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I. INTRODUCTION

1. WELCOME TO THE DEPARTMENT OF NURSING

As a student in the Nursing Program, you have a need for special knowledge relating to the Departmental philosophy, curriculum, policies, and procedures. In order to meet this need, we have assembled the information in this Student Handbook. We hope it will answer your questions about the department. Your advisor can help you in answering any questions you may have. We hope you enjoy your studies with us as you earn your nursing degree. Have a good year!

2. STATEMENT OF NONDISCRIMINATION AND NO HARASSMENT POLICY

Saint Francis University, inspired by its Franciscan and Catholic identity, values equality of opportunity, human dignity, racial, cultural, and ethnic diversity, both as an educational institution and as an employer. Accordingly, the University prohibits and does not engage in discrimination or harassment on the basis of gender, gender identity, age, race, color, ethnicity, religion, sexual orientation, marital status, disability, pregnancy status, veteran status, predisposing genetic characteristic or any protected classification.

Saint Francis University will not tolerate sexual violence, dating violence, domestic violence, stalking, or sexually inappropriate conduct in any form. The University is committed to this policy based upon its values and as required by Title IX of the Education Amendments Act of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes and University policies. This policy applies to all programs and activities of the University, including, but not limited to, admission and employment practices, educational policies, scholarship and loan programs and athletic or other University sponsored programs.

Saint Francis University affirms its commitment to promote the goals of fairness and equity. All policies contained herein are subject to resolution using the University’s Resolution Process, as detailed below. The Resolution Process applies regardless of the status of the parties involved, who may be members or non-members of the campus community, students, student organizations, faculty, administrators and/or staff. The University reserves the right to act on incidents occurring on campus or off-campus, when the off-campus conduct could have an on-campus impact or impact on the mission of the University. The Vice President for Finance and Administration oversees implementation of the University’s Affirmative Action and Equal Opportunity plan, disability compliance. The Associate Dean of Students/Title IX Coordinator oversees implementation of the University’s policy on equal opportunity, discrimination, harassment, sexual misconduct, stalking, and relationship violence. Reports of discrimination, harassment, sexual misconduct, stalking, relationship violence, and retaliation should be made to the Title IX Coordinator promptly. There is no time limitation on the filing of allegations as long as the accused individual remains subject to the University’s jurisdiction. However, a delay in filing a report will weaken an investigation. Reporting is addressed more specifically below.

a) Any situation where it appears that the accused individual may present a danger or threat to the health or safety of him/herself or others;
b) Any situation that significantly impinges upon the rights, property or achievements of self or others or substantially breaches the peace and causes social disorder; and/or

c) Any situation that is detrimental to the educational interests of the University.

Inquiries about the University Affirmative Action and Equal Opportunity plan and Disability Compliance policy and procedure may be made internally to:
Jeffrey Savino University
Vice President for Finance and Administration
101 Raymond Hall
(814) 472-3261
Email: jsavino@francis.edu

Inquiries about the University Harassment, Sexual Misconduct, Stalking, and Relationship Violence policy and procedure may be made to:
Lynne Banks, M.Ed.
Associate Dean of Students &Title IX Coordinator
232 Padua Hall,
(814) 472-3002
Email: lbanks@francis.edu

To read our full Nondiscrimination Statement and No Harassment Policy: www.francis.edu/Nondiscrimination-and-No-Harassment/

For more information on Title IX, please use the following link: www.francis.edu/titleix

3. POLICY REVIEW PROCEDURE

All student policy and procedures are annually reviewed and revised as necessary during Nursing Faculty Organization meetings. The students are invited to present student concerns, questions, and recommendations regarding the policies and procedures through their designated/elected student representative. Revised and new policies and procedures are distributed to all nursing students. If there are revisions of old policies/procedures or new policies and procedures during the academic year, those will be emailed to every student and posted on the Nursing Department Bulletin Board. Students are required to sign the Statement of Receipt and Compliance form annually. All students are expected to read each policy and procedure, clarify any questions or concerns, and adhere to the policies and procedures for the current academic year.
4. STATEMENT OF RECEIPT AND COMPLIANCE

I have reviewed the current 2018-2019 Department of Nursing Student Policies and Procedures and clarified any questions or concerns. I feel that each policy and procedure is fair and equitable. I agree to adhere to the requirements as stated in each of the policies and procedures as indicated by my signature in the appropriate space below.

The Pennsylvania State Board of Nursing and the Council on Collegiate Nursing Education (CCNE) periodically reviews nursing programs. A portion of this process is the review of nursing student’s educational records for validating the process of faculty/student evaluation and the student’s health and criminal record for compliance to admission standards. Clinical agencies may request review of student health and criminal records to assure compliance with the contractual obligation and accreditation standards.

I give my consent for the visitors for the State Board of Nursing and the CCNE to review my education and criminal record. I also extend the privilege to review my health and criminal records to a clinical agency that I may be affiliated with as a student.

Media / Photography/Video Implied Consent:
There is implied consent to the University to use news media as well as use of photos and video on the web and in promotional materials. Photograph(s) and video footage may be obtained from both informal and formal settings. All negatives, positives, prints, and raw footage are the property of Saint Francis University. If anyone wishes to withdraw consent to the University for photography or videography usage, he or she may contact the Marketing and Communications Office (marketing@francis.edu). It is the student's responsibility to contact the Marketing and Communication Department to withdraw consent for photography and videography and the student must also notify the Nursing Department. It is also the student's responsibility to exclude him/herself from any situation involving photography or videography.

Please Print Name: _______________________________________________________

Signature: __________________________________________________________________

Date: ___________________________________________________________________

Revised 5/18
## II. ORGANIZATION & ADMINISTRATION

### 1. FACULTY

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<th>Phone Extension</th>
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### 3. ADJUNCT FACULTY - Contact: Either by email or phone extension 3027

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<tbody>
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<td>Kristine Williams</td>
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Reviewed 5/2018
4. SAINT FRANCIS UNIVERSITY ORGANIZATIONAL CHART

* SBDC: Small Business Development Center
  CETL: Center for Excellence in Teaching and Learning

Approved by President's Council
February 10, 2016
5. DEPARTMENT OF NURSING ORGANIZATIONAL CHART

Saint Francis University

Nursing Department

Organizational Structure

Nursing Department Chair

Simulation Lab Coordinator

BSN & MSN Administrative Assistants

BSN Program

BSN Program Coordinator

Level Coordinators

BSN Faculty

MSN Programs

MSN L/E Program Coordinator

MSN FNP Program Coordinator

MSN Faculty
# 6. CLINICAL AGENCIES

| ACRP                      | Arbutus Park Retirement Community | Cambria Heights School District
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<td>131 Market Street</td>
<td>Ottawa Street Johnstown, PA 15904</td>
<td>426 Glendale Lake Road Patton, PA 16668</td>
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<td>Johnstown, PA 15930</td>
<td>Windber 600 Somerset Avenue Windber, PA 15963</td>
<td>Conemaugh Memorial Medical Center – A Duke LifePoint Hospital 1086 Franklin Street Johnstown, PA 15905</td>
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<tr>
<td>Central Cambria</td>
<td>Chan Soon-Shiong Medical Center at Windber</td>
<td>Hollidaysburg Area School District 405 Clark Street Hollidaysburg, PA 16648</td>
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<tr>
<td>208 Schoolhouse Road</td>
<td>549 Locust Street Sidman, PA 15955</td>
<td>Homewood at Martinsburg 437 Givler Drive Martinsburg, PA 16662</td>
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<tr>
<td>Ebensburg, PA 15930</td>
<td>Hollidaysburg YMCA Children’s Center 2459 Reservoir Road Hollidaysburg, PA 16648</td>
<td>Maple Winds Healthcare and Rehabilitation Center 4112 Spring Hill Road Portage, PA 15946</td>
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<tr>
<td>Conemaugh Nason Medical Center</td>
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<td>Penn Highlands Dubois 100 Hospital Ave. DuBois, PA 15801</td>
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<td>105 Nason Drive</td>
<td>Forest Hills School District 549 Locust Street Sidman, PA 15955</td>
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<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
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<td>Bedford Street</td>
<td>Saint Michael School 301 Saint Elizabeth Street Loretto, PA 15940 (covered under Penn Cambria)</td>
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<td>of Central PA – Cambria LTSR</td>
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<td>Health Center</td>
<td>Saint Michael School 301 Saint Elizabeth Street Loretto, PA 15940</td>
<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
</tr>
<tr>
<td>108 Franciscan Way</td>
<td>Presbyterian Homes in the Presbytery of Huntingdon (dba Presbyterian Village Hollidaysburg) 220 Newry Street Hollidaysburg, PA 16648</td>
<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
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<tr>
<td>Loretto, PA 15940</td>
<td>Presbyterian Homes in the Presbytery of Huntingdon (dba Presbyterian Village Hollidaysburg) 220 Newry Street Hollidaysburg, PA 16648</td>
<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
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<tr>
<td>Senior Life – Ebensburg</td>
<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
<td>Torrance State Hospital State Route 1014 Torrance, PA 15779</td>
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<tr>
<td>429 Manor Drive</td>
<td>Select Specialty Hospital – Johnstown 320 Main Street 3rd Floor Johnstown, PA 15901</td>
<td>Torrance State Hospital State Route 1014 Torrance, PA 15779</td>
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<td>Ebensburg, PA 15931</td>
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<tr>
<td>UPMC Altoona</td>
<td>UPMC Bedford 10455 Lincoln Highway Everett, PA 15537</td>
<td>UPMC Children’s Hospital of Pittsburgh Children’s Hospital Drive 4401 Penn Avenue Pittsburgh, PA 15224</td>
</tr>
<tr>
<td>Altoona Hospital Campus</td>
<td>UPMC Bedford 10455 Lincoln Highway Everett, PA 15537</td>
<td>UPMC Children’s Hospital of Pittsburgh Children’s Hospital Drive 4401 Penn Avenue Pittsburgh, PA 15224</td>
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<tr>
<td>620 Howard Avenue</td>
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<td>UPMC Children’s Hospital of Pittsburgh Children’s Hospital Drive 4401 Penn Avenue Pittsburgh, PA 15224</td>
</tr>
</tbody>
</table>

NOTE: Clinical agencies vary from semester to semester. In addition to these clinical agencies and schools, there are multiple other clinical experiences throughout the program of study. A complete list of these agencies and schools are kept on file in Sullivan Hall, Room 205, in the Department of Nursing.

O:\Nursing-Administrative\Affiliation Agreements\Clinical Affiliations(updated 5.17.2018).docx
Reviewed and Revised: 5/18
III. CURRICULUM

A. THE NURSING PROGRAM

1. MISSION

The Department of Nursing inspires students to dedicate themselves to service, leadership, critical self-reflection and life-long learning in the Spirit of Franciscan values. The Nursing Programs challenge students in the application of clinical reasoning, cultural competence, patient care technologies and interprofessional collaborative practice within an evidence-based approach while providing safe and quality care to individuals, families, groups, communities, and populations across both the lifespan and the continuum of complex, changing health care environments. Through graduate education, the Nursing Program provides its students with advanced knowledge and higher-level leadership skills for improving health outcomes and elevating patient care in various roles and settings.

2. VISION

The Department of Nursing utilizes exceptional learning opportunities, to strengthen and develop educational programs that are current and encourage students to develop critical thinking, cultural competence, and evidence-based approach to practice.

3. HISTORY OF THE NURSING DEPARTMENT

Saint Francis University is a Catholic, Franciscan, co-educational, liberal arts institution founded in 1847. The need for a baccalaureate program leading to a Bachelor of Science in Nursing degree was evidenced through a feasibility study conducted by the University administration in 1978 and 1979. The Faculty Senate gave its support for the development of a Nursing Program on May 7, 1979. On May 24, 1979, the Board of Trustees gave full approval for the program.

In July 1980, the Pennsylvania State Board of Nurse Examiners gave full initial approval to the nursing curriculum, and the first class of nursing students was admitted in the fall of 1980. Following the graduation of the first class of 1984 and a visit by the Educational Advisor from the State Board of Nurse Examiners, full approval was obtained in the fall of 1984. The most recent State Board compliance report was the spring of 2015. Graduates of the Nursing Program are eligible to sit for the National Council Licensure Examination – RN (NCLEX – RN).

On March 8, 1986, the National League for Nursing granted full accreditation to the Nursing Program. The National League for Nursing granted continuing full accreditation to the program on October 19, 1993, and this continued through the fall of 2001. The NLN transitioned to the National League for Nursing Accrediting Commission (NLNAC) and is now known as The Accreditation Commission for Education in Nursing.

In March 1987, the Board of Trustees approved a track within the BSN program to be offered to Registered Nurses. This track was announced to the public on June 12, 1987, and enrollments began as of that date. The RN Track was fully accredited by the National League of Nursing. On May 7, 1989, the first RN-BSN student graduated from this program. On June
14, 1996, the Department of Nursing announced the initiation of the RN to BSN Articulation Plan.

The School Nurse Certification Program was approved by the University and the Pennsylvania Department of Education in April of 1997. The first group of students completed the School Nurse Certification Program in December of 1998. During the fall of 2003, the Pennsylvania Department of Education did a program review and found the program in full compliance. During the fall of 2011, notification was provided from the University to the PA Department of Education to end this program. Due to changes in rules and regulations in the Department of Education related to schools, the School Nurse Certification Program is no longer offered at Saint Francis as an educational option.

Initially, the Nursing Program used Chrisman/Fowler's system-in-change theory to guide the curriculum. The Pennsylvania State Board of Nursing approved the revised caring nursing curriculum on January 15, 1992. This curriculum implementation was completed with the graduation of the Class of 1995.

The baccalaureate Nursing Program was granted preliminary approval by the Commission on Collegiate Nursing Education (CCNE) in February 1998. The evaluator visit was April 2001, and the 10-year CCNE accreditation was initiated on September 29, 2001, and continued through December 2011. The most recent CCNE visit was in March 2011. No deficiencies were cited at the time of that review. In November 2011, the CCNE voted to continue the 10-year CCNE accreditation through December 2021.

4. NURSING DEPARTMENT PHILOSOPHY

The Nursing Programs at Saint Francis University are designed to provide the study of professional nursing within the framework of a Catholic liberal arts program. The faculty of the Department of Nursing endorses the Mission, Core Values, and Goals of Franciscan Higher Education and the educational philosophy statements of the University. We believe the liberal arts component fosters the personal and professional development of the student and enhances the student's ability to reason critically and to communicate effectively with the interprofessional health care team.

We acknowledge nursing's religious heritage and service to the poor and needy, and reaffirm the relevance of Christian altruistic values for contemporary nursing practice. We believe an environment where Christian love is expressed through the Franciscan tradition, as exemplified in the Prayer of Saint Francis, nurtures a spirit of respect and caring in a community of teachers and learners.

Professional nursing is a discipline; it is an art and a science which involves a commitment to human caring and special regard to underserved populations. Nursing is an interpersonal process that promotes health and wellness for the body, mind, and spirit across the lifespan. Nursing provides a service to humanity and exerts an ethical influence on society. Professional nursing requires knowledge of professional and personal ethics, and value-based decision making. Professional nursing requires an understanding of the person, sensitivity to the human condition, a global perspective and cultural consciousness, a concern for human life and well-being, a scientific knowledge base, and clinical competencies.
The nursing faculty views the person as a unique being, created in the image of God, possessing a sacred unity of mind, body, and spirit with inherent value. Endowed with self-determination, the person seeks to meet needs, to realize intrinsic potential, and to find meaning in life; thus, each person is ultimately accountable for their choices in life.

Health is subjectively interpreted and reflects the person's perception of well-being. Changes in health are the result of the dynamic interaction of the internal and external elements which constitute the person's environment. Well-being is living a personally defined meaningful and fulfilling life accomplished by self-determination.

The nursing faculty emphasizes that learning is a life-long process. The learner is an active, engaged participant in the teaching-learning process. We believe that a helping-trusting-caring relationship enhances learning. In an interpersonal teaching-learning process, the faculty serves as facilitators, role models, resources, change agents, and co-learners. Faculty engages students to know and practice quality and safe nursing care.

B. BSN NURSING PROGRAM and CURRICULUM

1. PURPOSE OF THE BSN NURSING PROGRAM

The BSN Program prepares generalists in nursing to assist persons, families, and communities toward the goal of health throughout life. A baccalaureate education in nursing provides each student with the knowledge base for practicing professional nursing. The curriculum is based on a liberal arts foundation in the Judeo-Christian tradition and utilizes the AACN Essentials of Baccalaureate Education for Professional Nursing Practice within an integrated caring curriculum.

The faculty of the Department of Nursing has embraced the concept of the learner as an individual who has acquired the self-concept of being responsible for one's self and of being self-directed. We view learning as a self-motivated and voluntary endeavor on the part of our nursing students. We also have, in response to our caring curriculum, moved away from the traditional role of teacher to that of facilitator of learning. Upon completion of the curriculum, the graduate possesses a foundation for graduate study.

The baccalaureate nursing program at Saint Francis University has full approval by the Pennsylvania State Board of Nursing and is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW Suite 750, Washington, DC. 20001, (202) 887-6791. [http://www.ccneaccreditation.org](http://www.ccneaccreditation.org) A graduate is eligible to sit for the R.N. licensure exam, NCLEX-RN®.

2. BSN NURSING PROGRAM GOALS

1. Provide a liberal educational program of academic excellence which emphasizes critical reflection and cultivates professional caring attributes.

2. Provide an education program based on the Essentials of Baccalaureate Education for Professional Nursing Practice (2008) whereby care is given using a mind-body-spirit

3. Provide dynamic educational opportunities to develop the caring attributes in preparation for professional nursing practice.

4. Prepare the graduate for ethical leadership and management roles including health policies, finances, and regulatory environments in order to promote safe, quality, patient-centered health care environments.

5. Prepare individuals at the baccalaureate level to assume interprofessional leadership roles across the continuum of health care environments.

6. Provide a foundation for graduate study.

7. Foster life-long learning and stimulate personal and professional growth.

8. Increase the number of nurses prepared at the baccalaureate level that are educated within a caring paradigm.

3. BSN STUDENT LEARNING OUTCOMES

1. Synthesize knowledge from the humanities and sciences, advanced nursing concepts, and applicable evidenced-based practice to enhance the art and science of nursing care.

2. Espouse a life-giving mode of being derived from The Prayer of Saint Francis for use in interprofessional communication and collaboration to establish therapeutic and human caring relationships with individuals, families, and communities.

