# Bachelor of Science in Nursing

# Student Nurse Handbook 2026-2027

"Educating individuals committed to competence and compassion in the nursing profession, serving God and society."

ANDERSON UNIVERSITY

College of Professional Studies

School of Nursing

*Policies reviewed annually. Policy updates are ongoing as changes are implemented throughout the year.*

Table of Contents

**Section I — Program Description** ..... 4

Introduction ..... 4

Statement of Compliance ..... 4

Accreditation ..... 4

Mission Statement ..... 4

Overview of the School of Nursing ..... 4

Overview of the Nursing Curriculum ..... 5

Philosophy of School of Nursing ..... 6

Conceptual Framework ..... 7

BSN Program Outcomes ..... 8

**Section II — Academic Advisement** ..... 8

**Section III — Scholarship, Admission, Progression, and Graduation Requirements** ..... 8

Scholarships ..... 8

Admission to the Nursing Major ..... 9

Criteria for Admission to the Nursing Major ..... 9

Criteria for Admission to the Accelerated BSN Program ..... 9

Transfer Student Criteria for Admission to the Nursing Major ..... 9

Other Requirements for Admission to the Nursing Major ..... 10

Progression Following Acceptance to the Nursing Major ..... 11

Placement ..... 11

**Section IV — Methods of Evaluation** ..... 11

Classroom Testing ..... 13

**Section V — Clinical Evaluation** ..... 13

Clinical Component ..... 13

**Section VI — Behavior Expectations** ..... 14

Clinical or Academic Violations ..... 14

Classroom Professionalism Policy ..... 15

Code for Nurses ..... 15

Social Media Policy ..... 16

Chemically Impaired Student, Drug and Alcohol Policy ..... 17

Attendance ..... 18

Technical Standards for Admission and Graduation ..... 18

**Section VII — Liberal Arts Component** ..... 19

**Section VIII — Graduation and Degree Requirements** ..... 20

Application for Graduation ..... 20

Student Retention ..... 20

Dismissal/Withdrawal ..... 20

Grading Policy ..... 20

Program Dismissal Policy ..... 22

Informal and Formal Complaint Policy and Procedure ..... 22

Criteria for Grade Appeal ..... 23

Procedure for Appealing a Grade ..... 23

Incomplete ..... 24

Readmission ..... 24

**Section IX — Simulation Lab Policy and Procedures** ..... 24

**Section X — Clinical Experiences** ..... 32

Chapel Attendance as a Nursing Student ..... 32

Student Course Work Review (Accreditation) ..... 33

Student Incident or injury ..... 33

Skill Lab/St. Vincent Anderson Regional Center for Clinical Excellence ..... 33

Inclement Weather ..... 33

Liability Insurance ..... 33

Transportation ..... 33

Nursing Student Uniform ..... 34

General Appearance ..... 34

Donations ..... 35

**Section XI — Student Affairs** ..... 34

Student Representation on SON Committees ..... 35

Sigma Theta Tau International, Honor Society of Nursing ..... 36

Departmental Honors Recognition Policy ..... 36

SON Student Awards and Criteria ..... 36

**Section XII — Employment and Licensure** ..... 37

Student Nurse Employment ..... 37

Rules and Regulations from Indiana State Board of Nursing ..... 37

**Appendix A** ..... 40

**Appendix B** ..... 41

**Appendix C** ..... 43

*Policies reviewed annually. Policy updates are ongoing as changes are implemented throughout the year.*

# Section I: Program Description

### INTRODUCTION

This handbook provides information about major policies, procedures, and guidelines for the School of Nursing (SON) Bachelor of Science in Nursing (BSN) program. The handbook is also available on the School of Nursing website at anderson.edu/nursing.

In addition, students should read and reference the Anderson University (AU) Undergraduate Catalog and the Anderson University Student Handbook. These references may be obtained on the Anderson University website at anderson.edu.

### STATEMENT OF COMPLIANCE

Anderson University maintains compliance with applicable federal and state statutes related to private institutions of higher education, including the Family Educational Rights and Privacy Act (FERPA), as amended; the Student Right to Know Act, as amended; and the Solomon Amendment. In compliance with the Civil Rights Act of 1964 and 1991, Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 as amended, the university does not discriminate in its educational programs or admissions procedures. Anderson University is a not-for-profit, exempt organization as described in Section 501(c) (3) of the Internal Revenue Code. The following individuals have been designated to handle inquiries regarding non-discrimination policies: Director of Human Resources, 1100 E. Fifth St., Anderson, IN 46012, telephone (765) 641-4133, and Director of Disability Services for Students, 1100 E. Fifth St., Anderson, IN 46012, telephone (765) 641-4223.

### ACCREDITATION

Anderson University is accredited by the Higher Learning Commission: website address *www.hlcommission.org*, phone (312) 263-0456. The programs leading to the Bachelor of Science in Nursing degree is approved by the Indiana State Board of Nursing. *The baccalaureate degree program in nursing at Anderson University is accredited by the Commission on Collegiate Nursing Education (http://www.ccneaccreditation.org).*

## MISSION STATEMENT

The Anderson University School of Nursing was established in 1973 in response to the community's need for nurses to provide care in local institutions. Since that time the program has evolved and now offers baccalaureate and accelerated baccalaureate nursing education and is dedicated to "Educating individuals committed to competence and compassion in the nursing profession, serving God and society" (approved 3/2004, reaffirmed 5/2009, 8/2012, 8/2014,5/2016,8/2022, 11/2023,12/2024, 5/2026).

### OVERVIEW OF THE SCHOOL OF NURSING

In 1973, in response to closure of a diploma program of nursing at Saint John's Hospital, the AU School of Nursing was established, offering an Associate of Science in Nursing (ASN) program, followed by a Bachelor of Science in Nursing (BSN) program in 1986. The Associate of Science degree program successfully graduated 755 individuals until it was closed in May 1991. The MSN program successfully graduated 125 individuals until it closed in May 2019. RN to BSN graduated 14 individuals and was closed in June of 2024.

In the early 1980s, the program offered a 2+2 program for three years. This served as a transition to the present degree offering. In 1986, the department received permission from the university board of trustees, administration, and faculty to initiate the process of dropping the 2+2 program and offering the traditional Bachelor of Science in Nursing. The first traditional students graduated in 1992. The BSN program continues to date.

In 1995, the Anderson University School of Nursing began offering a program allowing associate degree-registered nurses to complete a Bachelor of Science in Nursing. This program extended over three calendar years, with the majority of the

instruction occurring on the weekends. Having met the community needs, it was decided in 1999 to only offer the traditional Bachelor of Science in Nursing degree. However, a need was identified for this type of continuing education in 2009, and the RN-BSN Completion Program was initiated, with substantial curricular changes, in the fall of 2010. This program was again closed in 2014 but opened again in 2021. In June of 2024, the track was closed.

In 2019 the Anderson University School of Nursing began offering an Accelerated second-degree BSN program (ABSN). This program is designed for students who have earned a bachelor's degree in a non-nursing field and want to pursue a nursing career. This is a full time, five-semester program, requiring 61 credit hours of nursing education.

## OVERVIEW OF THE NURSING CURRICULUM

The Anderson University School of Nursing has an integrated curriculum extending over three academic years based upon the Ecological Model of Health. The major is intentionally designed to incorporate learning from the liberal arts in nursing courses. The nursing care of individuals, families, groups, communities, and populations as patients are included in clinical experiences (*The Essentials of Baccalaureate Education for Professional Nursing Practice, American Association of Colleges of Nursing, 2008*).

## COMMISSION ON COLLEGIATE NURSING EDUCATION (CCNE) BACCALAUREATE ESSENTIALS

The Anderson University School of Nursing Pre-licensure Bachelor of Science in Nursing program incorporates the essential elements required for professional nursing education by the American Association of Colleges of Nursing. The Baccalaureate Essentials detail standards for preparing bachelor's degree nurses to assume roles as care providers; as designers, managers, and coordinators of care; and as members of a profession. Within these roles, the document provides specific standards for educational components that are essential for all baccalaureate nursing programs, including liberal education, professional values, core knowledge, and role development (*https://www.aacnnursing.org/Portals/0/PDFs/Publications/Essentials-2021.pdf*). The Essentials of Baccalaureate Education for professional nurses was last revised in 2021 and includes the following 10 domains of competence to reflect the nursing discipline:

Domains:

1. Knowledge for Nursing Practice
2. Person-centered Care
3. Population Health
4. Scholarship for the Nursing Discipline
5. Quality and Safety
6. Interprofessional Partnerships
7. Systems-Based Practice
8. Informatics and Healthcare Technologies
9. Professionalism
10. Personal, Professional, and Leadership Development

## NATIONAL COUNCIL LICENSURE EXAMINATION-REGISTERED NURSE (NCLEX-RN)

The nursing courses, which vary by specialty area, expand and extend knowledge and complexity, providing an opportunity for students to develop skills in evidence-based practice. Following program completion, students are prepared to sit for the National Council Licensure Examination for Registered Nurses (NCLEX-RN). For further information on this exam, please see the National Council of State Boards of Nursing: ncsbn.org/nclex.htm. The elements of the NCLEX-RN Blueprint are incorporated into AUSON Pre-licensure BSN courses and are as follows:

- Safe and Effective Care Environment: Management of Care
- Safe and Effective Care Environment: Safety and Infection Control
- Health Promotion and Maintenance
- Psychosocial Integrity
- Physiological Integrity: Basic Care and Comfort
- Physiological Integrity: Pharmacological and Parenteral Therapies
- Physiological Integrity: Reduction of Risk Potential
- Physiological Integrity: Physiological Adaptation

### Quality and Safety Education for Nurses (QSEN)

The Robert Wood Johnson Foundation (RWJF) has funded the Quality and Safety Education for Nurses (QSEN) project. The overall goal through all phases of QSEN is to address the challenge of preparing future nurses with the knowledge, skills, and attitudes (KSA) necessary to continuously improve the quality and safety of the healthcare systems in which they work. The AUSON Pre-licensure BSN program incorporates the following areas as identified by QSEN (qsen.org/competencies):

- **Patient-Centered Care** — Recognize the patient or designee as the source of control and a full partner in providing compassionate and coordinated care based on respect for the patient's preferences, values and needs.
- **Teamwork and Collaboration** — Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect and shared decision-making to achieve quality patient care.
- **Evidence-based Practice (EBP)** — Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal healthcare.
- **Quality Improvement (QI)** Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems.
- **Safety** — Minimize risk of harm to patients and providers through both system effectiveness and individual performance.
- **Informatics** — Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

## PHILOSOPHY OF SCHOOL OF NURSING

Each person is a unique creation of God. To honor and serve God and all persons is the ultimate purpose of the human experience. This includes honoring through health, well-being, and wholeness. The discipline of nursing includes persons, environment, health, and education. Within these concepts, students must learn to apply clinical judgment in order to provide optimal patient care and achieve their highest potential as nurses.

Learning in a Christian environment offers a unique value system that fosters a commitment to service. Local and global experiences prepare students to be sensitive to the needs of culturally diverse persons, developing a style of Christian servanthood.

**Persons/Human Beings:** Persons are an integrated outcome of the Ecological Model domains, which include intrapersonal, interpersonal, community, environment, public policy, and spiritual domains. These components are inseparable and complement each other in all aspects of human existence. Each person, as a unique creation of God, is irreplaceable. Human beings have the right to be treated with dignity, respect, and compassion. To honor and serve God and others is the ultimate purpose of the human experience.

Persons, families, groups, communities, and populations interact with these domains and are capable of adaptation. Persons should be viewed as valuable and should be esteemed by others regardless of gender, ethnicity, nationality, socioeconomic status, cultural lifestyle, religion, or belief system. The life cycle of each person involves many transformations and opportunities for growth and development within and throughout the domains.

**The Environment:** The environment has the capacity to influence human response and can be experienced as a physical environment (the character and condition of the water, air, open space, plants, and wildlife, as well as different living infrastructures), a social environment (influence of family and peers; community attitudes about gender roles, race, childbearing, work, etc.), a political environment (policies and laws, such as anti-smoking ordinances, that regulate behavior or lifestyle; the attitudes of those in power toward specific groups or issues), or an economic environment (the availability of decent-wage jobs, affordable housing, and health insurance; the community tax base; global economic conditions) (Precede/Proceed, 2018, para. 35). —*Precede/Proceed. (2018). Retrieved from Community Tool Box: ctb.ku.edu/en/table-contents/overview/other-models-promoting-community-health-and-development/preceder-roceder/main*

**Health:** Within the Ecological Model, health is a multidimensional process that includes, but is not limited to physical, emotional, spiritual, and psychological health. The definition of optimal health is individualized to each person interacting within and throughout the domains. Persons, organizations, communities, and systems share responsibility for promoting health, preventing disease, and reducing disparities.

**Nursing:** Nursing is a profession that incorporates evidence-based research using a holistic approach to empower people to strive toward their optimal health. Within the Ecological Model, the nurse as part of an inter-collaborative healthcare team is accountable and responsible for the synthesis of theoretical and experiential knowledge; the application of social, cultural,

interpersonal, and technological skills; and the motivation to serve others with compassion. The professional role of the nurse includes those as a provider of care, advocate, leader, coordinator, change agent, educator, and a member of the multidisciplinary healthcare team. As a serving profession, the nurse cares for the individual, family, community, and population through effort, perseverance, ingenuity, and human and material resources. The nurse also upholds the standards of practice, code of ethics, and the pursuit of lifelong learning for continued professional development.

**Nursing Education:** The goal of nursing education is student-centered learning through active engagement. Students must learn to think critically and creatively to achieve their highest potential as nurses and assume responsibility and accountability for ongoing professional development and lifelong learning in a perpetually changing healthcare environment. Improving health requires futuristic thinking and adopting advocacy roles for individuals, families, communities, and populations. Learning in a Christian environment provides a unique value system that fosters a commitment to service. Local and global experiences prepare students to be sensitive to the needs of culturally diverse persons and to purposefully adopt a style of Christian servanthood.

The knowledge for nursing practice and the needs of nursing change rapidly. Students must be prepared to practice in conditions of constant change; therefore, the emphasis of learning is on concepts of patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics. The ability to change is enhanced through the use of the Ecological Model, which encourages flexibility and adaptation.

Nursing knowledge consists of cognitive, affective, and psychomotor components. Students and faculty share responsibility for the educational process within a climate of mutual respect. Students are actively involved in clinical reasoning endeavors such as experiencing, analyzing, questioning, and evaluating within a caring Christian community: Faculty value the varied learning needs of students and facilitate experiential opportunities that assist the student in meeting specified educational goals, articulate previous learning, develop meaningful relationships, and mature in self-understanding and professional conduct.

*—Copyright 2003 by the School of Nursing, Anderson University; Reviewed 9/2004, Revised 5/2011, and 05/2018*

## CONCEPTUAL FRAMEWORK

The AUSON Conceptual Framework borrows elements from the Ecological Model of Health as a way to comprehend the complex interplay between people, relationships, and environments.

At the core of the framework is the **intrapersonal** sphere, made up of a person who includes factors such as knowledge, attitudes, skills, values, beliefs, motivations, self-efficacy, and resiliency. The person's demographics, health history, current health status, and risks converge with the cognitive and affective realms to complete the intrapersonal sphere.

