clear chemical substance screen is required to begin or continue in the nursing program. If the student leaves the program for any reason, a new chemical substance screen will be required before readmission into any classes.

B. Pre-Clinical Chemical Substance Screening

1. Students will be notified about the chemical substance screening in their admission letter.
2. Students in the pre-licensure BSN program will be required to complete a pre-clinical chemical substance screening during the first semester of the program, again prior to the senior year, and/or as required by an affiliated clinical agency.
3. Students in the RN-BSN completion program will be required to complete a pre-clinical chemical substance screening prior to enrolling in the first clinical course.
4. Pre-clinical chemical substance testing will be coordinated through the office of the Chair, Department of Nursing, and will be conducted by a qualified vendor approved by the University. The cost of drug testing shall be borne by the student. The student shall be provided with a list of drugs for testing as may be required by either the nursing program or an affiliated clinical agency.
5. Positive pre-clinical chemical substance tests will be confirmed by a second screen from the original sample.
6. The Chair of the Department of Nursing will notify a student of a confirmed positive chemical substance test.
7. A student having a confirmed positive chemical substance screen will be subject to disciplinary action, up to and including dismissal from the nursing program, in accordance with established Department of Nursing disciplinary policies and procedures. Positive chemical substance tests will also be referred to Office of Student Conduct for investigation and University discipline if warranted.
8. A student’s failure to submit to pre-clinical chemical substance testing, or any attempt to tamper with, contaminate or switch a sample will result in disciplinary action, up to and including dismissal from the nursing program.

C. Reasonable Suspicion Chemical Substance Abuse Screening

1. Reasonable suspicion substance abuse screening may be conducted when individualized and objective evidence exists to support the conclusion that a student (1) has engaged in the use of alcohol and/or illegal drugs in violation of applicable policies, laws, and regulations; or (2) appears to be impaired.
2. Evidence of a student’s use of alcohol and/or illegal drugs or impairment may be provided to a Department of Nursing faculty member by any individual, including employees of affiliated clinical agencies.
3. When individualized reasonable suspicion is found to exist, the faculty member begins the documentation process by completing the Faculty Report of Reasonable Suspicion of Chemical Substance Use by Student Form (Attachment B).
4. Once reasonable suspicion is determined by a faculty member and the student has been confronted by the faculty member who documents the suspected conduct, the student will be removed from the learning environment, the faculty member shall notify the Chair, Department of Nursing or in the absence of the Chair, a designee, and submit the Faculty Report of Reasonable Suspicion of Chemical Substance Use by Student Form to the Chair or designee.
5. The faculty member, who reported the reasonable suspicion, will coordinate the screening procedure with the Chair, Department of Nursing or in the absence of the Chair, a designee. Determination of whether drug testing is warranted under the facts and circumstances shall be made by the Chair or designee, Department of Nursing and the University General Counsel. The cost of chemical substance testing shall be borne by
the student. No advance notice to the student is required to test for reasonable suspicion testing.
6. The student shall be provided with a list of drugs for testing as may be required by either
the nursing program or an affiliated clinical agency.
7. Positive reasonable suspicion drug tests will be confirmed by a second screen from the
original sample.
8. The Chair, Department of Nursing will notify a student of a confirmed positive chemical
substance test.
9. A student having a confirmed positive chemical substance screen will be subject to
disciplinary action, up to and including dismissal from the nursing program, in
accordance with established Department of Nursing disciplinary policies and procedures.
Positive chemical substance tests will also be referred to Office of Student Conduct for
investigation and University discipline if warranted.
10. A student’s failure to submit to reasonable suspicion drug testing, or any attempt to
tamper with, contaminate or switch a sample will result in disciplinary action, up to and
including dismissal from the nursing.

D. Voluntary Admission of Substance Abuse

1. A student, who voluntarily reports to the Department of Nursing faculty or
administrators that he/she has a substance abuse problem, will be assisted by the Chair,
Department of Nursing to obtain services through the University Student Health Services
and/or the Counseling and Testing Center.
2. Continued participation in the nursing program will be at the discretion of the Chair,
Department of Nursing.