3. Utilize technology and informatics to improve the delivery of nursing care, quality of care, health care outcomes, and the delivery of health education to multiple populations.

4. Employ the caring-nursing process to maximize wellness in the delivery of culturally competent professional nursing care for individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments.

5. Affirm professionalism in the art and science of nursing care by understanding the ramifications of health care policy, finance, and regulatory environments on nursing care.

6. Assume the professional nursing roles of caregiver, teacher, advocate, and care manager by utilizing basic organizational and systems leadership skills to promote quality patient-centered care and patient safety.

4. PRAYER OF SAINT FRANCIS

LORD,

Make me an instrument of Your peace.
Where there is hatred, let me sow love;
Where there is injury, pardon;
Where there is doubt, faith;
Where there is despair, hope;
Where there is darkness, light; and
Where there is sadness, joy.

O, Divine Master,

Grant that I may not so much seek
To be consoled as to console;
To be understood as to understand;
To be loved as to love;
For it is in giving that we receive;
It is in pardoning that we are pardoned;
and it is in dying that we are born
to eternal life

5. CURRICULUM CARING STRAND

The "7 C's" of Caring

The C's of Caring are utilized by the nurse in all areas of the practice of nursing. The first “6 C's of Caring” (Roach, 1984, 1992, 2002) are attributed to Sr. S. Roach who describes the attributes of Caring. These C's of Caring are not mutually exclusive and are a basis for identification of certain CARE behaviors. The “7th C” was developed from Boykin and Schoenhofer (1993).

1. Compassion: Showing empathy; responding in kindness; recognizing patient/family needs and taking appropriate action. Compassion is the essential component of the nurse/patient relationship. Experience with others, seeing them with worth, and experiencing health problems. Humanizing ingredient, to allow one to share and make room for others. Is a relationship where patient/family is able to share sorrows, pain, accomplishments. Means to be with another in their suffering. Is empathy and sensitivity to human pain and joy that allows one to enter into the experience of another. Is the understanding of whom the patient/family truly is for whom the nurse is caring.

2. Competence: Skillful; properly qualified. Knowledge, judgment, skills, energy, experience and motivation. Required to respond to the demands of professional responsibilities. Without it would have harm to patients/families. Knowledge of the health condition, the treatment, what is available. Understand illness, symptom treatment: physical, emotional, etc. High degree of cognitive, affective, technical, and administrative skills. Works with compassion, so not to be harsh or inhumane. Responsibility requires preparation and practice. Disciplined effort. Is acquiring and using evidenced-based scientific and humanistic knowledge and skill in therapeutic interventions. It is the knowledge of the role of the nurse in the health care delivery systems. Is related to conscience, including with relationships that are difficult as well as enjoyable and gratifying.

3. Confidence: Hope; feeling of assurance. A quality that communicates and fosters trusting relationships. Necessary to effectively implement nursing roles. One’s ability to create a caring environment.

Empowers the nurse and others for accomplishing goals. Developed through successful utilization of knowledge and experience. To instill in patient/family feeling of confidence of
caregivers. Patient trusts the nurse when the nurse gives good information and advice. Information is based on sound knowledge and experience. A negative is deception which destroys confidence, and is the exact opposite (antithesis) of caring. Confidence in one’s ability to create CARING environments, which serves as empowerment (catalyst) for change. Is developed through successful utilization of knowledge and experience.

4. **Conscience:** A state of moral awareness; ethical and legal obligations. Grows out of valuing self and others. Directs moral, ethical, and legal decision-making. Motivates the nurse to increase knowledge and skills needed to respond morally, ethically, and legally. It directs the nurse to know and adhere to the standards of professional nursing practice. Directs response to social injustices; increases awareness of local, state, national, and global health concerns of all populations. Is the accountability, responsibility, and leadership for patient care. Involves spiritual power of influencing others (affectivity). Grows out of valuing self and others.

5. **Commitment:** Being present and attentive to patient’s state of being and bound to his/her emotional, intellectual, spiritual, and physical needs. It is staying with the patient that conveys commitment. It is the coming together (convergence) of the nurse’s desires and obligations, and making the deliberate choice. It becomes what one prefers to do. It becomes second nature (internalized). It is deliberate reflection and choice. It is the conscious effort to grow with continuing education, life-long learning, increasing all skills. It is internalizing accountability with responsibility. Is maintaining and elevating standards and obligations of the nursing profession.

6. **Comportment:** In harmony with a caring stance with dress, appearance, language and attitude to communicate a caring presence. Includes self-awareness and impact of the self on others, and accepting responsibility of one’s own actions and inactions. These are symbols of communication. This extends to responsibility for the health care environment, patient safety, and the behavior of others who contribute to it.

7. **Creativity:** Explores ways to use nursing knowledge and knowledge from other disciplines. Use of research, evidence based practice, and new possibilities for practice, teaching, administration, and inquiry.

6. **THE CARING DOCUMENT**

A Life-giving mode of being as exemplified by the *Prayer of Saint Francis*:

**Lord, make me an instrument of Your peace**
1. Affirms the commitment to be used for the peace and well-being of another.
2. Acknowledges health as peace and harmony within the body-mind-spirit of the person.
3. Provides safe and quality nursing care using a holistic perspective.
4. Expresses humility:
   a. in the recognition of one’s strengths
   b. in the recognition of one’s areas for improvement
   c. by seeking appropriate assistance
   d. by accepting assistance and constructive criticism graciously
Where there is hatred, let me sow love;
1. Accepts the person as a unique being made in the image of God with inherent value and dignity regardless of circumstances as evidenced by respectful verbal and nonverbal interaction.
2. Possesses traits of life-giving behaviors such as compassion, openness, gentleness, kindness, and patience.

Where there is injury, pardon;
1. Allows the person to express positive and negative feelings without feeling defensive and while offering understanding and support.
2. Adheres to standards of professional competence while acknowledging the role of learner.
3. Identifies spiritual needs of forgiveness and reconciliation, understanding and support.

Where there is doubt, faith; where there is despair, hope;
1. Is honest and genuine in interactions.
2. Is calm and confident in interactions with others.
3. Acknowledges the healing power of belief.
4. Displays professional comportment in demeanor and presence.

Where there is darkness, light;
1. Identifies, accepts, and explores one's own feelings.
2. Expresses sensitivity and feeling towards others.
3. Enlightens others on health promotion and disease and injury prevention.
5. Uses values-based clarification/consciousness and moral inquiry to attain a mature conscience.
6. Identifies services, using an interdisciplinary approach, to benefit the poor and vulnerable populations.

Where there is sadness, joy;
1. Acknowledges the healing properties of appropriate humor.
2. Exhibits an appropriate cheerfulness.
3. Is able to laugh at oneself.

O Divine Master, grant that I may not so much seek to be consoled as to console;
1. Is available and present for others.
2. Accepts expression of other's feelings.

To be understood as to understand;
1. Demonstrates empathy.
2. Identifies and utilizes research in evidence-based practice to create new possibilities for practice, including Evidenced-Based Research (EBR).
3. Uses principles of critical thinking and clinical reasoning to identify client needs and promote positive care outcomes.

For it is in giving that we receive;
1. Ascribes to an altruistic philosophy.
2. Expresses that life is lived in accordance with a value system.
3. Identifies how caring for another can assist one in the process of and self-actualization.
## 7. LEVEL COMPETENCIES

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<tbody>
<tr>
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<td>NURS 410</td>
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<tr>
<td>CORE 407</td>
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<tr>
<td>(capstone)</td>
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<td>GETM IV</td>
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</table>

1. Acquires a knowledge base from the humanities and sciences, to provide a foundation for the art and science of nursing care.

2. Identify the life-giving mode of being derived from The Prayer of Saint Francis.

3. Develop and learn how to apply information literacy skills for formal composition assignments.

4. Defines the caring-nursing process as a basis for professional nursing practice.

5. Discusses professionalism in nursing from an historical and contemporary perspective.

6. Identifies the roles within professional nursing.

*Eng 103 links to another general education course during the term.*

**Foreign Language 102 or above has varied placement, starting sophomore year.**
8. SUGGESTED PROGRAMS OF STUDY

Saint Francis University

Department of Nursing

Bachelor of Science in Nursing (BSN) 128 credits

Freshman (Fall)

<table>
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<tr>
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<td>____PSYC 101 Intro to Psychology</td>
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<tr>
<td>____BIOL 111 Biology I</td>
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<tr>
<td>____MATH 107 College Algebra</td>
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Freshman (Spring)

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<td>____CHEM 113 Human Chemistry</td>
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<td>____Fine Arts elective (100 or higher)</td>
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<td>____SOC 101 General Sociology</td>
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<td>____HIST 100-200</td>
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<td>____ENGL 103 Writ. For Discipline</td>
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<td>____CORE 104 Comm. Enrichment Series</td>
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<td>____NURS 100 Intro to Professional Nsg</td>
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Sophomore (Fall)

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<tr>
<td>____BIOL 205 Anatomy &amp; Physiology I</td>
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<td>____BIOL 214 Microbiology</td>
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<tr>
<td>____STAT 205 Statistics (GETM II)</td>
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<tr>
<td>____ENGL 104 Writ. About Literature</td>
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<td>____PHIL 205 Discovering Philosophy</td>
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<td>____CORE 211 Personal Wellness</td>
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Sophomore (Spring)

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<tr>
<td>____BIOL 206 Anatomy &amp; Physiology II</td>
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<td>____LANG 102</td>
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<tr>
<td>____NURS 200 Assessment of the Person</td>
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<td>____GETM III</td>
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TOTAL = 16 credits

Junior (Fall)

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<tr>
<td>____NURS 300 Fundamentals-Human Care</td>
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<td>____NURS 301 Care/Childbearing Family</td>
<td>4cr</td>
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<tr>
<td>____NURS 311 Human Nutrition</td>
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<td>____NURS 316 Patho/Pharm I</td>
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<td>____NURS 302 Care of Adults – Acute</td>
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<td>____NURS 303 Care of Children</td>
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<td>____NURS 403 Nursing Research</td>
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<td>____NURS 416 Patho/Pharm II</td>
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TOTAL = 17 credits

Senior (Fall)

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<tr>
<td>____NURS 401 Care/Life Threatening</td>
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<td>____NURS 405 Care/Human Community</td>
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<td>____CORE 407 Senior Capstone</td>
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TOTAL = 17 credits

Senior (Spring)

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<tr>
<td>____NURS 402 Care/Psych-Mental Hlth</td>
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<td>____NURS 404 Care of Adults – Chronic</td>
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<td>____NURS 413 Mgt/Leadership Practicum</td>
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<td>____EXAM 401 Senior Comprehensive</td>
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TOTAL = 13 credits

* Students must pass these courses with a grade of C or better
** Sophomore students need to take and pass a Math Proficiency Exam
^ Pre-requisite for NURS 201
^^ Students can consider taking BIO 214 in the summer.

For entrance into the Professional Phase of Nursing, NURS 300 Level courses, students must have a 2.75 minimum overall QPA and a minimum overall Natural Science QPA of 2.6 or higher.

Rev. 6/18
9. GENERAL EDUCATION PROGRAM CHECK SHEET 2018 – 2019

Complete all courses from the following areas during your FIRST year:

<table>
<thead>
<tr>
<th>CORE (3 Credits)</th>
<th>English (3 Credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ CORE 103 Community Enrichment Series 0</td>
<td>___ ENGL 103 Writing for a Discipline 3</td>
</tr>
<tr>
<td>___ CORE 104 Community enrichments Series 0 * This course will link with another subject area, please see the Class Schedule for the link</td>
<td></td>
</tr>
<tr>
<td>___ CORE 113 First Year Seminar 3</td>
<td></td>
</tr>
</tbody>
</table>

* If applicable for 2013-2014 year

Complete all course from the following areas during your SOPHOMORE year:

<table>
<thead>
<tr>
<th>CORE (0 Credits)</th>
<th>English (3 Credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ CORE 211 Wellness Inside &amp; Out* 0</td>
<td>___ ENGL 104 Introduction to Literature 3</td>
</tr>
<tr>
<td>___ CORE 212 Wellness Inside &amp; Out* 0</td>
<td>___ PHIL 205 Reason &amp; Responsibility 3</td>
</tr>
</tbody>
</table>

Complete the following during your JUNIOR or Senior year:

<table>
<thead>
<tr>
<th>Core (0 Credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ EXAM 301 Writing Competency Exam 0 or ___ ENGL 199 Argumentative Writing 3 (Need to earn a “C” or better)</td>
</tr>
</tbody>
</table>

Students with Junior status (based on # of credits) are automatically in the WCE unless they enroll on ENGL 199. Students who failed the WCE twice or who achieve Senior status without having passed the WCE are automatically enrolled in CORE 199, Writing Intensive Seminar, 0 credits, in order to prepare for the WCE.

Complete TWO courses from different disciplines of Social Sciences, three credits from Fine Arts, and ONE course of language studies. These can be taken ANY TIME during your studies.

<table>
<thead>
<tr>
<th>Social Sciences (6 Credits)*</th>
<th>Fine Arts (3 Credits)</th>
<th>Language (3 Credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ ECON 101 Principles of Economics 3</td>
<td>Three credits from FNAR&lt; ART, MUS, OR THTR:</td>
<td>___ Any language course numbered 102 or above: 3</td>
</tr>
<tr>
<td>___ PSYC 101 Introduction to Psychology 3</td>
<td>___</td>
<td>___</td>
</tr>
<tr>
<td>___ Any 100 or 200 level Sociology Course 3</td>
<td>___</td>
<td>___</td>
</tr>
<tr>
<td>___ PLSC 102 American National Government 3</td>
<td>OR</td>
<td>OR</td>
</tr>
<tr>
<td>OR</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>___ PLSC 103 World Politics 3</td>
<td>OR</td>
<td></td>
</tr>
<tr>
<td>OR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OR</td>
<td>Any 200 or 300 level course in Political Science, with instructor’s permission:</td>
<td></td>
</tr>
</tbody>
</table>

*=must be from two different disciplines

Total Credits = 36
10. GENERAL EDUCATION Thematic Minor/Open Program

**GENERAL EDUCATION THEMATIC MINOR/OPEN PROGRAM**
Completion of GETM or the Open Program accounts for the final 15 credits of the General Education Program
Please see the updated list of courses available for GETM on the General Education localweb
http://info.francis.edu/paradigms/

Circle One:

<table>
<thead>
<tr>
<th>Active Citizenship</th>
<th>Global Community</th>
<th>Science, Techn., &amp; Society</th>
<th>Servant Leadership</th>
<th>Social Justice &amp; Peacemaking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sustainability &amp; the Environment</td>
<td>Utopian &amp; Dystopian Visions</td>
<td>Women, Family, &amp; the Community</td>
<td>Open Program</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
<th>Semester Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Ethics</td>
<td></td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>(Ethics: Humanities 200 level or above (ENGL, FNAR, HUM, HIST, PHIL, RLST, LANG)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Science and Quantitative Literacy</td>
<td></td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>(Science/Quant. Literacy: Mathematical reasoning, quantitative literacy, or scientific processes or concepts)</td>
<td></td>
<td></td>
<td></td>
<td>(Science/Quant.</td>
</tr>
<tr>
<td>(3) Diversity and Communications</td>
<td></td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>(Diversity/Comm.: Respect for another culture/value system or stress social justice/conflict res.; effective verbal or written commun)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Social Systems</td>
<td></td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>(Social Systems: Taught by or approved by the faculty in the Social Sciences (ECON, PSYC, PLSC, SOC)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Seminar</td>
<td>CORE 407</td>
<td>Keystone Seminar</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

Total GETM/Open Program Credits 15

Please note the following:
1. Students must take a religious studies course (RLST) or Philosophy (PHIL) course to fulfill either the Category 1 or Category 3 requirement.
2. Courses may be added to each GETM as required by the General Education program; students and advisors should consult the updated list on the local web and the course listing during registration to see what options are available for each category in a given GETM.
3. Students may use course(s) required by their major to fulfill GETM requirements, if the course(s) are included in a GETM category.
IV. POLICIES AND PROCEDURES

1. ABSENCE FROM CLASS - CLINICAL EXPERIENCE POLICY

A. Clinical Policy

The Department of Nursing at Saint Francis University believes that clinical experiences are essential to the education of our students. Our curriculum is designed to give the student clinical experiences that are increasing in intensity, acuity, and time spent in the clinical arena. It is the expectation that each student attends all scheduled clinical experiences, but we recognize that situations may arise that necessitate the student be absent from one or more of these experiences. For this reason, the Department of Nursing has instituted a clinical absence policy that will afford the student the opportunity to make up missed clinical time, thereby not jeopardizing their clinical learning experiences due to absences.

1. If clinical day is cancelled due to University class cancellation, those days/hours do not need to be made up.
2. If the clinical day is cancelled due to inclement weather, the clinical day will be made up on one of the regularly scheduled “clinical make up days” or as determined by the clinical faculty.
3. If the clinical day is cancelled by the faculty due to his/her personal illness, the clinical day will be made up according to a day and time determined by the faculty; ideally this will be on a “clinical make up day.”
4. If a student misses one clinical day due to illness or an athletic event, the student may be offered an alternate clinical assignment that will be comparable in time and learning experience to a clinical day. Completion of this alternate assignment will be due as per the clinical instructor. If the complete assignment is not submitted by the deadline, the course grade may be lowered one step. The student is responsible to ensure that electronic submissions are properly submitted and received by the instructor. At the discretion of the clinical faculty, the student may be asked to make up this clinical day on a day and time as determined by the clinical faculty instead of being offered an alternate assignment.
5. The clinical instructor and preceptor must receive notification of absences at least 1 hour prior to the start of the clinical experience. Failure to communicate to the instructor prior to the start of the clinical experience will result in an “unexcused absence.”
6. If a student misses more than one clinical day, the clinical day(s) will be made up on the clinical unit (or a unit that is comparable) on a day(s) to be determined by the clinical faculty. If any “clinical make up days” are available, these may serve as the days that the clinical experience can be made up. Any days that need to be made up beyond these “clinical make up days” may necessitate the student having the clinical experience(s) on a weekend or after the semester has ended. If, at the end of the semester, the student still needs to make up clinical days, a “continuing” grade will be issued in the respective course until which time the student successfully completes the clinical experience. Additionally, there may be a cost incurred to the student if faculty needs to be hired to oversee the student on the clinical site beyond the predetermined clinical make up days.
7. Students with absences secondary to extenuating circumstances will be addressed on a case
by case basis to ensure students are able to meet course objectives.