Each person exists within an **interpersonal** framework of relationships, which may include families, friends, and social networks. This sphere may give meaning to, or at times, detract from, a person's wholeness, thereby being an asset or a limitation at various points in time.

The person interacts with an **organizational** setting, which includes social institutions such as schools, employers, and businesses. Both the person and the organization are located within a larger **community** setting, which may include geographic boundaries and/or a shared sense of purpose or trait that binds individuals together. The context of the community includes the seen or unseen social and physical **environments** in which a person lives and within which he or she interacts. The social environment includes the norms, mores, and dominant assumptions that inform a person's values, attitudes, and beliefs. The physical environment includes the traits and characteristics of the natural and built environment in which a person lives, involving not only desired attributes such as green space and clean air and water, but also undesired qualities such as toxic chemical and biological agents. One's community may be considered to be **global**, as people are thought to be citizens of the world, existing within a globalized community.

Each of these spheres is enhanced, constrained, and governed by a larger **public policy** sphere that is made up of national, state, and local laws and regulations. This domain has a profound influence on the health of individuals, families, communities, and populations.

The **nurse** has the ability to affect the health of patients (individuals, families, communities, and populations) by intervening in each of these spheres, often through primary, secondary, and tertiary prevention. As a member of an interdisciplinary team, the nurse acts as caregiver, advocate, decision-maker, communicator, and teacher. Understanding the nature of the systems in which a patient exists, the nurse also acts as a navigator for patients within complex systems (public, private, financial, regulatory, healthcare, etc.).

The **spiritua**l dimension encircles the whole, acknowledging that the spiritual realm can be experienced within a person and/or in relationships between people and God. Cultural, political, and societal influences impact the experience and expression of spirituality.

In summary, the Ecological Model provides great utility as a framework for a nursing curriculum. The use of this model enhances the ability of the nurse to coordinate care for patients in varying states of health, often within complicated interpersonal situations, and living in contexts that may or may not contribute to positive outcomes.

*—Copyright 2018 by the School of Nursing, Anderson University*

## BSN PROGRAM OUTCOMES

Upon completion of the BSN program, graduates will:

1. Integrate knowledge, skills, and values from the liberal arts to provide safe, humanistic care as an advocate using the Anderson University School of Nursing conceptual model.
2. Incorporate knowledge and skills in relational leadership, quality improvement and patient safety to provide high-quality health care.
3. Evaluate and utilize research finding to facilitate critical thinking, clinical reasoning and clinical judgment in Evidence-Based Practice.
4. Utilize technologies to deliver high-quality care with a variety of systems.
5. Articulate knowledge of policy, fiancé and regulatory environments including local, state, national and global healthcare trends.
6. Facilitate collaboration/communication within an interprofessional system to improve patient outcomes.
7. Utilize the Anderson University School of Nursing conceptual model for health promotion and disease prevention at the individual and population levels.
8. Embrace the inherent values of altruism, autonomy, dignity, integrity and social justice through professional nursing practice.
9. Provide appropriate patient care across the lifespan in complex environments using a variety of resources. Anderson University School of Nursing conceptual model.
10. Design nursing care within a Christian framework by integrating the mission and philosophy of Anderson University and the School of Nursing into individual practice.

*—Revised Oct. 2, 2018, by the School of Nursing Faculty (The Essentials of Baccalaureate Education for Professional Nursing Practice, American Association of College of Nursing, 2008)*

# Section II: Academic Advisement

All students with an interest in nursing or a declared nursing major are assigned to SON faculty for course registration and academic counseling. These assignments are emailed to students at the beginning of each school year. Students should contact their advisor prior to or early in their first semester at AU to review the program requirements and verify their enrollment in appropriate prerequisite classes.

Within the Anderson University advising model, ASPIRE, students are encouraged to integrate the development of professional skills and professionally relevant learning opportunities throughout their collegiate career. Activities included on the checklist include attending the academic majors fair, creating a four-year plan, creating and updating a resume, identifying potential job shadowing, internship, or practicum experiences, and volunteering in the community.

Students should come prepared with a tentative schedule in their shopping cart for the following semester (fall registration) or for the entire academic year (spring registration). The faculty member will review the tentative schedule and assist the student in planning for the next enrollment period. It is the student's responsibility to monitor his/her own progress toward meeting graduation requirements.

# Section III: Scholarship, Admission, Progression, and Graduation Requirements

### SCHOLARSHIPS

The following scholarship is available to School of Nursing students:

- Indiana Center for Nursing Scholarship

## ADMISSION TO THE NURSING MAJOR

Students will be formally admitted to the School of Nursing as sophomores. Application may be made in the following ways:

**Direct Admit: Students may apply to the School of Nursing during their senior year of high school. High school seniors may be considered "direct admit" if the following criteria are met:**

1. Obtain a cumulative GPA of 3.5 in high school.
2. Complete two years of high school math, including algebra.
3. Complete three years of high school science, including biology and chemistry.

"Direct Admit" students must meet the criteria for admission to the nursing major following their freshman year of study at Anderson University.

Students may also come on campus as freshman, begin taking the scheduled prerequisite courses, and declare their intent to major in nursing. All students (including transfer students) will be considered for admission on a competitive basis.

**Transfer Students: Transfer students must meet all Anderson University and School of Nursing admission criteria before being considered for the nursing major. Students may be required to submit course syllabi or descriptions for evaluation before previously earned credits are considered for transfer. Courses in non-nursing areas will be evaluated by the SON chair or the BSN admissions coordinator. A minimum grade of C (C minus is not acceptable) must be earned in transfer courses to fulfill prerequisite requirements. Students applying to the pre-licensure program of nursing may not transfer courses from other institutions to meet the requirements of nursing courses (NURS).**

Transfer students are welcome and may apply for admission to the sophomore year; however, Anderson University students are given first priority during the admission process.

### CRITERIA FOR ADMISSION TO THE NURSING MAJOR

Students who meet the following criteria will be considered for admission to the nursing program in the sophomore year*:

1. Obtain a grade of C or above (C minus is **not** acceptable) in PSYC 2000, BIOL 2410, BIOL 2420 (or equivalent transfer courses) and a grade of C or above in NURS 2140 (C minus is **not** acceptable)
2. Obtain a cumulative GPA of 3.2 or higher (admission is competitive).
3. Complete an Application for Admission/Re-entry/Transfer form.

### CRITERIA FOR ADMISSION TO THE ACCELERATED BSN PROGRAM

1. Completion of a bachelor's degree from an accredited and recognized college or university with a minimum cumulative grade-point average of 2.75 or higher.
2. Prerequisite courses must be completed with a grade C or above:
    - Anatomy & Physiology I
    - Anatomy & Physiology II
    - General Psychology
    - Developmental Psychology
    - Intro to Chemistry
    - Microbes & Disease

#### Bachelor of Science in Nursing:

60 hours in Nursing: NURS 2170, 2140, 2231, 2241, 2250, 2270, 2340, 3351, 2261, 3391, 4451, 4470, 4510, 4521, 4950, 4960, 4970

## **TRANSFER STUDENT CRITERIA FOR ADMISSION TO THE NURSING MAJOR*

**Acceptance criteria for transfer students are as follows:**

1. Completion of a grade of C or above in PSYC 2000, BIOL 2410, BIOL 2420 (BIOL 2410 and 2420 must be taken at the same institution), or the equivalent transfer courses.
2. NURS 2140 (may be taken concurrently with NURS 2241 and NURS 2270 with permission of the chair of the SON). NURS 2140 must be successfully completed to progress to 3000-level nursing courses.
3. Cumulative GPA of 3.2 or higher (admission is competitive).
4. Transfer students who have transcripts from multiple universities may utilize an "average" of the cumulative GPAs from any school at which 12 or more semester hours have been completed in order to meet the cumulative GPA requirement. Students may request academic forgiveness for courses completed more than five years/change of Major. Please note any dual credit or college course credits acquired prior to the student's High School degree conferral will be excluded from the transfer GPA calculation.
5. Transfer students who do not meet the cumulative GPA requirement for admission to the School of Nursing must Complete a minimum of 12 semester hours at Anderson University (50% of which must be within a traditional classroom setting and obtain a cumulative GPA of 3.2 or higher in order to apply to the School of Nursing.
6. Transfer credits in pre-requisite and supporting courses (PSYC 2000, PSYC 2510, BIOL 2410, BIOL 2420, BIOL 2230 and CHEM 1000) must be taken within the previous five academic years to be considered for academic credit.
7. Completed criminal background check and urine drug screen submitted to *CastleBranch.com.*
8. Complete immunization history and physical examination submitted to *CastleBranch.com.*
9. CPR certification through Resuscitation Quality Improvement (RQI) through AU School of Nursing.
10. Complete annual registration of CastleBranch Bridges to ensure clinical placement.
11. Complete an Application for Admission/Transfer Form.

## Progression to the Sophomore Year **(for those who have direct admit status)**

Requirements for progression to the sophomore year:

1. Grade of C or above in PSYC 2000; BIOL 2410, 2420; NURS 2140.
2. Cumulative grade point average of 3.2 or higher.
3. Completed criminal background check and urine drug screen submitted to *CastleBranch.com*.
4. Complete immunization history and physical examination submitted to *CastleBranch.com*.
5. CPR certification through Resuscitation Quality Improvement (RQI) through AU School of Nursing.
6. Complete an Application for Admission form.

## Bachelor of Science in Nursing (124 hours)

60 hours in Nursing:

- NURS 2140, 2231, 2241, 2250, 2270, 2340, 3351, 3361, 3391, 4451, 4470, 4510, 4521, 4950, 4960, 4970

65+ hours in supportive sciences and liberal arts:

- BIOL 2230, 2410, 2420; PSYC 2000, 2510; CHEM 1000

Remaining hours from liberal arts courses (see Liberal Arts Program in this catalog). The School of Nursing strongly recommends NURS 2130 be taken before entering the major. Nursing courses must be completed successfully at AUSON and no NURS courses transferred from another institution will be accepted in place of a nursing course.

## OTHER REQUIREMENTS FOR ADMISSION TO THE SCHOOL OF NURSING

The following are also required and must be completed prior to registration for NURS classes in the fall semester:

1. CPR certification through Resuscitation Quality Improvement (RQI) through Anderson University School of Nursing.
2. Criminal background checks via CastleBranch.com.
3. Documentation from a licensed primary care provider of a recent physical exam.
4. Documentation of current immunizations — including Tetanus/Diphtheria/Pertussis (Tdap), Measles/Mumps/Rubella (MMR), Varicella (chickenpox), titer required, Hepatitis B series, titer required, and Polio or a declination form for each vaccine you declined to receive based on religious grounds — submitted to CastleBranch.com. Annual tuberculosis (TB) screening. If your health record indicates that you had a positive PPD, read "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings," 2005. **Vaccine refusal note: Clinical agencies will not be liable in the event Student(s) or faculty who are not immunized become infected with any diseases as a result of their association with the institution per our affiliation agreements.**
5. Healthcare workers (HCW) with a baseline positive or newly positive TST or BAMT result should receive one chest radiograph to exclude a diagnosis of TB disease. After the baseline chest radiograph is performed and the result is documented, repeat radiographs are not needed unless symptoms or signs of TB disease develop or a clinician recommends a repeat chest radiograph. Instead of participating in serial testing for M. tuberculosis infection, HCWs with a positive test result for M. tuberculosis infection should receive a symptom screen (Department of Health and Human Services Centers for Disease Control and Prevention, 2005, p.30). The positive PPD record will be updated annually while enrolled in the School of Nursing documenting the absence of clinical symptoms by the AU Health Service Department.
6. Drug Test (LabCorp) completed via CastleBranch.com prior to the sophomore year. The cost of any needed repeat drug testing is the responsibility of the student.
7. CastleBranch Bridges for clinical placement and scheduling.

## PROGRESSION FOLLOWING ACCEPTANCE TO THE NURSING MAJOR

In accordance to the Indiana State Board of Nursing Indiana Administrative Code, all students must maintain a minimum grade of C in all nursing (NURS) and required support courses (BIOL 2410, 2420, 2230; CHEM 1000; and PSYC 2000 and 2510) to progress in the program of study. A C minus grade is **not** acceptable.

Students are also required to keep their CPR/RQI certification up to date, annually submit proof of flu & COVID vaccine and TB screening, as well as, submit the Background Check and Drug Screen Disclosure Statement.

Students who have been absent for one semester or more from their last clinical experience must reapply to the School of Nursing and meet the criteria for admission to the nursing major from the most recent Bachelor of Science in Nursing Student Nurse Handbook. All students requesting readmission must make requests in writing to the chair of the School of Nursing. In addition to returning, the student must re-demonstrate a successful completion of clinical skills at the appropriate skill level. A remediation contract will be developed by faculty members with input from the student within 30 business days of the request for readmission. The remediation contract will be designed on an individual basis and full execution of the contract will be the responsibility of the student. Remediation may include, but is not limited to, ATI assessments, simulation, and appropriate skill level check off. The student will be enrolled in NURS 3400: Nursing Remediation. If the student was unsuccessful in NURS2231, no remediation, contract, or enrollment in NURS 3400 is required.

After the remediation contract is executed, the student is eligible for review to determine readmission status. The petitioner will receive a disposition of the petition within 30 business days of the full faculty governance meeting.

### ADVANCED PLACEMENT

Advanced placement and/or credit may not be earned through placement examination toward nursing course credit.

# Section IV: Methods of Evaluation

The following method of evaluations applies to most nursing (NURS) courses:

1. Written work contributes 30% to the final course grade.
2. The combination of exams contributes to 65% of the final course grade.
3. ATI remediation contributes to 5% to the final course grade.
4. An average of 80% must be achieved on unit examination and care map (semester project) regardless of other course grades in order to successfully complete a NURS course.
5. For any competencies required in a NURS course, failure to demonstrate competency on the 3rd attempt may result in a class failure with the exception of the Head to Toe competency which only allows 2 attempts. (A failure of test-out/competency will be incurred for each “no show” test-out/competency appointment.)
6. Writing intensive courses, such as NURS 3391 and NURS 4470, will be graded as follows: written work contributing 50% to the final course grade and assignments and quizzes contributing 50% to the final grade.
7. NURS 4960: Leadership Capstone is a Speaking Intensive course. The grading will be as follows: CQI project work contributing to 60% of the final course grade, quizzes and written work contributing to 40% of the final grade.

A unit exam average of 80% is required to pass nursing courses. If an 80% exam average is not attained, a maximum grade of C minus will be entered as the final course grade regardless of other course work. A maximum grade of C minus will also be entered as the course grade if an unsatisfactory clinical evaluation is received, regardless of other coursework.

Unit examinations will be of equal weighted value and together comprise 65% of the course grade. Not all questions on examinations will be of equal value, nor will all exams be of an equal number of test questions. All exams will be of equal weight in regard to the final grade. A final will be given in most NURS courses. Examinations not completed at the scheduled times may only be made up in justified emergencies after prior clearance from the faculty member responsible for the examination. Students who do not take the examination on the assigned day may receive an alternate form of the examination for make-up.