E. Readmission after a Positive Chemical Substance Screen

Any student who is unable to complete the clinical component of required courses due to a
positive chemical substance screen may apply for readmission to the nursing program. To be
considered for readmission, the following conditions must be met:
1. Complete a substance abuse treatment program approved by the UNC Pembroke
Department of Nursing.
2. Have the approved treatment agency submit a letter to the Chair, Department of Nursing
verifying completion of a substance abuse treatment program.
3. Submit to an unannounced chemical substance screen at the student’s expense prior to
readmission. A positive screen will result in ineligibility for readmission.
4. Submit to random chemical substance screens as required by the Department of Nursing
while enrolled in the nursing program. A positive screen, at any time, will result in
permanent dismissal from the Department of Nursing.
5. Any student seeking readmission must reapply in accordance with the readmission
procedure in the Department of Nursing Student Handbook.

IV. Confidentiality

Individual test results of the chemical substance screen will not be provided to clinical facilities. No
release of information will be made without the student’s written consent, unless in response to
appropriate judicial process such as a subpoena or court order. There will be a group list of those qualified to attend clinical as a result of the pre-clinical screening process.

V. Appeals

A student may avail him/herself of any appeal procedure relating to any Department of Nursing action taken under this policy, as outlined in the Department of Nursing Student Handbook and the UNCP Student Handbook.

VI. Consequences of Permissible Drug Use

Some of the classes of drugs for which screening will be conducted are available by prescription from health care practitioners. Prescription drugs prescribed to a student by an appropriate health care practitioner may nevertheless be subject to abuse. The fact that a student has a prescription for one or more of the classes of drugs which are legally prescribed by health care practitioner does not necessarily, in and of itself, excuse the student from the effect of this policy.

When a student is prescribed medications that may impair cognitive and/or motor functions, the Department of Nursing expects the student not to attend clinical or laboratory courses, while impaired by the prescribed medication. If the faculty observes changes in appearance or behavior that is reasonably interpretable as being caused by properly used prescribed medications, if in the clinical setting, the student will negotiate transportation from the clinical facility and not return until the cognitive and/or motor impairment is resolved. The student will continue to be held to the course attendance requirements. The student may be required to have a physician’s written endorsement that they are safe to practice nursing while taking prescribed medications before being permitted to return to the clinical or laboratory setting.

Adapted from: Western Carolina University, College of Health and Human Sciences, East Carolina University College of Nursing, and the University of North Carolina – Wilmington, School of Nursing

Approved: spring 2012
Attachment A

University of North Carolina – Pembroke
Department of Nursing

Acknowledgement and Consent Form

I have read and understand the Department of Nursing Chemical Substance Abuse and Impairment Testing Policy for Students ("Policy"). I also have had an opportunity to ask questions about the Policy.

By my signature below, I agree to comply with the requirements of the Department of Nursing, this Policy, and all applicable policies and regulations of the University and affiliated clinical agencies. Further, as a condition of participation in the nursing program, I knowingly and voluntarily consent to submit to, and assume the cost of, any requisite pre-clinical chemical substance testing, reasonable suspicion chemical substance testing required by the Department of Nursing, or any random chemical substance testing required by an affiliated clinical agency.

I hereby authorize the disclosure of any and all chemical substance testing results to the Chair, Department of Nursing.

I hereby agree, for myself and on behalf of my successors, heirs, and assigns, to hold harmless and waive any and all claims and release, satisfy, and forever discharge the University of North Carolina at Pembroke and its trustees, officers, and employees, and the University of North Carolina and its governors, officers, and employees from any and all actions, claims, damages, judgments, demands, rights, and causes of action of whatever kind or nature, arising out of or in connection with the Department of Nursing’s and University’s administration of the Policy.

__________________________
Student Signature

__________________________
Date

____________________________________________
Printed Name

Adapted from: Western Carolina University, College of Health and Human Sciences
Attachment B

University of North Carolina – Pembroke
Department of Nursing

Faculty Report of Reasonable Suspicion of Chemical Substance Use by Students Form

Please use the space below to provide a detailed description of the student’s behavior. All information is to be kept confidential. Please return the form in a sealed envelope to the Chair’s or designee’s office as soon as possible. Notify the Chair’s or designee’s office by phone immediately to request a chemical substance abuse test.