8. Repeated tardiness and/or absences will result in a Letter of Concern for the course.

   a. Two tardy episodes are equal to one absence.

   b. **IF A STUDENT DOES NOT NOTIFY THE APPROPRIATE INSTRUCTOR OR PRECEPTOR OF AN ABSENCE OR TARDINESS PRIOR TO CLINICAL, IT IS AN AUTOMATIC UNEXCUSED ABSENCE.**

   c. Two unexcused absences will result in the student’s grade being lowered by one step and the generation of a Letter of Concern.

   d. Two Letters of Concern regarding unexcused absences will result in failing the course.

**B. Classroom Policy**

1. Students are required to attend and be on time for class, laboratories, and clinical experiences and not leave assigned work undone.

2. Faculty have the option of excluding students from class/clinical if tardy and/or unprepared.

3. If unable to attend class, laboratory, or clinical on campus, the student is required to notify the appropriate faculty person 1 hour prior to the start time. Additional course policies may be outlined in the syllabi.

4. Repeated tardiness and/or absences will result in a Letter of Concern for the course.

   a. Two tardy episodes are equal to one absence.

   b. **IF A STUDENT DOES NOT NOTIFY A FACULTY MEMBER OF AN ABSENCE OR TARDINESS PRIOR TO A CLASS OR CLINICAL, IT IS AN AUTOMATIC UNEXCUSED ABSENCE.**

   c. Two unexcused absences will result in the student’s grade being lowered by one step and the generation of a Letter of Concern.

   d. Two Letters of Concern regarding unexcused absences will result in failing the course.

5. Faculty will monitor patterns of tardiness across all courses. While these episodes of tardiness and absence may not be sufficient to warrant a Letter of Concern for a particular course, **three tardy episodes within a semester will generate a Letter of Concern.** Tardiness patterns will be reviewed by the Committee on Student Admission, Progression, and Placement (CAPP) for possible action. Possible actions may include dismissal from the Nursing Program. When absences/tardiness occurs, the faculty member will initiate a Letter of Concern form. The student involved will then be responsible for completing the requested information on the form, including the plan for corrective action. Letter(s) of Concern will be stored in the student’s file. This is information employers request with recommendations.
6. Students with absences secondary to extenuating circumstances will be addressed on a case by case basis to ensure students are able to meet course objectives.

C. Cancellation of On-Campus Classes

The faculty is committed to the education of students. Classes will only be canceled in cases of extreme emergency. The faculty responsible for the class will post a policy for notification of cancellation of class in their course syllabus. Please see the University Faculty Handbook for University cancellation policies. Faculty will offer make up time for any missed classes.

2. ACADEMIC GRIEVANCE POLICY

An Academic Grievance is a formal complaint by a student of any grade appeal, or academic concern. The student must file the formal complaint in writing using step 1 in the process below.

A. Grievance and Appeal Process

Students appealing a grade will follow the procedure outlined in the University Catalog and the academic grievance procedure. This grievance procedure must be initiated within two weeks of receiving the grade. Please refer to the current University Catalog for the University policies and procedure regarding grade appeal.

If a student has cause for a formal complaint in the nursing program the student must adhere to the following process:

1. Discuss and present in writing the grade or academic concern in question with the course instructor. Subsequently, the instructor and student will initiate the Referral of Concern Form (see Section III).

2. If the student does not resolve the grievance in step one, the student will then discuss the grievance with the Level Coordinator. The Level Coordinator will provide a recommendation to the Program Director.

3. If the grievance is still not resolved, the student will then discuss the issue with the Chair of the Department of Nursing. After this discussion, the Chair will provide a recommendation to the Dean of the School of Health Sciences. The student needs to complete the School of Health Science Student Appeal to Dean Form (see Section IV).

4. The Dean of the School of Health Sciences will provide his recommendation.

5. Should there still be no resolution to the grievance, the student may then present the grievance as outlined in the University Policies and Procedures. Copies should be placed in the student’s file and the department’s file on grievances.

B. Resolution of Formal Complaint

Copies of all documentation should be placed in the student’s file and department file on grievances documenting the outcomes or resolution of the complaint.
C. School Of Health Sciences Student Appeal Policy

Students in the School of Health Sciences must have the opportunity to raise matters of concern without fear of disadvantage and in the knowledge that their privacy and confidentiality will be respected as well as that of members of faculty and staff.

Procedures: The aim of these procedures is to ensure rigorous quality assurance of the academic decision-making processes by providing students with a fair, transparent and just formal process which makes sure that academic decisions have fully taken into account all required procedures and processes, and the consideration of any valid extenuating circumstances. Common appeals include: grade changes, lack of progression, academic probation/dismissal, assertion of policy not being followed, etc.

1. Student initiating an appeal must begin and complete the process identified by the respective department, within the specified timeframe.
2. If the appeal is not granted by the Department, the student may opt to appeal to the Dean of the School of Health Sciences, using the appropriate form. This appeal must be made and received in the Dean’s Office within 5 business days of notification of the appeal being denied by the department.
3. The Dean of the School of Health Sciences will notify the appropriate Department Chair of the student’s appeal and request the student’s educational record and/or any pertinent documentation related to the appeal.
4. The Dean of the School of Health Sciences will also alert the School of Health Sciences Appeals Board* of the appeal and schedule a meeting to review the appeal with the Appeals Board.
5. Following thorough review of this documentation, the School of Health Sciences Appeals Board may meet with the involved Department Chair and an additional departmental faculty member as deemed appropriate by the Chair (may include faculty member involved in the appeal, student advisor, etc.) to ask clarifying questions and to fully understand the reasons for the denial of the appeal.
6. The School of Health Sciences Appeals Board may contact the student within 5 business days to schedule a meeting with the student, either face-to-face, via conference call or other electronic meeting mechanisms to review the student’s appeal and seek clarification. Emphasis of this meeting will include:
   a. Adherence to established policies
   b. Consideration of any extenuating circumstances
7. The School of Health Sciences Appeals Board will deliberate and come to a decision (simple majority vote) based on the above meetings.
8. The School of Health Sciences Appeals Board will notify the involved Department Chair and the additional departmental faculty member (see #4 above) of the final appeal decision via e-mail.
9. The Dean of the School of Health Sciences will then notify the student of the final appeal decision via e-mail, utilizing the official appeal form.

*The School of Health Sciences Appeals Board will consist of: The Dean of the School of Health Sciences; the Associate Dean of the School of Health Sciences; An additional Chair from one of the Health Sciences Departments who is appointed on an annual rotating basis. An alternate member will also be appointed in an annual rotating basis. In the event that the appeal originates from the Department from which the Associate Dean or other appointed member, the
Appeals Board will consist of the Dean, the alternate member and an additional chair from Health Science Departments not involved in the appeal. Refer to the Appeals Board document for a list of current Appeals Board members.
D. Referral of Concern Form

REFERRAL OF CONCERN

Name of Student: ___________________________  Course: _____________________________

I. Identify current theory grade average:

II. Identify the problem: State learning objective or program requirement or policy not being met. (cite page numbers):

III. Note student strength and weakness regarding the situation.

IV. Identify measures used to offer student assistance in improving performance.

V. Course Coordinator/Level Coordinator Recommendation:

VI. Program Director Recommendations

VII. Chair Recommendation:

__________________________  ___________________________
Signature of Instructor                                Date

__________________________  ___________________________
Signature of Course Coordinator/Level Coordinator      Date

__________________________  ___________________________
Signature of Program Director                          Date

__________________________  ___________________________
Signature of Chair                                      Date

__________________________  ___________________________
Signature of Student                                    Date

Reviewed 5/3/2018
E. School of Health Sciences Student Appeal to Dean Form

Saint Francis University
School of Health Sciences
Student Appeal to Dean

Student Name: Click here to enter name.
Major: Click here to enter major.
Date of Appeal Submission: Click here to choose date.

1) Appeal Request:
   a. Please clearly and succinctly explain what you are appealing.
      Click here to enter text.
   b. Why are you appealing?
      Click here to enter text.
   c. What outcome do you hope to attain?
      Click here to enter text.

2) Policy being challenged or Extraordinary Circumstances:
   a. Please reference the policy and elaborate on what you believe has been violated.
      Click here to enter text.
   b. Describe any extraordinary circumstances, which contribute to this appeal.
      Click here to enter text.

3) Actions to Date:
   a. What actions have you taken to date?
      Click here to enter text.
   b. What actions has the department taken to date?
      Click here to enter text.
4) Other:

a. Is there any additional information you want to convey related to this appeal? Click here to enter text.

Student Signature: Click here to enter electronic signature.

______________________________________________________________

Office use only. Do not write below this line.

Received by Dean's Office: ______________

Appeal Decision:

_________________________________________________________________

Copies to:
3. ADVISING POLICY: FACULTY/STUDENT

In addition to the counseling and advising services provided to all Saint Francis University students as outlined in the current University Catalog, students enrolled in the Nursing Program are provided with academic advising services through the Department of Nursing. The purpose of the Department of Nursing Advising Program is to assist each nursing student in planning, implementing, and evaluating his/her academic goals in accordance with Saint Francis University and specific nursing curriculum goals. Academic advising is available to all freshmen, sophomore, junior and senior nursing students; advising sessions can be initiated by either the faculty member or the student. Faculty members also utilize referral resources available at Saint Francis University for additional counseling and advising as the need arises.

Full-time faculty members are assigned specific nursing students by the Department Chair at the beginning of each academic year for the purpose of academic advising. Student advisees and faculty are responsible for meeting each semester to evaluate the student's present status in the Nursing Program and to establish specific plans for progression through the Saint Francis University nursing curriculum.

Faculty advisors may schedule additional meetings with each assigned student throughout the semester as necessary. A schedule of the faculty office hours is posted on individual office doors. A student may also arrange for an appointment with his/her faculty advisor during scheduled office hours. If this is not possible, other arrangements will be made by the advisor and student. A summary of each meeting will be documented by the faculty advisor and maintained in the student's file in the Department of Nursing.

4. AMERICANS WITH DISABILITIES ACT

A. Office of Disability Services

Saint Francis University is a community that welcomes and embraces students with disabilities. Each disability is unique and for this reason, services are individually tailored to the needs of each student. Students who request accommodations based on a disability, in this or any other course, must contact Ms. April Fry, Accessibility Service Coordinator, at 814-472-3176 or afry@francis.edu, before the semester begins or as soon as possible after the semester begins. After the proper documentation is approved by that office, students must then schedule individual meetings with individual faculty in their offices to discuss the specific needs for courses.

B. Accommodations Process

Accessibility Services will facilitate reasonable accommodations for students with disabilities. A disability, as defined by federal law, is a physical or mental impairment that substantially limits one or more major life activities such as walking, hearing, seeing or learning. A student requesting accommodations must self-identify and provide recent documentation of his or her disability to Accessibility Services. This documentation is used to establish the student as an individual with a disability, and provides rationale for reasonable accommodations.
If accommodations are needed, the student with a documented disability will receive an accommodation letter from Accessibility Services to take to each instructor. It is the student's responsibility to deliver these letters as soon as possible. Instructors should expect to receive notification early in each semester.

Students who request accommodations based on a disability must contact Ms. April Fry in Accessibility Services in 111 Saint Francis Hall at 814-472-3176 or afry@francis.edu, before the semester begins or as soon as possible after the semester begins. After the proper documentation is approved by that office, students must then schedule individual meetings with individual faculty in their offices to discuss the specific needs for courses.
5. DRUG AND ALCOHOL POLICY

SAINT FRANCIS UNIVERSITY
SCHOOL OF HEALTH SCIENCES (SHS)

Drug and Alcohol Policy

Rationale
Those employed in the field of healthcare are entrusted with the safety, health, and welfare of patients and work in settings which require that sound ethical behavior and good judgement be exercised. Some majors within the School of Health Sciences will even have the ability to prescribe and / or have access to controlled substances within their chosen profession therefore requiring an absolute commitment to these principles.

The use of illicit drugs, non-prescribed drugs or impairment due to alcohol consumption can diminish the student’s ability to learn in the classroom as well as their ability to provide adequate and appropriate care in the clinical setting. Therefore the use of illicit drugs, non-prescribed drugs and / or being under the influence of alcohol in the classroom or clinical setting will not be tolerated.

Clinical facilities that serve as educational and training sites for students require that every department verifies that each student has a negative drug and / or alcohol screen prior to scheduling students at their facility. Additionally, many licensing agencies require individuals to pass a drug screen as a condition of licensure and / or employment. Clinical rotations / field experiences / internships are a required element of all programs within the School of Health Sciences. It is thus in the interest of both the students and the School of Health Sciences to identify any barriers to a student completing the clinical education requirements to allow the student to graduate with a degree within the School of Health Sciences.

In keeping with the Safe Harbor policy found in the Alcohol and Other Drugs Policy in the University’s Student Handbook, any currently enrolled School of Health Sciences student who brings their own use, addiction or dependency to University officials or academic department / program personnel at least three days prior to student notification of any drug / alcohol testing or prior to any conduct sanctions and seeks assistance will not be immediately dismissed from the health science major. A written action plan between the academic department / program and student will be created. This plan may include, but not be limited to a mandated leave of absence to complete a certified drug treatment program, conditions of readmission / continuation in the health science major, and additional drug screenings performed at cost to the student. Failure to follow the action plan will nullify the Safe Harbor protection and lead to dismissal of the student from the health science major except for the B.S. in Health Care Studies major, which does not require clinical experiences.

SHS Drug and Alcohol Policy and Procedures
1. Any student within the School of Health Sciences who violates the Alcohol and Other Drugs Policy in the University’s Student Handbook for example, by possessing an illicit drug substance in University housing, will be required to submit to appropriate drug or alcohol testing.
   a. Students who are involved with any violation of the University’s Illegal Drug Policy will be required to submit to drug testing as soon as possible, but no later than three days following the incident. The student will be responsible for the cost of testing in this incident.
b. Students exhibiting signs of excessive alcohol consumption will undergo a field sobriety test performed by the University Police Officers or other appropriate law enforcement personnel. Any student that does not pass the field sobriety test will be required to be transported via Emergency Medical Services (EMS) at the student’s expense for medical attention, including a blood alcohol content level.

2. Depending on their academic major, students may be required to submit to drug screens prior to admission to and/or progression into the professional portion of the academic major and/or prior to or during clinical experiences. Students should be prepared for drug or alcohol testing at any point in their education and must comply when a test is scheduled.

3. Drug screens will be scheduled by the academic department/program as needed and/or required by clinical sites or when use is suspected.
   a. If the student is taking a prescribed substance, they are required to disclose the prescription information to the testing site personnel prior to the testing.
   b. Students subsequently must provide written documentation from their licensed health care provider to the testing site that performed the screen within two business days that there is a medical necessity for the medication.
   c. Failure to submit appropriate documentation to the testing site from a licensed health care provider for medical necessity for the medication will result in the test being considered a “positive” result.
   d. Despite a medical necessity for taking this medication, the student may not be able to attend clinical experiences if this medication impairs the student’s ability to appropriately function and meet the physical and cognitive functioning required for the safety of the student and patients. A decision regarding the student’s ability to participate in clinical experiences will be made at the academic department/program level utilizing each department’s/program’s current student review processes.
   e. Students are able to request a medical leave of absence if they believe that a medical condition and its subsequent treatment would prohibit them from appropriately functioning in their role as a student health care provider.

4. Drug testing may be performed through any of the following methods:
   a. Urine drug testing
   b. Hair follicle testing
   c. Clinical facility policy, if applicable

5. Students will be notified about associated fees for required drug screens from their respective academic department/program. Students will be responsible for the cost of all screens, either individually or through an academic department/program designated budget line that includes student fees for that purpose.

6. If screening for alcohol use is warranted, screens will be performed by obtaining a blood alcohol content level. The student will be responsible for the cost of any testing related to suspected alcohol use or abuse.

7. The program director, program or any School of Health Sciences faculty and clinical preceptors/facility reserve the right to request a drug or alcohol screen when use is suspected.
   a. If a student appears to be impaired, they will be removed from the clinical experience, class, or activity immediately.
   b. Any faculty member or clinical preceptor/facility who suspects alcohol impairment or use of illicit or non-prescribed drugs may require that the student submit to an alcohol or drug screen.
This testing could be scheduled on the same day as the suspected incident, especially if alcohol use is suspected. The student will be responsible for the cost of testing in this incident.

b. If an incident occurs on campus with suspected excessive alcohol consumption, the University Policy will be contacted to perform a field sobriety test. Any student that does not pass the field sobriety test will be required to be transported via EMS at the student’s expense for medical attention, including a blood alcohol content level.

d. If the clinical preceptor / facility suspects any impairment due to drugs and / or alcohol, the academic department / program is to be notified immediately. The scent of alcohol on the breath while at a clinical site will also not be tolerated. Testing may occur according to the School of Health Sciences Drug and Alcohol policy or the clinical facility’s policy, if appropriate.

8. Failure to complete a drug or alcohol screen which has been scheduled by University personnel and / or the student’s department faculty or clinical preceptor / facility will be considered as a positive result.

9. Students within the School of Health Sciences will sign a Department / Academic Program Drug and Alcohol Policy Contract and Consent form with a waiver of liability releasing the results of any drug or alcohol testing information to the academic department / program and any clinical site that may require the reported results.
   a. Failure to sign this form will result in automatic dismissal of the student from the School of Health Sciences major except for the B.S. in Health Care Studies major, which does not require clinical experiences.
   b. Students who are licensed professional nurses will also be directed to the Volunteer Recovery Program (Commonwealth of Pennsylvania Bureau of Professional and Occupational Affairs Professional Health Monitoring Programs) which offers the eligible professional an alternative to board disciplinary action from becoming a permanent part of their professional licensing record.

10. If the result of the drug or alcohol screen is positive as determined by the appropriate Medical Review Officer at the testing site, the Department Chair / Program Director or an appointed designee will be notified in writing of the results of the drug screen, typically within two business days. The results of any testing completed off campus will be sent to the University Student Health Center and then forwarded to the Department Chair / Program Director or an appointed designee as outlined.

11. Students who do not pass a drug or alcohol screen and / or fail to get a drug or alcohol screen when scheduled by University personnel and / or the student’s department faculty or clinical preceptor / facility will be dismissed from their major within the School of Health Sciences and are prohibited from changing majors to any other School of Health Science major except for the B.S. in Health Care Studies major, which does not require clinical experiences. Students who are licensed professional nurses will also be directed to the Volunteer Recovery Program which offers the eligible professional an alternative to board disciplinary action from becoming a permanent part of their professional licensing record.

