



The mission of Kansas Wesleyan University is to promote and integrate
academic excellence,
spiritual development,
personal well-being,
and **social** responsibility.

Division of Nursing Education and Health Sciences

Department of Nursing Education

The mission of the Kansas Wesleyan University Department of Nursing Education baccalaureate program is to prepare students as professional nurse generalists by incorporating the areas of biopsychosocial, behavioral, and spiritual development into the delivery of nursing education so that students may provide client-centered care, pursue graduate studies and continue lifelong learning.

2020-21
NURSING STUDENT
HANDBOOK

Bachelor of Science with a Major in Nursing
Degree Program

(NDO APPROVED 03-26-18; 05-15-18; 3.18.19, 4.27.20, 8.5.20; EDITED OCTOBER 2020 AND 11.2.20)

DISCLAIMER

The policies and procedures stated in this handbook apply to all students admitted and active in the KWU nursing program. The contents of this handbook may be subject to change throughout the program. Faculty reserve the right to change policies when needed. If changes are made to the contents of this Nursing Student Handbook or policies, procedures, guidelines, or expectations for the DNE at KWU, students will be informed. Updates are posted on the KWU and DNE website and will be posted on the communication bulletin board in the DNE at KWU. In addition, students are responsible for other sources of policies, procedures, guidelines and expectations, including the Kansas Wesleyan University Student Handbooks and Academic Catalog, class schedules, KWU website, and any other pertinent KWU resources. Should contradictory information be found between a particular course syllabus and this handbook, please notify the course faculty. Course syllabi have the most current course requirements and will be followed, should the syllabus differ from this handbook.

University student policies are found in the KWU Academic Catalog and the KWU Student Handbook, found online at www.kwu.edu. If there are any discrepancies or differences in policies or procedures that are contained in the university catalog with those contained in the Nursing Student Handbook, the Nursing Education section of the university catalog will be followed.

This Nursing Student Handbook has policies, procedures, guidelines, and expectations for student nurses in the DNE at KWU. Students are held responsible for adhering to the policies, procedures, guidelines, and expectations contained within the DNE Student Handbook. Students are encouraged to take time to read and understand the contents.

Nursing students who fail to adhere to the policies and procedures as outlined in this handbook may earn a failing grade in each nursing course in which he or she is enrolled during the semester that the violation occurred. The violation may also result in dismissal from the program and ineligibility for readmission.

NON-DISCRIMINATION

It is the policy of Kansas Wesleyan University to provide all students with access to the benefits of services in admission, registration, counseling, and instruction. In order to receive the needed assistance, an individual with a diagnosed disability must inform the university of the disability through official documentation. For information on assistance with physical accessibility to facilities contact the Vice President for Finance and Operations (785-833-4335). For information on assistance with learning in the classroom, contact the Director of the Student Success Center (785-833-4398).

Kansas Wesleyan University does not discriminate on the basis of gender, handicap, age, race, color, religion, sexual orientation/preference, national or ethnic origin, nor veteran status in the recruitment and admission of students, the recruitment and employment of faculty and staff, and the operation of any of its educational programs and activities, as specified by federal laws and regulations. Kansas Wesleyan University's Equal Opportunity Officer, who coordinates compliance with these various laws and regulations, is the Vice President for Finance and Administration.

KWU complies with non-discriminatory regulations. Inquiries concerning this policy may be directed to the Provost.

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Refer to individual course syllabi for adjunct faculty contact information.

NURSING EDUCATION MISSION AND PHILOSOPHY

MISSION

The mission of the Kansas Wesleyan University Department of Nursing Education baccalaureate program is to prepare students as professional nurse generalists by incorporating the areas of biopsychosocial, behavioral, and spiritual development into the delivery of nursing education so that students may provide client-centered care, pursue graduate studies and continue lifelong learning.

PHILOSOPHY

The philosophy of the Department of Nursing Education is to offer an educational program that provides professional nursing education for students that is characterized by excellence and rooted in a liberal arts tradition. This program should nurture the whole person – body, mind, and spirit, stimulate creativity and discovery, develop both intellect and character, foster a sense of social responsibility and service, and prepare graduates for lifelong learning. Six concepts permeate the professional nursing curriculum: humans, society, environment, health, nursing, and education.

Humans and Society

Humans are perceived as biopsychosocial, spiritual beings who have the right of self-determination, make choices throughout life and are accountable for their choices. Humans are individuals, families, and communities. Humans are clients and health care providers who live in a society which is shaped by environmental, cultural, religious, socioeconomic, governmental and safety factors that influence the communities in which people live.

Environment

Environment includes internal physiological factors as well as external sociocultural factors with which the client and health care providers are in constant interaction. Nursing helps to create and maintain safe environments that promote the well-being of persons and the health care system.

Health

Health is a dynamic state, in which persons interact with their environment and adapt to it in order to maintain a dynamic equilibrium. Nursing helps clients to promote health, prevent illness, and provide support for the maintenance of equilibrium when the client cannot do so. Health is influenced by the interaction of physical, psychological, social, cultural, and spiritual dimensions.

Nursing

Best practice in nursing is both art and science, drawing upon various disciplines and expanding its own body of knowledge through research and practice. Communication, critical thinking, ethical reasoning, cultural sensitivity, knowledge, therapeutic skills, and leadership-management principles are essential to the practice of nursing. Nursing care is based on research evidence and decision-making skills in collaboration with clients, families, and other health care providers. Nurses use the nursing process to assess the client's health status, formulate nursing diagnoses, plan and implement client-centered care and evaluate the care provided.

Education

Education is the process whereby individuals acquire knowledge, skills, and attitudes, and values that assist them in reaching their optimum potential. Nurse educators draw upon theories of education and principles of learning to provide an environment conducive to student growth and change. An effective learning environment is characterized by encouragement of active student participation, the use of critical

reasoning, and provides the basis for life-long learning. The nursing curriculum is influenced by a strong liberal arts emphasis as well as humane Christian values.

Baccalaureate education in nursing at KWU provides opportunities for the student to integrate professional education with the natural and behavioral sciences and the humanities, and Christian values, leading to self-fulfillment and professional development. Baccalaureate nursing education prepares nurses to use critical thinking skills, research findings, independent clinical judgment, organizational skills, and technological understanding for quality improvement of nursing care. Additionally, baccalaureate nursing education prepares nurses to serve as leaders; to collaborate as team members with other health care providers in coordinating the care of individuals, families, and communities in diverse settings; to effect change and improve health care outcomes; and to participate in research which validates and extends current nursing knowledge and practice. Furthermore, the baccalaureate nursing graduate is expected to participate in professional nursing activities at local, state, national, and global levels. Graduates will incorporate the influences of consumer demands and health care trends for quality improvement in nursing and health care delivery.

BUILDING ON A LEGACY

The nursing program at Kansas Wesleyan University was established in January 1988 as a result of discussions between Asbury Hospital and Kansas Wesleyan University. The KWU Department of Nursing Education initiated an Associate Degree in Nursing in 1989, followed by a Bachelor of Science in Nursing (BSN) degree-completion program in 1990. Registered Nurses who had a diploma or an Associate Degree in Nursing had the opportunity to pursue a BSN one evening per week for 16 months and still work full-time. A unique approach to the clinical aspect of the program was the Applied Learning Projects (ALPs). Both programs were approved by the Kansas State Board of Nursing and obtained accreditation by the National League for Nursing in 1991. By June 2004, the last Accelerated RN to BSN group graduated. A traditional 4-year BSN degree program was designed in 2004, and the Class of 2007 was the first cohort to graduate.

The need for major program revisions was identified in 2014, which included a team of new full-time faculty, revising the curriculum, and launching the Bachelor of Science with a major in nursing degree.

While KWU continues to provide a baccalaureate nursing program for traditional pre-licensure students, we now also offer an RN to BS nursing degree online program for articulation students who are licensed RN's wanting to pursue a baccalaureate degree.

Nursing students at KWU receive clinical instruction in a variety of health care facilities. Salina Regional Health Center (SRHC) provides the majority of clinical experiences. Other opportunities are provided in long-term care settings, physicians' offices and community service agencies. A graduate of the KWU Bachelor of Science with a major in nursing degree program is eligible to apply for the National Council Licensure Examination (NCLEX-RN) to become licensed as a registered nurse.

Nursing students are encouraged to apply for the State of Kansas Nursing Scholarship. This annual, renewable scholarship requires that the applicant be accepted into the nursing program, enroll full-time, be a Kansas resident, meet other criteria outlined in the financial assistance application, and agree to work for a healthcare facility/sponsor after graduation for one year for each year of the scholarship. A number of local organizations outside the university provide small scholarships on an intermittent basis.

Accreditation and Approval of the KWU Nursing Program

The Kansas Wesleyan University baccalaureate nursing program is on conditional approval by the Kansas State Board of Nursing (Landon State Office Building, 900 SW Jackson, Suite 1051, Topeka, Kansas 66612-1230, Phone: 785-296-4929, Fax: 785-296-3929, ksbn.org).

The nursing program is also supported by the university's accreditation, which was reaffirmed in 2017 by The Higher Learning Commission of the North Central Association of Colleges and Schools (30 N. LaSalle Street, Suite 2400, Chicago, IL 60602-2504, www.ncahigherlearningcommission.org. Telephone: (800) 621-7440 or (312) 263-0456).

The baccalaureate degree program with a major in nursing at Kansas Wesleyan University is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001 (202) 887-6791.

Sunflower Health Network: Salina Regional Health Center and KWU

The Salina community and region continue to benefit from an agreement between KWU and Salina Regional Health Center (SRHC). This agreement was developed to expand the opportunities for Kansas Wesleyan student nurses by providing additional financial support for their education through Salina Regional Health Center. In return they are employed by Salina Regional Health Center following graduation.