1. Name of Student:__________________________________________________________

2. Date of Incident:_____________________________________________________________________

3. Time of Incident:_____________________________________________________________________

4. Location of Incident:_____________________________________________________________________

5. Detailed description: Include any behavioral, visual, olfactory or auditory observations.
   a. Speech (normal, incoherent, confused, change in speech, slurred, rambling, shouting, using profanity, slow)
   b. Coordination (normal, swaying, staggering, lack of coordination, grasping for support)
   c. Performance (unsafe practices, unsatisfactory work)
   d. Alertness (change in alertness, sleepy, confused)
   e. Demeanor (change in personality, fighting, excited, combative, aggressive, violent, argumentative, indifferent, threatening, antagonistic)
   f. Eyes (bloodshot, dilated)
   g. Clothing (dirty, disheveled)
   h. Odor of alcohol on breath
   i. Other observed actions or behaviors
   j. List reports of complaints of student behavior from personnel or other students
   k. List unexplained absences or tardiness.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
6. Did the student admit to use of chemical substance(s)? ______No _____ Yes
   Comments:

7. Were chemical substance(s) discovered? _____No _____ Yes
   Comments:

8. Obtain signatures of witnesses to student’s behavior:

9. Are you recommending the student for chemical substance abuse screening? ___No ___Yes
   Please Note: If Yes, Complete the Notice of Chemical Substance Screening form.

_____________________
Faculty Name

_____________________
Date

Adapted from: University of South Alabama, College of Nursing
Notice of Chemical Substance Screening

To: ______________________________________________________
   (Name of Student)

From: ____________________________________________________
      (Faculty, Department of Nursing)

Date: _____________________________________________________

Re: Reasonable Suspicion Chemical Substance Testing

Based on individual reasonable suspicion that you may be engaging in the impermissible use of chemical substances prohibited by the University of North Carolina – Pembroke, Department of Nursing you are to report for chemical substance screening to the ______________________ located at ___________________________________________ no later than ________ (time) on ____________ (date). You will be required to provide a urine and/or blood sample and/or submit to an alcohol breathalyzer test at that time, in accordance with:

   a. The policies and procedures established by the University of North Carolina – Pembroke Department of Nursing
   b. Your signed consent to the provisions of the protocol and the program for Substance Abuse.

In accordance with the University of North Carolina – Pembroke Department of Nursing’s Chemical Substance Abuse and Impairment Testing Policy for Students and your signed Acknowledgement and Consent Form, you are responsible for the cost of any required chemical substance screening.

Confirmed confidential written results shall be sent to:

   Barbara B. Synowiez, PhD, RN
   Chair and Professor
   Department of Nursing
   University of North Carolina - Pembroke
   One University Drive, PO Box 1510
   Pembroke, North Carolina 28372

______________________________________________  __________________
Signature of Nursing Student                      Date and Time

______________________________________________  __________________
Signature of Nursing Faculty                      Date and Time

Adapted from: University of North Carolina – Wilmington, School of Nursing
APPENDIX G

Release to Share Background Information and Agreement to Report Future Felony or Misdemeanor Convictions

By signature, I agree to a Criminal History Database Check for the purpose of complying with the Department of Nursing requirements for admission screening and clinical agency Memoranda of Agreements seeking to identify and evaluate care providers who have been convicted of one or more criminal offenses before they participate in patient care. The Department of Nursing has my permission, and I direct it, to share information obtained in the investigative report generated by my Criminal History Database Check with whomever appropriate, to include health care agencies at which I have been assigned for clinical educational experiences. Only group information will be shared without my knowledge and opportunity for involvement. I further agree to report any adverse event, including felony or misdemeanor charges and convictions (excluding minor traffic related violations), which occur during my enrollment in the Department of Nursing within 10 business days of occurrence.

By this agreement, I understand that:
- following my acceptance of the offer of admission and prior to matriculation (or re-matriculation), I must agree to a Criminal History Database Check which includes a check of my background seeking information on criminal charges and convictions for the lesser period of either the past 7 years or since my 18th birthday, in all geographic areas in which I have resided, either domestically or internationally;
- Certiphi Screening, Inc. or another University selected company, will be used to conduct the check and that my privacy will be fully maintained throughout this process;
- any information about misdemeanor or felony charges or convictions learned through this check will be discussed with me prior to my identity and history being shared with external parties; and should I deem the content of the report incorrect, I may request the check be conducted a second time using my Social Security number as my identifier;
- the Department of Nursing agrees to use my information only to complete admission screening and to secure placement for educational experiences in area clinical agencies;
- only essential information from my Criminal History Database Check report will be shared with applicable agencies;
- should the Department of Nursing need to reveal my identity and check findings to a clinical agency, I have the right to submit to the Department for inclusion in the transmittal, a written request for special consideration specific to the clinical site assigned;
- my failure to permit the sharing of this information will result in the inability of the Department of Nursing to secure suitable clinical placement for me, thus rendering me unable to complete my nursing degree program at The University of North Carolina at Pembroke;
- I must report felony or misdemeanor charges and convictions which occur during my enrollment within 10 business days of occurrence to the Coordinator, Learning Enhancement Center;
- failure to report any future misdemeanor or felony charges and convictions in a timely and complete manner will constitute a violation of the University’s Honor Code and be reported to the Student Judicial System;
- failure to report any future misdemeanor or felony charge and convictions in a timely and complete manner will be a violation of this policy, subjecting me to appropriate sanctions;
- failure to report requisite information may constitute grounds for dismissal;
- I have the right to appeal administrative actions taken as a result of information obtained in my Criminal History Database Check by submitting a written statement of appeal to the Chair, Department of Nursing; and,
- the Department of Nursing, in consultation with University officials, makes the final decision as to my ability to matriculate; the clinical agency makes the final decision about whether I may be placed at that site.