12. Any student that has a positive drug or alcohol screen will be referred for evaluation and treatment to an appropriate chemical dependency program. The University Student Health Center will provide a referral list of programs in the regional area, if needed. The student is responsible for any costs associated with the counseling and treatment in the chemical dependency program.

13. In addition to University or School of Health Sciences sanctions, students are subject to all legal sanctions under federal, state and local law for any offenses involving under-age drinking, driving while under the influence/driving while intoxicated or with the sale, manufacture, distribution, possession or use of illicit/non-prescribed drugs.
**SHS Drug and Alcohol Testing Process**

1. Testing times for academic department / program screens will not be announced in advance.

2. The School of Health Sciences utilizes a strict chain-of-custody system to ensure minimal possibility of tampering with the specimen from the time of announcement of the testing through its collection to the time of testing in the laboratory. To that end, if the testing takes place at a site on the Saint Francis University campus, the student will be escorted to the testing area by department / program personnel and will remain at the testing area until the appropriate specimen is obtained.

3. **Student Health Center Process**
   The following drug and alcohol testing process will be utilized for any testing completed through the DiSepio Institute for Rural Health and Wellness and the Student Health Center. The Student Health Center recognizes that the School of Health Sciences students are required to have drug screens performed as outlined by the academic department / program. There may also be times as outlined in the School of Health Sciences Drug and Alcohol Policy that testing be completed for suspected drug and / or alcohol use. To that end, the following procedures and policies for testing completed by the Student Health Center will be in effect:

   **Student Health Center Scheduling of Testing**
   a. The School of Health Sciences academic department / program will contact the Student Health Center at least two (2) weeks prior to schedule the timing of drug testing that includes testing the entire class cohort.
   b. The School of Health Sciences academic department / program will schedule drug screenings as a class, whenever possible. Individual testing for drugs and / or alcohol will be completed based on extenuating circumstances and / or when requested due to suspected use.
   c. The School of Health Sciences academic department / program will inform their students of the need and timing of any drug and / or alcohol testing.
   d. The School of Health Sciences academic department / program will provide a copy of this drug and alcohol testing process to student donors to include notification of the following:
      1) Student donors must present photo identification at the time of testing
      2) Student donors should be instructed by the academic department / program not to over-hydrate once the testing time is announced to avoid a “dilute” testing result. Student donors should be instructed not to drink more than 8 ounces of water every 30 minutes up to 5 times (40 oz.)
      3) Student donors will be required to provide a list of prescribed medications the student is taking as part of the intake process prior to drug testing
      4) Student donors will need to review and sign the Student Health Center Drug / Alcohol Screen Consent form the day of testing (See Appendix A)
      5) If an observed urine drug screen is scheduled, the process includes the need to monitor the urine specimen collection. This process will include the presence of a Student Health Center designee that will serve as a monitor based on the gender of choice as chosen by the student donor on the day of testing to be present in the bathroom during specimen collection.

   **Student Health Center Procedures**
   a. Urine sample collection
      1) Preparation for urine sample collection
         a) Ensure supplies are present (test collection kit with cup, color chart, and specimen transport bag)
         b) Place bluing agent in toilet
         c) Affix tamper evident tape to soap dispenser and faucet
d) Remove garbage can and any other supplies from restroom

e) Shut off water valve to restroom

2) Urine sample collection

a) Upon the student donor’s arrival to the health center, they will be escorted to a waiting area inside the health center to complete pre-testing paper work
   - The student donor will provide a list of current medications to the medical staff as part of the consent form
   - The student donor will then sign the consent to be tested form

b) The student donor will remain in this area until their turn and when they feel they are able to give at least a 30 mL urine sample

c) The student donor will be escorted to the lab and asked to remove any outer clothing which would include hats, jackets, hoodies etc.

d) The student donor will be asked to empty all pockets and place articles on lab counter

e) The student donor will be required to present a photo identification card that may be either the student’s University identification card and/or another photo identification card, such as a driver’s license

f) The certified Student Health Center collector will put on gloves

g) The student donor will be asked to wash and dry their hands

h) The student donor will be asked to pick a test collection kit and examine it to see if it is securely sealed

i) Once the student donor agrees the test collection kit is sealed, it is given to the certified Student Health Center collector to be examined for proper seal and expiration date

j) The test collection kit will be opened and the bag and test container will be emptied onto the counter by the certified Student Health Center collector and the collection cup will be given to the student donor

k) The student donor will be escorted to the bathroom where a Student Health Center designee that will serve as a monitor based on the gender of choice as chosen by the student donor on the day of testing will enter the bathroom with the student donor. The monitor must have completed the Student Health Center’s training process.

l) Once the sample is obtained, the student donor will hand it directly to the certified Student Health Center collector

m) The sample is kept in view of the student donor at all times

n) Should the student donor be unable to give at least a 30 mL urine sample, they will be considered to have a “shy bladder”
   - The student donor will then be escorted to a designated waiting area within the health center
   - The student donor will be offered 8 ounces of water every 30 minutes up to 5 times (40 oz.)
   - The student donor may be required to wait up to three hours with periodic attempts to provide an adequate 30 mL urine sample
   - The certified Student Health Center collector will document in the remarks section of the custody form the time each attempt was made and whether any specimen was provided
   - If the student donor leaves before the end of the three hour period, it is considered a refusal to test and is subject to disciplinary action as outlined in the School of Health Sciences Drug and Alcohol Policy
   - When the student donor states they are able to potentially supply a urine sample, another specimen using a new collection kit will be attempted
      o If the volume is adequate (30 mL), the sample will be utilized to complete the testing process
If the volume remains insufficient (less than 30 mL), a note of “shy bladder” will be made in the “remarks” section of the custody and control form by the certified Student Health Center collector.

- If any student, including a student with a noted “shy bladder,” is not able to provide a urine sample on the scheduled day of testing, a hair follicle sample will automatically be obtained to complete the testing process.

- The student donor is then escorted back to the lab to wash and dry their hands.

- The volume, temperature, odor and color are checked by the certified Student Health Center collector, which is documented on the designated section of the chain of custody form.

- The 30 mL sample is transferred to the test container and security seal is placed over the lid.
  - The student donor initials and dates the seal.
  - The remainder of the urine sample is discarded down the sink by the certified Student Health Center collector.

- The chain of custody form is completed by the Student Health Center designated monitor, the student donor and the certified Student Health Center collector.
  - The Student Health Center designated monitor completes and signs the appropriate portion of the custody form.
  - The student donor completes and signs their appropriate portion of the custody form.
  - The certified Student Health Center collector ensures that all areas of the chain of custody form is completed appropriately and signs the designated portion of the custody form.
  - A copy of the chain of custody form is given to the student donor.

- The student donor may leave the health center.

- The sample will be sent to an offsite certified testing facility.

- The results will be kept in the student donor’s confidential medical record at the Student Health Center and also released to the designated academic department / program personnel as outlined on the School of Health Sciences Drug and Alcohol Policy Contract and Consent form.

b. Hair follicle sample collection

1) Preparation for hair follicle sample collection: ensure supplies are present (scissors, alcohol pads, hair clip, security seals, hair specimen collection envelope and specimen transportation bags).

2) Hair follicle sample collection
   a) Upon the student donor’s arrival to the health center, they will be escorted to a waiting area inside the health center to complete pre-testing paperwork unless it is a student with a noted “shy bladder” who is already in the waiting area.
      - The student donor will provide a list of current medications to the medical staff as part of the consent form.
      - The student donor will then sign the consent to be tested form.
   b) The student donor will be required to present a photo identification card that may be either the student’s University identification card and/or another photo identification card, such as a driver’s license.
   c) The certified Student Health Center collector will put on gloves and clean the scissors and hair clip with an alcohol pad in front of the student donor.
   d) The certified Student Health Center collector will prepare the foil for the specimen.
      - Remove foil from specimen collection envelope.
      - Fold the foil lengthwise.
e) If the student donor has hair in a ponytail or braid have the student donor undo it
f) The certified Student Health Center collector will obtain the hair follicle sample by
   • Using a hair clip to separate and cleanly part the student donor’s hair
   • Moving the top layer of hair out of the way
   • Sliding the scissors under a single row of hair one strand deep and ½ inch wide
   • Pulling the row over the certified Student Health Center collector’s index finger and holding it with their thumb
   • Sliding the scissors down the student donor’s hair to the scalp and cut the hair
   • Pinching the root ends together and keeping them aligned
   • Making an appropriate cut of hair to collect a specimen with the following characteristics:
     o The specimen is small – about 120 strands of hair
     o The correct amount of hair will measure about one centimeter wide when it is wrapped in foil
     o The hair specimen should resemble the thickness of a pencil
     o The specimen is collected from the crown of the head, where the hair is thickest
     o If the student donor has sparse hair, a few strands are taken from different spots, so it is cosmetically undetectable
     o If the student donor has short, curly hair: cut from different spots on the head, repeat until specimen is the size of a small cotton ball, or about two centimeters in diameter
     o If the student donor has hair that is shorter than 1 inch: body hair may be used with possible sites in order of preference:
       ▪ Head
       ▪ Nape
       ▪ Beard/mustache
       ▪ Underarms
       ▪ Chest
       ▪ Arms
       ▪ Legs
       ▪ Back
     o The hair sample will NOT combine body hair with head hair

g) The certified Student Health Center collector will finalize the hair follicle specimen to be sent to an offsite certified testing facility
   • Place the hair specimen in the prepared foil
   • Press the sides of foil together while keeping the root ends of the hair sample aligned
     o Root ends should extend ¼ inch beyond the edge of the foil
     o Wrap ends around the foil, do not cut
   • Remove the security seal from the specimen collection envelope
   • Place the seal on the front of the envelope with the bar code facing up
   • Flip the envelope over and wrap the seal around the bottom with the area of initials and date visible
   • Seal the specimen collection envelope
   • Date and initial the security seal making sure the initials run over onto the envelope
     o Sign and date the area marked “Sample Collector”
The student donor initials the security seal and the specimen collection envelope to certify the hair specimen in the envelope is theirs, that it was cut close to the scalp, and that they witnessed the certified Student Health Center collector seal their hair in the envelope.

h) The chain of custody form is completed by the student donor and the certified Student Health Center collector.
   - The student donor will read, sign and date the Donor Certification on Copy-1.
   - The student donor must provide date of birth, as well as day and evening contact information.
   - The certified Student Health Center collector will make sure the student donor’s signature matches the photo identification card and return it to the student donor.
   - The certified Student Health Center collector will complete the Collector’s Certification on Copy-1 with name and signature (printed and signed), time of collection, and name of delivery service and then will:
     - Fold Copy 1 of the form in half and place it in the large pouch of the specimen transportation bag collection and name of delivery service.
     - Place the specimen collection envelope in the small pouch and remove the release liner folding over both openings and seal it.
     - Give the student donor the Copy-5.
     - Put the sealed specimen transportation bag in the mail for transport to the offsite certified testing facility.

**Student Health Center Post-Testing Process and Procedures**

a. The Department Chair / Program Director or an appointed designee will receive a written copy of each student’s test results by the Student Health Center, typically within two days.

b. Any student with a positive test result will be subject to the School of Health Sciences disciplinary actions as outlined in The School of Health Sciences Drug and Alcohol Policy and will also be required to complete the following process through the Student Health Center:
   1) All positive drug screen results will be reviewed by the Student Health Center’s certified Medical Review Officer.
   2) The student will then be brought into the Student Health Center to have a consultation with the Student Health Center’s certified Medical Review Officer.
   3) The Medical Review Officer will determine if the student will be required to meet with the on campus Drug and Alcohol Educator or be evaluated by an off campus chemical dependency agency. If the student is referred to an off campus chemical dependency agency, the following will be in effect:
      - The student will be provided a list of certified chemical dependency agencies in the region by the Student Health Center.
      - All students referred to an off campus chemical dependency agency will follow the treatment plan provided by that facility.
      - The Student Health Center must be informed in writing of the expected completion date of the program by the chemical dependency agency.
      - The Student Health Center must be informed in writing when the student successfully completes the program, or if the student does not complete the program by the chemical dependency agency.
      - The student is responsible for any costs associated with the counseling and treatment in the off campus chemical dependency program and any additional subsequent drug testing performed.
- Students who successfully complete the substance abuse program are required to submit to a minimum of two (2) follow-up random drug testing over a twelve (12) months period
- A refusal to participate in a substance abuse treatment program and / or follow up drug testing will result in Student Health Center informing the Office of Student Development

4. The results of the drug or alcohol screen for each student will be sent to the Department Chair / Program Director or an appointed designee following each testing. A written copy of the results of the drug screen for each student will be sent to this individual by the Student Health Center, typically within two business days.

**SHS Drug and Alcohol Testing Results**

1. A negative or “clean” drug screen result is needed to participate in clinical experiences and remain within the School of Health Science majors except for the B.S. in Health Care Studies major, which does not require clinical experiences.

2. A “negative dilute” result on a urine drug screen means that the urine was not concentrated enough to determine accurate test results. This result and any result that is reported as “invalid” as determined by the testing site will need to be repeated. Since accurate test results were not initially able to be determined, repeat drug testing will automatically occur as outlined:
   a. Once the academic department / program is made aware of the test results, an observed repeat urine drug screen will be performed within 24-72 hours. The student may be responsible for the cost of testing in this incident.
   b. If the repeated urine drug screen is again reported as “negative dilute,” the student will be scheduled to have a drug screen performed through hair follicle analysis. The student may be responsible for the cost of testing in this incident.

3. A positive drug test, including a “positive dilute” result, which is not related to a legally prescribed drug therapy, will result in immediate dismissal from any health science major except for the B.S. in Health Care Studies major, which does not require clinical experiences.

4. A blood alcohol content that is 0.08% or greater that occurs during any scheduled class, lab or clinical rotation / field experience / internship is considered a positive alcohol testing result. If a clinical site has a more restrictive requirement of acceptable blood alcohol content level (less than 0.08%), students will be notified and the site’s policy will be followed. A positive blood alcohol content in either of these situations will also result in immediate dismissal from any health science major except for the B.S. in Health Care Studies major, which does not require clinical experiences.

**SHS Appeals Process**

All students have the right to appeal any dismissal due to a positive drug test to the School of Health Sciences Appeal Board. An appeal must be submitted in writing to the Dean of the School of Health Sciences’ office within five business days of student notification of dismissal from the School of Health Sciences major. All decisions rendered by the School of Health Science Appeal Board are final.
SAINT FRANCIS UNIVERSITY
SCHOOL OF HEALTH SCIENCE
DEPARTMENT / ACADEMIC PROGRAM FORM

DRUG AND ALCOHOL POLICY CONTRACT AND CONSENT FORM

By signing below, I acknowledge the following:

1. I have received a copy of the Saint Francis University School of Health Sciences Drug and Alcohol Policy that explains the rationale for testing, testing policies, testing procedures and testing results, as well as an appeal process regarding dismissal based on a positive test result.

2. I agree to abide by all policies and procedures outlined in the School of Health Sciences Drug and Alcohol Policy, including being tested for drugs and / or alcohol as outlined.

3. Depending on my academic major, I may be required to submit to drug screens prior to admission to and / or progression into the professional portion of the academic major and / or prior to or during clinical experiences. Test results must be negative to remain in any School of Health Sciences major except for the B.S. in Health Care Studies major, which does not require clinical experiences.

4. I agree to provide the testing site with a list of current medications, including prescribed and over-the-counter (herbals, vitamins, etc.) drugs as part of the intake information on the day of testing.

5. I hereby give my consent for any authorized testing site to release the results of any drug and / or alcohol testing to the Saint Francis University Student Health Center. The Student Health Center will release the results to my Department Chair / Program Director or an appointed designee and any clinical site that may require the reported results.

6. I am aware that any positive test for drugs and / or alcohol will dismiss me from the School of Health Sciences and all of its majors except for the B.S. in Health Care Studies major, which does not require clinical experiences.

STUDENT:

Print Name: ____________________________

Signature: ____________________________ Date: __________________

WITNESS:

Print Name: ____________________________

Signature: ____________________________ Date: __________________

cc: Student Health Center
APPENDIX A

STUDENT HEALTH CENTER FORM
DRUG / ALCOHOL SCREEN CONSENT FORM

I hereby consent to submit to a drug and / or alcohol test and to furnish an appropriate sample for analysis in order to meet the School of Health Sciences Drug and Alcohol Policy.

I understand that refusing to provide or tampering with a collection specimen, or providing false information on a specimen’s chain of custody form, may constitute disciplinary action from my academic department / program according to the policies outlined in the School of Health Sciences Drug and Alcohol Policy. I understand that failure to pass the drug test will lead to my immediate dismissal from the School of Health Science majors.

I further authorize and give full permission to have the Student Health Center send the specimen or specimens collected to a certified laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to the Saint Francis University Student Health Center. As per the School of Health Sciences Drug and Alcohol Policy, all tests results will also be released to the designated academic department / program personnel.

The following is a list of current medications, including prescribed and over-the-counter (herbals, vitamins, etc.) drugs that I am currently taking:

1. ___________________________________ 6. ___________________________________
2. ___________________________________ 7. ___________________________________
3. ___________________________________ 8. ___________________________________
4. ___________________________________ 9. ___________________________________
5. ___________________________________ 10. ___________________________________

STUDENT DONOR:

Print Name: ____________________________
Signature: ____________________________  Date: ____________________________

WITNESS:

Print Name: ____________________________
Signature: ____________________________  Date: ____________________________
6. CLASSROOM, LABORATORY AND CLINICAL ATTIRE POLICIES

A. Classroom, Nursing Laboratories, and Clinical Sites

The student is to be dressed neatly and well groomed, with clothing clean, pressed, and in good repair. The student must maintain proper hygiene with respect to body odors, perfume, after shave, second hand smoke, and scented hand cleaners. Male students are expected to be clean shaven or with neatly groomed facial hair. All students are expected to wear appropriate undergarments. The following examples of dress items are considered inappropriate and a student so attired will be asked to leave the classroom or lab:

- Bare mid-drifts
- Baggy pants revealing underwear
- Low cut or tight fitting clothing

When all day simulations and clinical on campus are scheduled, the students must present themselves in full uniform with name tags.