KWU currently provides significant scholarship support for its students. Under the agreement, KWU agrees to continue its regular scholarship aid packages for each incoming class of students. Salina Regional Health Center agrees to provide additional scholarship aid packages.

Students selected for the SRHC scholarship and who are accepted into the B.S. major in nursing degree program will receive a scholarship of \$3,600 for their first year in the nursing program and a \$5,400 for their second year in the nursing program as long as they are in good academic standing. Students at this level who do not continue in the KWU nursing program are obligated to repay any of the scholarship aid received from SRHC.

Students who complete the baccalaureate nursing degree program are expected to work at SRHC or a Sunflower Health Network participating facility for a minimum of four years. Graduates who do not fulfill this requirement will be required to repay the scholarship aid received on a pro-rated basis, with each year of service completed at SRHC or a Sunflower Health Network participating facility equaling 25 percent of the scholarship aid received.

More information about the Sunflower Health Network is available at www.sunflowerhealthnetwork.com.

STUDENT LEARNING OUTCOMES

Student Learning Outcomes in the Bachelor of Science with a major in nursing degree program for which students are prepared to meet are listed below.

1. Integrate knowledge and theoretical concepts from liberal education into nursing practice decisions.
2. Utilize the nursing process in the delivery of multicultural, client-centered care, providing therapeutic nursing interventions with individuals, families, and communities who live in a society of multicultural settings.
3. Practice nursing care using safety, ethical, legal, and professional nursing standards.
4. Communicate effectively with the interdisciplinary team through teamwork and collaboration in maintaining continuity of care.
5. Use information and technology to communicate, manage knowledge, mitigate errors, and support decision making information for quality improvement in the clinical setting.
6. Utilize research evidence as a basis for providing and making decisions about quality of care and nursing practice.
7. Exhibit leadership and management principles in assessing, planning, providing, directing, controlling, and evaluating health care.
8. Function as a professional nurse through self-evaluation as life-long learners who reflect critical thinking skills in nursing practice.
9. Promote and support optimal biopsychosocial spiritual health of individuals, families, and communities in society.
10. Analyze the role of the professional nurse in relation to trends in health care and consumer demands.

FACULTY OUTCOMES

Faculty Outcomes focus on specific areas designated in the KWU Faculty Handbook guidelines. The faculty outcomes include a) teaching effectiveness, b) service, and c) scholarship. The Department of Nursing Education's Faculty Handbook defines the measureable outcomes for each of these areas.

PROGRAM OUTCOMES

1. Seventy percent (70%) or higher of each admission class will graduate from the nursing program within five (5) years (10 semesters) of admission to the baccalaureate nursing program.
2. Eighty percent (80%) or higher of graduates will pass the NCLEX-RN exam using one (1) of the three (3) calculation methods described by CCNE Standards (Amended 2013).
3. Seventy percent (70%) or higher of responding nursing graduates will be employed within 12 months after graduation.
4. Seventy-five percent (75%) or higher of each graduating cohort will score eighty percent (80%) or higher on summative projects, when aggregated per semester, which demonstrates the progress toward achievement of Student Learning Outcomes.
5. Seventy-five percent (75%) or higher of each graduating cohort will document their perception of their achievement of Student Learning Outcomes in their professional portfolio as at least level 3.0, out of 4.0 possible.
6. Eighty percent (80%) or higher of each graduating cohort will report at least level 3.0, out of 4.0 possible, in satisfaction with the nursing program on the Graduate Exit Survey.

STUDENT CONTACT INFORMATION

Each student is responsible to ensure the Department of Nursing Education has a current phone number and address on file where they can be contacted. Forms are available from the Administrative Assistant for the Department of Nursing Education.

LEGAL QUALIFICATIONS FOR RN LICENSE

Individuals entering a profession such as nursing need to be aware of the factors affecting their licensure on completion of the educational program. Many of these same factors are included in the student evaluations during the program as one develops the professional behaviors necessary to practice nursing. The student needs to be cognizant of the statutes, rules and regulations governing nursing prior to entering a nursing program, while enrolled and at the time of applying for licensure.

KANSAS NURSE PRACTICE ACT STATUTES & ADMINISTRATIVE REGULATIONS

Go to the Kansas State Board of Nursing website (<http://www.ksbn.org/npa/npa.htm>).

STANDARDS OF PRACTICE

The DNE's mission, philosophy and expected outcomes incorporate the core professional nursing standards and guidelines used throughout the baccalaureate nursing program, as found in the following documents:

- The Essentials of Baccalaureate Education for Professional Practice (AACN, 2008)
- American Nurses Association Scope and Standards of Practice, (ANA, 2015)
- Quality and Safety Education for Nurses: Knowledge, Skills, and Attitude Competencies, (NAP, 2003)

ADMISSION POLICY FOR PRE-LICENSURE NURSING STUDENTS

Please refer to the KWU Academic Catalog and www.kwu.edu/nursing for the Nursing Education Admission Policies.

RECOMMENDED COURSE SEQUENCE (DEGREE BLUEPRINT)

Freshman FALL	CrHrs	Freshman SPRING	CrHrs
ENGL 120 Introductory English Composition (foundational course) (prerequisite)	3	ENGL 121 Intermediate English Composition (foundational) (prerequisite)	3
BIOL 110 General Biology (with on-campus lab) (Natural World Stewardship) (prerequisite)	4	BIOL 222 Anatomy and Physiology II (with on-campus lab) (prerequisite)	3
BIOL 221 Anatomy and Physiology I (with on-campus lab) (prerequisite)	3	PSYC 101 Introduction to Psychology (Personal Awareness) (prerequisite)	3
INTD 105 Wesleyan Experience (foundational course only for first-time freshmen)	2	BIOL 226 Microbiology (with on-campus lab) (prerequisite)	4
INTD 115 Wesleyan Heritage (foundational course for students new to KWU)	1	Elective: <i>If needed</i> MATH 120 College Algebra or Liberal Studies choice	3
Elective: <i>If needed</i> MATH 102 Intermediate Algebra or Liberal Studies choice	3		
Total Semester Credit Hours	16	Total Semester Credit Hours	16
Sophomore FALL	CrHrs	Sophomore SPRING	CrHrs
CHEM 120 Concepts in Chemistry (with on-campus lab) (Natural World Stewardship) (prerequisite)	4	SPES 175 Nutrition (prerequisite)	3
EDUC 244 Developmental Psychology (Personal Awareness) (prerequisite)	3	NURS 250 Intro to Professional Nursing (online)	3
SPES 120 Personal, Community & Global Health (Community & World) (recommended)	3	SPES 180 Medical Terminology (online) (Human Expression) (prerequisite)	3
BSHS 210 Statistics (foundational quantitative reasoning) (prerequisite)	3	Liberal Studies suggested: REPH 111 Introduction to Ethics (Community & World)	3
Liberal Studies suggested: SCTH 130 Public Speaking (Human Expression)	3	Elective	3
Total Semester Credit Hours	16	Total Semester Credit Hours	15
Junior FALL	CrHrs	Junior SPRING	CrHrs
NURS 304 Nursing Interventions (4cr) & Clinical (2cr) 90 clinical hrs	6	NURS 308 Adult Health I (4cr) & Clinical (3cr) 1st 8 weeks (Chronic) 135 clinical hrs	7
NURS 318 Pharmacology (blended)	3	NURS 355 Mental Health Nursing (2cr) 2nd 8 weeks & Clinical (1cr) 45 clinical hrs	3
NURS 375 Pathophysiology (blended)	3	NURS 360 Evidence-Based Practice (online)	3
NURS 380 Assessment in Nursing with Lab	3	NURS 378 Healthy Aging (online)	2
Total Semester Credit Hours	15	Total Semester Credit Hours	15
Senior FALL	CrHrs	Senior SPRING	CrHrs
NURS 409 Community Health Nursing (online) (2cr) 2nd 8 weeks & Clinical (1cr) 45 clinical hrs	3	NURS 429 Adult Health III (5cr) & Clinical (2cr) 1st 8 weeks (Complex) 90 clinical hrs	7
NURS 408 Adult Health II (4cr) & Clinical (2cr) (Acute) 90 clinical hrs	6	NURS 451 Leadership & Issues in Nursing (online)	2
NURS 432 Family-Centered Health (4cr) & Clinical (2cr) 90 clinical hrs	6	NURS 479 Leadership Practicum (1cr) 45 clinical hrs 2nd 8 weeks & Capstone (2cr) 90 clinical hrs	3
Total Semester Credit Hours	15	Total Semester Credit Hours	12

TEXTBOOKS

It is **essential** that students purchase the books and required materials listed for nursing courses. Book expenses during the first semester will be greater than in subsequent semesters. Books purchased for nursing courses will serve as excellent references for subsequent nursing courses and should be retained for continued use during the program and after graduation. Purchase the exact edition of textbooks required in the course syllabus.

GOVERNANCE, KWU STUDENT PARTICIPATION, DNE COMMITTEES

The faculty of KWU is organized to develop the overall curriculum and to approve curricular changes, act on academic policies and policies affecting the faculty, such as employment, promotion and tenure policies. Students have the opportunity to serve on a variety of committees appointed to carry out the work of the Faculty. A student representative also has contact with the Administrative Cabinet and Board of Trustees.

The Department of Nursing Education has adopted Rules and Regulations to assure the smooth operation of the Department, including its faculty members and students. One representative and one alternate are selected from the junior class and from the senior class for representation at Nursing Department Organization meetings. The selected students are expected to attend every meeting, but do not have voting privileges. Students are to report back to their classes about items of interest and about decisions affecting them. Student representatives are excluded from discussions concerning other students.