When an instructor reviews an examination, he/she may decide that a question has not been answered correctly by a sufficient number of students. The instructor may choose to accept an additional option as the correct choice, thereby having more than one correct answer. Another option for the instructor is to eliminate the test item from the examination and thus, reduce the total points possible on the test. If a question is eliminated from the test, the students will have their scores calculated by dividing the number of correct responses by the reduced number of questions.

Exam scores will be computed as percentages (number correct/total possible points). These scores will be recorded to three decimal places (example: 0.894 equates to 89.4%). Exam 1% + Exam 2% + Exam 3% + Exam 4% + Final exam % / (number of unit exam + final) = Final Test Average. Throughout the semester, unannounced quizzes may be given at the discretion of the teaching team. Students may not make up quizzes missed for any reason. Quiz scores will be added to the point total for written work.

The student is expected to complete all assignments by the due date established by the teaching team. 5% will be deducted from the final earned score for each calendar day an assignment is late (including weekends and holidays). Work designated by the teaching team as outlined in the syllabus as pre-work for class, lab, and sim, will not be accepted late and will be assigned a score of zero. Written work is to be submitted via the method designated by the teaching team.

Errors (in spelling, punctuation, grammar, style, usage, etc.) detract from the student message and from the student’s credibility as a professional communicator. Please proofread your work carefully. Handwritten assignments are not accepted unless specified. Written assignments are to follow American Psychological Association (APA) format outlined in the assigned edition of the publication manual.

Care maps are an indication of the student’s ability to critically analyze patient/client situations and use the nursing process in the design of care. In the event the student earns a grade of less than 80% on the nursing care map, in order to be successful in the course, he/she must remediate the nursing care map.

The following criteria apply to care-map remediation:

1. The student must initiate contact with the faculty member within one week of receiving the graded nursing care map.
2. A remediation session with the faculty member is required prior to resubmitting the work and should be held within two weeks of receiving the original graded care map.

3. The faculty member will determine if the care map to be resubmitted qualifies as a revision of the original or if a new care map is required (based on a new patient or a case study).
4. The revised care map must be turned in no later than one week after the remediation session.
5. The grade earned on the resubmitted nursing care map will replace the original nursing care-map grade. A maximum of 80% may be obtained following remediation.

**Policy:** ATI Remediation

**Purpose: ATI** is a required adjunctive resource designed to aid students in furthering their understanding of curricular content. Focused Review Tests (non-proctored) and Integrated Tests (proctored) are available to students to practice/study and benchmark performance, respectively.

**Review:** This policy shall be reviewed every two years (or as needed) during the Faculty Governance Retreat by the chair and Faculty Governance Committee.

**Policy:** Integrated (proctored) ATI tests will be strategically sequenced throughout the AUSON curriculum to measure retention of material and benchmark individual student and cohort performance to ATI national standards (level II and higher). Students will be required to take the exam on the scheduled day. Integrated ATI tests not completed at the scheduled time may only be made up in justified emergencies after prior clearance from the proctoring faculty member. Students making up an integrated ATI test may receive an alternate version of the exam. Remediation of the integrated ATI exams will be required and due on the assigned date as stated by the teaching team. For each day the remediation is late -5% of the total points allotted for the grade will be taken away. Any faculty may grade the remediation. Integrated ATI remediation(s) will account for 5% of the final course grade.

**In summary:**

1. A cumulative average of 80% on course exams. The cumulative course exam average will not be rounded up. Example: 79.566% will not be rounded to 80%.
2. A grade of 80% on the Semester Project.
3. A 75% overall course average.
4. A pattern of capable clinical evaluations throughout the course.
5. Attendance at all learning opportunities except in justified emergencies.
6. Capable completion of nursing laboratory assignments.
7. Completion of all assignments.

Academic performance will be evaluated at midterm, end of the semester, and at times when special needs present themselves.

Any student who temporarily leaves the nursing major must meet the nursing course requirements of the class with which they graduate.

# CLASSROOM TESTING

1. Students are to arrive prior to the scheduled exam time. No late entry to exams without faculty permission. If a student arrives late and is permitted to test, no additional time will be granted.
2. No children or visitors are permitted in the testing areas during exams.
3. Student belongings must be placed in the designated areas.
4. Any and all electronic and/or wireless devices (including cell phones and smart watches) will be turned off and out of sight during examinations, quizzes, and any graded events.
5. No hats, ball caps, coats, or hoodies are permitted to be worn or in the testing area during the exam. If a student is wearing long sleeves, students may be asked to pull up the sleeves to expose arms. Hats will only be permitted for a religious, medical, or cultural need.
6. No Meta/AI glasses or recording devices of any kind are permitted in the testing room.
7. Students may not leave the exam room while an exam is in progress other than to exit when the student has completed the exam. If the student is having an emergency, the faculty will address the need on an individual basis.

8. No food or drink is allowed in the testing space.
9. Calculators will be provided. Personal calculators are not permitted.
10. It is within the faculty's discretion to make additional arrangements or measures to ensure test security.
11. Make-up exams may be a different version than the original exam including format.

Exam Review: The purpose of this process is to maintain test security, validity and reliability of questions, while facilitating a remediation and learning environment for students.

1. The review must be completed prior to the next course exam.
2. Students must meet with the faculty face-to-face. Reviews will not be done virtually.
3. Reviews will not be recorded. No note taking or photos will be permitted. Any violation of this will be considered an Academic Integrity violation and subject to disciplinary action.
4. Students scoring less than 80% on any exam are encouraged to make an appointment for exam review.
5. Specific questions will not be discussed. Concepts will be reviewed during the exam review.

# Section V: Clinical Evaluation

## CLINICAL COMPONENT

The student's professional nursing skills will be evaluated and determined to have capabilities and/or limitations. The determination will be based on the criteria in the Bachelor of Science in Nursing, Student Nurse Handbook. Evaluations for clinical performance will be made following each clinical agency experience. At the end of the semester, a summary evaluation will be completed and a conference between the student and a teaching team representative will be held if the student is not found to have successfully completed the course or have incurred clinical limited status.

A pattern of limitations that continues throughout the course or a failure to show satisfactory progress in the performance of previously taught nursing skills will constitute a clinical failure.

Students are expected to prepare for the skill laboratory experiences according to the assignments provided for the course. During the lab period, the student is expected to participate. The cognitive portion of this material will be tested on the unit exams. Skill laboratory test-outs/competencies will be scheduled to evaluate the psychomotor portion of the material presented. The student must complete these psychomotor tests successfully in order to pass the course. A limit of three opportunities will be given to successfully demonstrate a required nursing skill. Failure to demonstrate competency on the 3rd attempt may result in a class failure. (A failure of test-out/competency will be incurred for each "no show" test-out/competency appointment.)

**Definition:** Evaluation is the ongoing assessment and documentation of student performance in the clinical area.

**Purpose:** The purpose of the written clinical evaluation is to provide the student with ongoing feedback regarding performance in the clinical area. The student is encouraged to dialog with the course instructor(s) regarding clinical evaluation throughout the clinical experience.

**Procedure:** Supervising clinical instructors will evaluate the student's performance utilizing the Clinical Evaluation Form. Feedback from agency licensed personnel may also be obtained and included in the evaluation process. A clinical session may consist of one clinical day or consecutive clinical days. The form is made available to the student to read, add comments if desired, sign, and date.
The student's signature on the Clinical Evaluation Form indicates that the student has reviewed the evaluation. The completed form is placed in the student's file.

A student who demonstrates a pattern of behavior below expectations and/or established a pattern of needed improvement may be at risk of failing the course. Students at risk will be required to attend a conference(s) with the instructor and/or course coordinator.

A student may attend clinical experiences in facilities in which he/she is also employed. While attending school-assigned experiences, the student is not allowed to use an employee code that is assigned for work purposes (documentation, medication administration, or patient testing). A clinical affiliate has the right to request that a student be removed from the agency and deny the student the privilege of returning to the agency for further clinical experiences based on inappropriate, unsafe, unprofessional behaviors which compromise patient care. This request may result in a clinical failure for the course, and a course failure.

All materials with patient identifiers may not leave the clinical site. No patient identifiers should be included on written assignments. Students should only access medical records that are necessary for the clinical experience involving the care of the assigned patient. Photographing or copying any part of the health record for any reason will result in immediate dismissal from the program. Failure to comply with any of these guidelines may result in clinical failure, course failure, and/or dismissal from the program.

# Section VI: Behavior Expectations

Students of Anderson University School of Nursing are expected to demonstrate professionalism at all times. A student who fails to manifest professionalism and/or honesty may be asked to leave the nursing program. Students are not allowed to fraternize with any patients at any time.

Students must conduct themselves in accordance with the ethos and policies of the university when utilizing electronic or computer-based methods of communication and socialization.

## Clinical or Academic Violations

Violations of the code of conduct as outlined in the BSN Student Nurse Handbook will result in disciplinary action. The severity of each violation will be assessed, and appropriate measures will be taken. Violations will be documented and will remain on record for the duration of the student's enrollment in AUSON. After 3 violations the student may be dismissed from the School of Nursing. Some infractions will automatically equal a second-offense violation and some may result in immediate removal from the program.

Violation Examples:
Level 1/First offense:

- Violation of clinical dress code
- Attendance issue
- Disruptive behavior
- Disrespect of peer
- Disrespect of Instructor/Faculty
- Inappropriate use of electronic devices during lab and sim
- Earbuds in during classroom activity
- Academic Integrity Violations
- Inappropriate displays of affection (hand holding, kissing, etc,) during clinical

2nd Level Violations/ 2nd offense:

- Any two level 1 offenses
- Pattern of Attendance Issues
- Disruptive behavior
- Disrespect of peer
- Disrespect of Instructor/Faculty
- Academic Integrity Violations

3rd level Violations/ 3 offense:

- Any three level 1 violations or combination totaling 3 (level 2 and level 1)
- Violating the Chemically Impaired Student Drug and Alcohol Policy
- Violating HIPAA policy
- Falsifying records
- Misappropriation of patient’s property

- Sleeping in clinical
- Exchanging personal information with patient

# Classroom Professionalism Policy

A portion of your assignment grade in each class will be based on your professionalism in the classroom. Domain 9 in the CCNE Baccalaureate Essentials emphasizes Professionalism and Professional Values. The School of Nursing (SON) believes professionalism starts with your behavior in the classroom. Therefore, your professionalism grade will be influenced by how you conduct yourself throughout the semester. This includes but is not limited to, active class participation, showing respect towards instructors and classmates, arriving on time, remaining in class until dismissal time, demonstrating a positive attitude, being supportive of instructor supervision, exhibiting respect to all individuals through appropriate conversation, dress, and behaviors in all interactions. Additionally, the use of cell phones or other electronic devices in ways other than note-taking and class activities will be taken into account determining points.

| Professionalism Grade for NURS | | |
|---|---|---|
| Criteria | Ratings | Pts |
| Class participation | | -10 each time up to 100 pts |
| Respect for Classmates and Professors | | -50 each time up to 100 pts |
| Use of electronics not concerning class activities | | -25 each time up to 100 pts |
| Arriving to Class on time/remaining in class | | -5 each time up to 100 pts |
| Total Points Possible 100 pts | | |

**CODE FOR NURSES**

The 2025 *Code of Ethics for Nurses* reaffirms and expands the ethical foundation of the nursing profession, now with ten provisions that illuminate the essential relationships central to nursing practice. Grounded in nursing's enduring commitment to health and social justice, the Code serves as a timeless yet dynamic foundation to nursing theory, practice, and praxis, expressing the values, virtues, ideals, and obligations that shape and guide the profession.

This revised 2025 edition retains the nine provisions from the 2015 Code, with updates to reflect the evolving needs of nursing practice. A new tenth provision has been added, focusing on global ethical issues, emphasizing nursing's commitment to health and well-being on a global scale complementing the relational structure already established.

1. **Dignity and Respect**
    - The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. **Primary Commitment**
    - A nurse's primary commitment is to the recipient(s) of nursing care, whether an individual, family, group, community, or population.
3. **Trust and Advocacy**
    - The nurse establishes a trusting relationship and advocates for the rights, health, and safety of recipient(s) of nursing care.

4. **Responsibility and Accountability for Practice**
    - Nurses have authority over nursing practice and are responsible and accountable for their practice consistent with their obligations to promote health, prevent illness, and provide optimal care.
5. **Duties to Self**
    - The nurse has moral duties to self as a person of inherent dignity and worth including an expectation of a safe place to work that fosters flourishing, authenticity of self at work, and self-respect through integrity and professional competence.
6. **Ethical Work Environments**
    - Nurses, through individual and collective effort, establish, maintain, and improve the ethical environment of the work setting that affects nursing care and the well-being of nurses.
7. **Knowledge Development and Social Policy**
    - Nurses advance the profession through multiple approaches to knowledge development, professional standards, and the generation of policies for nursing, health, and social concerns.
8. **Collaborative Relationships**
    - Nurses build collaborative relationships and networks with nurses, other healthcare and non-healthcare disciplines, and the public to achieve greater ends.
9. **Commitment to Society and Social Justice**
    - Nurses and their professional organizations work to enact and resource practices, policies, and legislation to promote social justice, eliminate health inequities, and facilitate human flourishing.
10. **A Global Nursing Community**
    - Nursing, through organizations and associations, participates in the global nursing and health community to promote human and environmental health, well-being, and flourishing.

American Nurses Association. (2025). *Code of ethics for nurses with interpretive statements*. https://codeofethics.ana.org/

## SOCIAL MEDIA POLICY

The ANA (September 2011) social media policy is as follows:

1. Nurses (and nursing students) must not transmit or place online individually identifiable patient information.
2. Nurses (and nursing students) must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses (and nursing students) should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses (and nursing students) should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses (and nursing students) should bring the content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses (and nursing students) adhere to clinical affiliate policies.

It is not the purpose of this policy to infringe on a student or faculty member's freedom of expression; however, the SON has ethical, legal (such as HIPAA and FERPA), and regulatory obligations to protect the confidentiality of patients, students, and employees. The following are ANA tips to avoid problems:

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact on a personal nature with patients blurs this boundary.
4. Do not make disparaging remarks about patients/families, peers, faculty/professors, facilities, employers or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

*—Adapted from the American Nurses Association. (2011, September). Principles for social networking and the nurse. Silver Spring. MD: Author*

Social media is defined as mechanisms for communication designed to be disseminated through social interaction, created using highly accessible and scalable publishing techniques. Examples include, but are not limited to, LinkedIn, Wikipedia, Flickr, blogs, podcasts, X, Instagram, Facebook, SnapChat, YouTube, RSS feeds, and personal websites. Clinical affiliate is defined as any public or healthcare setting in which a SON student completes clinical, observation, or laboratory hours assigned by a SON course. Social media activity is defined as any use of social media, regardless of the motive or purpose. This can include, but is not limited to posting content, publishing content, commenting, sharing, liking, or rebroadcasting content.

Violations of this policy by students or faculty will be subject to disciplinary action as outlined in the appropriate handbook.