B. Uniform Policy for Clinical Practice

The student uniform consists of black pants and red shirt. Particulars of the dress code include:

1. Unless otherwise stipulated, full uniform is required at all times on the clinical unit. Full uniform is defined as follows:
   a. Scrubs:
      1) The top may be worn with a white or black turtle neck or tee shirt underneath. The turtleneck or tee shirt may be long or short sleeved, and may not have any printing or design on the shirt.
      2) The pants may have an elastic or draw string waist.
   b. White or black socks.
   c. White, black, or red athletic shoes which must be all leather, no sandals, no clogs or backless shoes.
   d. White cotton lab/warm-up jacket with SFU logo. Hoodies are not permissible
   e. Clinical site ID policy must be followed; this is specific to each clinical. You will be informed of the clinical site policy prior to clinical.
   f. Watch with a second hand must be worn at clinical.

2. The clinical uniform may be worn to class if it immediately precedes or follows the clinical experience.

3. Hair should be clean and styled neatly. Hair that is shoulder length or longer must be tied back and off the collar of the uniform. Unnatural hair colors (purple, green, blue, pink, orange, etc.) are not permitted.

4. Jewelry that is worn must be conservative.
   a. Only small earrings may be worn-ONE EARRING PER EAR (earrings are limited to - earlobe only - post only - no DANGLING EARRINGS) and NO
Saint Francis University

NECKLACES FOR SAFETY PURPOSES. This policy protects student nurses from injury.

b. Wedding band may be worn; no other rings.

c. Professional appearance is conservative. Body jewelry should be concealed. Tongue piercings are not permissible. Tattoos must be covered.

5. Nails are to be short and neatly trimmed. No nail polish. A clear coat is acceptable, but must not be cracked or chipped. No acrylic or other false nails.

The dress code may vary in adherence to the clinical institution's dress code with the permission of the Clinical Instructor, Level Coordinator, and Department Chairperson. Students will be notified accordingly. Any Department of Nursing faculty member may dismiss a student from the clinical unit for infraction of any part of this policy.

7. SYSTEM OF GRADING

All nursing courses will be graded according to the following system:

A = 92 – 100%
A- = 90 – 91%
B+ = 88 – 89%
B = 82 – 87%
B- = 80 – 81%
C+ = 78 – 79%
C = 72 – 77%
C- = 70 – 71%
D = 60 – 69%
F = 59% and below

Students must earn a minimum grade of 80% in all required nursing courses in order to meet progression requirements.

Grades are rounded to whole numbers only once in a course when the final grades are calculated. Grades are reported with two (2) decimal places until the final grade. For example, a grade on an assignment is reported as 89.2. A final course grade of 89.25 is reported as 89. If the final grade for a course is xx.5 or above, the grade rounds to the next highest whole number.

A. Clinical Performance

Clinical performance will be evaluated weekly and reviewed with the student at least twice during the clinical rotation on a satisfactory/unsatisfactory/needs improvement basis. However, it may be done more frequently if a student is having difficulty. At the completion of the clinical experience, the evaluative scores for each clinical behavior will be compiled into a final score. A minimum of 80% of the objectives must be satisfactorily completed to achieve a satisfactory
score. A student must also have a 100% score on all contributory objectives. If a student’s level of clinical practice is unsafe or unsatisfactory, the student may fail before the end of the semester. Clinical is graded on a pass/fail basis. The grading criteria is outlined on the clinical evaluation tool.

B. Clinical Failures

A clinical failure will occur if the student demonstrates unsafe, negligent, incompetent, or unethical clinical performance. Unsafe practice is anything that places the patient in jeopardy for injury or causes injury, and it includes, but is not limited to, the following examples:

1. Not following specific directions

2. Not consulting faculty before doing a procedure or giving a medication

3. Consistently not being prepared or being late for clinical

4. Jeopardizing client safety:
   a. Not paying attention to alarms
   b. Performing skills without supervision or permission by the faculty member
   c. Failure to follow Universal Precautions, including failure to follow isolation precautions
   d. Failure to follow hospital policies and procedures

5. Failure to follow through with instructions of RN or faculty member

6. Failure to report changes in assessment of patient status to faculty or assigned RN in a timely manner

7. Failure to maintain confidentiality

8. Failure to accept responsibility for personal actions or inactions

Failure to practice in a safe manner may result in the student being removed from clinical, and may result in the failure of the course. Failure to adhere to the Professional Behavior and Integrity Policy is grounds for dismissal.

C. Final Course Grade Computation – Clinical Courses

1. Final satisfactory clinical performance and final theory grade of 80% or better equals the grade for the course. Clinical grading is derived from the clinical evaluation tool.

2. If the final U’s are in contributory areas, this will constitute an automatic clinical and course failure. Failure of either the clinical or theory component will result in an overall failure of the entire course. This will necessitate the student repeat both the clinical and theory components on a space available basis provided the student has not exhausted the allotted number of repeats.
D. Clinical Warning for Dismissal

A student may be placed on clinical warning for dismissal based upon unsatisfactory performance. This is a method to identify behaviors that interfere with the attainment of clinical objectives. A student on clinical warning must correct the deficiencies in order to pass the clinical course. The student will meet clinical faculty member(s) and/or the course coordinator to complete a clinical contract. The clinical contract will define the goals that need to be met for the student to pass with satisfactory performance.

E. Program Dismissal Policy

A student may be dismissed from the Department of Nursing for the following reasons:

1. Dismissal for Unsafe Clinical Practice: dismissal for unsafe clinical practice may occur at any time during the academic semester. Dismissal is based on unsafe behavior demonstrated by the student as determined by the faculty of the Department of Nursing. Dismissal may be based on:
   a. One potentially life-threatening incident; or
   b. One incident contributing to the injury or death of another; or
   c. Two or more incidents of unsafe practice identified at any time during the length or enrollment in the Department of Nursing.

2. Dismissal for Unprofessional Behavior: In addition to the list found in the Professional Behavior Policy, the following provides examples of behaviors in three areas as basis for dismissal from the Department of Nursing:
   a. Regulatory – examples include, but are not limited to the student’s failure to practice within the guidelines of:
      • The Professional Nursing Law of Pennsylvania
      • The Policies and Procedures of Saint Francis University and the Department of Nursing
      • Policies and procedures of the clinical agencies
      • Patient’s Bill of Rights
   b. Accountability – examples include, but are not limited to:
      • Failure to adequately prepare for clinical learning experiences
      • Failure to communicate accurate and complete information verbally and/or in writing
      • Failure to report unsafe or incompetent practice of peers or other health care team members to nursing faculty
      • Failure to practice within limitations of the student nurse role
      • Failure to accept responsibility for own behavior
      • Failure to accept responsibility for client care
      • Failure to seek appropriate guidance from the faculty
      • Excessive absence or tardiness as per the absence from class/clinical policy
      • All forms of dishonesty, including cheating, falsification, or plagiarism of information on assignments
c. **Clinical Nursing Performance** – examples include, but are not limited to:
   - Medication administration errors
   - Misinterpretation of medical orders
   - Improper implementation of nursing care plans
   - Improper implementation of procedures according to the Department and/or agency guidelines
   - HIPAA violations

Any student who is dismissed from the program has the right to follow the School of Health Sciences Appeal of Dismissal Procedure.

8. **CPR CERTIFICATION**

Prior to entering the clinical areas at the 300 level, all student must have successfully completed and be currently certified in the Health Care Provider Basic Life Support Course, sponsored by the American Heart Association.

A copy of the student's current course certification shall be maintained in the student's file in the Department of Nursing while the student is enrolled in the junior and senior level clinical nursing courses.

This certification must be current for the entire academic year for the junior and senior year. Any student who cannot provide evidence of current certification for the required CPR content (as identified above) will not be permitted to perform in the clinical area.

9. **EXAMINATION POLICY**

Students are expected to take examinations as scheduled. Make-up exams will be available according to the instructor’s policies on the course syllabi. Individual course policies will be evident in the course syllabi.

Arrangements for make-up exams must be completed within one business week of the return to the program following an absence. Failure to follow this procedure will result in a "0" for the exam. Students need to be aware that they can expect make-up exams to be a different format which could include essay-question exams.

During exam time, all materials, including cell phones, books, water bottles, baseball caps and book-bags, are to be in an area of the room designated by faculty.

Students are required to attend final examinations as scheduled. Please refer to the University Policy which states:

*Final examinations must be administered in accordance with the final examination schedule prepared by the registrar. In courses where major research papers constitute a major portion of the semester’s work, such papers may be substituted for final examinations.*
A student absent from a final examination due to serious illness, or an equally grave reason, may have his or her examination deferred. Ordinarily, such deferment is not to exceed three weeks after the close of the semester in which the examination is missed. Students who are absent from a final examination for the above stated reasons will receive a grade of I (Incomplete). A final examination missed by a student must be made up within the specified time; otherwise the grade of I (Incomplete) will automatically change to an F (Failure). Instructors are urged to administer a formal final examination. In any case, the professor should inform students of final examination policies on the first day of classes.

In the event of a conflict in examination scheduled, the student must request a special examination through the Office of the Registrar. If a student is absent from a final examination for any reason other than a conflict of schedules, a fee is charged by the Business Office for the privilege of taking the make-up examination. This fee is given to the professor administering the special examination.

Assistance in proctoring examinations for large classes is arranged by the respective department chairpersons. (Retrieved from my.francis University Faculty Handbook, approved Jan 30, 1992, manual updated November 2016)

10. INCIDENT POLICY

During a clinical experience, if a student becomes ill or injured, a Department of Nursing Incident Report form will be completed. This form may also be used to document unusual events that occur in campus classrooms or laboratories. All occurrences should be documented. The Department of Nursing Incident Report form makes it possible to recall the nature of the incident, action taken, witnesses, and the follow-up.

If possible, the form should be completed by the student with the assistance of the clinical instructor. This form should be completed within three business days after the incident occurred. The completed form should then be submitted to the Course Coordinator. After review, the original form will be placed in the incident report file and a copy in the student’s file in the Department of Nursing office unless additional action is determined to be necessary.

If the event occurs during a clinical experience, it may be necessary to complete the agency/hospital’s incident report per the agency/hospital’s policy.

If a student becomes ill or injured while on campus and requires medical attention, Campus Police should be notified for incident management. Campus will follow up with a report using the University on line system for reporting.
# A. Incident Report Form

**Incident Report**

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
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Address (where incident occurred):

<table>
<thead>
<tr>
<th>Street</th>
<th>City</th>
<th>State</th>
</tr>
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<tr>
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Site

Instructor

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<th>Nature of Incident</th>
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<tr>
<th>Action Taken</th>
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</table>

Refused treatment

Referral

Follow-up

<table>
<thead>
<tr>
<th>Location/Circumstances of Incident</th>
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<tbody>
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<td></td>
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</table>

Witnesses

<table>
<thead>
<tr>
<th>Permission to call emergency contact</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

Signature of Involved Student

<table>
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<tr>
<th>Date</th>
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Signature of University Representative

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<th>Date</th>
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Witness

<table>
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<tr>
<th>Date</th>
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</table>

☐ Copy to student file

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11. MALPRACTICE INSURANCE

Saint Francis University covers all nursing faculty and student malpractice insurance. This only covers the faculty or student when they are performing University clinical experiences.

12. MATHEMATICS PROFIENCY EXAM POLICY

The professional nurse requires logical thinking ability and proficiency in arithmetic operations in order to calculate medication dosages. All students who take NURS 200, NURS 300, NURS 303, and NURS 401 must successfully demonstrate mathematics proficiency. Evidence of proficiency is described in each of the course syllabi.

Math proficiency exams administered to the students will include the following:

1. Adding, subtracting, multiplying, and dividing fractions and decimals
2. Reducing fractions
3. Reading decimals
4. Using percentage
5. Ratio-proportion

Students with difficulty in the math competencies may be referred for tutoring services and given remediation.

13. MINIMUM FUNCTIONAL REQUIREMENTS/TECHNICAL STANDARDS POLICY

Nursing education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behaviors. The nursing degrees awarded by Saint Francis University at the completion of the educational process certifies that the individual has acquired a base of knowledge and skills requisite for the practice of nursing at the respective undergraduate or graduate level.

To this end, all courses in the curriculum must be completed successfully. In order to acquire the knowledge and skills to function in a variety of clinical situations and to render a wide spectrum of patient care, candidates for the undergraduate and graduate degrees in nursing must have abilities and skills in five areas:

• Observation
• Communication
• Motor
• Conceptual Integrative
• Behavioral- Social

Technological compensation can be made for some disabilities in certain of these areas, but a candidate should be able to perform in a reasonably independent manner and exercise independent judgment.
A. Observation
The candidate must be able to observe demonstrations and participate in didactic courses and simulated learning opportunities. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation requires the use of common sense, as well as the functional use of the senses of vision, audition, olfaction, and palpation.

B. Communication
Candidates must communicate effectively using English in clinical and classroom settings. A candidate must be able to elicit information from patients, describe changes in mood, activity and posture, and perceive nonverbal communications. A candidate must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but reading and writing. The candidate must be able to communicate effectively and efficiently with all members of the health care team in both immediate and recorded modes.

C. Motor
Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other assessment techniques. A candidate should be able to perform nursing skills requiring the use of gross and fine motor skills (e.g. IV insertion, venous blood draw, urinary catheter insertion). A candidate should be able to execute motor movements reasonably required to provide nursing care and emergency response to patients.

Examples of emergency responses reasonably required of nurses are cardiopulmonary resuscitation, medication administration, and application of pressure to stop bleeding. Candidates must perform actions which require the use of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision. Candidates should also be able to assist and/or participate in various lifting activities.

D. Conceptual-Integrative
These abilities include measurement, calculation, reasoning, analysis, synthesis, and retention of complex information. Critical thinking requires all of these intellectual abilities in order to provide optimal nursing care. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

E. Behavioral-Social
Candidates must possess the emotional health required for the full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the care of patients, and the development of mature, sensitive and effective relationships with patients. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress in the classroom and clinical area.

They must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical environment. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that are assessed during the admissions and educational process.
Reasonable accommodations will be considered on a case by case basis for individuals who meet eligibility under applicable statutes. Any person expecting to need accommodations should request them prior to beginning the program, as some accommodations may not be considered reasonable and may impact an applicant’s ability to complete all components of the program.


(Retrieved May 21, 2018)

14. PROGRESSION POLICY

Progression and continuance in the Nursing Program is based upon academic performance and successful achievement of nursing prerequisites, health maintenance, and adherence to Saint Francis University policies in the current University Catalog and Department of Nursing policies as stated in the current Student Handbook. The faculty of the Department of Nursing has the right and the responsibility for judging and evaluating the quality of the student’s achievement, both in the mastery of the theoretical content and in clinical competence.

A. Academic Progression

1. Students must earn a minimum grade of “C” in the following prerequisite Natural Science and Social Science courses. A “C-” grade is not acceptable.

<table>
<thead>
<tr>
<th>Natural Science Courses:</th>
<th>Social Sciences Courses:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOL 111 Biology I</td>
<td>PSYCH 101 Introduction to Psychology</td>
</tr>
<tr>
<td>CHEM 113 Human Chemistry I</td>
<td>SOC 101 General Sociology</td>
</tr>
<tr>
<td>BIOL 214 Microbiology</td>
<td>Mathematics Course:</td>
</tr>
<tr>
<td>BIOL 205 Anatomy and Physiology I *</td>
<td>Math 107 College Algebra or higher</td>
</tr>
<tr>
<td>BIOL 206 Anatomy and Physiology II *</td>
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</tbody>
</table>

* BIOL 205 and BIOL 206 must be taken at Saint Francis University

2. Students must earn a cumulative minimum GPA of 2.6 or better in the Natural Science courses of BIOL 111, CHEM 111, BIOL 214, BIOL 205 and BIOL 206 prior to entry into the professional phase of nursing in the junior year (300 Level)

3. All Natural Science courses required by the Nursing Program that are taken at another institution and transferred into Saint Francis University will be used in the Natural Science GPA calculation, although they are not calculated into the student’s overall cumulative GPA.

4. Students must earn a minimum overall cumulative GPA of 2.75 prior to entry into the professional phase of nursing in the junior year (300 Level).

5. The only nursing courses that may be taken prior to entry into the professional phase of the nursing program (300 Level) are: NURS 100, NURS 200, NURS 201, and NURS 311.
6. Students must successfully complete the required pre-requisites with at least a “C” grade.

7. Prior to the junior year, it is recommended that the maximum number of liberal arts courses the student should have left to complete is three (3) courses (nine credits maximum). When scheduling classes, it is the student’s responsibility to schedule classes so that the classes do not interfere with the clinical experiences.

8. All students must pass a math proficiency exam with an 80% in the following courses: NURS 200, NURS 300, NURS 303 and NURS 401. The purpose of the examination is to determine the student’s ability to correctly calculate medication dosages in the clinical setting. Please refer to the policy on the Math Proficiency Exam found in the Student Handbook.

9. A maximum of three (3) repeated courses are permitted in the total curriculum of the Nursing Program which includes only one nursing course, and any prerequisite Social Science or Natural Science course.

10. Nursing majors MUST earn a minimum grade of “B-” (80%) in each nursing course in order to progress to the next course that requires a clinical laboratory component.

   a. A grade of less than a “B-” grade will constitute a failing grade in any required nursing course.

   b. A student may repeat a nursing course only once. Dismissal occurs when a student fails any nursing course the second time. If a student’s level of clinical practice is unsafe or unsatisfactory, the student will fail the course BEFORE the end of the semester.

   c. Any withdrawal from a nursing course with less than a B- grade is considered a course failure and counts as a course to be repeated.

   d. Any student who needs to repeat a nursing course beyond one year of withdrawal or failure of that course must repeat all prerequisite and co-requisite nursing courses for that course. Exceptions are NURS 100, NURS 201, NURS 311, NURS 316, NURS 416, NURS 403, and nursing electives.

11. Nursing majors must attain at least a GPA of 2.6 in the pre-requisite Natural Science courses (BIOL 111, CHEM 113, BIOL 214, BIOL 205 and BIOL 206) and minimum “C” grade in the Social Science courses (SOC 101, PSYC 101) and MATH 107.

   a. Any withdrawal from a core curriculum prerequisite social or natural science course with a grade of “D” or lower is considered a course failure and counts as a course to be repeated.

   b. If a science course has a separate laboratory grade, and the student earns a “D” or “F” in the lab component, this is considered a failing grade and counts as a course to be repeated.

   c. Courses in which “D” or “F” grades are earned can only be repeated at Saint Francis University.

   d. Students who need to repeat a course are subject to the restrictions specified below. Both the original course and grade, and the repeated course and grade, appear on the academic record, but only the higher grade is used in the computation of the GPA. A
course which is a prerequisite course for a more advanced course in the same discipline may not be repeated after a more advanced course has been successfully completed.

e. If a student passes a prerequisite course with a C grade and elects to repeat a prerequisite course to increase their GPA, the repeated course will count toward total repeated courses.