Student representatives are appointed to various committees within the Department of Nursing Education to assure their input. The following committees have student representatives:

Curriculum Committee

One student representative and one alternate from the junior year cohort and the senior year cohort.

Nursing Department Organization (NDO)

One student representative and one alternate from the junior year cohort and the senior year cohort.

Admission and Progression Committee (A&P)

One student representative and one alternate from the junior year cohort and the senior year cohort. The students attend only meetings for policy development and revision.

Student Activities Committee (SAC)

Junior year class President and one alternate. Senior year class President and one alternate. Student Nurses Organization President and Vice-President.

The Student Nurses Organization (SNO), which was formed in the fall of 1991, is a club open to all pre-nursing students and BS nursing students. KWU student organizations are described in the KWU Student Handbook. Nursing and pre-nursing students are encouraged to participate as their schedules permit.

BACKGROUND CHECKS OR QUERIES

Learning in clinical settings is an important aspect of the nursing program at Kansas Wesleyan University. Many health care facilities require information about students engaged in clinical learning opportunities, including much of the following, but not limited to: verification of name; address and social security number; personal health information; drug and alcohol testing; criminal background

checks; verification of education; listing on any registered sex offender lists; listing on the U.S. Office of Inspector General's Excluded Individual's list; and listing on the U.S. General Services Administration's Excluded Parties List; and/or Kansas Bureau of Investigation (KBI) background checks and/or Federal Bureau of Investigation (FBI) background checks; and Department on Aging and Disability Services (DOADS).

Students are responsible for obtaining and gathering information required by a health care facility, as well as for any cost of obtaining such information. The information required to permit a student to participate in a clinical setting is determined by the respective health care facility. Any student who does not consent to required disclosure or background checks, or does not meet the clinical settings' eligibility requirements, may not be allowed to enter clinical settings. If a student is unable to fulfill the clinical experiences required by his/her program of study, the student will be unable to graduate.

All new and current DNE students must complete the background and/or criminal history check by the DNE designated date. Students will not be allowed to participate in activities involving a practicum setting until the background and/or criminal history check is completed.

Should the background check disclose any information not in compliance with the KSBN legal requirements for licensure, the result may be non-acceptance to the KWU nursing program. *Please refer to the Nursing Education section of the Academic Catalog.*

Be advised that nursing licenses may be denied or disciplined by the Kansas State Board of Nursing (KSBN). Possible grounds for such action may include being guilty of a felony, being guilty of a misdemeanor that involves an illegal drug offense if the KSBN determines that such a person has not been sufficiently rehabilitated to warrant the public trust. Also considered are patterns of practice and other behaviors exhibiting an apparent incapacity to practice nursing. The KSBN will deny licensure in Kansas to an individual who has been convicted of a felony crime against a person. All criminal history must be revealed to and will be evaluated by the KSBN **before** licensure is granted or denied. KSBN will require fingerprinting in order to conduct background checks with the Kansas/Federal Bureau of Investigation (KBI/FBI).

STUDENT FEES

Students are expected to prepare themselves for additional fees that are a part of the KWU nursing program. Below, please see a summary of approximate fees that students can expect throughout their nursing program experience. Please note that some fees will be a part of the first few weeks of the junior year, and some fees will not apply until students have reached their final semester of senior year.

Fee amounts are subject to occasional changes as deemed necessary by the Nursing Department Organization committee. Faculty and staff diligently strive to keep fees as low as possible for items listed; however, due to periodic vendor changes and program updates, students and families should be prepared to receive updates to the list of approximate fees.

DEPARTMENT OF NURSING EDUCATION ADDITIONAL NURSING COSTS

2020/21

In addition to books and tuition, here is an approximation of additional costs in the nursing program.

Paid out of student's KWU tuition account in first semester:

- ATI Assessment Package: **\$2100**
 *charged to student's account Fall of Junior Year Only
 *This fee is non-refundable, but is transferrable

TOTAL tuition-account related nursing fees: \$2,100

Estimated out-of-pocket costs by August 1st of junior year:

- Drug screen, background check, and immunization
 Tracker package through **Corporate Screening** \$122.00
- Uniforms:
 2 sets scrubs: \$100
 top \$17 pant \$17
 jacket (optional) \$20 (*You will receive instructions on where to order scrubs!)
- Embroidery of KWU Logo (2-3 scrub tops) \$ 21
 We have asked Salina Embroidery to collect all or most of the uniforms to embroider them at the same time so you can receive the lowest price break.
 1-6 pieces \$9 each
 7-12 pieces \$8 each
 13-48 pieces \$7 each
- White or Black Shoes and White or Black Socks \$ 80
- Stethoscope with dual head, soft ear pieces,
 and single sound tube (see attached) no need to spend more than \$100
- Wrist Watch with Second Hand \$ 20
- BLS Certification Course \$ 45
- Photo I.D. Badge for Hospital \$ 5
- Pen light \$ 5
- Bandage scissors *optional \$ 10

Estimated out-of-pocket expenses: \$508

Total of 1st semester fees + out of pocket expenses: \$2,608.00

Estimated out-of-pocket costs in last semester of senior year:

- Application to KSBN for RN License, fingerprinting,
 background check, +\$200 for Pearson View \$ 343

- Legislative Day in Topeka (required) \$ 75
 - NCLEX Review, possibly held in Topeka
*Transportation/mileage, 3 days meals and 2 night stay Est. \$300-350
 - Nursing Pin and Pinning Ceremony Uniform \$ 105
 - Multi-state license fee \$125
- Estimated max total out-of-pocket for senior year expenses: \$948**

GUIDELINES FOR HEALTH AND DOCUMENTATION REQUIREMENTS FOR NURSING STUDENTS

Student health and documentation requirements are intended to protect nursing student and the patients the student is in contact with. Per the contractual agreements between Kansas Wesleyan University and clinical agencies, all students must comply with health and documentation requirements in each clinical facility. The following process is followed for health and documentation requirements:

Each semester the Director, or designee, for the Department of Nursing Education (DNE) will compile all students' health and documentation requirements of the following, either through a vendor selected for this purpose, or by collecting the documents directly from each student:

Medical History Form	Measles Immunity
Physical Exam Form	Mumps Immunity
Tetanus, Diphtheria & Pertussis (TDaP)	Rubella Immunity
Tuberculosis Screening (every year)	Varicella (Chickenpox) Vaccine/Immunity
Hepatitis B Vaccine (3 series)	

New Students:

The DNE office will give a packet to each student entering in the junior year of the BS nursing program listing health and documentation requirements needed prior to commencement of classes each fall, specifically **before clinical rotations begin each semester.**

Progressing Students:

The vendor used to review and store students' health and immunization documentation will notify students when documents expire. The DNE office will have access to this information so that if any student does not comply with renewal requirements, they will be prohibited from attending clinicals until the documentation is satisfactorily renewed.

1. Those students notified by the DNE office or faculty member will need to submit necessary health and documentation requirements to the selected vendor and notify the nursing administrative assistant prior to returning to clinicals. The DNE office will notify faculty when the health and documentation requirements have been submitted.
2. This process will be updated as needed to remain in compliance with our contractual agreements between KWU's DNE and clinical agencies.

Basic Life Support (BLS) Certification:

The Department of Nursing Education accepts the American Heart Association Adult, Child, and Infant BLS Certification for Healthcare Providers.

1. All students enrolled in the Department of Nursing Education are required to demonstrate current Adult, Child, and Infant BLS for Healthcare Providers certification from the American Heart Association before beginning clinical courses. It is important that the students' BLS cards have the words "for Healthcare Providers" in the title of the course.
2. It is the student's responsibility to attend a BLS certification or re-certification course outside scheduled class time.
3. If needed, one American Heart Association Adult, Child, and Infant BLS for Healthcare Providers class will be taught during the fall semester by KWU faculty. This class is open to students. Pre-enrollment is required since the class size is limited. The fee will be announced.
4. It is the students' responsibility to provide a **photocopy** of BLS certification to the Department of Nursing Education (or the vendor selected for this purpose).
5. A student will not be permitted to enter the clinical area until a photocopy of current BLS certification is on file in the Nursing Education Office. NO EXCEPTIONS!
6. Clinical days missed because of an expired BLS certification or lack of proof of current BLS certification will be counted as a clinical absence requiring a mandatory clinical make up assignment.

Other Required Clinical Agency Documentation:

Other required documentation must be submitted by the student to the nursing office prior to attending the clinicals.

- Salina Regional Health Center World Class Service Standards of Performance Form (annually)
- Salina Regional Health Center Safety Test (annually)
- Salina Regional Health Center HIPAA Test (annually)
- Salina Regional Health Center Confidentiality Statement (annually)

STUDENT HEALTH CONDITIONS

Health Services in the Salina Community

KWU has arrangements with the Urgent Care facility to provide services for students. Students who self-identify as a KWU student will be given preferential service, but must utilize their health insurance policy for payment. Students are encouraged to utilize professional counseling services when desirable or necessary to maintain mental health. Contact the Student Development office for further information. Payment of medical bills is always the student's responsibility.

Salina Regional Health Center (Hospital and Emergencies)
400 South Santa Fe Avenue 785-452-7000

Stat Care – Family Minor Emergency Center
101 S. Ohio Street 785-827-6453
Monday – Friday: 8 a.m. – 9 p.m.
Saturday: 9 a.m. to 9 p.m.; Sunday 1 p.m. to 6 p.m.