# CHEMICALLY IMPAIRED STUDENT, DRUG AND ALCOHOL POLICY

Anderson University and the School of Nursing program prohibits the use or possession of alcohol and the use or unlawful possession of drugs during any clinical activity. The School of Nursing's drug and alcohol policy is consistent with Anderson University's Student Handbook. In the university setting, nursing students involved in clinical activities must uphold the standards of the nursing profession to ensure safe, effective, and supportive client care. Because an impaired nursing student may have altered judgment and skills, appropriate management of abuse and addiction is critical for nursing education and practice.

Anderson University and the School of Nursing are committed to providing a quality education for admitted students. In order to protect the integrity of the program and the nursing profession, and to safeguard the welfare of nursing students and patients receiving treatment from students, this policy addresses drug and alcohol testing of nursing students involved in clinical activities based on reasonable suspicion of drug or alcohol use. Due to the requirements of accrediting agencies and clinical nursing partners, students who accept admission are required to complete a drug screen.

Students will be tested for the use of alcohol and drugs upon "reasonable suspicion." Reasonable suspicion is defined to mean that the student's instructor, supervisor, or his/her designee believes that the behavior, speech, body odor, or appearance of a student is indicative of the use of alcohol or drugs. Reasonably suspicious behavior could include conduct that prevents the student from performing the essential functions of the student role or that poses a direct threat to the safety of others.

Other behavior that could lead to reasonable suspicion of drug or alcohol use includes, but is not limited to odor of alcohol or drugs, unsteady or staggering gait, rapid or slurred speech, pinpoint or dilated pupils, unresponsiveness, bloodshot eyes, fine motor tremors, difficulty participating in activities, nausea, vomiting, sweating, erratic behavior, incoherent speech, verbal or physical outbursts, self-report of drug use or alcohol abuse, unsafe behavior, unsatisfactory care for others, and threats to harm self or others.

Students may be asked to submit to random drug screens anytime throughout their program. Positive drug screens may prevent a student from participating in clinical learning experiences and may result in dismissal from the program. Lack of participation could constitute course failure and potential for dismissal from the program. The cost associated with the drug screen will be the sole responsibility of the nursing student. Note: If a CBD product contains THC at sufficient concentration (0.3% or greater) it possibly can cause a positive drug test for marijuana metabolites, which will be considered evidence of possession and use.

Students will sign a **Background Check and Drug Screen Disclosure Statement annually.** Failure to disclose any changes or issues that have occurred since the initial background check and/or previous disclosure may result in dismissal from the School of Nursing.

In settings where application of learning is applied, the faculty requires that students provide safe, effective, and supportive care to those populations to whom they serve. This mandates students to be free of chemical impairment during participation in classroom, laboratory, and/or clinical settings. Since it is critical that the client and clinical sites are protected from unsafe, impaired practitioners, the faculty must be diligent in observing and documenting impaired student behavior. The SON recognizes chemical dependency (alcoholism and/or drug addiction) as a treatable condition and takes a supportive stance in addressing students while maintaining a safe environment:

- A student will not possess, use, transmit, sell, conceal, or be under the influence of any impairing substance.
- Possession, use, or sale of an unauthorized motor or judgment impairing substance on the premises of Anderson University or any affiliated agencies by a student is prohibited and may result in dismissal from the program.

- Chemical impairment includes any student in the academic or clinical setting under the influence of any single or combination of impairing substances including, but not limited to, illegal drugs, alcohol, over-the-counter, inhalants, prescribed medications that may impair task performance when misused episodically or chronically creating psychological and/or physical symptoms.

| In a clinical setting: | Any other University activity: |
|---|---|
| 1. Faculty will remove the student from the clinical activity.<br>2. Confront the student in a private setting and in the presence of a witness, if possible.<br>3. Discuss the suspicious behavior with the student and allow the student to explain.<br>4. Notify the Chair or Dean of the School of Nursing.<br>5. The chair or dean will notify the Dean of Student Life or the Director of Residence Life and Student Conduct.<br>6. If the clinical site has an emergency department the student will be sent immediately to the ED for drug testing. Any costs associated will be the responsibility of the student. | 1. The faculty will meet with the student or refer to the SON chair or Dean to meet with the student.<br>2. Meet with the student in a private setting and in the presence of a witness, if possible.<br>3. Discuss the suspicious behavior with the student and allow the student to explain.<br>4. Notify the Dean and/or Chair of the School of Nursing if applicable.<br>5. The dean or chair of SON will notify the Dean of Student Life or the Director of Residence Life and Student Conduct. |

In cases where drug use is suspected, Anderson University reserves the right to require students to undergo a drug screen to test for the presence of illegal substances. Any costs associated with the drug screen is the responsibility of the student. The decision to test will be made by the Dean of Student Life or Director of Residence Life and Student Conduct. A positive drug screen will serve as evidence of possession and use. Test results indicating a dilute specimen will be viewed as evidence of possession and use. Students will have 24 hours to complete a drug screen after being notified that a drug screen is required. Not completing the drug screen within the 24 hour timeframe will be considered a refusal and considered a positive result. Students will be informed that refusal to submit to a urine screen will be evidence of guilt and make the student subject to disciplinary consequences, including dismissal from the university..

In cases where possession or use of alcohol is suspected, the director of Security Services or designated university staff may use an alco-test to determine alcohol use. A positive alco-test will serve as evidence of possession and consumption. Students will be informed that refusal to take an alco-test when use is suspected will evidence of guilt.

Any student in violation of conduct with the university must self-disclose to the Chair of the School of Nursing. Evidence of possession and use or any action associated with a positive test result may result in dismissal from the School of Nursing.

# ATTENDANCE

Each student is responsible for their attendance to class, lab, sim, or learning experience. If a student is absent for two or more learning experiences he/she may be required to meet with the course coordinator. Absences include arriving after attendance is taken (tardy), leaving early, or non-attendance of an assigned learning experience. Total course hours are included in the course syllabus and the Anderson University Undergraduate Catalog.

Class attendance, by both the instructor and the student, is fundamental to the teaching/learning process and any absence from a class results in a loss of learning for the student and learning community. The AU faculty adopted the class attendance policy with this rationale in mind. That is, **students may be directly penalized for absences only after the number exceeds the number of class meeting hours/sessions per week.** Any absence results in a loss of learning for the student. It is the student's obligation to personally notify the individual course instructor about any absence, in advance if possible. When a student misses classes, the course instructor determines whether or not to allow the completion of missed work and how much work will be evaluated. This policy recognizes that the loss of participatory learning and class involvement due to class absences by students will differ depending on the particular course and instructor. For this reason, the individual instructor is responsible for setting the specific course policy for each class, regarding make-up work, sanctions for missed classes (after the student misses more than the number of class meeting hours per week), missed course examinations, laboratory sessions, field experience, class presentations, and special class events.
**Whatever specific policy a given instructor adopts for a class should be clearly documented in the course syllabus and reviewed with students at the beginning of the semester.**

**Lab and Simulation are considered clinical hours. Attendance is mandatory and must be made up if missed. A pattern of consistently late behaviors may contribute to an unsatisfactory clinical/lab/simulation grade, which means a failing grade in the course.**

*Adopted by the faculty and reviewed and edited-April 20, 2015, Anderson University Faculty Handbook, 4.22.1*

## TECHNICAL STANDARDS FOR ADMISSION AND GRADUATION

The curricula of the Anderson School of Nursing require that students engage in diverse and complex experiences directed at achieving competencies, knowledge, skills, attributes and professional values. Applicants for the School of Nursing, and enrolled degree-seeking students must possess certain abilities and skills deemed essential for meeting the professional standards of accrediting agencies.

Admission to the Anderson University School of Nursing is open to all qualified individuals in accordance with the 1973 Vocational Rehabilitation Act and the Americans with Disabilities Act. The Anderson University School of Nursing is committed to accommodating the needs of students with documented disabilities and will do so to the extent possible without compromising the essential components of the curriculum.

Candidates for nursing degrees or certificates must be able to meet the minimum standards (listed below) with or without reasonable accommodation (aacnnursing.org/Education-Resources/ToolKits/Accommodating-Students-with-Disabilities):

- **Observation** — Students must have sufficient capacity to make accurate visual observations and interpret them in the context of laboratory studies, medication administration, and patient care activities. A student must be able to observe a patient accurately at a distance and close at hand. Students must have a sufficient level of hearing to determine both high and low levels of frequency and amplitude (monitor, assess, and respond to health needs).
- **Communication** — Students must communicate effectively both verbally and non-verbally to elicit information and to translate that information to others. A student must be able to read and write English effectively in order to fulfill academic requirements and to maintain accurate clinical records on patient care.
- **Motor** — Students are required to possess motor skills sufficient to elicit information independently from patients by palpation, auscultation, percussion, and other manually-based diagnostic procedures. Students should be able to conduct laboratory and diagnostic tests and carry out physical assessments. Students must possess the motor skills required for their specialty's scope of practice. The student must also be able to coordinate fine and gross muscular movements to treat patients in emergency situations. Emergency situations include any circumstance requiring immediate remedy.
- **Intellectual-Conceptual, Integrative, and Quantitative Abilities** — The student must be able to develop and refine problem-solving skills that are critical to practice as a nurse. The student must have the ability to measure, calculate, reason, analyze, and synthesize objective and subjective data and to make decisions that reflect consistent and sound clinical judgment.

  Students must possess good judgment in patient assessment, and the ability to incorporate new information, comprehend three-dimensional relationships and retain and recall pertinent information in a timely fashion. This includes decision-making in order to maintain the safety and security of patients and to behave appropriately with patients, staff, students, supervisors, and faculty.
- **Behavioral and Social Attributes** — Students must possess the physical and emotional health required for the application of his/her intellectual abilities and the employment of sound judgment in an appropriate and prompt manner. Students must be able to function effectively under physically taxing workloads and in times of physical and mental stress. Students must display compassion, sensitivity, and concern for others, and maintain professional integrity at all times. Students must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism and learn to function cooperatively and efficiently in the face of uncertainties inherent in clinical practice. This includes appropriately interacting with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.
- **Ability to Manage Stressful Situations** — Students must be able to adapt to and function effectively in stressful situations in the classroom and clinical settings (including emergency situations). Students will encounter multiple stressors while in the nursing program; these stressors may be related to (but are not limited to) one's personal life, patient care, faculty, peers, family, and/or program-related.

# Section VII: Liberal Arts Component

Anderson University and the School of Nursing believe in the importance of a broad base of learning. The liberal arts program was developed to ensure that each Anderson University student receives a liberal arts education along with her or her major area of study. Students must complete course work in these liberal arts content areas:

- **Foundational Skills** — The First-Year Experience, Civil Discourse and Critical Reasoning, Written Communication, Speaking and Listening, Quantitative Reasoning, Biblical Literacy, and Personal Wellness.
- **Ways of Knowing** — Christian Ways of Knowing, Scientific Ways of Knowing, Civic Ways of Knowing, Aesthetic Ways of Knowing, Social and Behavioral Ways of Knowing, Global and Intercultural Ways of Knowing, and Experiential Ways of Knowing.
- Also included in the liberal arts requirements are speaking intensive and advanced writing competency courses.

# Section VIII: Graduation and Degree Requirements

1. Satisfactory completion of 125 semester hours including 60 nursing credits and at least 65 Liberal Arts, prerequisite support, and elective course credits.
2. Achievement of a minimum 2.00 grade point average.
3. Chapel-convocation attendance in accordance with university requirements.

The student may not take the NCLEX examination until the BSN degree requirements are met and a Certificate of Completion is earned.

### APPLICATION FOR GRADUATION

The student must complete an application for graduation form, obtain his or her advisor's signature, and file the form with the Office of the Registrar. The student will be notified by letter/email if requirements are missing for graduation completion.

In the event a student has not completed requirements for graduation, the following rules apply:

August graduates may participate in the May commencement ceremony. Their picture will be included on the composite for that academic year.

If the student must repeat a course or complete requirements later than August, the student will be included in the following academic year commencement ceremony and composite picture.

### STUDENT RETENTION

The faculty of the School of Nursing is committed to student success. Each student is assigned to a faculty advisor who counsels the student before entering the nursing program and each semester throughout the program. If a student develops academic problems or difficulty, individual faculty members will counsel the student in order to improve performance. Students may also be referred to the learning center for evaluation and study skills.

Students are evaluated frequently throughout the nursing program and given feedback on their performance. Students showing "below expectations" or excessive "needs to improve" behaviors and/or receiving a letter grade of C minus or lower at midterm will be counseled by the course instructor/course coordinator. Additionally, any student may request a conference with any faculty member at any time. A summary of clinical evaluation will occur at the end of each nursing course.

During any type of academic or behavioral counseling meeting, an additional faculty member may be asked to be present in order to protect the integrity of the counseling process.

# DISMISSAL/WITHDRAWAL

When a student's conduct or health endangers the well-being of others or makes it inadvisable to remain in the nursing program, the faculty reserves the right to dismiss them from the course or program. Students may choose to withdraw from the program at any time. Students who wish to withdraw from a course must follow the university policy outlined in the AU Undergraduate Catalog. No refund of the malpractice or ATI fee will be given.

# GRADING POLICY

A semester credit hour is equivalent to 15 hours of classroom contact plus appropriate outside preparation, 45 hours of clinical experience, or a combination of the foregoing. A "credit point" is a measure of the quality of work performed. Credit points are figured only on work completed at Anderson University; therefore, transfer students must earn twice as many credit points as minimum hours remaining for the degree. Grade reports are issued by the registrar's office in the following terms:

A, A- = Achievement of superior quality in course objectives.

B+, B, B- = Achievement of excellent quality in course objectives.

C+, C, C- = Achievement of average or somewhat above average quality in course objectives.

D+, D = Basically unsatisfactory achievement but of sufficient quality to meet minimum requirements.

F = Clearly unsatisfactory or below minimal achievement of course objectives.

I = Incomplete. Allow completion of delayed work by written agreement between instructor and student. Must be filled with the registrar before grades are processed; becomes "F" at the end of the fifth week of the following semester if not completed.

IP = In progress.

NR = Faculty did not record a grade.

W = Withdraw.

WF = Withdrawn failing.

S = Work completed at "C-" level or above.

U = Work completed at "D+" level or below.

CR = Work completed at a satisfactory level.

NC = Work completed at an unsatisfactory level.

Credit points per semester hour:

A = 4.00

A- = 3.67

B+ = 3.33

B = 3.00

B- = 2.67

C+ = 2.33

C = 2.00

C- = 1.67

D+ = 1.33

D = 1.00

No credit points are given for courses bearing grades of CR, NC, S, U, F, I, W, or WF. The credit point index is the ratio of the number of credit points earned to the number of hours attempted (excluding CR, NC, S, U, and W).

The following standard grading scale will be used in all levels of the nursing program:

A = 93-100%

A- = 90-92.99%

B+ = 87-89.99%

B = 84-86.99%

B- = 81-83.99%

C+ = 78-80.99%

C = 75-77.99%

C- = 70-74.99%

D+ = 65-69.99%

D = 60-64.99%

F = 59.99% or below

# PROGRAM DISMISSAL POLICY

Dismissal from the Anderson University School of Nursing will result from the following:

- More than one failure in clinical nursing (NURS) courses (NURS 2231, 2241, 2270, 3351, 3361, 4451, 4521, 4950, 4960, 4970).
- A pattern of “below expectations” and/or “needs improvement” in the clinical setting.
- Failure to exhibit professional behavior.