12. Nursing students enrolled in the program of studies will be the first to fill the limited spaces available in the nursing courses. Students who must repeat a nursing clinical course will then be given preference over those students reactivating their status in the program or transferring into the program.

13. A student who requests and receives a continuance or readmission is responsible for curricular changes in the program of nursing study which occur during his or her absence. A student follows the curriculum guide for the class which he or she joins upon returning to the program.

14. Nursing students who leave the program for a year or more will be evaluated on an individual basis for a progression plan in the curriculum.

B. Health Maintenance:

Students must adhere to the health policies or other policies of Saint Francis University Department of Nursing or they will not be able to progress in the nursing program.

Refer to the Student Health Requirements Policy in the Department of Nursing Student Handbook.

C. Professional Integrity:

Refer to the Professional Behavior Policy and the Professional Integrity Policy in the Department of Nursing Student Handbook.

15. PROFESSIONAL BEHAVIOR POLICY

As representatives of Saint Francis University and as future members of the profession of nursing, and as students in the Department of Nursing’s BSN program must demonstrate professional behavior at all times in the classrooms, clinical sites, and nursing labs. Students must adhere to the policies, responsibilities and rules and regulations as outlined in the Saint Francis University Student Handbook, Department of Nursing’s BSN Student Handbook, as well as those of the clinical agencies.

A. Academic and Campus Conduct

The Department of Nursing – BSN Program follows the Code of Student Conduct as detailed in the Saint Francis University Student Handbook. At the University, student members are to uphold and abide by the Academic Honesty Policy and the Standards of Conduct, which are embodied within a set of core values that include justice awareness, peacemaking, self-respect and respect for others. Any student found to have committed or to have attempted to commit misconduct is subject to the procedures and sanctions as outlined in the Student Conduct Review Process.
B. Professional Nursing Conduct

Nursing students are held to the same standard of behavior as a professional nurse, and these standards apply to the classroom, lab or clinical setting. The standards of professional nursing conduct are as follows:

1. The student practices with compassion and respect for the inherent dignity, worth and unique attributes of every person.
   - Respects the worth, dignity, needs, values and human rights of every individual in all professional relationships.
   - Delivers caring and compassionate nursing care with respect for human needs and values irrespective of the nature of the health problem. Does not discriminate while providing nursing services, on the basis of age, marital status, sex, sexual preference, race, religion, diagnosis, socioeconomic status or disability.
   - Delivers nursing care directed toward meeting the comprehensive needs of clients across the lifespan.
   - Recognizes the right for self-determination as a basis for informed consent.
   - Maintains a respectful relationship with patients, peers, faculty, staff and members of the health care team and commits to the fair treatment of all while preserving integrity and resolving conflict in a professional manner.
   - Maintains respect of individuals by addressing the client, significant other(s), faculty, staff and all members of the health care team by title and last name.
   - Values the contribution of individuals and/or groups in the classroom, lab and clinical area.
   - Contributes to a healthy educational experience on campus and in the clinical environment by exhibiting respectful behaviors and positive conflict resolution when encountered with situations that may be incompatible with the student’s ideas and values.
   - Adheres to the University policies regarding acceptable use of Network and Internet Resources, and the Department of Nursing Social Media Policy.
   - Refrains from the unnecessary use of cell phones, pagers or other electronic equipment on the clinical areas and in the classroom.
   - Practices a standard of conduct that precludes (or excludes) all prejudicial actions, any form of incivility, bullying, cyber-bullying, harassment or threatening behavior, vulgar, abusive or offensive language, anger and hostility, or disregard for the effect of one’s action on others.

2. The student’s primary commitment is to the patient, whether an individual, family, group, community, or population.
   - Uses effective communication and collaboration for shared decision making in providing quality and safe care.
   - Maintains accurate and thorough documentation in all health care and educational documents.
   - Maintains professional boundaries that establish limits to the student-client, student-faculty and/or student-employee relationship. In all encounters, students are responsible for retaining professional boundaries with clients, faculty and employees by refraining from socialization outside the academic and/or clinical setting or in social networking sites.
   - Refrains from conduct defined as sexual violation or sexual impropriety in the course of a professional relationship.
• Does not falsify or knowingly make incorrect entries into the client’s record or other documents.
• Does not use deceit, dishonest behavior or distort the truth in regards to client or health care information and implementation of nursing care.
• Does not leave a nursing assignment prior to the proper reporting and notification to the appropriate person(s).
• Does not knowingly abandon a client in need of nursing care, or refuse to provide nursing care to a client in need.

3. The student promotes, advocates for, and protects the rights, health and safety of the patient.
• Safeguards the patient’s right to dignity, the right to privacy and the confidentiality of patient information.
• Advocates for an environment that provides for sufficient physical and auditory privacy which protects the confidentiality of information. No conversations regarding patient and/or patient information should be overheard or accessible to others.
• Maintains the confidentiality of all protected patient information whether oral, written or electronic. All patient information must be strictly confidential according to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) standards and basic ethical principles.
• Refers the patient and/or family members’ request for information to the appropriate nursing staff or clinical faculty member.
• Maintains data security while on the clinical unit, by closing desktops and computer screens when not in use and does not share computer log-in information. Patient information should not be visible to others.
• Demonstrates the knowledge, skill, attitudes, commitment and integrity that is essential in providing safe and competent nursing care.
• Takes appropriate action regarding any instances of incompetent, unethical, illegal or impaired practice by any member of the health care team and/or peer group.
• Respects the client's right to freedom from psychological and physical abuse
• Does not solicit, borrow or misappropriate money, property, drugs or money from the client or any member of the health care team.

4. The student has accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
• The student is individually responsible in their role and accountable for nursing care that their clients receive. Nursing care includes direct care activities, acts of delegation and other responsibilities. In each instance, the student retains accountability and responsibility for the quality of care and conformity with standards of care.
• The student is accountable for one’s own actions and for judgments made and actions taken in the course of nursing care.
• The student is responsible for adequately preparing for the clinical experience.
• The student is expected to seek learning experiences as appropriate.
• The student is responsible for documenting accurate nursing assessments or observations and the client’s response to that care.
• The student is responsible for practicing within the student role
• The student is responsible for seeking assistance from faculty as needed, following through with faculty directives, and taking corrective action as recommended.

5. The student owes the same duties to self as to others; including responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
• The student remains consistent with both personal and professional values to ensure the well-being of self and others.
• The student is expected to attend classes, be punctual for class, lab, and clinical experiences, complete assignments on time and complete work.
• The student is expected to maintain appropriate attire in the classroom and clinical setting.
• The student does not present to the classroom or clinical area under the influence of illegal or non-prescribed drugs, including alcohol.
• The student adheres to the policies of the Nursing Department and the clinical agencies policies including parking restrictions.
• The student does not intentionally remove property from the clinical sites or from the University.
• The student maintains competence in the knowledge, skills and attitudes required in the student role. The following includes, but is not limited to the following:

  ➢ Medication Administration
  ➢ Utilization of the nursing process
  ➢ Making effective clinical judgments
  ➢ Effective Communication
  ➢ Proper implementation of medical orders
  ➢ Infection Control
  ➢ Patient Safety
  ➢ Recognition and report of significant changes in client condition
  ➢ Application of theoretical knowledge into the clinical component
  ➢ Preparation for clinical assignments
  ➢ Competence in skill performance
  ➢ Implementation of nursing skills with instructor supervision

• Evaluates one’s own professional growth toward meeting the student learning outcomes.

Any student suspected of or, observed to be in the practice of unprofessional or unethical behavior as indicated in the Professional Behavior policy will be asked to meet with the nursing faculty assigned to the clinical or classroom area where the suspected or observed behavior is to have occurred. If it is determined that the student has been involved in unprofessional or unethical behavior, the charge will be taken to the course and level coordinator.

If the student is found guilty, the consequences of any violation of the Professional Behavior Policy (Professional Nursing Conduct), a Referral of Concern will be initiated. Students are only permitted to receive three Referrals of Concern over the professional phase of the nursing program. After three referrals of concern, the student will be dismissed from the program.

Consequences of any violation will included but not be limited to:

• Warning and/or reprimand
• Receiving an Unsatisfactory (U) for the clinical day
• Receiving a “F” grade or zero points for the assignment of exam
• Counseling
• Suspension from class
• Dismissal from the nursing program

Any student suspected of being under the influence of non-prescribed drugs and/or alcohol in the classroom or clinical area will be required to follow the SHS Drug and Alcohol Policy.
Disruptive behavior in the classroom or clinical area will not be tolerated. Consequences of disruptive behavior will be as follows:

- **First Offense:** The student may be separated from the class (seating assignments may be initiated)
- **Second Offense:** The student will be asked to leave the classroom or clinical area and will not be permitted to return for the remainder of the class or clinical. This will result in an unexcused absence from class or an unsatisfactory for the clinical day.
- **Third Offense:** The student may not return to class or clinical until the issue is resolved.

A notification of any action as result of unprofessional or unethical behavior will be submitted to the Dean of the School of Health Sciences.

References:
- ANA Code of Ethics 2015
- PA Code Title 49: Professional and Vocational Standards 21.18 Standards of Nursing Conduct
- PA Nursing Law

16. **RATIO OF LAB HOURS TO CREDIT HOURS POLICY**

A. **Definition of Terms**

1. **Credit hour** – one semester credit hour is equal to fifty (50) minutes of classroom instruction per week.
2. **Clinical and Laboratory** – that unit of time which is used for the application of theoretical content and includes laboratory experiences and clinical on and off-campus. It does not include travel time to or from such experiences.

As the student progresses through the curriculum, there shall be more clinical experience within cooperating agencies and less in an on-campus laboratory environment. Because of the importance of the clinical experience to the curriculum, the Department of Nursing allocates one credit hour to every four 50-minute clinical hours, which is equivalent to a 1:4 ratio of credit to clinical hours.

A course with a two (2) credit clinical component has a minimum of 93 clock hours of clinical over the semester.

*The fall and spring terms at Saint Francis University are 14 weeks plus the final exam week.*

17. **SIMULATION LAB POLICES**

Simulation replicates some or nearly all of the essential aspects of a clinical situation so that the student can practice in a safe environment prior to participating in clinical experiences. Simulation activities can range from basic skill acquisition to participating in complex simulated patient scenarios. Simulating real-life situations is conducive for developing clinical reasoning and clinical judgement skills which will increase the probability of transference to the clinical practice areas. Simulation also enhances the theoretical component of the courses by providing opportunities for the application of theory content to case scenario exercises.
Simulation labs for usage include the Simulation Center of Excellence for Interdisciplinary Clinical Education (SCEICE) located in Padua 113, and the Nursing Department Sim lab located in Sullivan 204. Both labs are fully equipped to practice all clinical skills. Simulated case scenarios relevant to the theoretical content will be scheduled per course learning activities.

As a focus of student-centered learning, students are expected to be active and self-directed participants.

Students are required to follow the Policy and Procedure Manual for the Simulation Center of Excellence for Interdisciplinary Clinical Education (SCEICE) and the Nursing Program Guidelines when participating in Simulation Lab activities.

Students are also encouraged to use the Nursing Simulation Lab in Sullivan 204 for independent learning and practice of presented skills in preparation for clinical experiences.

The following guidelines will facilitate your use of the Nursing Simulation Lab for independent learning:

1. The phone in the Nursing Simulation Lab may not be used for personal calls.

2. Sign-out books are located in the lab. With every use, fill in the requested information.

3. Questions or problems with equipment usage should be directed to the Nursing Simulation Lab Coordinator or the Department Administrative Assistant.

4. For safety and security reasons, the lab will be locked. Contact the Simulation Lab Coordinator or any Nursing faculty member or the Administrative Assistant for lab access.

5. Anyone caught vandalizing lab property or theft of equipment or supplies will be subject to disciplinary action, including dismissal from the Nursing Program.

The Faculty and the Simulation Lab Coordinator work to provide you with a useful, convenient center that meets your learning needs. Open lab hours will be posted for the semester. Should you request access to the Nursing Simulation Lab at a time other than open lab time, or after University hours, arrangements should be made with the Nursing Simulation Lab Coordinator in advance.

18. SKILLS INVENTORY POLICY AND PROCEDURES

Nursing Skills Inventory sheets will be distributed at the beginning of the junior year. These sheets are to be kept with the student and brought to each skills lab and clinical day throughout the junior and senior year. It is the responsibility of the student to keep and maintain these skills sheets throughout the semesters. Prior to finals week, each student is to submit the skills sheets to the clinical coordinator. It is highly recommended that each student safeguard their skills sheets and keep them in a safe place. It is the student’s responsibility to assure that the skills are signed off by the instructor as they are observed, practiced, or performed. Completion of skills sheets is required prior to graduation.
For skills that are taught and performed in the skills lab, the student will obtain a faculty member’s signature only if the student properly and satisfactorily performs each of these skills with minimal or no prompting. The proper technique, sequence, and procedure for each skill will be outlined according to the current class textbook.

19. SOCIAL MEDIA POLICY

A. Acceptable Use of Email, Network, and Internet Resources

Please see the SFU Handbook for specific guidelines regarding the use of University e-mail, network, and Internet resources. It is available at https://my.francis.edu/ICS/icsfs/StudentHandbookFinal.pdf?target=1b758b48-ce0a-415f-9e49-5abc0f4a15a7

B. Social Media Policy

Social Media encompasses websites and applications that enable users to create and share content or to participate in social networking. Prominent examples of social media include Facebook, Instagram, Twitter, Google+, LinkedIn, Reddit, and Pinterest. Social media is an effective and accepted form of communication that warrants a safeguard to prevent misuse and abuse.

The Social Media policy is developed to provide guidance for the use of social media technologies, both internal and external to Saint Francis University and the Department of Nursing. It is the intent that through this policy, these systems are used appropriately and lawfully in accordance with all other Saint Francis University Social Media policies and procedures.

As a nursing student, you agree that you will not:

1. Violate any local, state, federal, and international laws and regulations, including, but not limited to copyright and intellectual property rights laws regarding any content that you send or receive. Plagiarism applies online as well.
2. Transmit any material (by uploading, posting, email, or otherwise) that is unlawful, disruptive, threatening, profane, abusive, harassing, embarrassing, tortuous, defamatory, obscene, libelous, or is an invasion of another’s privacy, is hateful, or racially, ethnically, or otherwise objectionable as solely determined by the Department of Nursing and/or administration of Saint Francis University.
3. Impersonate any person or entity or falsely state or otherwise misrepresent your affiliation with a person or entity.
4. Transmit any material (by uploading, posting, email, or otherwise) that infringes any patent, trademark, trade secret, copyright, or other proprietary rights of any party.
5. Transmit any unsolicited or unauthorized advertising (by uploading, posting, email, or otherwise) promotional material, “junk mail,” “spam,” “chain letters,” “pyramid schemes,” or any other form of solicitation.
6. Transmit any materials (by uploading, posting, email, or otherwise) that contains software viruses, worms, disabling code, or any other computer code, files, or programs designed to interrupt, destroy, or limit the functionality of any computer software or hardware or telecommunications equipment; harass another, or collect or store, or attempt to collect or store personal data about third parties without their knowledge or consent.
7. Transmit (by uploading, posting, email, or otherwise) any patient information, names of clinical agencies, clinical preceptors, Saint Francis University faculty photos, or engage in any clinical discussions. HIPAA laws apply to social media applications and shall not be violated.
8. Violate confidentiality of system accounts, passwords, personal identification numbers (PINS) and other types of authentication assigned to individual users. These must be maintained, protected, and not shared with others.
9. Utilize SFU logos and trademarks without written consent form the SFU Marketing Department.

C. Prudent Use of Social Media

The following guidelines on the use of social media by nursing students are meant to clarify and not to supersede those of Saint Francis University. Many forms of social media exist in society today. While there are distinct advantages to staying connected and informed, it is essential that the use of this media does not bring harm.

- **Harm to self** – All students in the Nursing Program share the same goal, to continue to become a respected member of the profession. Posting inappropriate content in an open forum can negatively impact every student’s progress toward this goal. In recent years, it has become commonplace for employers to conduct a web search in an attempt to learn more about prospective employees. Inappropriate photos or comments posted for all to see can mean the difference between finding a secure and satisfying work and unemployment.
- **Harm to the Department** – Saint Francis University Nursing Program has maintained an excellent relationship with the surrounding community for many years. There are many medical professionals in the surrounding area who go to great lengths to offer their expertise and skills in real and virtual classroom as well as clinical practice settings. Posting of derogatory or defamatory comments about these individuals, their staffs, or their facilities as well as any Program faculty and staff, could potentially cause great damage to the strong relationship that has been forged over the years. This, in turn, could deter future involvement with the Nursing Program by them as well as their colleagues. Should a student have a negative experience with any guest lecturer, clinical preceptor, Department faculty or staff member, it should be brought to the immediate attention of the Department Chair.
- **Harm to Patients** – While it is human nature to want to share interesting experiences, a patient’s right to privacy must be protected at all times. In accordance with the Health Insurance Portability and Accountability Act (HIPPA), patient information such as name and/or address must NOT be shared. **Do NOT post any patient information (including photos or medical information) or experiences you have had with patients on social media such as Face Book, Twitter, etc.**

20. STANDARDIZED TESTING AND REMEDIATION POLICY

A. Standardized Testing Policy

The Department of Nursing utilizes Standardized Testing throughout the curriculum to prepare students to take the NCLEX-RN exam. The products utilized throughout the professional phase of the nursing program consist of Practice Exams, Specialty Exams, Comprehensive Exit Exams and Computer Adaptive Testing (CAT).

For the Academic Year 2018-2019, the Department of Nursing will utilize the ATI Comprehensive Assessment and Remediation Package. The incoming junior class will have the additional modules of Drug Calculations and Pharmacology Made Easy 3.0. Students will enroll in the Virtual ATI during the final semester of their senior year.

[www.atitesting.com](http://www.atitesting.com)
B. Assessment and Remediation
The Assessment and Remediation program provides focused and comprehensive assessment and remediation of nursing concepts. The Saint Francis University Department of Nursing uses the exam and remediation program to ensure the student’s ability to achieve the BSN program objectives and to prepare the student for success on the NCLEX-RN exam.

1. Specialty Exams – These proctored exams are given in specific courses and measure the student’s ability to apply concepts related to specific nursing content areas throughout the curriculum. There are two versions of the specialty exams. Each Specialty Exam is repeated at various points in the curriculum after appropriate review and remediation.