Salina Family Healthcare - By appointment
651 E. Prescott 785-825-7251

Urgent Care: Salina Family Health Center
2265 S. 9th Street 785-452-6000

MedExpress Urgent Care
2770 S. 9th Street 785-827-3551

Veridian Behavioral Health
501 South Santa Fe Avenue 785-452-4930
*KWU has a written agreement with Veridian for mental healthcare.
KWU will pay for the first two visits for a student to be seen.*

Central Kansas Mental Health Center
24 Hour Emergency: 785-823-6324
809 Elmhurst 785-823-6322

Domestic Violence Association of Central Kansas (DVACK)
785-827-5862 or (800) 874-1499
Emergency Number: 911 (within residence halls 9911)

Absences Due to Illness or Injury

Student participating in classroom, laboratory, and clinical rotations are presumed healthy. However, in the event a student is absent because of illness or injury, the student must notify the appropriate faculty member and other individuals or agencies as specified in the course syllabus. The faculty member and/or the DNE Director reserve(s) the right to prohibit a student from participating in a classroom, laboratory, or clinical experience if the student's health and/or safety may be at risk or may jeopardize the health and/or safety of other individuals.

If a student is absent because of musculoskeletal problems, surgery or a communicable disease, the student must notify the appropriate faculty member. A student experiencing any of these health categories may be required to present a written release from the student's physician, APRN or PA. The need for a written release will be determined by the appropriate faculty member, in consultation with the DNE Director, if appropriate.

If a written doctor's release is required, it must be presented to the appropriate faculty member prior to returning to the classroom, laboratory, or practicum experience. The release should state which activities, if any, are limited. The faculty member will forward the completed written release to the DNE Director.

Please refer the Attendance, Exams & Assignments Policy.

Pregnancy

Students who are pregnant, or become pregnant, are to provide a release from a health care provider (physician, PA, or APRN) to the course faculty and the Director of the nursing program in order to attend clinical activities. If there are any activity limitations, these must be specified. A release from a health care provider for the student to return to clinical activities is also required following delivery.

Communicable Diseases and Illness

Any student experiencing a communicable disease or illness must notify the appropriate faculty member who will determine the feasibility of a student's participation. The student is subject to exclusion or assignment modification as defined by the Center for Disease Control (CDC) Guidelines for Infection

Control in Health Care Personnel (CDC, 2011) in classroom, laboratory, or clinical experience if the student has a communicable illness, including, but not limited to the following:

- Streptococcal infections of the throat
- Herpes Simplex
- Dysentery, confirmed organism or diarrhea accompanied by abdominal cramping and fever
- Infectious Meningitis
- Varicella
- Impetigo
- Measles
- Herpes Zoster
- Rubella
- Mumps
- Pertussis
- Staphylococcal infections
- Infectious hepatitis
- Tuberculosis
- Vomiting
- Fever of 100 degrees or above

Any injury incurred during a clinical course will be immediately reported to the clinical faculty and the DNE Director. After consulting with the clinical faculty or the Director, it is the student's responsibility to seek appropriate treatment. In emergency situations, it is the student's responsibility to seek immediate treatment. Students must comply with the clinical agency's policies/protocols of reporting and treating injuries occurring during the clinical practicum. Incident forms should be completed according to the clinical agency's policies/protocols. Fees and subsequent fees and subsequent costs resulting from injury, exposure, or physical occurrence incurred by a student while participating in a clinical experience are the responsibility of the student and may or may not be covered by the student's health insurance plan.

All missed clinical days must be made up through virtual simulation. Students may return to clinical when a written doctor's release has been submitted to the Department of Nursing Education.

Please refer to the Attendance, Exams & Assignments Policy.

Policy on Face Coverings

Face coverings, such as masks, are required to be worn in the classroom at this time. Students are expected to follow the protocols for classroom safety as established by the university and as directed by their instructors. Students who fail to comply with the health and safety guidelines during the coronavirus pandemic should expect to be removed from class and may be referred to the Student Development Office for further action. Students seeking accommodations should contact the Director of the Student Success Center (bryan.mccullar@kwu.edu).

FUNCTIONAL ABILITIES

If any student has a documented disability that may prevent from meeting the functional abilities stated below, the student will be encouraged to contact KWU's Disability Services Coordinator for assistance with accommodations. It is the student's responsibility to voluntarily and confidentially disclose information regarding the nature and extent of a disability and to provide documentation of the disability. The university cannot assume responsibility for providing accommodations or services to students who have not identified themselves as having a qualifying disability.

Please note that program requirements will not be waived, but accommodations may be made to assist a student with meeting requirements. Please refer to the KWU Academic Catalog under Disability Services for further information.

Minimum Qualifications Necessary to Perform Essential Functions of a Nurse Generalist:

Physical Requirements: The ability and stamina to stand for long periods of time and work at a fast pace. The ability to use abdominal and lower back muscles to support part of the body repeatedly or continuously over time without 'giving out' or fatiguing. The ability to position and move patients manually and by stretcher or wheelchair. The ability to intermittently sit, stand, walk, reach, twist and bend. Both hands are used for power grip, speed, and precision work. Use of both hands and both feet is required.

Data Conception: The ability to gather, collate, or classify information about data, people, or things. Reporting and /or carrying out a prescribed action in relation to the information are frequently involved.

Visual Acuity: The ability to differentiate colors and shades of color, clarity of vision at 20 inches or less, ability to judge distances and spatial relationships so as to see objects where and as they actually are, and ability to see in dimly lit areas.

Manual Dexterity/Motor Coordination: The ability to make precisely coordinated movements of the fingers of one or both hands to grasp, manipulate, or assemble very small objects. The ability to use body members to start, stop, control, and adjust the progress of equipment. Operating equipment involves setting up and adjusting the equipment or material as the work progresses. Controlling involves observing gauges, dials, meters, etc., and turning switches and other devices. Must have good eye/hand/foot coordination.

Reasoning Development: The ability to apply principles of logical or scientific thinking to define problems, collect data, establish facts, and draw valid conclusions. Interpret an extensive variety of technical instructions in verbal, mathematical, or diagrammatic form. Deal with several abstract and concrete variables.

Form/Spatial Ability: The ability to inspect dimensions of items and to visually interpret information and data. The ability to estimate sizes, distances, and quantities.

Mental Acuity: The ability to concentrate on a task over a period of time without being distracted. The ability to remember information such as words, numbers, pictures, and procedures. The ability to shift back and forth between two or more activities or sources of information (such as speech, sounds, touch, or other sources).

Physical Communication: The ability to speak and hear (to express or exchange ideas by means of the spoken word), to impart oral information to patients or to the public, and to convey detailed spoken instructions to other workers loudly, accurately, or quickly.

Language Development: The ability to read and understand complex information from scientific and/or technical textbooks, journals, papers, etc. Requires the ability to communicate the same types of complex information and data through speech and in writing using proper format, punctuation, spelling, grammar and using all parts of speech.

Numerical Ability: The ability to determine time, weight, and to perform practical applications of fractions, percentages, ratios and proportions as well as basic addition, subtraction, multiplication, and

division operations.

Personal Temperament: The ability to deal effectively with stress produced by staff/student interactions and patient interactions that may be of critical or emergency situations.

Natural Rubber Latex Tolerance: The ability to work in an environment where NRL items are commonly used for patient care without demonstrating severe contact or respiratory allergic reactions.

Test of English as a Foreign Language (TOEFL) Internet-Based Test (IBT)

For “**English Not as First Language**” or international students, see university requirements in the current KWU Academic Catalog under English Proficiency Requirement.

When English is not considered the applicant’s primary language, the applicant must take the Test of English as a Foreign Language (TOEFL) Internet-Based Test (iBT); and the minimum score must be attained in each area as listed below. Scores must be submitted with the application to the nursing program.

Writing= 20 Speaking=20 Reading=19 Listening=20

Students not meeting the minimum requirement in any area are not eligible for admission to the nursing program.

For information and application for TOEFL contact:

TOEFL Educational Testing Service
PO Box 6151
Princeton, New Jersey 08541-6154
606-771-7760
<http://www.toefl.org>

NURSING STUDENT HEALTH REQUIREMENTS CHECKLIST

Students new to the KWU nursing program must complete and submit the following forms to the vendor selected for collection of these documents **BY AUGUST 1st**.

1. Medical History Form
2. Medical Release Form
3. Physical Examination – to be provided by a licensed healthcare provider within the past year.

Students must provide documentation of the following immunization requirements:

4. Tetanus, Diphtheria & Pertussis (TDaP) booster within the last 10 years.
5. Tuberculosis Screening: Negative TB skin test (PPD) within the last year, or a negative chest x-ray if the student has a history of positive TB skin test. TB skin testing must be repeated yearly.
6. Hepatitis B Vaccine: Series of three vaccinations obtained anytime in the student’s history.
7. Measles, Mumps, Rubella (MMR):

- a. Measles (Rubeola) Immunity:
 - i. The student will be considered immune if a copy of documentation shows:
 - 1. Born before 1957 **OR**
 - 2. If born in 1957 or after, there must be written documentation from a healthcare provider of:
 - a. 2 measles vaccinations or 2 MMR's after the first birthday **OR**
 - b. Physician diagnosed measles **OR**
 - c. Laboratory test (titer) showing proof of immunity
 - ii. The student will be considered susceptible if these requirements are not met.
 - iii. **ACTION:**
 - 1. If there is no documentation of any measles vaccination, 2 doses of live measles vaccination or 2 MMR's must be given.
 - 2. If there is documentation of one measles or MMR vaccine, then one measles or MMR must be given **OR** a laboratory test can be done to determine immunity.
- b. Mumps Immunity:
 - i. The student will be considered immune if a copy of the documentation shows:
 - 1. 2 mumps vaccinations or 2 MMR's after first birthday **OR**
 - 2. Physician diagnosed mumps **OR**
 - 3. Laboratory testing shows immunity
 - ii. The student will be considered susceptible if these requirements are not met.
 - iii. **ACTION:** Two mumps **OR** 1 MMR vaccine must be given.
- c. Rubella Immunity:
 - i. The 1957 birth year exception does not apply to Rubella immunity as referenced above. The student will be considered immune if there is a copy of written documentation from a health care provider of:
 - 1. One vaccination with live rubella or MMR vaccine after the first birthday **OR**
 - 2. Laboratory testing shows immunity.
 - ii. The student will be considered susceptible if these requirements are not met.