A student has the right to appeal a failing grade on an assignment or an entire course.

# INFORMAL AND FORMAL COMPLAINT POLICY AND PROCEDURE

In light of our goal to enable every member of the university to become stronger in mind, body, and spirit, to experience what it means to love God and neighbor, and to adopt a Christ-like servant way of life, the Anderson University School of Nursing Informal and Formal Complaint Policy and Procedure is designed to create an orderly, just, and effective means of dealing with complaints in a reasonable and timely manner (anderson.edu/provost/documents.html). Students may submit grievances within 10 business days of the occurrence. However, this policy does not apply to cases of sexual harassment, discrimination, grade appeals, or student life issues, which should be addressed according to the procedures outlined in the Anderson University Student Handbook or below (https://anderson.edu/student-life/handbook/). A formal complaint is defined as a complaint that is not able to be resolved by the informal process. Any issue that cannot be resolved informally should be submitted for review through the Formal Complaint Process outlined below.

**Informal Complaint**

It is expected that the majority of complaints should be settled through the informal complaint process. If the student does not feel comfortable bringing the complaint to the involved faculty member, it is recommended they meet with their advisor and schedule a meeting, together with the involved faculty member. The advisor can act as a third-party member, however, they will not participate in the outcome narrative (Appendix B) or the required signature. They may offer advice and support

to both the student and faculty member.

### Informal Complaint Process

1. The student (and advisor, if necessary) should meet with the involved faculty member to reach an agreement or understanding to resolve the issue.
2. If the student and faculty member cannot reach an agreement or understanding, the student and faculty will draft an outcome narrative (Appendix B) and the student will initiate the formal complaint process within 10 days of the occurrence.

### Formal Complaint

As part of professional development, students are encouraged to learn conflict resolution and present their complaints in a professional manner. The student filing the grievance is responsible for documentation of the date, time, and description of the complaint in the formal process of the procedure (see Appendix A).

### Formal Complaint Process

Any student wishing to file a formal complaint will be responsible for documenting the date, time, and description of the complaint as noted on the Informal and Formal Complaint Policy and Procedure Form (see Appendix A). The documentation of the topic of the complaint will include a description of the acts or conditions that were offensive, an explanation of why the act was unfair or in violation of written policy, and completion of an Outcome Narrative form (Appendix B), including required signatures from the student and the involved faculty. The steps listed below must be followed or the appeal will be rendered invalid:

1. The student will make an appointment with the course coordinator to discuss the complaint within five business days of meeting with the involved faculty member. At least two business days prior to the meeting, the student needs to present the documentation to the course coordinator for review. If the course coordinator is the same as the involved faculty member, move to the next step in the chain of command. Documents need to be completed prior to moving the issue to the next step in the process.
2. If the complaint cannot be resolved with the course coordinator, the student can make an appointment with the Chair of the School of Nursing within five business days of meeting with the involved faculty member and/or the course coordinator. At least two business days prior to the meeting, the student needs to present the documentation, Outcome Narrative, and required signatures to the chair for review. Documents need to be completed prior to moving the issue to the next step in the process.
3. If the complaint cannot be resolved with the chair, the student can make an appointment with the Dean of the College of Professional Studies within five business days of meeting with the Chair. At least two business days prior to the meeting with the dean, the student needs to present the documentation, Outcome Narrative, and required signatures to the dean for review. Documents need to be completed prior to moving the issue to the next step in the process.
4. If the complaint cannot be resolved with the Dean of the College of Professional Studies the student can send their final appeal to the appropriate person or committee. Any formal complaint escalated to the University must be done within 60 days of the event that triggered the complaint by submitting the form linked in the University's Student Handbook **(https://anderson.edu/student-life/handbook/)** to the assistant to the Provost who will determine who addresses and responds to the complaint.

# CRITERIA FOR GRADE APPEAL

- An obvious error in the calculation of the grade.
- The assignment of a grade to a particular student by application of more exacting or demanding standards than were applied to other students in the course.
- The assignment of a grade to a particular student on some basis other than performance in the course.

- The assignment of a grade by a substantial departure from the instructor's previously announced standards.

### PROCEDURE FOR APPEALING A GRADE

A student wishing to appeal a grade should do the following within 5 days of the assigned grade:

1. Discuss the course work and grade earned with the instructor responsible for the content.
2. If a resolution is not achieved with the instructor, the student may appeal to the course coordinator.
3. If a resolution is not achieved with the course coordinator, then the student needs to initiate a written appeal to the Chair of the School of Nursing within 15 days of initial communication with the course coordinator. The written appeal must clearly state the student's concern, indicate the date or dates on which the instructor/faculty/Course Coordinator was consulted, and give a brief statement as to his/her interpretation of the outcome of this discussion(s).
4. If a resolution is not achieved with the Chair of the School of Nursing, then the written appeal goes to the Dean of the College of Professional Studies, who may bring the matter to the Faculty Governing Committee.
5. If a resolution is not achieved with the Dean or Faculty Governing Committee, then the student should follow the procedure for grade appeals in the Anderson University Student Handbook.

# INCOMPLETE

The grade of "I" (Incomplete) is given only by written agreement of the instructor and student. If given, it is the student's responsibility to contact the instructor and submit work or take examinations appropriate to the removal of the Incomplete. The change of an Incomplete to a regular letter grade must be accomplished by the instructor, on a form available in the Registrar's Office, not later than the end of the fifth week of the first full semester following the awarding of the Incomplete. Otherwise, the grade of Incomplete automatically becomes a grade of "F." If meeting this deadline is impossible because of circumstances beyond the control of the instructor or the student, the instructor should contact the respective school chair and dean to request an extension.

# READMISSION

It is recommended, once the major is begun, that a student remains in the program until graduation. Any student who has exited the program for any reason must petition the faculty for readmission.The applicant must submit an Application for Admission/Transfer/Re-entry to the chair of the School of Nursing at least 45 days prior to the start of the semester.The applicant is also reminded that a cumulative GPA of 2.5 is required for readmission. Readmission may be denied based on cohort and/or clinical availability in addition to not meeting readmission criteria. All prerequisites for the major and requirements for the university must also be satisfied for readmission.

Students who have been absent for more than one semester from their last clinical experience must reapply to the School of Nursing and meet the criteria for readmission to the nursing major from the most recent Bachelor of Science in Nursing Student Nurse Handbook. All students requesting readmission must make the requests in writing to the chair of the School of Nursing at least 45 days prior to the start of the semester. In addition to returning, the student must re-demonstrate the successful completion of clinical skills at the appropriate skill level prior to attending clinical.

A remediation contract will be developed by faculty members with input from the student within 30 business days of the request for readmission. The remediation contract will be designed on an individual basis, and full execution of the contract will be the responsibility of the student. Remediation may include, but is not limited to, ATI assessments, simulation, and appropriate skill level check-off. The student will be enrolled in NURS 3600: Nursing Remediation.

After the remediation contract is executed, the student is eligible for review to determine readmission status. The petitioner will receive a disposition of the petition within 30 business days of the full faculty governance meeting.

*—Voted on and approved by AUSON Faculty Governance Committee, December 2024*

# Section IX: Simulation Lab Policy and Procedures

## SIMULATION

Simulation is utilized by the Anderson University School of Nursing in the development of critical and creative thinking skills and fostering greater understanding and expertise in all pervasive and progressive strands of the program. Simulation is used as an adjunct to didactic and clinical learning, and has as its goal greater mastery of the nursing process in the delivery of care in accordance with Ecological Model of Health.

The simulation will be delivered in a variety of methods that will meet the essential definition of the simulation stated above. These delivery methods may include (but are not limited to) high-fidelity simulation, mid-fidelity simulation, low-fidelity simulation, case studies, video simulations, community health simulation activities, live actors, and guest subjects.

The percentage of simulations will be based on current evidence-based research (within five years) identifying levels of simulation for optimal learning. Simulation percentage will be in keeping with recommendations by accrediting agencies and the Indiana State Board of Nursing when directed.

Students and alumni are given yearly surveys on the AUSON covering a variety of topics. This survey includes a section on simulation within their coursework and allows the opportunity for students/alumni to express their perception of the clarity, effectiveness, and comfort of the simulation environment. In addition, suggestions for future simulations are elicited. This information is forwarded to the course coordinators for the purposes of quality improvement.

Anderson University School of Nursing strives to provide our nursing students with a diverse, dynamic, and an outstanding educational environment. The Nursing Simulation Lab provides a safe environment to improve patient safety and quality of care through simulated education, demonstration, and the reinforcement of exceptional performance and readiness.

### Mission Statement:

The mission of the Nursing Simulation Lab is to provide a safe, interactive approach where participants can integrate didactic content, skills, critical thinking, and judgment in diverse interprofessional environments.

### Vision:

The Nursing Simulation Lab aims to provide a safe simulated environment for learning, where quality patient care is emphasized through the utilization of evidence-based clinical decision-making and evaluation methods.

### Values:

The Nursing Simulation Lab values are consistent with the Anderson University philosophy of integrity, excellence, servant leadership, responsibility, and generosity, including the integration of respect and compassion throughout all learning experiences.

### Goals:

The Nursing Simulation Lab's goals for participants include improved critical thinking, increased clinical judgment, increased confidence, improved competence, marked critical analysis of performance, and decreased stress in an active-learning environment:

1. Provide a safe environment for students to learn and make mistakes.
2. Promote and develop critical thinking skills to increase clinical competence.
3. Increase self-confidence and self-efficacy as students learn, demonstrate, and participate in the foundational skills of nursing.
4. Encourage self-reflection of performance and areas of improvement.
5. Enhance communication between team members as reflected in professional practice.
6. Promote and develop interprofessional collaboration throughout multiple disciplines.

## STUDENT NURSING SIMULATION LAB GUIDELINES AGREEMENT

### Purpose:

Anderson University School of Nursing strives to provide our nursing students with a diverse, dynamic, and an outstanding educational environment. This Nursing Simulation Lab provides a safe environment to improve patient safety and quality of care through simulated education, demonstration, and the reinforcement of exceptional performance and readiness.

### Goals:

1. Provide a safe environment for students to learn and make mistakes.
2. Promote and develop critical thinking skills to increase clinical competence.
3. Increase self-confidence and self-efficacy as students learn, demonstrate, and participate in the foundational skills of nursing.
4. Encourage self-reflection of performance and areas of improvement.
5. Enhance communication between team members as reflected in professional practice.

### Guidelines:

1. Use professional behavior when in the Nursing Simulation Lab. This includes, but may not be limited to, the following:
    - What happens in the lab stays in the lab.
    - This is a safe environment; students are allowed to make mistakes in the lab in order for continued learning to take place. This information should not be discussed outside of the lab.
    - Everyone should be able to experience the lab in the same manner. Sharing with students who attend at a later time gives them an unfair advantage.
2. Follow the dress code as outlined for the clinical. This is part of your clinical experience.
3. Phones are NOT to be used during lab time. Cellular phones and electronic devices should be set to the “off” or “silent” position.
4. Follow Standard Precautions. Sharps and syringes are to be disposed of in appropriate sharps containers. Anyone encountering a needle-stick injury MUST complete a Student Occurrence Report.
5. Leave the Simulation Lab in order. Please clean up work areas and put equipment back when done using it.

**Hours of Operation:**
The Nursing Simulation Lab is located on the second floor of Hartung Hall at the Anderson University School of Nursing, 1100 E. 5th St., Anderson, Indiana 46012. Normal business hours are from 8 a.m. to 4 p.m. Monday through Friday throughout the school calendar year. After hours and weekend events must be scheduled in advance and approved by the simulation coordinator. The Nursing Simulation Lab can be accessed by nursing students during business and open-lab hours and does not require special permission for admittance.

### CONTACT INFORMATION

**Director:** Savannah Laker, MSN, RN

sslaker@anderson.edu

Hartung Hall

### POLICY AND PROCEDURE REVIEW

- The School of Nursing dean, chair, simulation coordinator, and Faculty Governance Committee are to review the Policy and Procedure Manual prior to use in the Nursing Simulation Lab.
- Students are oriented by the coordinator and faculty to applicable policies before their first experiences in the Nursing Simulation Lab and at subsequent events as needed.

### SIMULATION EVENT BEST PRACTICE

The simulation coordinator will assist faculty members in implementing and evaluating simulation experiences for their students according to the International Nursing Association for Clinical Simulation and Learning (INACSL) Standards of Best Practice: Simulation (inacsl.org/i4a/pages/index.cfm?pageID=3407).

- Simulation Design
- Outcomes and Objectives
- Facilitation
- Debriefing
- Participant Evaluation
- Professional Integrity
- Simulation-Enhanced Interprofessional Education (Sim-IPE)
- Simulation Glossary

The simulation coordinator will assist all faculty and instructors in developing all simulation scenarios and will oversee all simulation experiences in the Nursing Simulation Lab.

## DEFINITIONS

**Simulation:** An educational strategy in which a particular set of conditions are created or replicated to resemble authentic situations that are possible in real life. Simulation can incorporate one or more modalities to promote, improve, or validate a participant's performance (INACSL Standards Committee, 2016).

**High-Fidelity Simulation:** In a healthcare simulation, high-fidelity refers to simulation experiences that are extremely realistic and provide a high level or interactivity and realism for the learner. This includes a human manikin, a task trainer, or virtual reality (Lopreiato et al., 2016).

**Low-Fidelity Simulation:** Not needing to be controlled or programmed externally for the learner to participate; examples include case-studies, role-playing, or task trainers used to support participants in learning a clinical situation or practice (Lopreiato et al., 2016).

**Objectives:** Statements of specific measurable results that participants are expected to achieve during a simulation; incorporate knowledge, attitude, and skills that match the learners' level of knowledge and experience (INACSL Standards Committee, 2016).

**Assessment:** The process that provides information about or feedback to individual participants, groups, or programs. The findings of the assessment are used to improve future outcomes (INACSL Standards Committee, 2016).

**Participant:** One who engages in a simulation-based activity for the purpose of gaining or demonstrating mastery of knowledge, skills, and attitude of professional practice (INACSL Standards Committee, 2016).

**Evaluation:** A term for appraising data gathered through one or more measurements that involves the rendering of judgment that may include strengths and weaknesses, quality and productivity, and/or program processes (INACSL Standards Committee, 2016).

**Debriefing:** A reflective process immediately following the simulation that is led by a trained facilitator/debriefer using an evidence based debriefing model. The participants' reflective thinking is encouraged, and feedback is provided regarding the participants' performance while various aspects of the completed simulation are discussed (INACSL Standards Committee, 2016).

**Prebriefing:** An information and orientation session held prior to the start of a simulation activity in which instructions or preparatory information is given to the participants. The purpose of the briefing is to set the stage for a scenario, and assist participants in achieving scenario objectives (Lopreiato et al., 2016).