_____________________________  ______________________________
Name (please print)                  Signature

_____________________________  ______________________________
Banner ID Number                  Date

Students are to receive a copy of the signed agreement.
APPENDIX H

Health Incident Report Form

Instructions: This form should be completed by both the student and faculty member within 24 hours after an incident occurs; and should be submitted to the Chair of the Department of Nursing (or designee).

Date of Report: __________________________________________________

Date of Incident: __________________________ Time of Incident: _________________

Location of Incident: _______________________ Student Name: __________________________

Faculty/Preceptor Name: __________________________ Course: __________________________

Type of Incident: _____ Needle stick injury _____ Exposure to blood/body fluids _____ Other

1. Briefly describe the incident (who was involved, who was present, who was notified, what happened, when, where).

2. List the name, address and phone number of all witnesses.

3. List any testing/treatment that was/has been provided.

4. Identify any follow-up which is planned or which was recommended.

5. How might this incident have been prevented?

Student’s signature: ___________________________________ Date _________________

Faculty/Preceptor signature: ___________________________ Date ___________________

(Please use the back of this form if more space is needed.)
APPENDIX I

Student Medication Administration Incident Report

Instructions: Complete this form within 24 hours of discovery of error. This form is to be completed by the student and faculty or preceptor together.

Student Name________________________ Course _______ Date Form Completed __________

Faculty ___________________________ Preceptor ________________________________

Clinical Agency ___________________ Date/Time of Incident: _______________________

Who was notified of the incident? ________________________________________________

Describe exactly what happened. _________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Who was notified of the incident? ________________________________________________

Describe what actions occurred once the incident was noted. _____________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Describe the consequences or potential consequences related to the incident. ________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Student’s recommendations to prevent re-occurrence: _________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Recommendations from the Course Coordinator: _________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Recommendations from the Chair or designee: _______________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Student Signature ______________________________ Date ______________

Clinical Preceptor/Instructor Signature _________________________ Date __________

Course Coordinator Signature _________________________________ Date __________

Chair or Designee Signature ______________________________ Date __________
APPENDIX J

Nursing Student Code of Academic and Professional Behavior Statement

As a nursing student of the University of North Carolina at Pembroke Department of Nursing I promise to develop and uphold the highest standards of academic and professional behavior; and to accept my academic, clinical, and personal responsibilities in all learning environments. To achieve these ideals, I will embrace and abide by the Nursing Student Code of Academic and Professional Behavior.

I understand that the duties and responsibilities outlined in this Code begin with my acceptance as a nursing student into the University of North Carolina at Pembroke Department of Nursing. By signing below, I acknowledge that I have received a copy, have read and understand and will adhere to the provisions of the Nursing Student Code of Academic and Professional Behavior.

Signature: ___________________________________________ Date: __________________

Print Name: __________________________________________
APPENDIX K

The International Pledge for Professional Nursing

In the full knowledge of the obligations I am undertaking, I promise to care for the sick with all of the skill and understanding I possess, without regard to race, color, creed, politics, or social status.

I will respect, at all times, the dignity and religious beliefs of the patients under my care and holding in confidence all personal information entrusted to me and refraining from any action which might endanger life or health.

I will endeavor to keep my professional knowledge and skill at the highest level and give loyal support and cooperation to all members of the health care team.

I will do my utmost to honor the international code of ethics applied to nursing and to uphold the integrity of the nurse.