Summary: Minimum Immunization Requirements if the Other Conditions of Immunity are not Met: Two MMR'S after first birthday.

- 8. Varicella (Chickenpox) Immunity:
 - a. The student will be considered immune if:
 - i. There is laboratory evidence of immunity **OR**
 - ii. There is written documentation of adequate varicella vaccination (2 doses of vaccine).
 - b. The student will be considered susceptible if these criteria are not met.
 - c. **ACTION:** Nursing students must have a varicella titer drawn to determine immune status if the conditions of immunity are not met. If the student prefers to be vaccinated, the vaccine is given in two doses, one month apart. While waiting for the results of the titer, any exposure to Chickenpox must be promptly reported to the course faculty and Infection Control at the clinical site. The student will be excluded from clinical experiences for at least 10 days following exposure.
- 9. Influenza Vaccine: The vaccine will be given to students by the Salina Regional Health Center immunization nurse in October.

HEALTH INSURANCE

Evidence of personal health insurance must be provided by nursing students to the Nursing Education office prior to starting the nursing program, and will be verified at the beginning of each spring semester. For students who have no ability to access and secure health insurance, there is a health insurance waiver available in the Department of Nursing offices. Students opting this choice must provide the signed waiver to the Department of Nursing, which absolves KWU and the nursing program from any liability for illness or injury sustained to the student while in the clinical or lab setting.

LIABILITY INSURANCE

Students are covered during their clinical experience through a clause in the university's insurance policy. Students are not covered by the university's insurance policy during employment in a health care setting.

TRAVEL RESTRICTION POLICY

Due to the exceptional circumstances surrounding the Covid-19 pandemic of 2020, the Department of Nursing Education is implementing the following travel restriction policy for all nursing majors (juniors and seniors) for the fall 2020 semester. The limitations of this policy include travel over holidays or fall break, if provided.

This policy is in place primarily to provide decreased disease transmission, for the protection of all at KWU. Additionally, due to the variation between clinical sites' travel restrictions, this policy is in place to reduce challenges in students' ability to attend clinical. Students are strongly discouraged from traveling outside the state of Kansas during the 2020 fall semester. This policy does not apply to the winter break between fall and spring terms. It may be necessary to enact this policy during the spring 2021 term. It may also be necessary to further restrict travel within the state of Kansas, based on recommendations by Kansas Department of Health and Environment (KDHE). The KDHE travel information webpage (link provided) will be the source of information for Kansas counties with travel restriction recommendations.

<https://www.coronavirus.kdheks.gov/175/Travel-Exposure-Related-Isolation-Quaran>

If a student chooses to travel outside the state of Kansas or designated high risk county in Kansas, it may result in the need for a two-week quarantine. The inability to attend class or clinical during this timeframe could result in exceeding the allowable missed days of clinical or class, resulting in failure of the course.

STUDENT CONDUCT POLICY

In addition to adhering to the student conduct policies of KWU, nursing students are also required to adhere to the student conduct policies of the Department of Nursing Education. The DNE student conduct policies are based on the American Nurses Association, Code of Ethics for Nurse (ANA, 2015). Nursing students in the DNE will be expected to adhere to the ANA Code of Ethics for Nurses. A copy of the ANA Code of Ethics for Nurses is available to students in the campus library. Violations of the student conduct policies or behavior that demonstrates unethical conduct or incompetence to practice as a nursing student in the DNE is considered unacceptable conduct. Violations of the student conduct policies may result in removal from the classroom or clinical setting, formal warning or contract, remediation, course failure, faculty initiated withdrawal from the course (equals course failure), and/or up to dismissal from the nursing program.

American Nurses Association's Code of Ethics for Nurses

The Code of Ethics for Nurses (the Code) establishes the ethical standard for the profession and provides a guide for nurses to use in ethical analysis and decision-making. The Code is foundational to nursing theory, practice and praxis in its expression of values, virtues, and obligations that shape, guide and inform nursing as a profession. Individuals who become nurses, as well as the professional organizations that represent them, are expected not only to adhere to the values, moral norms, and ideals of the profession, but also to ***embrace them as a part of what it means to be a nurse.***

The provisions stated below are broad and non-contextual statements of the obligations of nurses. For the interpretive statements of each provision, which provide additional, more specific, guidance in the application of this obligation to current nursing practice, a copy of *The Code of Ethics for Nurses with Interpretive Statements* (2015, ANA) is available in the Nursing Education office and in the campus's Memorial Library.

Provisions of the Code of Ethics for Nurses:

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

The Code of Ethics for Nurses with Interpretive Statements (2015, American Nurses Association)

Standards of Professionalism

Students are expected to meet the following requirements on campus and in the clinical setting at all times. If students are unclear how a policy may be applied, they should consult with a faculty member. Students who demonstrate violations of the requirements may be assigned a failing grade and may be dismissed from the program and ineligible for readmission.

1. Students must conduct themselves honestly and with integrity regarding course and clinical activities.
2. Behaviors which threaten the public's health, welfare, and/or safety will constitute grounds for immediate dismissal from the nursing program.

3. Failure to prepare for classroom or clinical experiences is addressed in the course syllabi. Failure to hand in written classroom or clinical assignments on time is addressed in the course syllabi.
4. Students must maintain the confidentiality of privileged information and adhere to HIPAA regulations.
5. Students must observe the dress code stated within this handbook.
6. Inappropriate and/or disruptive behavior will result in disciplinary action. Inappropriate or disruptive behavior includes, but is not limited to, hostile or confrontational communication; distracting or attention-seeking behavior; behavior which is disrespectful, threatening or abusive to others; destruction, theft (including examinations) or mutilation of college property; and any illegal activity or behavior that results in discipline. Inappropriate verbal/nonverbal behavior patterns include, but are not limited to, dishonesty, inappropriate facial expressions, inappropriate touching, behavior which aims to threaten or intimidate a client/student/team member/instructor/preceptor, and leaving the clinical site without notifying the instructor. Upon the occurrence of the described behavior(s) disciplinary action will be implemented, and possible dismissal from the nursing program may occur.
7. Nursing examinations or testing materials, both hard copy and electronic, are the property of the Nursing Department. Removing or accessing testing materials from external sources, classrooms, labs, or the computer is considered “theft”. Students who remove nursing exams or exam answers from the classrooms, labs or computers will face disciplinary actions under the academic honesty and professional ethics policies. Other disciplinary actions may also apply.

Academic Integrity and Honesty

Academic integrity and honesty are central components of a student's education, and the ethical conduct maintained in an academic context eventually will be taken into a student's professional career. Academic honesty involves taking responsibility for one's own education, completing all work required one's own, and contributing thoughtfully and fully to any group work assigned or sanctioned by the instructors. (These examples are not meant to be all inclusive, but are presented for guidance in defining acts of academic dishonesty which, if they are found to have occurred, required academic action by the faculty in whose course they occurred.) In more straightforward terms, academic honesty means not cheating on tests and not plagiarizing. Violations will be dealt with according to the “Rules While Taking an Exam” located in this handbook, and the Academic Honor Code section of the KWU Academic Catalog, which includes dismissal from the university. *Refer to the Grievance Procedure located in this handbook.*

Classroom Civility

Classroom civility is essential to the learning atmosphere. Value is placed on each student and instructor of the classroom with regard to respect and the difference in learning styles. All members of the classroom will be expected to conduct themselves in a manner that facilitates this learning.

Respect for the Learning Environment

A safe and respectful learning environment is an essential condition to achieving the maximum level of student achievement. Students show respect by being prepared and attending class on time, paying attention, contributing to discussions, adapting to the surrounding environment and teaching methods, and striving for their best performance. Faculty show respect by their timeliness and preparedness, taking students seriously, valuing their goals and aspirations, and providing honest feedback. Mutual respect and consideration will provide a productive, positive and successful learning environment.

CLINICAL PROBATION AND PROGRAM DISMISSAL

Process for Determining Clinical Probation or Program Dismissal

1. **Problem Identified:** Unsatisfactory performance shall be identified by the Nursing Education staff or faculty. The problem may be academic, personal, attitudinal, emotional or financial.
2. **Verbal Warning:** A student conference shall be held with the student and the faculty member involved. During this conference, problems shall be identified and recommendations made to the student. This constitutes a verbal warning.
3. **Documentation:** After the conference, a written success plan and clinical remediation tool shall be prepared by the faculty member and a copy given to the student.
4. **If the Problem Continues:** If the problem continues, a joint conference shall be scheduled with the student, the nursing staff, and/or other appropriate individuals (i.e., counselor, support staff, financial aid officer).
5. **Documentation:** A written summary of the student conference will be issued and signed by all involved – student, program nursing director, and faculty for identified academic and/or clinical problems.
6. **Consequence:** If the terms of the agreement are not met, the student shall be dismissed from the program. Dismissal from the clinical area shall occur at any time when clinical practice is determined to be unsafe or unsatisfactory by the course or clinical instructor.

DRESS CODE GUIDELINES

Students are expected to be clean, neat, and professional in their appearance and behavior. These guidelines are intended to ensure that students present a good impression as they represent KWU and to identify them as a student in the BS nursing program of the KWU Department of Nursing Education. For clinical activities at sites other than the hospital setting, dress codes are provided in the course syllabi.