**Facilitator/Debriefer:** Person who leads participants through the debriefing and is knowledgeable and skilled in performing appropriate, structured, and psychologically safe debriefing sessions (Lopreiato et al., 2016).

**Skills Lab:** An instructional strategy that allows learners to progress through technical skills. The skills lab incorporates knowledge, skill, and ability to accomplish a specific medical task; for example, performing sterile dressing changes or inserting a Foley catheter. The subject matter is customized and generally in smaller units to master the subject matter (Lopreiato et al., 2016).

**Competence:** Demonstrates the ability to perform a specific role or skill, based on standardized criteria. Individuals having the state or quality of being adequately or well qualified to do the job properly. The criteria may include a set of defined behaviors that guide the identification, development, and evaluation of one's ability to perform a specific role (INACSL Standards Committee, 2016).

**Serious Game:** A game designed for a primary purpose other than pure entertainment. Serious games are simulations of real-world events or processes designed for the purpose of solving a problem (Lopreiato et al., 2016). Serious games are designed experiences that encourage the participant to learn by acting and experiencing in a well-ordered, problem-solving space. During games, participants learn by thinking and reflecting on their actions both while they are acting in terms of problem-solving and afterward. Their experiential learning is enhanced by this reflection. In a game, learners receive feedback on their performance and can promptly be made aware of mistakes or omissions during the exercise. Short-term patient consequences, such as hypoxia, are evident if the learner neglects to provide oxygen, just as they are in the real world. Games can take this a step further, to the point of providing rapid feedback that isn't available from the real world. The ability to compress time within a game provides a unique opportunity to teach potential long-term consequences that are often only theoretical in the real world (Stokowski, 2013).

**Fidelity:** The degree to which the simulation replicates the real event and/or workplace; this includes physical, psychological, and environmental elements (Lopreiato et al., 2016).

**Fiction Contract:** A concept that implies that engagement in simulation is a contract between the instructor and the learner; each has to do his or her part to make the simulation worthwhile (Lopreiato et al., 2016).

**Feedback:** Information given of dialog between participants, facilitator, simulator, or peer with the intention of improving the understanding of concepts or aspects of performance (INACSL Standards Committee, 2016). 1 INACSL Standards Committee (2016).

INACSL standards of best practice: Simulation facilitation. Clinical Simulation in Nursing, (12)S, S16-S20. http://dx.doi.org/10.1016/j. ecns.2016.09.007. Lopreiato, J.O. (Ed.), Downing, D., Gammon, W., Lioce, L., Sittner, B., Slot, V., Spain, A. E. (Associated Eds.), and the Terminology Concepts Working Group. (2016). Healthcare Simulation Dictionary. Retrieved from http://www.ssih.org/dictionary. 3Stokowski, L.A. (2013). A digital revolution: Games, simulation, and virtual reality in nursing education. Nursing Education. Medscape. *Retrieved from ttp://www.medscape.com/viewarticle/780819_3.*

| | | |
|---|---|---|
| Participant (Student) | Simulator/Educator | Faculty/Staff |
| Come prepared by completing any pre-work assigned. | Review all course material prior to the session. | Ensure the proper set-up of the session, including the correct amount of supplies for anticipated learners. |
| Be on time. | Be on time. | Be on time. |
| Be willing to suspend your disbelief and treat the simulation as if it were a real-life encounter. | Inspect the set-up of the activity to assure that it aligns with the stated objectives and outcomes. | Respond appropriately and within a timely manner to equipment malfunctions. |
| Be fully engaged in both the simulation and the debriefing/feedback session. | Be fully engaged in both the simulation and the debriefing/feedback session. | Engage in the session |
| Be respectful of all participants, staff, and faculty. | Be respectful of all participants, staff and faculty | Be respectful of all participants, staff and faculty. |
| Adhere to the dress code as stated in the Nursing Handbook unless otherwise notified. | Wear proper professional attire per university dress code. | Wear proper professional attire per university dress code. |
| Maintain confidentiality regarding the session. | Maintain confidentiality regarding the session. | Maintain confidentiality regarding the session. |
| Complete evaluation at the end of the session. | Review evaluations at the end of the session. | Review evaluations at the end of the session. |

**Notification:**

The simulation coordinator should be informed immediately if support faculty/staff are not present for scheduled simulation hours, reporting an absence, or delayed. The absence of students from a simulation needs to be reported by the end of the day to the simulation coordinator and lead faculty member.

A*dapted from: Loyola University Chicago. (2015). Center for simulation education: Policy and procedure manual. Retrieved from: hsd.luc.edu/media/healthsciencesdivision/centerforsimulationeducation /documents/policyprocedure2015.pdf.*

## POLICY: CONFIDENTIALITY

**Purpose:** To preserve the realism of the scenarios used in the Simulation Lab and to provide an equitable learning experience and psychological safety for each student.

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Policy:** In order to preserve the realism of the scenarios used in the AU Simulation Lab and to provide an equitable learning experience for all students, all persons using the AU Simulation Lab will be required to sign a confidentiality agreement (See attached copy of confidentiality statement, Appendix C). Because simulations may be recorded, mannequin accessibility will be treated like a real patient. Students are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws requiring confidentiality. Students agree to report any violations to their faculty or an instructor. The instructor is then required to notify the simulation coordinator immediately of that breach of confidentiality (Duke University School of Nursing, 2016; Loyola Center for Simulation Education, 2015; Missouri Southern State University, Washburn University Institute of Technology, 2016).

*—Duke University School of Nursing. (2016). Center for nursing discovery: Policy and procedure manual.*

*Retrieved from: from: nursing.duke.edu/sites/default/files/centers/cnd_policy_and_ procedure_6.20.16_jmd.pdf*

*. —Loyola University Chicago. (2015). Center for simulation education: Policy and procedure manual. Retrieved from: hsd.luc.edu/media/healthsciencesdivision/centerforsimulationeducation/*

*—Missouri Southern State University. (n.d.). Policy and procedures manual: Simulation center for interdisciplinary clinical education. Retrieved from: mssu.edu/academics/health-sciences/ simulation-center/pdfs/LAB%20POLICY%20%20PROCEDURE%20Procedure%20*

*—Washburn University Institute of Technology. (2016). Regional simulation center's policy procedure manual.*

*Retrieved from: washburntech.edu/career-programs/health-care/sim%20lab%20rsc/ Policy%20and%20Procedure%20Manual.pdf.*

## POLICY: PSYCHOLOGICAL SAFETY OF STUDENTS

**Purpose:** The purpose of this policy is to provide a systematic approach to creating and sustaining healthy conditions for the psychological well-being, preventing psychological injury, and identifying and positively managing the psychological injury of our students (Health and Safety Executive, 2012).

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Policy:** The emotional well-being of students is a principal concern for the Nursing Simulation Lab. Confidentiality policies are in place to assure students of their privacy, and orientation to the simulation environment and equipment are provided at the beginning of each course/class to alleviate the anxiety of participants in simulation-based education (INACSL Standards Committee, 2016). This policy applies to everyone participating in the Nursing Simulation Lab and AUSON.

**Policy Detail:** Promotion of participant well-being.

- Empathy (trustworthy, even-handed, understanding, proactive).
- Clarity (clear goals, micro, and macro objectives, delegations).
- Engagement (decision-making, goal-alignment, teamwork).
- Learning (feedback, coaching, professional development).

- Course faculty and simulation lab coordinator information is readily available for all participants who might have concerns (Health and Safety Executive, 2012) [1].

Identification of, and response to, participant disengagement:

- Withdrawal behaviors.
- Discretionary absenteeism.
- Lateness.
- Cynicism.
- Counterproductive behaviors.
- Productivity (misuse of time and resources, unsafe behavior, poor attendance, presentism, alcohol/drug use).
- Property (theft, destruction, misuse of information).
- Political (gossip, favoritism, blaming behaviors).
- Interpersonal (inactivity, harassment, bullying, and violence) (Health and Safety Executive, 2012) [1].

**Evaluation:** Evaluations routinely include questions specific to the debriefing process as a means of quality assurance and allow the simulation coordinator to ensure debriefings are perceived as non-threatening, objective, and protective of the confidentiality of all participants (INACSL Standards Committee, 2016) [2].

[1]Health and Safety Executive –UK-b. (2012). An example of a stress policy. Retrieved from: hse.gov.uk/stress/pdfs/examplepolicy.pdf.

[2]INACSL Standards Committee (2016). INACSL standards of best practice: Simulation facilitation. Clinical Simulation in Nursing, (12)S, S16-S20. *http://dx.doi.org/10.1016/j.ecns.2016.09.007.*

**POLICY: LOANING OF EQUIPMENT**

**Purpose:** The purpose of this Nursing Simulation Lab policy is to designate appropriate expectations and responsibility of individuals borrowing equipment for activities to support the educational programs of the university (Lopreiato et al., Downing, Gammon, Lioce, Sittner, Slot, Spain, 2016).

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Policy:** The Nursing Simulation Lab offers select equipment that can be borrowed by AU faculty, staff, and students. Equipment is available on a first-come, first-serve basis and must be properly signed out. It is the expectation that all equipment is functioning properly upon return. All equipment must be returned within 48 hours unless otherwise approved. Individuals who check out equipment are not allowed to give the equipment to others.

## Procedure:

Borrowers must:

1. Complete the equipment sign-out log.
2. Pick up and drop off of equipment during normal business hours unless other arrangements are made in advance.
3. Agree to abide by the policy and procedures for use of the equipment.

[1]Lopreiato, J.O. (Ed.), Downing, D., Gammon, W., Lioce, L., Sittner, B., Slot, V., Spain, A. E. (Associated Eds.), and the Terminology and Concepts Working Group. (2016). Healthcare Simulation Dictionary. Retrieved from: http://www.ssih.org/dictionary.

## POLICY: ASSESSMENT AND QUALITY IMPROVEMENT

**Purpose:** The AU Simulation Lab is committed to providing high-quality education and assessment sessions.

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Policy:** In an effort to maintain standardization and overall quality, a quality improvement process is in place. This process requires the evaluation of all sessions held in the AU Nursing Simulation Lab. Resources for evaluation are located in the School of Nursing office.

**Procedure:**

1. Each participant evaluates the simulation program at the end of their course of study as part of the exit surveys. Questions on those surveys assess the overall simulation program and its effectiveness in promoting students' achievement of course and program outcomes, development of skills, and the ability to relate classroom learning to practice.
2. Students, course faculty, facilitators, and appropriate AU staff evaluate the simulation experiences at the end of each event and/or semester; these surveys address whether or not the simulations enabled students to meet objectives, prioritize interventions, develop skills, and if they were valuable, high-quality learning experiences.
3. Data from each of these surveys are reviewed collaboratively by facilitators, course faculty, and appropriate AU staff is used for revising the scenario or teaching modality as needed.
4. The evaluation of student learning and performance during simulation experiences and skills training is done to provide feedback to students for further learning (formative) and verify their achievement of skills and competencies (summative).

*—Duke University School of Nursing. (2016). Center for nursing discovery: Policy and procedure manual. Retrieved from: nursing.duke.edu/sites/default/files/centers/cnd_policy_and_ procedure_6.20.16_jmd.pdf.*

**POLICY: UNIVERSAL PRECAUTIONS/SAFETY AND SECURITY**

**Purpose:** The Simulation Lab policy assures that universal precautions, safety, and security are implemented throughout the lab.

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Procedure:**

• **Infection Control** — Participants in simulated scenarios need to be mindful of all standard precautions and transmission specific precautions (contact, droplet, airborne). Any piece of equipment that comes in contact with the simulated patient body fluids are considered contaminated and need to be handled appropriately. Gloves will be worn with all manikin interaction and non-sterile gloves should be disposed of in non-biohazard trash cans. If a sharps container is full, please inform the simulation coordinator so that it may be replaced.

• **Latex Warning** — Participants and faculty need to know that some of the equipment in the Simulation Lab contains latex. Those with a known sensitivity/allergy to latex need to contact the simulation coordinator. Every effort will be made to replace equipment with latex-free substitutions. All users who suffer from latex allergies should take precautions while using or handling the latex parts by wearing non-latex gloves.

• **"Clean" Needle Stick Guidelines** — In accordance with the Center for Disease Control (CDC), all sharps are to be handled safely and disposed of properly. In the event of a "clean" needle stick, faculty should be notified of the incident immediately so first aid can be provided. The simulation coordinator should be notified so that an incident report form can be filled out. Complications from a "clean" needle stick may include tenderness, minor bleeding or bruising, and infection.

• **Safety and Emergencies** — In case of fire, all are expected to evacuate the building and Campus Security needs to be notified immediately at ext. 3333. Fire extinguishers are in designated locations throughout the building.

• **Physical Safety** — All participants should be instructed on the safe handling techniques prior to practice and demonstration. Any person should use caution when practicing skills and should not lift a manikin or heavy object without assistance. The wheels of all equipment (beds, wheelchairs, stretchers, etc.) are to be locked during practice and after use. Any accident or injury needs to be reported immediately to the faculty. The simulation coordinator will complete all incident reports.

*—Duke University School of Nursing. (2016). Center for nursing discovery: Policy and procedure manual.*

*Retrieved from: nursing.duke.edu/sites/default/files/centers/cnd_policy_and_procedure_6.20.16_jmd.pdf.*

*—Loyola University of Chicago. (2015). Center for simulation education: policy and procedure manual. Retrieved from hsd.luc.edu/media/healthsciencesdivisio/centerforsimulationeduction /document/policyprocedure2015.pdf*

*—Missouri Southern State University. (n.d.). Policy procedures manual: Simulation center for interdisciplinary*

*clinical education. Retrieved from mssu.edu/academics/health-sciences/simulationcenter/pdfs/LAB%20POLICY%20%20PROCEDURE%20MANUAL. pdf.*

*—Washburn University Institute of Technology. (2016). Regional simulation center's policy procedure manual. Retrieved from washburntech.edu/career-programs/healthcare/sim%20 lab%20rsc/Policy%20and%Procedure%20Manual.pdf.*

## NEEDLE -STICK AND BODY -FLUID EXPOSURE ALGORITHM

Contaminated exposure is defined as follows:

- A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids. • A mucous membrane (e.g., splash to the eye or mouth) exposure to blood or body fluids.
- A cutaneous exposure involving large amounts of blood or prolonged contact with blood, especially when the exposed skin is chapped, abraded, or afflicted with dermatitis.

The procedure for contaminated exposure is as follows:

1. Provide immediate care to the exposure site.
   - Cleanse the wound and surrounding area with soap and water for 15 minutes.
   - Flush nose or mouth with water for 15 minutes.
   - Irrigate eyes with clean water, saline, or sterile wash for 15 minutes.
2. Notify a nursing faculty.
3. Document on Student Occurrence Report.
   - If clean, monitor for infection and meet with the chair of the School of Nursing.
   - If contaminated (blood or body fluid), go to a local emergency room for treatment and, within 24 hours, follow up with the chair of the School of Nursing.

**A Refusal of Post-Exposure Medical Treatment form must be signed if the individual refuses a medical evaluation.**

### POLICY: VIDEO CAPTURE RECORDING

**Purpose:** Outline the capability of displaying and capturing video recordings.

**Review:** This policy shall be reviewed each spring during the Faculty Governance Retreat by the dean, chair, simulation coordinator, and Faculty Governance Committee.