2. Practice Exams are pre-built, non-proctored tests that will help you to assess knowledge of concepts learned while practicing NCLEX-style questions written at the application level. These practice exams will also help you prepare for the Specialty Exams.

Preparation for taking the Specialty Exams:
In preparation for the first proctored Specialty Exam, the student must:
- Complete Practice Exam 1 and review and remediate the concepts missed
- Complete Practice Exam 2 with a minimum 95% (without rationales).
Prior to taking version 2 of the exam, the student must review and complete remediation on concepts missed.

Grade Calculation:
Proctored Specialty Exam grades will comprise 5% of total course grade prior to taking the final exam. Course syllabi will reflect the total allocated points for the specialty exams.
The recommended performance level for all ATI Specialty Exams is a Level 2 proficiency.
- A student earning a score greater than or equal to the percentage score equivalent to a Level 2 proficiency will receive 100% of the points allocated to the ATI Specialty Exam.
- For a score less than a Level 2 Proficiency percentage, awarded points will be calculated using the student’s percentage score times the total course points allocated to the exam.

3. Comprehensive Exit Exam – A Comprehensive Exit Exam assesses the student’s readiness to take the NCLEX Examination with question formats and an exam blueprint that matches the latest NCLEX-RN Test Plan. The Comprehensive Exit Exam helps to identify a student’s strengths and weaknesses and provides remediation to address knowledge deficits prior to taking the NCLEX-RN exam.

The ATI RN Comprehensive Predictor Exam is given in the last semester of the Senior year. Prior to taking the Comprehensive Exit Exam, the student must receive the percentage equivalent to a Level 2 Proficiency on the ATI Specialty Exams.
The Specialty Exams are as follows: Fundamentals, Maternal-Newborn, Nursing Care of Children, Med/Surg, Management/Leadership, Community, Pharmacology, Nutrition and Mental Health.

- If a student does not achieve the required benchmark on either Version 1 or Version 2 of the Specialty Exams, the student must meet with the NCLEX Review Course faculty member to review areas of strengths and weaknesses on the Specialty Exams complete remediation. The student will be required to complete at least six (6) additional exams in the Lippincott’s Pass Point resource related to the identified deficiencies in either the NCLEX Client Needs Categories or Content Areas and complete other remediation activities as appropriate to the student’s identified weaknesses. Lippincott’s Pass Point is an online, adaptive learning resource designed to help students succeed on the NCLEX-RN. Students can take adaptive quizzes, take comprehensive adaptive exams and access evidenced-based content.

4. **Computer Adaptive Test (CAT)** – Just like the actual NCLEX-RN exam, the CAT Exam provides a tailored-item selection based on the student’s performance on the previous item, creating an exam realistic to the NCLEX-RN exam.

   The following is the list of Standardized Assessments/Exams and resources that are administered in the identified courses. **The Assessments/Exams may be administered at designated times outside of the regularly scheduled classroom time.**
<table>
<thead>
<tr>
<th>Course</th>
<th>Assessments/Exams</th>
<th>Version 1 Exam Administration</th>
<th>Version 2 Exam Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 300: Fundamentals</td>
<td>Critical Thinking Pre-Test</td>
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<td></td>
<td>ATI Plan Orientation</td>
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<td></td>
<td>Nurse Logic</td>
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<td></td>
<td>Self-Assessment Inventory</td>
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<td></td>
<td>Drug Calcs Secured Exam: Fundamentals</td>
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<tr>
<td>NURS 301: Care of Childbearing Families</td>
<td>Maternal – Newborn Secured Exam</td>
<td>Week 14</td>
<td>NCLEX Review Course</td>
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<tr>
<td></td>
<td>Drug Calcs Secured Exam: Maternal-Newborn</td>
<td></td>
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<tr>
<td>NURS 302: Acute Alterations in Health</td>
<td>Fundamentals Secured Exam</td>
<td>Week 13</td>
<td>NCLEX Review Course</td>
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<tr>
<td></td>
<td>Drug Calcs Secured Exam: Med/Surg</td>
<td></td>
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<tr>
<td>NURS 303: Care of Children</td>
<td>Nursing Care of Children Secured Exam</td>
<td>Week 14</td>
<td>NCLEX Review Course</td>
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<tr>
<td></td>
<td>Drug Calcs Secured Exam: Nsg Care of Children</td>
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<tr>
<td>NURS 401: Care of Individuals with Life-Threatening Alterations</td>
<td>Medical/Surgical Secured Exam</td>
<td>Week 14</td>
<td>NCLEX Review Course</td>
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<tr>
<td></td>
<td>Drug Calcs Secured Exam: Critical Care</td>
<td></td>
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<tr>
<td>NURS 402: Care of Individuals with Alterations in Mental Health</td>
<td>Mental Health Secured Exam</td>
<td>Week 12</td>
<td>Week 14</td>
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<tr>
<td></td>
<td>Drug Calcs Secured Exam: Mental Health</td>
<td></td>
<td></td>
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<tr>
<td>NURS 404: Care of Inds with Chronic Alterations in Health</td>
<td>Nutrition Secured Exam</td>
<td>Week 13</td>
<td>NCLEX Review Course</td>
</tr>
<tr>
<td>NURS 405: Care of Human Communities</td>
<td>Community Secured Exam</td>
<td>Week 13</td>
<td>NCLEX Review Course</td>
</tr>
<tr>
<td>NURS 410: Nursing Management/Leadership</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>NURS 413: Management/Leadership Practicum</td>
<td>Leadership Secured Exam</td>
<td>Week 5</td>
<td>NCLEX Review Course</td>
</tr>
<tr>
<td>NURS 413: Management/Leadership Practicum</td>
<td>Pharmacology Secured Exam</td>
<td>Week 6</td>
<td>NCLEX Review Course</td>
</tr>
<tr>
<td>NCLEX Review Course</td>
<td>Critical Thinking Post-Test</td>
<td>Spring Semester Week 13</td>
<td></td>
</tr>
<tr>
<td>NCLEX Review Course</td>
<td>Virtual ATI NCLEX Review</td>
<td>Spring Semester Mid-Term</td>
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</tbody>
</table>
5. EXAM 401 Senior Comprehensive Examination Policy

As per University policy, all students must pass a comprehensive examination in their major field of study as a requirement for graduation. The purpose of the examination will be to assess the student's command of the material and methodology used in his or her major.

Students who pass their comprehensive examinations will be registered for EXAM 401 Comprehensive Exam and a grade of "P" will be recorded. The non-credit requirement will not affect the students' cumulative quality point averages, and there will be no additional fees charged to the students.

A passing score for Exam 401 is contingent on the completion of the following requirements:

1. All students are required to take the NCLEX Review Course (0 credits) during the Fall and Spring semesters of the Senior year. The focus of the course will include test-taking strategies, content review, and review of NCLEX-style questions.

2. Students must complete the requirements as outlined in the Standardized Testing policy, which includes achieving the benchmark of a level 2 percentage score on either version 1 or version 2 of the specialty exams. If the benchmark is not met, the student must meet with the NCLEX Review course faculty member to review strengths and weaknesses on the HESI Specialty Exams. The student will then complete at least six (6) additional exams in the Lippincott’s Pass Point resource related to the identified deficiencies in either the NCLEX Client Needs Categories or Content Areas and complete other remediation activities per areas of weakness. Lippincott’s Pass Point is an online, adaptive learning resource designed to help students succeed on the NCLEX-RN. Students can take adaptive quizzes, take comprehensive adaptive exams and access evidenced-based content.

3. Students must complete 3000 NCLEX-type questions by March 1 of the spring semester. The number of questions will be obtained by completing NCLEX style questions in the Lippencott NCLEX-RN Pass Point resource and other exams as indicated by the course faculty member.

4. Version 1 of the Comprehensive Exit exam will be given the second week of the spring semester. The benchmark for the ATI Comprehensive Exam is achieving the 96% Probability level for passing the NCLEX. Students will review the exam and complete remediation on the concepts missed. Each student will meet with the NCLEX Course faculty.
member to discuss areas of strengths and weaknesses on the comprehensive exit exam. Students must complete individualized assignments and assignments in Lippincott’s Pass Point based on the weaknesses noted in the NCLEX Client Needs Categories, Content Areas and integration areas.

5. The second version of the ATI RN Comprehensive Predictor Exit Exam will be administered at mid-term and the CAT exam during the last week of classes.

6. Students must register for the Virtual ATI NCLEX Review course at midterm and some, but not all of the time will be allotted during the NCLEX Review course to begin the required assessments and remediation. Students will be responsible for a portion of the payment for this review course. The Virtual ATI is offered through Assessment Technologies, Inc. and provides the student with an individualized online mentor to guide them through the review, assessment and remediation process. When the student achieves the recommended benchmarks, the online mentor will provide a “green light” for the student to take the NCLEX-RN exam. The Virtual ATI program and obtaining the clearance to take the NCLEX-RN is dependent on student progress; therefore, the program may extend after graduation. The student must complete at least 75% of the course prior to May 1 in order to receive a passing grade for EXAM 401. If the student completes at least 75% of the course, she/she is permitted to graduate contingent upon continuance of the Virtual ATI program after graduation until the student obtains the “green light” to take the NCLEX-RN. If the student does not complete 75% of the Virtual ATI program by May 1, the student will receive an incomplete grade for Exam 401.

21. STUDENT EMPLOYMENT POLICY

Students are urged to give careful consideration to their ability to engage in part-time employment during the academic year because of the considerable demands of the program. Students will not be excused from theory, lab, or clinical experience due to conflicts with an employment schedule. Employment schedules should be taken into consideration before enrolling in classes.

22. STUDENT HEALTH REQUIREMENTS POLICY

The health objectives, policies, and services identified in the current Student Handbook apply to all Saint Francis University students. The Health Program is planned and implemented to assist in maintaining the physical and mental health of students. Students must adhere to agency guidelines regarding ChildLine clearances and Criminal checks in order to complete clinical requirements.

In addition to the health policies of Saint Francis University, students enrolled in Nursing courses (NURS 200 level and above) will be responsible for meeting the following additional requirements. Students are responsible for costs incurred for these requirements. These costs are not included in student fees:
<table>
<thead>
<tr>
<th>Requirement</th>
<th>Sophomore</th>
<th>Junior</th>
<th>Senior</th>
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<tbody>
<tr>
<td>Health Physical Exam (q 2 years)</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>Immunizations/Titors</td>
<td>X</td>
<td>X</td>
<td></td>
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<tr>
<td>PPD</td>
<td>X 2-step</td>
<td>X 1-step</td>
<td>X 1-step</td>
</tr>
<tr>
<td>Urine Drug Screen</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>ChildLine and Abuse Registry Clearances</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>PA State Police Criminal Background Check</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>FBI clearances/fingerprints</td>
<td>X</td>
<td></td>
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<tr>
<td>Health Insurance Card</td>
<td>X</td>
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<tr>
<td>Flu Vaccine</td>
<td>X</td>
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<tr>
<td>CPR (AHA for Health Care Providers)</td>
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<td>X</td>
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<tr>
<td>Signed Release of Confidential Information form</td>
<td>X</td>
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<tr>
<td>Act 31 Recognizing and Reporting Child Abuse</td>
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</table>

Detailed information related to the above and the appropriate health forms will be distributed to students in the spring prior to entry into junior and senior years and in the fall prior to second semester sophomore year. This required information must be completed and submitted to the appropriate departments at Saint Francis University as indicated on the cover sheet that you will receive in the spring. All health services will be offered at Saint Francis University in the Student Health Center. Urine drug screens must be completed on campus. The physical exam may be completed at the Student Health Center or by your family medical provider. The student will incur the cost of these services. Saint Francis University’s Student Health Center determines the cost of these services, immunization titers, urine drug screen, and PPD.

As the examination results are submitted, they will be reviewed by the nurse in the Student Health Center (Phone 814-472-3008). All health records will be maintained confidentially at the Student Health Center office.

All information must be complete and submitted prior to the date designated by the Department of Nursing. Otherwise, the student will not be permitted to start the clinical rotation.

Any absence due to failure to obtain clearances for clinical will be considered an unexcused absence and will not be eligible for clinical makeup.

A student will not be permitted to participate in the clinical component of the nursing courses until the completed examination forms and immunization records are returned and reviewed.
A student may be asked to withdraw from the Nursing Program if there is evidence to suggest that the health of the student or the safety of the patients/clients in the clinical area may be threatened by the continuation of the student in the program. Falsification or omission of information required for the Student's health record is also a condition for requesting the withdrawal of a student from the Nursing Program.

Students, who develop any health issues during the semester, must abide by hospital/clinical policy.

To return to clinical or be re-admitted into the Nursing Program, the health provider must submit documentation directly to the Student Health Center that the student's health problem has been or is currently being treated, and that the student can return to clinical practice.

23. **STUDENT HEALTH INSURANCE POLICY**

The student is responsible for his/her own health insurance coverage, health care, and all health bills incurred. The student is to give health insurance coverage information to the Department of Nursing prior to entering the junior and senior years. This is a requirement of the affiliating agencies.

Most clinical agencies will provide emergency medical care to students and the expenses of that care are the responsibility of the student.

01/80 Rev. 09/90; 04/91; 06/93; 06/94; 06/96; 05/19/00; 5/01; 6/10; 8/12; 6/14; 5/15; 5/17; 5/18

24. **STUDENT RECORDS POLICY**

All permanent Saint Francis University student records are kept locked in filing cabinets in the Office of the Registrar.

The following information for each nursing student is maintained in locked filing cabinets in the Department of Nursing office:

1. Student evaluations related to theoretical and clinical experiences.
2. A summary of student/advisor conferences.
3. Copy of official communications sent to and received by student.
4. Student information form and program of studies form.
5. Copy of the math proficiency exam contract.
6. Original clearances (child abuse and criminal background check), copy of CPR card, copy of health insurance verification. Drug screening, immunization titers, physical exam, and PPD results will be kept in the Student Health Center with the student’s health record.

Following graduation, the student’s files are retained by the Department of Nursing.
Health records are maintained by the University for five (5) years at the Student Health Center located at the DiSepio Institute for Rural Health and Wellness.

Content of the student's record is confidential. The Department Chairperson, nursing faculty, the Dean of School of Health Sciences, the Associate Dean of the School of Health Sciences, the President of the University, the Provost of the University, the Associate Provost of the University, and the Registrar have access to the records in the Department of Nursing office. The student has access to his/her records under the policy of the University as stated in the current Student Catalog.

Information will be released from a student's record only with the student's written permission.

25. STUDENT REPRESENTATIVES GUIDELINES

Student level representation provides a means for students to participate in the evaluation of the Nursing Program. The faculty welcomes open dialogue with students to enhance the quality of the educational program.

A. Procedure

1. At the beginning of the fall semester, one student representative and one alternate in good academic standing will be elected for each Level. Additionally, one student representative for the Curriculum Committee will be elected from the senior class.

2. Student representatives will be notified at least one (1) week prior to a scheduled meeting. Student representatives may present items in writing for inclusion on the agenda to the Chairperson of the Nursing Department, or any faculty member, at least one (1) week prior to the scheduled meeting.

3. Student reports/concerns will be the first order of business at the respective meetings.

4. Student comments should be a reflection of the Level as a whole. Concerns relating to an individual student should be discussed with the instructor.

5. Student representatives are responsible to report the outcomes of the meetings to fellow students.

26. TRANSPORTATION POLICY

Travel to and from all assigned clinical facilities and field trips, and other expenses, such as lodging, as incurred are the responsibility of the student. Although on occasions, it may be possible to share transportation with other students, this cannot be guaranteed. Therefore, students should be prepared for this expense. It is expected that students will abide by parking regulations at each of the institutions and agencies where clinical experiences are planned.
V. PENNSYLVANIA STATE BOARD OF NURSING

1. Requirements For RN-Licensure

The Bachelor of Science in Nursing Program is approved by the Pennsylvania State Board of Nursing and accredited by the Commission on Collegiate Education (CCNE).

Students enrolled in the Saint Francis University Nursing Program must comply with the requirements of Pennsylvania’s PROFESSIONAL NURSING LAW, THE. Cl. 63. Act of May. 22, 1951, P.L. 317, No. 69. AN ACT, as amended.

A copy of the Professional Nursing Law of PA is maintained in the following area for students to review: the Nursing Office and is available on line at:
http://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Documents/Applications%20and%20Forms/Professional%20Nurse%20Law.pdf

...Section 6 Fees; Qualifications for Licensure
(a) No application for licensure as a registered nurse shall be considered unless accompanied by a fee determined by the Board by regulation. Every applicant, to be eligible for examination for licensure as a registered nurse, shall furnish evidence satisfactory to the Board that he or she is of good moral character, has completed work equal to a standard high school course as evaluated by the Board and has satisfactorily completed an approved program of professional nursing. Approved programs shall include baccalaureate degree, associate degree, diploma Nursing Programs and programs in transition from approved diploma- to degree-granting programs when all other requirements of the Board have been met….

...(c) The Board shall not issue a license or certificate to an applicant who has been convicted of a felonious act prohibited by the act of April 14, 1972 (P.L.233, No.64), known as “The Controlled Substance, Drug, Device and Cosmetic Act,” or convicted of a felony relating to a controlled substance in a court of law of the United States or any other state, territory or country unless:

(1) At least ten (10) years have elapsed from the date of conviction;

(2) The applicant satisfactorily demonstrates to the Board that he has made significant progress in personal rehabilitation since the conviction such that licensure of the applicant should not be expected to create a substantial risk of harm to the health and safety of patients or the public or a substantial risk of further criminal violations; and

(3) The applicant otherwise satisfies the qualifications contained in or authorized by this act.

As used in this subsection the term “convicted” shall include a judgment, an admission of guilt or a plea of nolo contendere. An applicant’s statement on the application declaring the absence of a conviction shall be deemed satisfactory evidence of the absence of a conviction, unless the Board has some evidence to the contrary.
(6 amended June 29, 2002, P.L.651, No.99)...

...Section 12.1 Continuing Nursing Education
(a) The Board shall adopt, promulgate and enforce rules and regulations consistent with the provisions of this act establishing requirements of continuing nursing education to be met
by individuals licensed as registered nurses under this act as a condition for renewal of their licenses. The regulations shall include any fees necessary for the Board to carry out its responsibilities under this section.

(b) Beginning with the license period designated by regulation, licensees shall be required to attend and complete thirty (30) hours of mandatory continuing education during each two-year license period. Nationally certified education courses shall be considered as creditable, in addition to any other courses the Board deems creditable toward meeting the requirements for continuing education.