1. During clinical experiences, or while in the role of nursing student in the community (i.e. when visiting the hospital to research a clinical assignment), men and women will wear a dark purple uniform consisting of scrub pants (drawstring or elastic waist) and a tunic-style scrub top. Students should consider that stooping, lifting and bending are involved during patient care. Uniforms must allow for this unrestricted movement. Uniforms must not be revealing because of length, tight fit or neckline. Pants must not drag on the floor. The following additional guidelines are to be followed:
 - a. A purple uniform or purple warm up jacket with the KWU insignia, and the student's name tag, is required when researching clinical assignment. Shorts, miniskirts, jeans, or sweats are not acceptable.
 - b. Students should select athletic or uniform shoes that are sturdy, comfortable, and predominately white or black. Any variations must be approved by faculty. Clogs or sandals are not permitted. Shoes must have an enclosed toe and heel.
 - c. White or black socks are to be worn.
 - d. Uniforms must be the style and color approved by the Department of Nursing Education. The KWU seal will be embroidered on the right by Salina Embroidery in Salina, Kansas.
 - e. A white or black knit shirt with three-quarter or full length sleeves may be worn under the purple scrub top. Full length sleeves must be pushed up on the arm when providing care. A white or black short sleeved t-shirt may be worn under the scrub top, but the short t-shirt sleeves must be completely covered by the scrub top sleeves and the hem must be tucked into the waistband.
 - f. No necklaces may be worn during clinicals. Rings are limited to one ring, or a wedding set, per hand. Dangle and hoop earrings are not allowed due to potential for injury. Post-style earrings are suggested. Earrings are limited to the ears and only one earring per ear. Visible jewelry, attached to other parts of the body, will not be allowed to be worn. Only clear or flesh-colored spacers are allowed for nose piercings. Tongue jewelry must be removed.
 - g. Tattoos must be covered.

- h. Sweaters, coats, or jackets are not to be worn during clinical experiences because of the possibility of cross contamination and/or loss of identification as a student nurse. Students may wear a purple scrub jacket with the nursing insignia and KWU name tag.
 - i. Long hair should be worn off the collar or tied back away from the face. Headbands are to be a solid color in either purple, black or white.
 - j. Beards, mustaches, sideburns, and goatees must be kept trimmed, neat and cut close to the face, and should not be allowed to contaminate the patient's field of care.
 - k. Perfume, cologne, or scented lotions are not allowed due to patients' and co-workers' possible sensitivities to fragrances.
 - l. Fingernails are to be trimmed short. Fingernail polish and artificial nails are not permitted.
 - m. Chewing gum is not permitted.
 - n. Rings and watches must be removed prior to scrubbing; only watches are to be worn in the nursery, labor and delivery, or mother-baby unit.
- 2. Nursing students may wear a dark purple polo shirt, with the KWU insignia and their name tag, with black or khaki pants while representing KWU at various events such as health fairs and fund raisers.
 - 3. Students may not use tobacco or smoke in any form while in uniform, KWU dress, or at any time they are representing KWU as a nursing student. As a result of this action, the student may be dismissed from the clinical rotation and/or the KWU nursing program.
 - 4. All nursing students must have a student ID badge from the KWU Student Development Office.
 - 5. KWU will be responsible for issuing the Salina Regional Health Center (SRHC) security access badges to the students and tracking the badges.
 - a. Any student leaving the program will immediately surrender the SRHC security access badge.
 - b. Lost or stolen SRHC security access badges must be reported immediately to Organizational Development office at SRHC and to a KWU nursing faculty member. Any lost or stolen badges will be replaced at a cost of \$10 from the student to whom it was issued. The student will be responsible for paying the cost of the missing SRHC security access badge.
 - c. Students and faculty will not allow hospital visitors and guests access to secure areas with these badges.
 - 6. KWU nametags, SRHC security access badges and uniform components that would identify a student with KWU **must not** be worn during activities not associated with being a KWU nursing student.

If these guidelines are not followed, the student may be sent home at the discretion of the faculty member and receive an unexcused absence. Clinical days must be made up.

SOCIAL MEDIA GUIDELINES AND PROFESSIONAL BOUNDARIES

The DNE adopts the National Council State Boards of Nursing (NCSB) Standards for Social Media Guidelines and Professional Boundaries. All nursing students in the DNE will adhere to these guidelines. *Refer to Appendix A for the Social Media Guidelines and Professional Boundaries.*

The KWU Department of Nursing supports the use of technology inside and outside the classroom. This support includes the use of social media communication formats such as Facebook, Twitter and any new technology to be developed. This support comes with the expectation that students in the nursing program will uphold the ethical standards of their profession: American Nurses Association Code of Ethics and the KWU Student Code of Conduct.

Federal Regulations regarding privacy such as Health Insurance Portability and Accountability Act (HIPAA) and Family Education Rights and Privacy Act (FERPA) apply to all personal and academic communication. Students will be required to sign confidentiality forms as required by clinical facilities.

Student use of photography and/or recording devices is prohibited in all classrooms, clinical laboratories, and clinical sites unless approved by an instructor in advance.

It is the expectation that students have read and understand the Nursing Student handbook, KWU Student Handbook and federal regulations related to privacy (HIPAA and FERPA). Noncompliance with this policy will result in disciplinary action which may include failure of a course, probation or dismissal from the nursing program.

STANDARD PRECAUTIONS AND EXPOSURE TO INFECTIOUS DISEASES

Serious Infectious Disease

Nursing students, with the support and guidance of their clinical instructor or preceptor, may have an opportunity to care for clients with an infectious disease. Students are expected to help manage care of these clients. When considering the care of clients diagnosed with serious infectious disease, we recognize that students have varying degrees of skills, both psychomotor and cognitive. We also recognize that faulty technique when caring for these clients could prove harmful or even fatal to the student.

Graduate health care workers (i.e. the preceptors who supervise nursing students) are expected to have the skills and knowledge necessary to provide safe and compassionate care for all clients, regardless of diagnosis. Consideration will be given to the client's complexity of care, agency policy, and the student's knowledge and dexterity level. A student who refuses to care for infected clients will be counseled to determine the reason for refusal and regarding the failure to meet the requirements of the profession of nursing. Students who have serious reservations about caring for clients with infectious disease should reconsider their career choice.

Standard Precautions - Centers for Disease Control (CDC)

(www.cdc.gov, May 2014)

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions, except sweat, non-intact skin, and mucous membranes may contain transmissible infectious agents. Standard Precautions include a group of infection prevention practices that apply to all clients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. They include: hand hygiene; use of gloves, gown, mask, eye protection, or face shield, depending on the anticipated exposure; and safe injection practices. Check the policies and procedures at each clinical agency.

Bloodborne Infectious Diseases (HIV/AIDS, Hepatitis B, Hepatitis C) and Needle Stick Injury Guidelines

The KWU DNE will follow the Bloodborne Pathogen Exposure Guidelines for clinical agencies as established by the Centers for Disease Control (CDC). The infection control nurse or designee at each clinical agency will serve as the resource person in interpretation and implementation of these guidelines. In the event that a student is exposed to bloodborne pathogens or a needle stick, the following will be observed:

1. It is the responsibility of the student to notify the faculty as soon as a needle stick has occurred. The faculty will then report the incident to the appropriate clinical agency representative.
2. If a student experiences a needle stick or sharps injury during the course of a clinical rotation, the student should immediately wash the injury with soap and water.

3. The faculty and clinical agency representative will:
 - a. Determine if the student was injured with a clean or contaminated needle. Puncture wounds from clean needles do not require special care.
 - b. Fill out the clinical facility's report for needle stick injury.
 - c. Follow the clinical facility's policy for an incidental needle stick injury.
 - d. If no policy exists, and the injury is from a contaminated needle, the following steps will be followed:
 - i. Notify the Nursing Education Director so that any further University procedures may be followed.
 - ii. Notify the patient's and student's physicians to secure orders to perform hepatitis screening and HIV antibody test on the patient and student when the patient is identified. Blood work on the student serves as a baseline if disease should develop. Inform the patient of the incident and explain the need for the blood work and who will be charged.
 - iii. The student is responsible for all expenses incurred for injuries during clinical, observational, or other learning experiences.
 - iv. If the patient refuses to have the blood work drawn, continue with the protocol for the student.
 - v. If the student refuses to have the blood work drawn, have he/she must sign a release of responsibility.
 - vi. Recommended follow up is as follows: a) If the source patient is negative for HIV and has no clinical manifestations of AIDS, no further follow up is required; b) if the source patient tests positive for HIV or if the patient is unknown, follow up testing is recommended at six weeks, three months, and six month as per clinical agency and CDC guidelines.

Please refer to the Communicable Diseases section of this handbook.

ATTENDANCE, EXAMS AND ASSIGNMENT POLICY

Students must own a laptop or personal computer with the specifications outlined in the KWU Online Handbook at <http://www.kwu.edu/academics/kwu-global/kwu-online>. Students must bring their laptop, fully charged, to all class periods. Exams will be given online.

Attendance Policy for Online Courses (2020-21 Faculty & Student Handbook for KWU Online, page 8): Class attendance is expected in all courses including online courses. Online attendance is measured by assignments submitted on the first day, the third day, and throughout the duration of the course. Faculty will record attendance through our current Learning Management System.

On the 7th business day of the term for full-semester courses or on the 5th business day for 8-week courses, students will be dropped from any course that they have not either "attended" by submitting an assignment or contacted the instructor regarding the absence. Courses that are administratively dropped will not appear on students' academic transcripts and will not be counted toward students' credit hour load (see the full attendance policy in the Academic Catalog for more information).

Theory (didactic) Courses:

1. Students are expected to attend all theory class sessions.
2. If a student misses more than twenty percent of the total didactic hours of the course per semester he/she will not be allowed to continue with the course.