**Procedure:** The AU Simulation Lab has the capability of displaying a variety of media. The lab has multiple cameras and microphones set up in the room, which can record any activity in the room. Recordings in the Simulation Lab are for educational purposes and debriefing opportunities with the appropriate faculty, staff, and participants. The confidentiality agreement signed by the students protects the privacy and discourages inappropriate discussion of video content or participants' performance in the simulation scenarios. Any viewing or publication outside of the classroom, such as posting on social media, is unacceptable and unethical and will result in disciplinary action from the individual's program. Participants and faculty should conduct themselves professionally as in the clinical setting since all interactions can be recorded.

*—Duke University School of Nursing. (2016). Center for nursing discovery: Policy and procedure manual.*

*Retrieved from: nursing.duke.edu/sites/default/files/centers/cnd_policy_and_ procedure_6.20.16_jmd.pdf.*

# Section X: Clinical Experiences

### CLINICAL EXPECTATIONS

In the clinical setting, students are expected to demonstrate a high level of accountability, professionalism, and competence across various aspects of care. Students are required to be punctual, maintain communication with

the clinical team, and initiate requests for assistance when needed. Professionalism is reflected in their adherence to appropriate clinical attire, confidentiality, and effective communication with team members, along with a commitment to ethical decision-making. Completing a diverse range of nursing procedures, such as injections, catheter placements, and dressing changes, is essential, with students required to meet specific clinical milestones based on their level of study. Additionally, attendance, assignment submission, patient care, and safety are critical to clinical success. Any deviation from these standards, including absences, missed deadlines, or failure to provide safe patient care, will result in point deductions and jeopardize the student's ability to pass the clinical component of the course. Students must earn a minimum of 80 points to pass the clinical portion and complete the course satisfactorily. These requirements will be tracked on a Clinical Evaluation form for each class that contains a clinical/lab component.

**CLINICAL SCHEDULING AND MAKEUP**

Clinical experiences are scheduled based on the availability of instructors and hospital facilities. The School of Nursing retains the right to assign clinical sessions on any day of the week and any shift. While every effort will be made to maintain an ideal clinical schedule, adjustments may be required based on site availability.

Clinical placements are a mandatory part of the Bachelor of Science in Nursing program, and the required clinical hours are governed by State Board of Nursing regulations, which cannot be modified. In the event that makeup hours are necessary, the student may be responsible for any associated costs related to the additional time required for the clinical instructor.

**CHAPEL ATTENDANCE AS A NURSING STUDENT**

Chapel/convocation attendance is an integral part of what it means to be a student in the Anderson University community. Chapel/ convocation meets every Tuesday and Thursday at 11 a.m. and is one setting in which individuals from the campus community gather regularly for worship, enrichment, and community building.

All full-time students (12 semester hours or more) are required to meet the chapel/convocation requirement. Nursing students are excused from chapel while attending NURS clinical experience. If the student is not scheduled for clinical, the student is expected to attend chapel.

**STUDENT COURSEWORK REVIEW (ACCREDITATION)**

For purposes of program accreditation and evaluation, student work samples may be viewed by individuals outside the SON faculty. Student consent for this will be obtained annually upon admission to the School of Nursing.

**STUDENT INCIDENT OR INJURY**

Providing nursing care to the client with an infectious disease today remains one of the greatest challenges and concerns of the nursing profession. These diseases presently include, but are not limited to, human immunodeficiency virus (HIV), hepatitis B (HVB), methicillin resistant Staphylococcus aureus (MRSA), and tuberculosis (TB).The School of Nursing shares in the concern for the safety of the student and patient.

Nursing faculty members will assist the student in caring for the physical and psychosocial needs of the patient, regardless of sex, religion, age, ethnic background, financial situation, and physical/emotional condition. The student is encouraged at any time to address questions and concerns with the nursing faculty when caring for any client, including care for the patient with a possible infectious disease.

The School of Nursing gives yearly instruction to each student in Standard Precautions according to recommendations from the Centers for Disease Control. The documentation of such instruction is contained in each student's folder housed in the School of Nursing office. In addition, students sign an agreement to follow Standard Precautions when caring for others.

In the event that a student should be exposed to body fluids, potentially infectious material, or be involved in other incidents during a clinical session, the student should follow the most current protocol recommended by the agency in

which the incident occurs. All incidents or injuries must be reported to the clinical instructor immediately. The instructor will assist the student in identifying appropriate treatment and need for referral. Confidential testing and counseling are available through the Madison County Health Department. Examples of incidents or injuries include falls, needle sticks, back strain, and motor vehicle accidents.

It is recommended that students maintain health insurance while they are enrolled in NURS courses. Auto liability insurance is required for all drivers in the State of Indiana. Students may be required to show proof of insurance coverage.

Any costs incurred from an incident or injury that occurs during clinical experiences, including testing, diagnosis, and treatment of any infectious and/or communicable diseases, will be paid by the student or his/her insurance carrier. All nursing students must sign a release agreement with Anderson University School of Nursing prior to attending clinical experiences.

### SKILL LAB/ST. VINCENT ANDERSON REGIONAL CENTER FOR CLINICAL EXCELLENCE

Students are encouraged to use the lab equipment to enhance learning. Skill Lab faculty coordinator hours of employment are posted each semester.

During regular business hours, the Skill Lab coordinator, course instructor, or SON office staff are available for questions or concerns regarding the Skill Lab facilities. Invasive procedures should never be performed on any person outside of scheduled clinical experiences, supervised by an AUSON instructor, or approved agency licensed personnel.

A Skill Lab fee will be assessed each semester to support the ongoing supply and equipment needs. No refunds are granted for this fee if a student withdraws from nursing courses during the semester.

### INCLEMENT WEATHER

The decision to postpone or cancel a clinical experience due to inclement weather will be made by the chair of the School of Nursing. All clinical experiences are to be considered canceled in the event the entire university closes. In the event of critical or multiple clinical cancellations, make-up learning opportunities will be planned by the clinical coordinator and course coordinator.

### LIABILITY INSURANCE

All nursing students enrolled in clinical nursing courses must be covered by liability insurance purchased through Anderson University. The student will be assessed for the cost of the insurance at the time of course registration and payment of fees on an annual basis.

The insurance, renewed each year, will be in effect until the student graduates or leaves Anderson University. If a student drops nursing classes after the charge has been applied to the account, a refund will not be given.

### TRANSPORTATION

It is the responsibility of the student to arrange to be at the assigned agency at the assigned time. All travel arrangements are to be made by the student.

## NURSING STUDENT UNIFORM

The grooming and general appearance of a nurse has a vital influence on the nurse-patient relationship. The nurse's attitudes about self as a professional and others are communicated through the image presented to clients and peers. Policies for student dress and appearance in the clinical area are provided to assist the student in complying with the requirements of our partnering organizations:

1. The designated AUSON uniform (scrub uniform) is worn for all clinical experiences unless otherwise indicated by the instructor. It is also required for observational experiences and skill lab test-outs.
2. A black scrub jacket, with the AU SON logo, may be worn over the scrub top, or a neat, clean white or black shirt, may be worn underneath the scrub top for warmth. Other jackets and sweaters are not allowed in clinical units.
3. A current AU identification badge is required and must be visible during all clinical experiences.
4. Clean white or black shoes or professional clogs in black (closed-toed, closed upper. No Crocs.) and white or black hose or socks are required.
5. A stethoscope and a watch with a second hand are required and are to be brought to all clinical experiences unless otherwise instructed.

6. A small pair of bandage scissors and a penlight are recommended.
7. The student should attend all clinical experiences prepared with a black pen and paper. Black ink is the only color allowed for paper documentation.
8. If street clothes are permitted for clinical experience, professional appearance is expected. Shorts, jeans, sleeveless tops, and or sandals are not permitted. Clothes that are revealing, fad-oriented, or are ill-fitting are not professional in appearance and should not be worn for clinical experiences.
9. No Meta/AI Glasses or recording devices in Lab, SIM, or Clinical will be permitted.

### GENERAL APPEARANCE

**Hair:**

1. Hair clean, check for dandruff or flaking hairspray on the uniform.
2. Neatly arranged, styled appropriately so as not to interfere with client care. Hair that is below the collar must be pulled up and contained in a ponytail. Hair that requires continual attention, hangs over the eyes, falls forward when bending, or is more suitable for a social occasion than the clinical setting is not appropriate.

**Identification Tag:**

1. To be worn on a uniform or other clinical attire for all clinical experiences.
2. It must be visible so that the name can be read.

**Jewelry/Piercings, in accordance with the policies of our partner agencies:**

1. One ring and watch may be worn.
2. One pair of pierced ear posts are permitted, with one post in each ear.
3. Body piercing appliances may not be worn on any facial structures or orifices while in the clinical area.
4. Some surgical or procedural areas may not allow jewelry.
5. Tattoos should be covered by the uniform or a clean white shirt under the uniform.
6. No permanent jewelry.

**Toiletries:**

1. Excessive use of cosmetics (eye shadow, make-up) is not appropriate for uniform attire.
2. To protect clients or coworkers with respiratory problems, perfumes and highly scented lotions or cosmetics are not allowed.
3. No gum or candy.

**Hands:**

1. Hands must be clean and washed in accordance with Standard Precaution Guidelines.
2. Nails are to be short (no more than ¼ in. past the end of the finger), freshly manicured, and appropriate for client care.
3. Only natural nails; no artificial, gel, stickers, or nail polish.

### DONATIONS

Donations for general programs/projects/trips may be made to the Anderson University Development Office for recognition and tax purposes.

# Section XI: Student Affairs

### STUDENT REPRESENTATION ON SON COMMITTEE

Current SON students are eligible to serve one-year terms on the following committee:

**Faculty Governing Committee (FGC)** — One representative each from the sophomore, junior, and senior classes will be elected by their peers. These representatives give voice to their respective classes at regularly scheduled FGC meetings. This representation affords students the opportunity to participate in SON governance.

**General guidelines for student representatives:**

1. During the first week of classes, the course coordinators for 2231, 2241, 3351, 3361, 4451, and 4521 will ask the class for volunteers to serve on the Nursing Faculty Governing Committee and the Nursing Policy Committee. If more than one-person volunteers to serve on a committee, an election will be held by secret ballot.
2. Only students able to attend the scheduled meeting times should volunteer as representatives.
3. Students are expected to regularly attend the committee meetings.
4. Student representatives are to gather information from their classmates about academic issues that need to be addressed by the committee structure. Efforts should be made to gather a representative sample of comments.
5. Items may arise during the meeting that are confidential and must be kept such as the student representative.
6. The student representative should report back to their class about non-confidential items raised in the meetings.
7. If student representatives have questions about issues covered during the meeting, they should approach the chair of the School of Nursing for clarification.
8. Student representatives should not try to interpret items raised in the meeting, but instead direct their classmates to the chair of the School of Nursing for questions.
9. Students will rotate each semester, serving one term.

**SIGMA THETA TAU INTERNATIONAL, HONOR SOCIETY OF NURSING**

Anderson University and Ball State University have merged chapters to create the Beta Rho At Large chapter.

**Organization Mission:** The mission of the honor society of nursing, Sigma Theta Tau International, is to support the learning, knowledge, and professional development of nurses committed to making a difference in health worldwide.

**Society Mission:** The vision of Sigma Theta Tau International is to create a global community of nurses who lead in using knowledge, scholarship, service, and learning to improve the health of the world's people.

**Membership:** Membership is by invitation to baccalaureate and graduate nursing students who demonstrate excellence in scholarship and to nurse leaders exhibiting exceptional achievements in nursing.

**DEPARTMENTAL HONORS RECOGNITION POLICY**

This policy applies to students who are eligible to receive departmental honors at graduation. The requirements are as follows:

1. A cumulative grade point average of 3.0 or above to be calculated at the end of the seventh semester.
2. Departmental grade point average of 3.5 or above to be calculated at the end of the seventh semester.
3. A maximum number of honorees is 10% of departmental graduates.
4. Minimum of 60 hours of study completed at Anderson University by the time of graduation.
5. Transfer students will submit all transcripts for review.
6. Satisfactory completion of an Honors Project. The project should consist of an outstanding intercultural proposal submitted at the end of the seventh semester, a formal presentation for the university community to be given during the eighth semester, and formal approval by the Nursing Faculty Governing Committee.

**Procedure:**

1. The departmental honors recognition policy will be introduced during the sophomore year.
2. At the end of their seventh semester, interested students should seek approval to pursue honors. The SON (Chair or designee) will determine if GPA requirements have been met at the end of the seventh semester.
3. After the NURS 4470 intercultural proposals have been graded, the FGC will make recommendations of student candidates. The recommendations are based on GPA, quality of the proposal, and a maximum number of

students the department is allowed to honor in a particular year based on the number of senior candidates for graduation.

4. Candidates approved to seek honors recognition will deliver a formal presentation of their intercultural research and study at the AU Scholars Day. This presentation will be given during the eighth semester to students and faculty of the Anderson University community. Specific requirements for this event will be announced in the spring semester or as soon as available. The coordinator of NURS 4950 will serve as the faculty advisor for SON students for this event.
5. School of Nursing Honors will be awarded at the end of the eighth semester to those candidates who successfully completed the requirements.

## SON STUDENT AWARDS AND CRITERIA

### The Lifelong Learner Award

Liberal arts education is one that intentionally fosters wide-ranging knowledge of science, cultures, and society; high-level intellectual and practical skills; and the demonstrated ability to apply to learn complex problems and challenges across the course of life.

Liberal arts education is critical to the generation of responsible citizens in a global society. In addition, liberal arts education is needed for the development of intellectual and innovative capacities for current and emergent generalist nursing practice. Acknowledgment of the need for continual learning in and outside of nursing practice demonstrates a commitment to the profession.

This graduate exercise appropriate clinical judgment and accepts responsibility for the continued development of self and the discipline of nursing. He/she assumes responsibility and accountability for ongoing professional development and lifelong learning in a perpetually changing healthcare environment. (Language: American Association of Colleges of Nursing, Essentials of Baccalaureate Education for Professional Practice, 08).

**Criteria:**

- Minimum overall cumulative GPA of 3.5 or higher at the conclusion of the seventh semester.
- Exemplifies academic excellence.
- Reflects the ethos of the School of Nursing and Anderson University as mirrored in the seal (faith, truth, and service)

**Procedure:**

- Nursing students to graduate during the spring/summer term of their senior year are eligible.
- The nursing faculty will make the determination based on the above-stated criteria.
- The award will be made at the annual pinning ceremony.

### The Nursing Scholar Award

Scholarship for the baccalaureate graduate involves identification of practice issues, appraisal and integration of evidence, and evaluation of outcomes. This graduate provides compassionate care informed by a scientific base of knowledge, including current evidence from nursing research.

This graduate demonstrates academic excellence in the nursing major, grounded in a firm foundation of the liberal arts education. He/she manifests a basic understanding of how evidence is developed, including the research process, clinical judgment, interprofessional perspectives, and patient preference as applied to practice. (Language: American Association of Colleges of Nursing, Essentials of Baccalaureate Education for Professional Practice, 08).