(c) An individual applying for the first time for licensure in this Commonwealth shall be exempted from the continuing education requirement for the biennial renewal period following initial licensure.

(d) (1) The Board may waive all or a portion of the continuing education requirement for biennial renewal for a licensee who shows to the satisfaction of the Board that the licensee was unable to complete the requirements due to serious illness, military service or other demonstrated hardship.

(2) The request shall be made in writing with appropriate documentation and shall include a description of circumstances sufficient to show why the licensee is unable to comply with the continuing education requirement.

(e) A licensee seeking to reinstate an inactive or lapsed license shall show proof of compliance with the continuing education requirement for the preceding biennium.

(f) All courses, locations, instructors and providers shall be approved by the Board. No credit shall be given for any course in office management.

(g) In lieu of meeting the requirements of this section:
(1) Certified registered nurse practitioners and dietetics-nutrition licensees shall fulfill the requirements for continuing education in accordance with sections 8.1 and 11, respectively.

(2) School nurses who as certified education specialists are required to obtain continuing professional education under section 1205.2 of the act of March 10, 1949 (P.L.30, No. 14) known as the “Public School Code of 1949,” and under this act shall be permitted to submit evidence of the completion of education courses approved for their certification by the school district.

(h) The board shall initiate the promulgation of regulations to carry out the provisions this section within one (1) year of the effective date of this section.

(12.1 added June 29, 2006, P.L.275, No.58)

**Section 14 Refusal, Suspension or Revocation of Licenses**

(a) The Board may refuse, suspend or revoke any license in any case where the Board shall find that:

(1) The licensee is on repeated occasions negligent or incompetent in the practice of professional nursing or dietetics-nutrition.
(2) The licensee is unable to practice professional nursing with reasonable skill and safety to patients by reason of mental or physical illness or condition or physiological or psychological dependence upon alcohol, hallucinogenic or narcotic drugs or other drugs which tend to impair judgment or coordination, so long as such dependence shall continue. In enforcing this clause (2), the Board shall, upon probable cause, have authority to compel a licensee to submit to a mental or physical examination as designated by it. After notice, hearing, adjudication and appeal as provided for in section 15, failure of a licensee to submit to such examination when directed shall constitute an admission of the allegations against him or her unless failure is due to circumstances beyond his or her control, consequent upon which a default and final order may be entered without the taking of testimony or presentation of evidence. A licensee affected under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume a competent practice of professional nursing with reasonable skill and safety to patients.

(3) The licensee has willfully or repeatedly violated any of the provisions of this act or of the regulations of the Board.

(4) The licensee has committed fraud or deceit in:

   (1) The practice of nursing, or in securing his or her admission to such practice or nursing school; or

   (2) The practice of dietetics-nutrition or in securing his or her license as a dietitian-nutritionist.

(5) The licensee has been convicted, or has pleaded guilty, or entered a plea of nolo contendere, or has been found guilty by a judge or jury, of a felony or a crime of moral turpitude, or has received probation without verdict, disposition in lieu of trial or an Accelerated Rehabilitative Disposition in the disposition of felony charges, in the courts of this Commonwealth, the United States or any other state, territory, possession or country.

(6) The licensee has his or her license suspended or revoked or has received other disciplinary action by the proper licensing authority in another state, territory, possession or country.

(7) The licensee has acted in such a manner as to present an immediate and clear danger to the public health or safety.

(8) The licensee possessed, used, acquired or distributed a controlled substance or caution legend drug for other than an acceptable medical purpose.

(9) The licensee has been guilty of immoral or unprofessional conduct. Unprofessional conduct shall include departure from or failing to conform to an ethical or quality standard of the profession. The ethical and quality standards of the profession are those embraced by the professional community in this Commonwealth. In proceedings based on this clause, actual injury to a patient or individual or group need not be established.

(b) When the Board finds that the license of any nurse or dietitian-nutritionist may be refused,
revoked or suspended under the terms of subsection (a), the Board may:

(1) Deny the application for a license.

(2) Administer a public reprimand.

(3) Revoke, suspend, limit or otherwise restrict a license as determined by the Board.

(4) Require a licensee to submit to the care, counseling or treatment of a physician or a psychologist designated by the Board.

(5) Suspend enforcement of its finding thereof and place a licensee on probation with the right to vacate the probationary order for noncompliance.

(6) Restore or reissue, in its discretion, a suspended license to practice professional or practical nursing or dietetics-nutrition and impose any disciplinary or corrective measure which it might originally have imposed.

(14 amended June 29, 2002, P.L.651, No.99)

Section 14.1 Impaired Professionals Program

(a) The Board, with the approval of the Commissioner of Professional and Occupational Affairs, shall appoint and fix the compensation of a professional consultant who is a licensee of the Board with education and experience in the identification, treatment and rehabilitation of persons with physical or mental impairments. Such consultant shall be accountable to the Board and shall act as a liaison between the Board and treatment programs, such as alcohol and drug treatment programs licensed by the Department of Health, psychological counseling and impaired professionals support groups approved by the Board and which provide services to licensees under this act.

(b) The Board may defer and ultimately dismiss any of the types of corrective action set forth in this act for an impaired professional so long as the licensee is progressing satisfactorily in an approved treatment program, provided that the provisions of this subsection shall not apply to a licensee who has been convicted of, pleaded guilty to or entered a plea of nolo contendere to a felonious act prohibited by the act of April 14, 1972 (P.L.233, No.64), known as “The Controlled Substance, Drug, Device and Cosmetic Act,” or the conviction of a felony relating to a controlled substance in a court of law of the United States or any other state, territory or country. An approved program provider shall, upon request, disclose to the consultant such information in its possession regarding an impaired professional in treatment which the program provider is not prohibited from disclosing by an act of this Commonwealth, another state or the United States. Such requirement of disclosure by an approved program provider shall apply in the case of impaired professionals who enter an agreement in accordance with this section, impaired professionals who are the subject of a Board investigation or disciplinary proceeding and impaired professionals who voluntarily enter a treatment program other than under the provisions of this section but who fail to complete the program successfully or to adhere to an after-care plan developed by the program provider.

(c) An impaired professional who enrolls in an approved treatment program shall enter into an agreement with the Board under which the professional’s license shall be suspended or revoked but enforcement of that suspension or revocation may be stayed for the length of time the professional remains in the program and makes satisfactory progress, complies with the terms of the agreement, and adheres to any limitations on his practice imposed by
the Board to protect the public. Failure to enter into such an agreement shall disqualify the professional from the impaired professional program and shall activate an immediate investigation and disciplinary proceeding by the Board.

(d) If, in the opinion of such consultant after consultation with the provider, an impaired professional who is enrolled in an approved treatment program has not progressed satisfactorily, the consultant shall disclose to the Board all information in his or her possession regarding such professional, and the Board shall institute proceedings to determine if the stay of the enforcement of the suspension or revocation of the impaired professional’s license shall be vacated.

(e) An approved program provider who makes a disclosure pursuant to this section shall not be subject civil liability for such disclosure or its consequences.

(f) Any hospital or health care facility, peer or colleague who has substantial evidence that a professional has an active addictive disease for which the professional is not receiving treatment, is diverting a controlled substance or is mentally or physically incompetent to carry out the duties of his license shall make or cause to be made a report to the Board. Provided, that any person or facility who acts in a treatment capacity to impaired professionals in an approved treatment program is exempt from the mandatory reporting requirement of this subsection. Any person or facility who reports pursuant to this section in good faith and without malice shall be immune from any civil or criminal liability arising from such report. Failure to provide such report within a reasonable time from receipt of knowledge of impairment shall subject the person or facility to a fine not to exceed one thousand dollars ($1,000). The Board shall levy this penalty only after affording the accused party the opportunity for a hearing, as provided in Title 2 of the Pennsylvania Consolidated Statutes (relating to administrative law and procedure).


VI. STUDENT NURSES ORGANIZATION BYLAWS

Article I
Name

The name of this organization shall be the Student Nursing Organization of Saint Francis University.

Article II
Purpose

The purpose of the Student Nursing Organization shall be:

A. To represent the student body at Saint Francis University activities and functions through participation and cooperation.
B. To provide an opportunity for participation in the formulation and application of policies affecting nursing, academic and student affairs.
C. To provide an opportunity for discussion of student concerns within the Department of Nursing.
D. To promote opportunities for academic growth at Saint Francis University.
E. To participate as a group in social and community activities within and outside of Saint Francis University.
F. To participate in the orientation of new students enrolled in the Nursing Program at Saint Francis University.
G. To introduce members of the organization to the existence of pre-professional and professional nursing organizations by exploring current trends and legislative issues related to the profession of nursing.

Article III
Membership

The eligible members of the organization shall be any student enrolled at Saint Francis University who is interested in professional nursing.

Article IV
Officers

Section 1:
The officers of the Student Nursing Organization shall be the President, Vice President, Secretary, Treasurer, and Public Relations Chair.

Section 2: Election of Officers
A. Nominations will begin at the October meeting and will be open until the election meeting in November.
B. The officers shall be elected by ballot and their term of office shall begin at the close of the annual meeting in December.
C. In the event of a vacancy of the Office of President, the Vice President will automatically assume the Presidency.
D. No member shall hold more than one office at a time.
E. In the event of a vacancy in any other elected office prior to a regular election, an interim nomination and vote will be held to elect a member to serve in the vacated position until the next regular election.
F. Any member shall run for more than one office at a time, but in the event that both offices are obtained, a choice would have to be made, and the second person on the ballot would obtain the other office.
G. Officers must be in good standing in the Nursing Department.

Article V
Duties of Officers

Section 1:
The President shall:
A. Preside at all Student Nursing Organization meetings.
B. Represent the Student Nursing Organization as its official spokesperson at Saint Francis University.
C. Serve as Chairperson of the Student Nursing Organization Executive Committee.
D. Sign all necessary documents in the name of the Student Nursing Organization when directed by the membership.
E. Serve as ex officio member of all committees within the Student Nursing Organization.
F. Perform additional duties assigned by the Executive Committee.
Section 2:
The Vice President shall:
A. Preside in the absence of the president and when so acting have full authority of the president.
B. Serve as Assistant to the President.
C. Serve as Chairperson of the Program Committee for Academic Growth.
D. Perform all other duties assigned by the President of the Executive Committee.

Section 3:
The Secretary shall:
A. Record the minutes of all the meetings and be responsible for copying all minutes necessary to hand out. Will also post meeting times, dates, places on nursing bulletin board.
B. Keep a record of all minutes.
C. Receive, write, and distribute all correspondence related to or of interest to the Student Nursing Organization.
D. Perform all other duties assigned by the President or as usual to this office.

Section 4:
The Treasurer shall:
A. Collect, receive, and record all monetary transactions for the organization.
B. Be custodian of the Student Nursing Organization's monies and deposit them in a bank designated by the Executive Committee.
C. Disperse the organization's funds as directed by the Membership.
D. Deliver a report of all transactions and current financial status of the organization at all regular meetings, as well as an annual report at the April meeting.
E. Perform all other duties assigned by the President or as usual to this office.

Section 5:
The Public Relations Chair shall:
A. Organize and keep a scrapbook of Student Nursing Organization functions and activities.
B. Assist the Secretary as necessary.
C. Perform all other duties assigned by the President or as usual to this office.

Section 6:
Class Representatives shall:
A. Consist of one member from each class (Freshman, Sophomore, Junior and Senior).
B. Communicate the needs of their respective classes to the Executive Committee.
C. Communicate activities of the Executive Committee to their respective classes.
D. Perform all other duties assigned by the Student Nursing Organization President or as usual to this office.

Article VI
Meetings

Section 1:
The regular meetings of the Student Nursing Organization shall be held each month from September to April. The date and time for the regular meetings will be established by the Student Nursing Organization Membership during its initial meeting at the beginning of the semester.

Section 2:
The regular meeting in April shall be known as the annual meeting and shall be for the purpose of receiving annual reports from officers and committee chairpersons and reviewing bylaws.
Section 3:
Additional meetings can be called by the President or by the Executive Committee.

Section 4:
A majority of the membership of the Student Nursing Organization shall constitute a majority of the members present.

Article VII
Executive Committee

Section 1:
Members of the Executive Committee shall include the officers of the Student Nursing Organization, one representative from each class (Freshman, Sophomore, Junior and Senior) all committee chairpersons, and the faculty advisors to the Student Nursing Organization.

Section 2:
The Executive Committee shall:
A. Enforce the Bylaws of the Student Nursing Organization.
B. Act as liaison and medium for communication exchange between the Student Nursing Organization and University faculty and administration.
C. Supervise the affairs of the Student Nursing Organization between regular meetings and make recommendations to the Organization.
D. Propose to the general membership the expenditure of funds for activities.
E. Be accountable to the nursing student body by making available fiscal reports, voting results, council agenda, and minutes.

Section 3:
The President of the Student Nursing Organization will preside as Chairperson of the Executive Committee.

Section 4:
One to two full-time members of the nursing faculty, selected by the Department Chairperson, shall serve as advisors and non-voting members to the Executive Committee.
Faculty Advisors shall:
A. Serve as liaisons between the Student Nursing Organization and the Department of Nursing.
B. Interpret the policies of the University and the Department of Nursing to the students.
C. Attend Student Nursing Organization meetings and Committee meetings upon the request of the specific committee chairpersons.

Section 5:
The Executive Committee shall meet regularly (once a month) on a day and a time set by the Executive Committee at its first regular meeting each semester. Additional meetings can be called by the President or upon the written request of three members of the Executive Committee.

Section 6:
The majority of the voting members of the Executive Committee present shall constitute a quorum. Each member of the Executive Committee shall have one vote.
Section 7: Dismissal Procedure

A. The Executive Committee shall have the privilege to ask for the dismissal of any Executive Committee member who:
   1. Is absent from two consecutive meetings with no reasonable excuse.
   2. Fails to carry out the designated duties of his/her office.

B. Action will be taken after two written warnings are given to the offending member from the Student Nursing Organization Chairperson.

C. A two-thirds vote by all Executive Committee members will decide upon the outcome of an offending member.

D. The offending member will be notified of the Executive Committee's action through a formal letter from the Executive Committee's Chairperson within one week of vote.

E. The offending member retains the right to come before the Executive Committee to appeal the decision. If he/she decides to do so, the Executive Committee must be informed one week after notification is received.

Article VIII

Committees

Section 1:
The Committees and their respective duties are as follows:

A. The Program Committee for Academic Growth shall:
   1. Be chaired by the Vice President of the Student Nursing Organization.
   2. Organize and conduct at least two programs per year for the Student Nursing Organization such as lectures, seminars, job fairs, etc.
   3. Carry out duties delegated by the Student Nursing Organization President with respect to committee or class functions.

B. The Publications and Bylaws Committee shall:
   1. Contribute articles related to the Student Nursing Organization to the Loretto.
   2. Publicize all Student Nursing Organization activities in advance.
   4. Make recommendations for Bylaw revisions as necessary to the Student Nursing Organization.
   5. Post a list of proposed changes in Bylaws for all students to review and comment on prior to presentation to the Executive Committee.
   6. Present revised Bylaws to the Executive Committee at the regular meeting in March for approval.
   7. Post approved Bylaws for all nursing students.
   8. Carry out duties delegated by the Student Nursing Organization present with respect to Committee functions.

C. The Social Committee shall:
   1. Coordinate all social activities of the Student Nursing Organization with the University.
   2. Coordinate the Student Nursing Organization's involvement in University activities.
   3. Organize a freshman orientation for new students in the Nursing Program at the beginning of each academic year.
   4. Organize fund-raising activities for the Student Nursing Organization.
   5. Submit a report of Student Nursing Organization social activities at the end of each school year.
6. Carry out duties delegated by the Student Nursing Organization President with respect to Committee’s functions.

D. The Service Committee shall:
   1. Plan and coordinate at least one service project of the Student Nursing Organization with the University and surrounding communities.
   2. Coordinate the Student Nursing Organization’s involvement in service projects sponsored by the University and/or community organizations.
   3. Carry out duties delegated by the Student Nursing Organization President with respect to Committee’s functions.

E. Special Committees shall be appointed as necessary by the Student Nursing Organization President and shall be disbanded when the task is accomplished.

Section 2:
Any member of the Student Nursing Organization shall serve on the Committees of their choice. Committee members are responsible for:
   A. Attending meetings, or in the event of an absence, relay any pertinent information to the Committee Chairperson.
   B. Participating in organizing and implementing Committee activities related to the Student Nursing Organization.
   C. Providing members of the Student Nursing Organization and the Executive Committee with essential information regarding Committee activities.
   D. Soliciting ideas and suggestions from the nursing student body.
   E. Meeting deadlines set by respective Committee or Executive Committee.

Section 3:
Committee Chairpersons shall be determined at the beginning of the fall semester.

Article IX
Amendments

These Bylaws can be amended at any regular meeting of the SNO by a majority of members present. The amendment shall be submitted in writing to the members at the next regular meeting.

Reviewed: 5/17

VII. STUDENT RIGHTS AND RESPONSIBILITIES

“As per the Saint Francis University Student Handbook, all students at Saint Francis University are expected to conduct themselves according to Judeo-Christian values that reflect their commitment to the University community and develop the personal character and social attributes that reflect maturity. To practice nursing as a student also requires upholding the trust society has placed in the profession of nursing. Nursing students are to adhere to the ethical principles and professional standards set forth by the profession while in both the clinical and academic environment…”
1. **STUDENT RIGHTS AND RESPONSIBILITIES**

   A. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.

   B. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.

   C. Each institution has a duty to develop policies and procedures, which provide and safeguard the students’ freedom to learn.

   D. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, lifestyle, disability, or economic status.

   E. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

   F. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

   G. Information about student views, beliefs, political ideation, or sexual orientation, which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

   H. The student should have the right to have a responsible voice in the determination of his/her curriculum.

   I. Institutions should have a carefully considered policy as to the information, which should be a part of a student's permanent educational record and as to the conditions of this disclosure.

   J. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

   K. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.

   L. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.

   M. The institution has an obligation to clarify those standards of behavior, which it considers essential to its educational mission, its community life, or its objectives and philosophy.

   N. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.

   O. As citizens and members of an academic community, students are subject to the obligations, which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.

   P. Students have the right to belong or refuse to belong to any organization of their choice.

   Q. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
R. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.

S. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.

T. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.

U. Students should have a clear mechanism for input into the evaluation of nursing faculty.

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).