3. Students are responsible for obtaining missed lecture notes, handouts, and assignments.
4. All assignments are required to earn a complete grade in the course. Any assignment not completed will result in an incomplete grade for the course. Accepted late assignments will receive a 10% grade deduction per day up to three days. Assignments will not be accepted after three calendar days of the course instructor's designated due date/time and will result in a zero for that assignment.
5. Students will not be allowed to enter the room once an exam is in progress.
6. All exams are taken online, timed, proctored and expected to be taken during scheduled class time. **Courses offered online will have exams completed online but proctored on campus (except for NURS 250).**
7. All exam grades will be posted within 72 hours after administration of the tests.
8. Make-up exams are to be completed within 72 hours of the scheduled exam date/time. Students must schedule the make-up exam with the course instructor. If the appointment for retake is missed, a score of zero will be entered into the grade book for that exam.
9. No early exams will be given. Nursing students who have obligations in other KWU programs (i.e. athletics, theatre, choir) must present their schedule for activities (i.e. practice, games, performances) and make arrangements for testing with the instructors by the end of the first week of classes each semester. Make-up exams will be given on a date determined by the faculty and if the student does not take the exam on the arranged date, a 10% penalty will be applied to the exam grade. If the second rescheduled exam date is missed, a score of zero will be entered into the grade book for that test.
10. Nursing students who do not take an exam on the scheduled day, for any reason other than those indicated in #9 above, will be assessed a 10% penalty applied to the exam grade. Exemption to the late exam policy in the case of a documentable life event must be presented by the student to the course faculty. The faculty, with review by the Admissions and Progressions committee, will make a determination. *Please refer to the Absences Due to Illness or Injury section in this handbook.*

Clinical Courses:

1. If a student misses a clinical day, including simulation labs, they will be required to make up the clinical day through virtual clinical simulation, as directed by the instructor. Up to two direct patient care clinical makeup days can be virtual makeup days. Adjustments may need to be made at faculty discretion for the purpose of ensuring direct patient care experience to comply with state and accrediting guidelines. Hours required per course will be determined based upon the course requirements.
2. Failure to make up clinical days will result in a failing grade for the clinical course.
3. It is the student's responsibility to notify the clinical faculty member of an impending absence at least one hour before clinical.
4. **If a student misses more than two clinical days per course, regardless of the length of the course, a failing grade for the entire course will be entered into the grade book.** Exemption to this policy in the case of a documentable life event must be presented by the student to the course faculty. The faculty, with review by the Admissions and Progressions committee, will make a determination.
5. All assignments are required to earn a complete grade in the course. Any assignment not completed will result in an incomplete grade for the course. Accepted late assignments will receive a 10% grade deduction per day up to three days. Assignments will not be accepted after three calendar days of the course instructor's designated due date/time and will result in a zero for that assignment.

6. Excused Absences: Nursing students who have obligations in other KWU programs (i.e. athletics, theatre, choir) must present their schedule for activities (i.e. practice, games, performances) to the instructors and arrange for potential conflicts in the clinical rotation schedule by the end of the first week of classes each semester. See #4 in this Clinical Courses section.
7. Unexcused Absences: Absences due to reasons other than those in #6 above, will be unexcused. The opportunity for clinical make-up is not guaranteed. See #4 of this Clinical Courses section.
8. The clinical faculty member is to be notified if a student expects to be tardy. If a student is more than 15 minutes late to a scheduled clinical experience, the student will be dismissed from the clinical site and a make-up clinical day will be required. Upon being dismissed, the student must leave the clinical site and report to the Department of Nursing Education's administrative assistant at 8:00am to receive the assignment(s) that the student will be expected to complete by the end of the day. The student must remain on-site in the Department of Nursing Education offices and/or classroom/conferences spaces (as dictated by the administrative assistant) to complete said assignments, and will receive a lunch break.

Rules While Taking an Exam:

Each course syllabus will list the schedule and information for testing and evaluation. When taking a test, the rules are as follows:

- Instructions for taking online exams are provided to students by the course faculty. (Faculty Reference "Proctored Exam Instructions for Students" on OneDrive.)
- Students will not be allowed to enter the room once an exam is in progress.
- Students may not have anything on their desks except a pencil while testing. No caps, hoodies, food or drinks will be allowed in the exam room. Paper necessary for calculating problems may be obtained from and returned to the instructor prior to leaving the testing room. Calculators will be provided.
- All student possessions must be placed at the front of the classroom. All cell phones and other electronic devices must be turned off and secured with student's belongings. Should a student need his/her phone available for an emergent situation, the phone may be left with the proctor in the front of the room. The phone should be set to vibrate so as to cause limited disruption in the examination room.
- Students are to allow as much space as possible between themselves and other students in the room
- No talking or signals between students are permitted.
- Students may not consult dictionaries or other sources of information (e.g. internet) without the permission of the instructor.
- Students are not allowed to leave the room once the exam has begun. If a student does leave, they will not be allowed to come back into the classroom until everyone has finished the exam.
- Violation of the Academic Integrity and Honesty Policy will not be tolerated.
- Violation of instructor's directive for computer testing will not be tolerated.
- A student's violation of the above rules may result in the student receiving a zero score for the test.

GRADING SCALE

Due to the professional nature of nursing practice and the requirement for passing the NCLEX-RN examination in order to practice, the grading scale for nursing is slightly higher than for many general education courses. Current grades are maintained on the KWU Learning Management System (LMS) for student viewing as courses progress. The following grading scale will be used in all required nursing courses for the Bachelor of Science nursing degree program:

Grade	Points
A	95-100

A-	92-94
B+	90-91
B	86-89
B-	84-85
C+	80-83
C	76-79
C-	74-75
D+	72-73
D	68-71
D-	65-67
F	≤ 64

For NURS courses, a final grade of 80% is required to pass. Grade scores will not be rounded.

CLINICAL EVALUATION TOOL RUBRIC

The mid-term and final Clinical Evaluation Tools (CETs) consist of essential competencies with specific performance criteria. The competencies are drawn from course and program objectives for the BS nursing program at Kansas Wesleyan University, *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), and *Quality and Safety Education in Nursing* (Cronenwett et al., 2007). The performance criteria for each competency includes cognitive, affective, and psychomotor domains of learning, and provide a complete evaluation of an individual student's clinical performance. The use of the Clinical Evaluation Tool makes it possible for a student to see their development over time as they progress through the specific course, as well as through the nursing curriculum. It also provides standard measures for student, course and program evaluation.

The standardized Clinical Evaluation Tool is used in each clinical course. A mid-term and final evaluation is completed and shared with the student at the mid-term and conclusion of the rotation.

Instructions: Students evaluate themselves on each of the criterion by selecting a rating and then recording comments to support that rating. Faculty rate students on each of the competencies using the designated rating scale. Faculty include comments related to each competency. To determine the overall rating score, faculty add all the assigned criteria ratings. The total scores for overall performance are written at the end of the CET.

A student who does not earn a satisfactory score or better on the mid-term CET will be placed on clinical probation. A student who does not earn a satisfactory score or better on the final CET will fail the course and the concurrent course, if any (i.e. NURS 451 and NURS 479 are concurrent courses). *Please refer to the Clinical Probation and Program Dismissal section of this handbook.*

ASSESSMENT REQUIREMENTS FOR NURSING STUDENTS

University Assessment

All students graduating from Kansas Wesleyan University are required to participate in the university assessment process. This process is found in the Academic Catalog. While graduation is not contingent on performance levels in assessment, diplomas and transcripts will be placed on "hold" for any student who does not complete all assessment requirements.

University requirements include:

Prior to Entry: ACT or SAT Exam

Freshman Year: English Placement Exam may be required for some students
Senior Year: Senior Departmental Exam; Assessment Exit Survey
Alumni: 1st, 5th, 10th Year Surveys

Departmental Assessment

Nursing Education requirements include:

Prior to Entry: Test of Essential Academic Skills (TEAS)

Senior Year:

- ATI Comprehensive Predictor (Senior Departmental Exam)
- Graduate Exit Survey
- One-Year Post-Graduation Survey *TBA

ATI Comprehensive Predictor

Student nurses will be expected to take the Comprehensive Assessment Technology Institute (ATI) Computer Adaptive Test during their last semester in the nursing program. This is the departmental exam used in the assessment program of the university. Student nurses will also take Content Mastery Assessment Technology Institute (ATI) Computer Adaptive Test(s) for assessment of readiness for the NCLEX-RN exam throughout the nursing program.

Graduate Exit Survey

All nursing graduates are expected to complete an exit survey. The survey contains questions related to the level of graduates' satisfaction with nursing student support services and the effectiveness of the nursing curriculum and clinical experiences. This information is used by the Department of Nursing Education for ongoing assessment and improvement of the nursing program.

One-Year Post-Graduation (from KWU) Surveys

A survey may be sent to graduates and employers from KWU one-year after students have graduated with the BS major in nursing degree. The survey contains questions related to the level of satisfaction with the nursing education provided to practice generalist nursing. This information is used by the Department of Nursing Education for ongoing assessment and improvement of the nursing program.

ASSESSMENT TECHNOLOGIES INSTITUTE® (ATI)

Assessment Technologies Institute® (ATI) offers an assessment driven review program designed to enhance student NCLEX-RN success. Nursing students will be required to complete this comprehensive assessment and review program in preparation for registered nurse licensure. Students will receive curricular materials each semester and complete normative examinations in specific courses. Fourth semester nursing students are required to complete a comprehensive predictor assessment and intensive NCLEX-RN virtual review.

STUDENT SUCCESS CONFERENCES

All students will meet with course faculty at designated times throughout the semester, as stated in the course syllabi, to review course success. These Student Success Conferences are designed to encourage the student's best performance regardless of scores earned during the nursing program. Student Success Conferences are held at the midterm portion of a course, regardless of the course's duration, and as a final conference. Students will be notified by the course faculty and/or DNE administrative assistant if they will need to sign up for a time to attend an additional student Success Conference at other points throughout the course. Students will be notified if they are currently completing a Student Success Plan if any course grade is below 83%, an exam earned a grade under 80%, or if there are faculty concerns.