**Criteria:**

- Minimum overall cumulative GPA of 3.7 or higher at the conclusion of the seventh semester.
- Exemplifies academic excellence.
- Reflects the ethos of the School of Nursing and Anderson University as mirrored in the seal (faith, truth, and service).

**Procedure:**

- Nursing students to graduate during the spring/summer term of their senior year are eligible.
- The nursing faculty will make the determination based on the above-stated criteria.

- The award will be made at the annual pinning ceremony.

# Section XII: Employment and Licensure

## STUDENT NURSE EMPLOYMENT

The faculty recognizes that students need and desire to work while they are enrolled in school. While the faculty acknowledges that students can gain experience from outside employment, we also believe that consideration must be given to the number of hours and types of employment students seek. The additional workload of outside employment may jeopardize academic or clinical performance. Students are expected to schedule employment time around the school schedule, including clinical and outside class assignments.

## RULES AND REGULATIONS FROM INDIANA STATE BOARD OF NURSING APPLICATIONS

Students will need to complete two types of applications (the NCLEX Candidate Bulletin and the Indiana licensure application). The NCLEX bulletin may only be accessed at www.ncsbn.org. Indiana applications for licensure by examination must be completed by each candidate and must be submitted to the Indiana Professional Licensing Agency. The registration with NCLEX must be completed according to the instructions in the NCLEX Candidate Bulletin. Both the Indiana licensure application and the NCLEX registration process must be completed before eligibility to take the examination can be granted by the Indiana State Board of Nursing.

**State Application**

- Applications may be submitted online at MyLicense.IN.gov or completed by paper and mailed to our office.
- Application Fee of $50: Pay by credit or debit-card for applications submitted online at MyLicense.IN.gov. If applying by paper/ mail, make checks or money orders payable to Indiana Professional Licensing Agency. All application fees are nonrefundable.
- If you have not completed high school, a copy of your GED scores must accompany this application.
- If you submit a paper application, a confirmation email advising you to do your criminal background check will be sent to the email address supplied on the application. If the application is submitted online, you may start your criminal background check process once the receipt screen appears after submitting your online application and payment. Applicants who complete a criminal background check prior to their application being received will be required to complete another criminal background check.
- The certificate of completion must be completed by the dean, chair, director, or designer of the domestic program of nursing with an original signature and received at the board's address before you can be declared eligible to take the examination. This form must be provided directly from the program of nursing. The board will not accept a certificate of completion form provided by parties other than the nursing program's dean, chair, director, or designer.
- All documents being sent to our office from a direct source should be mailed to:

Indiana Professional Licensing Agency
Attn: Nursing Board
402 West Washington Street
Room W072
Indianapolis, IN 46204

**NCLEX Application and Registration**

The NCLEX application and registration process must be completed according to the instructions in the NCLEX Candidate Bulletin. The NCLEX bulletin may only be accessed at www.ncsbn.org. You may register by internet or telephone at (866) -496-2539), or internet at www.ncsbn.org. The current fee for the NCLEX is $200 payable to the National Council of State Boards of Nursing in the form of a credit, debit, or prepaid card.

**Certificate of Completion Form**

This certificate must be completed by the dean/chair/director/designee of the program of nursing and received at the board's address (above) before you can be declared eligible to take the examination. This form must be provided directly from the

program of nursing. The board will not accept a certificate of completion form provided by parties other than the nursing program's dean,chair, director, or designee.

**Verification of Licensure**

We must receive verification from every state, territory, and country in which you hold or have held a nursing license. States that participate in NURSYS are as follows: AL, AR, CO, DE, DC, FL, ID, IN, IA, KY, ME, MD, MA, MN, MS, MO, MT, NB, NH, NJ, NM, NC, ND, OH, OR, RI, SC. SD, TN, TX, UT, VT, VA, WA, WV-PN only, WI, and WY. You can register online at nursys.com.

All other states not participating in NURSYS and countries must be sent a Verification of State Licensure Form to be completed by that respective state board and returned to our office. Please check with each state to see if there is a fee for this service. Verification needs to be sent from every state on which you hold or have ever held a nursing license.

You must also provide verification of all health-related licenses and certificates you hold or have held, including but not limited to CNA licenses, EMT certifications, etc.

**Admission to Examination**

Please refer to the NCLEX Candidate Bulletin for information on admission procedures.

**Name Changes**

A copy of a marriage certificate or divorce decree must be submitted by candidates who have changed their names after the application has been filed. Please specify on the name change document the type of examination for which you applied and the date of the examination.

**Special Accommodations**

Candidates who require special accommodations or modification of the normal examination procedures must notify the board in writing when the application is filed and state the modification being requested. A letter from an appropriate health professional confirming the diagnosis of the disability or condition must also be submitted with the application, as well as a letter from the nursing program stating accommodations made by the program, if any. Candidates will be notified of the arrangements made by the board.

**Notification of Results**

The processing of examination results may take at least three weeks to complete from the date the candidate was administered the examination. Successful candidates who have met all the other application requirements for licensure will receive an email from the Indiana Professional Licensing Agency with a license number.

Unsuccessful candidates will receive a notification letter and an application to retake the examination. Examination results are not given out via telephone. Excessive calls inquiring about results only hinders our staff's ability to process them as quickly as possible. New licenses can be verified on the internet via Access Indiana at in.gov/pla.

Any questions regarding the application process should be directed to (317) 234-2043 or pla2@pla.IN.gov. Please allow at least four weeks before you call regarding the status of your application for examination.

**Renewal of RN Licenses**

Registered Nurse (RN) licenses expire on October 31 of odd-numbered years regardless of the issuance date. Please consider this when you are applying for licensure. The renewal fee is $50. If you fail to renew by the expiration date, you will be assessed a $50 late fee.

It is your responsibility as a licensed nurse to make sure that the Indiana Professional Licensing Agency always has your current address. Renewal notifications will be sent to the address on record. Renewals will be available online at in.gov/pla. You may update your address online at any time by logging into Indiana's Online Licensing Service. Your login ID will be your license number, and your password will be your social security number.

Your social security number is being requested by this state agency in accordance with Indiana Code 4-1-8-1. Disclosure is mandatory, and this record cannot be processed without it.

# Appendix A

# Anderson University

# School of Nursing

**Informal and Formal Complaint Policy and Procedure Form**

**Date and Time of Grievance:** _____

**Involved Faculty Member:** _____

**Student Involved:** _____

**Description of the Complaint (**to be completed by the student):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

**Signature**_____**Date**_____

## Appendix B

# Anderson University

# School of Nursing

### Formal Complaint Outcome Narrative

Name:_____Date of incident:_____
Details of Complaint:_____
_____
_____
_____
_____
_____
Findings:_____
_____
_____
Resolution:_____
_____
_____
_____
_____
Date of Resolution:_____ or Date complaint escalated to Provost's assistant:_____
Student Response:
_____
_____

Signatures of involved parties:
Student
Print_____Sign_____Date _____
Faculty or Staff
Print_____Sign_____Date _____
Course Coordinator
Print_____Sign_____Date _____
Dean/Department Chair
Print_____Sign_____Date _____

# Appendix C

ANDERSON UNIVERSITY
School *of* Nursing

**YEARLY INFORMATION SHEET**

## Academic Year 20___/20___

**NAME** _____
Last First Middle

**Cell Phone** (_____)_____ **AU Email Address**_____

**Emergency Contact** _____ **Phone** (_____)_____

---

**PERMISSION TO COPY/RETAIN CLASS ASSIGNMENTS**

I give the Anderson University School of Nursing faculty permission to copy and/or retain any assigned work that I complete in my nursing (NURS) courses. I understand that this work may be shared with affiliated agencies and/or accrediting bodies of Anderson University School of Nursing.

Signature: _____Date: _____

**Student Nurse Handbook**

I am aware I may access the Anderson University School of Nursing Bachelor of Science in Nursing (BSN) Student Nurse Handbook on the nursing homepage of the university website, and I am responsible for the information contained in this handbook. The Handbook will be updated yearly and whenever it is deemed necessary by the AUSON Faculty.

Signature: _____Date: _____

**School of Nursing Canvas Course Quiz Compliance**

I confirm my enrollment in the School of Nursing Canvas Course* and have successfully completed all quizzes related to Academic Integrity, testing procedures, APA format, ATI, Attendance, Recording Policy, Castlebranch, Incivility, Bullying, Clinical, and Lab Expectations as outlined by the School of Nursing. I understand that these quizzes will be required to be taken at the start of each academic year.

Signature:_____Date:_____

*If you are not enrolled in the School of Nursing Canvas course, please contact Betsy Cofer at jecofer@anderson.edu to be added to this course.

## Clinical Experience Release Agreement Form

This Release is made by_____and is effective as of the date it is signed.

WHEREAS, I intend to participate in all clinical experiences required by the Anderson University School of Nursing. These experiences may involve observation or participation.

WHEREAS, I understand and acknowledge that there are certain risks to exposure to infectious diseases in the clinical experiences, including, but not limited to, catastrophic injury, COVID-19, HIV exposure, hepatitis exposure, invasion of privacy, emotional unrest, and even disability or death.

WHEREAS, I may also participate in the intercultural program.

WHEREAS, I understand and acknowledge that there are certain risks inherent in the intercultural program, including, but not limited to, civil unrest, environmental exposure, injury during travel to or from the program site, and even disability or death.

In consideration of Anderson University allowing me to participate in clinical experiences for its School of Nursing, and/or Anderson University allowing me to participate in the intercultural program, I agree as follows:

I release and forever discharge Anderson University and its agents, employees, officers, directors, contractors, consultants, successors, and assigns from any and all claims, demands, actions, or causes of action that arise from or are in any way connected with:

A. My participation in the School of Nursing clinical experiences.
B. My participation in the intercultural program.
C. Travel to and from clinical sites.
D. Travel to and from any site for the intercultural program.

It is my understanding that this Release Agreement also applies to medical expenses that I incur, and I acknowledge that any medical expenses I incur during my participation in clinical experiences or the intercultural program are my responsibility and not the responsibility of Anderson University.

This Release Agreement shall be binding on my successors and assigns.

**READ BEFORE SIGNING**.

Date_____ Participant Signature _____

Participant Name (Print) _____

## Photo/Video Recording Confidentiality Statement

I understand confidentiality regarding simulation is an essential element of the learning process and Anderson University School of Nursing (AUSON) Simulation Center should be treated as a clinical site.

I hereby agree to:

11. Authorize the professional faculty and staff to take photographs, video recordings, and produce educational (closed circuit) television programs, as well as other types of audio/visual recording.
12. AUSON faculty and staff ensure the confidentiality of information; Video recordings of simulations are accessible only by AUSON faculty and staff.
13. Acknowledge video recordings will be deleted after the end of each semester unless specific arrangements have been made between the simulation coordinator, course coordinator, and student to use said recording(s) for educational purposes.
14. Not discuss the events of the simulation(s), or the debriefing(s) with anyone other than the students and faculty who participated in this/these simulation(s). I hereby agree not to disclose the events, discussions, and/or materials used in simulated clinical experience.
15. Affirm that any viewing or publication of video recordings intended for simulation or learning outside of AUSON is strictly prohibited.
16. Acknowledge photography, video recordings, or reproduction of recorded material from AUSON simulation events by participants is also prohibited.
17. Permit AUSON Simulation Center the irrevocable, perpetual, unrestricted royalty-free right, license, and permission to copyright in your name, and to use, publish, reproduce, and distribute audio and/or visual recordings and pictures for education, promotion, and advertising.

I have read and understand the above Confidentiality Statement. I acknowledge that a breach of this contract will result in disciplinary action as outlined in the BSN Student Nurse Handbook.

Signature: _____ Date: _____

I hereby **decline** to be a subject in simulation events that are video recorded. I understand and agree that before the start of any simulations, it is my responsibility to inform the simulation coordinator regarding my declination.

Signature: _____ Date: _____

# CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT
**Student**

This Confidentiality and Non-Disclosure Agreement is entered into as of the _____day of _____, _____, by and between Anderson University of Anderson ("AU") and _____("Student").

WHEREAS, the Student is participating in a program whereby AU will provide educational experiences to the Student (the "Program"); and

WHEREAS, in the course of participating in the Program, Students may have access to confidential and proprietary information of the participating facility and its patients including but not limited to medical records, financial records, policies, procedures, and strategic plans (the "Confidential Information"); and

WHEREAS, AU requires assurances that the Confidential Information will not be used or disclosed by the Student as a condition of the Student's participation in the Program.

NOW, THEREFORE, in consideration of the foregoing and Student's participation in the Program, Student hereby acknowledges the value and importance of protecting the confidentiality of the Confidential Information and agrees to use his/her best efforts to protect such confidentiality. Student agrees that he/she will hold the Confidential Information in the strictest confidence and will exercise at least the same care with respect thereto as he/she exercises with respect to his/her own most confidential or proprietary information, and will not without prior, written consent of the participating facility, copy the Confidential Information other than as directly necessary for the achievement of the purposes of the Program, or disclose any portion of the Confidential information or any information derived from the Confidential Information to any other party. Student further agrees that he/she will not make any use of any portion of the Confidential Information or any information derived from the Confidential Information except for participation in the Program. The Student's efforts shall include but not be limited to taking reasonable steps to prevent other people from reading, copying, or otherwise obtaining access to Confidential Information.

IN WITNESS WHEREOF, Student has executed this Agreement this _____day of

_____, _____.

Signed:_____
(Student)

Printed:_____
(Student)

Annual Background Check and Drug Screen Disclosure Form

Students are required to complete a criminal history background check and drug screen prior to the start of clinical/practicum experiences. Annually thereafter, students must answer the following questions. An affirmative response

means that your status will be reviewed by the Dean, of the School of Nursing and Kinesiology. Failure to provide accurate and truthful responses will subject the student to possible removal from courses and/or dismissal from the Program.

If you are charged with a crime (even if dismissed) or tested positive for a drug or controlled substance (other than those obtained legally and legitimately) during the year, you must submit a revised Annual Disclosure Form to the Office of the School of Nursing within 5 business days of the incident or prior to the next clinical day.

1. Have you, the student, in the past semester, or since previously completing this form:

- Been arrested, but not charged?
- Been charged with a crime?
- Or had a charge dismissed?
- Or pleaded not guilty?
- Or pleaded guilty, “no contest”?
- Or been convicted of a crime?
- Or violated parole?

YES _____NO _____

If YES, name the crime or parole violation, the name of the court and any sentence or punishment, and the date of conviction/dismissal:

2. Have you, the student, tested positive for a drug or controlled substance (other than those obtained legally and legitimately)?

YES _____NO _____

I understand I must disclose in writing convictions of any misdemeanors or felonies in Indiana, any State, or other jurisdiction. I understand if an assigned clinical agency does not accept me as a nursing student based on my criminal background, it may result in an inability to progress through the Anderson University School of Nursing programs as such required agency placements that are necessary for the completion of any School of Nursing degree. I certify that my self-disclosure is true, accurate, and complete to the best of my knowledge.

Student’s Name (printed): _____

Student’s Signature: _____ Date: _____