PROGRESSION POLICY

In addition to university requirements, the applicant must meet the following requirements for progression in the Bachelor of Science with a major in nursing degree program:

1. Maintain a current tuberculin (TB) skin test
2. Provide evidence of BLS certification (adult, child, and infant) for the healthcare provider whenever necessary throughout the program.
3. Earn a grade of C+ or better in all nursing courses
4. Students who fail to earn a grade of C+ or better in a nursing course must retake that course the next time it is offered. The student must submit a **Student Petition for Repeat** to the nursing department Admission and Progression committee for progression in the nursing program. Repeating a nursing course requires the student to have an enrollment lapse in the nursing program for one consecutive academic semester. A **Return after Lapse** form is not required if the student is enrolled in any KWU course.
5. A second failure in any one course or failure in any two nursing courses will result in dismissal from the nursing program. For transfer students, nursing courses taken at another academic institution in which the student has received a grade of C- or lower will be counted as a failed course at KWU also.
6. Students may petition for exception for academic dismissal by meeting with the Director of Nursing Education and completing a **Student Petition for Exception**
7. Dismissal from the nursing program may also result from ethical, legal, or professional conduct unacceptable to the nursing program.

READMISSION POLICY

After a lapse of one semester of enrollment at KWU, returning students must:

1. Complete the **Return after Lapse** form through the Admissions Office, and
2. Complete the Nursing Department's **Student Petition for Exception** form and meet with the Director of Nursing Education to appeal for a position in a nursing course.

After a lapse of two semesters or more, in addition to the above, a returning student must:

- Re-apply for university admission through the KWU admissions office
- Re-apply for admission to nursing
- Adhere to the current catalog requirements
- Plan with a nursing advisor to develop a degree plan which meets all curricular and program requirements
- Submit a new physical examination form, current BLS certification for healthcare providers (adult, child, & infant), current TB skin test results, and any other health document requirements that may have expired or lapsed
- Validate competency in clinical skills and didactic knowledge

NOTIFICATION AND CLOSURE FOR STUDENTS WHO FAIL A NURSING COURSE

When a student receives a final grade less than an 80% in a nursing course, the course faculty will notify the student of the course failure. Formal notification by letter will be sent to the student from the Director of the Department of Nursing Education.

Grade Appeal

Students who wish to appeal the grade received on an assignment should first discuss the grade with the faculty member. If, after such discussion, the student still believes that the grade is incorrect, the student may initiate a grade appeal by following the Grievance Procedures in this handbook.

Any DNE student who believes she/he has been dealt with unfairly concerning academic progress (e.g., course grades, course materials, academic misconduct or absences) has access to an academic appeal. *Please refer to the Grievance Procedures section in this handbook.* DNE students, faculty and staff have access to appeal policies specified in the KWU Academic Catalog.

GRIEVANCE PROCEDURES

Chain of command is a principle of a formal organization, which establishes effective coordination, accountability and efficiency in organizational operation. If a student experiences a problem, please contact the course instructor or clinical instructor for clarification.

1. If the student feels resolution did not occur with the course instructor or clinical instructor, the student should make an appointment to visit with the DNE Director. A meeting will be conducted with the student, as well as with the course instructor or clinical instructor, to seek compromise or clarity.
2. If the student continues to feel no resolution was obtained, the following procedures may be used.

The Kansas Wesleyan University Department of Nursing Education Grievance Procedure is based on administration, faculty, and student beliefs as outlined in the National Student Nurses' Association (NSNA) Student Bill of Rights and Responsibilities for Students of Nursing, which can be found at www.nsna.org/Publications/BillofRights.

Grievance Committee

The Grievance Committee shall be composed of two students and nursing faculty. The two students shall be the junior year class president and the senior year class president as elected each year by their peers. Faculty members on the Committee shall be chosen by the faculty. If the grievance is against a member of the Committee, the aggrieved member shall abstain from the Committee while his/her grievance is being considered. The Committee shall then appoint someone to take that member's place.

The Grievance Committee shall be responsible for addressing all non-grade grievances (e.g. dishonesty, classroom behavior, clinical incidents, student-to-student conflicts, student-to-faculty conflicts, and Kansas State Board of Nursing reporting situations.)

The Committee may also review other grievances not necessarily included in the Student Bill of Rights as determined appropriate by nursing administration, faculty, and students.

The Grievance Committee has the responsibility and the authority to initiate the following actions: to set the procedure of appeal into motion or to determine that the substance of the grievance does not meet the Committee's responsibility.

The Committee shall meet as a situation arises. All involved persons shall be informed in advance as to the date, time, and place of these meetings. Any student shall have the right to ask for an "emergency meeting" of the Grievance Committee.

Accurate records, including complete minutes, and in individual cases, a verbatim record, shall be kept on file for all meetings of the Committee. Even when tape recordings are used, written minutes to officially document proceedings must be prepared. These minutes shall be signed by the two recording secretaries, who shall be one faculty member and one student on the Committee.

The student appearing before the Grievance Committee shall have the right to have a student peer, faculty member, or administrator of the university with him/her at the meeting.

Reasonable evidence, names of prospective witnesses, and background material concerning the case should be submitted in writing to the Committee at least three days prior to the date when the case is to be discussed. The evidence shall be relevant to the issues and not discussed by Committee members prior to the formal meeting.

Any charges against the student or faculty member shall be in writing and be made available to both the committee and the student or faculty member at least 14 days before his/her scheduled appearance.

The student should be given full opportunity to present evidence and witnesses that are relevant to the issue at hand. He/she shall also be given the opportunity to question any witnesses against him/her and also be informed of any evidence against him/her and its source.

The student shall be allowed to continue class (clinical at the discretion of the faculty involved) as usual until the committee has reached a decision. However, if the student is considered to present immediate danger to patient welfare, he/she shall be removed from clinical practice areas.

Group grievances shall be presented to the committee by one representative of the group. The representative may then appoint a student peer, faculty member, or administrator of the university to appear with him/her.

The faculty recording secretary will forward the decision of the committee in writing to the student and the Director of the Department within one week of hearing the case.

The student has a “right of appeal” for decisions made by the Grievance Committee as outlined in the KWU Academic Catalog under “Appeals Process”.

Any concerns regarding the university’s policies and/or the community standards are addressed in the KWU Academic Catalog and the KWU Student Handbook.

The Bill of Rights and Responsibilities for Students of Nursing, National Student Nurses’ Association, Inc., 2006 (last revision).

FORMAL COMPLAINT POLICY

Definition of a Formal Complaint

A formal complaint about the program is defined as a written, signed statement sent by an individual to the Department’s approving (KSBN) or accrediting agencies protesting a practice in the Department. An academic appeal or grievance made by a nursing student is not consistent with the DNE definition of a complaint.

Process for Addressing Complaints about the Program

In the case of a complaint issued about the program, the DNE will take the following steps:

1. Consult with the Provost. As directed by the Provost, consult with DNE legal counsel.
2. Follow any recommendations of the Provost and legal counsel in responding to the complaint.
3. As advised by legal counsel (as necessary), provide requested information according to the timeline specified in the complaint notification.
4. Maintain copies and/or notes of all correspondence (verbal or written) or meetings.
5. Keep records in the locked file cabinet in the office of the Director of Nursing Education.

Efforts to Prevent Complaints about the Program

DNE faculty members and staff attempt to address potential conflicts or concerns about the program by being proactive in addressing potential conflicts or concerns. DNE faculty members and staff are alert to potential or actual situation and report the situation to the Director. As necessary, the Director will consult with the Provost. The Director is responsible for contacting involved parties and trying to resolve the situation.

Any DNE student who believes she/he has been dealt with unfairly concerning academic progress (e.g., course grades, course materials, academic misconduct or absences) has access to an academic appeal. (See other policies within this handbook about conduct, appeals, complaints and grievances.) DNE students, faculty and staff have access to appeal policies specified in the KWU Academic Catalog.

STUDENT COMMUNICATIONS AND NOTIFICATION OF CHANGES TO KWU AND/OR DNE POLICY

Students are responsible for accessing official KWU communications via their **KWU email address** and the MyKWU LMS website. If a student does not have a KWU email address, they are to contact Justin Taylor at justin.taylor@kwu.edu or 785-833-4440 to get one set up as soon as possible.

Students are also responsible for responding to communications with faculty and peers through Canvas, the current Learning Management System utilized by Kansas Wesleyan University. Students are expected to regularly check Canvas for information posted regarding activities involving the Department of Nursing Education, or updates to due dates/expectations within nursing courses. If a student is unaware of a change or expectation that had been posted to Canvas with full accessibility, **the student is responsible for that information. Not checking online communication and information is not a valid excuse for being unaware of information or updates.**

Students are also responsible for reading information posted on the student bulletin board and on the KWU and DNE websites. Policy changes will be posted on the KWU DNE website, DNE student bulletin board, and emailed or mailed to all nursing students.

If major changes develop concerning the Nursing Education program, the Director of Nursing Education, KWU Provost and KWU Marketing Director discuss all available facts and actions to determine the appropriate wording and method for communicating program changes to interested parties, which includes current students. Appropriate staff will be assigned to be available to answer questions from students and all interested parties. The contact information of the assigned staff will be included when communicating with students and interested parties.

If not being used for academic purposes, personal communication devices are to be turned off and kept in the student's bag/backpack, or in the front of the room, during classes and clinicals. This includes, but is not limited to cell phones (texting, conversations, photographing), smart watches or health trackers that receive texts and notifications from cellphones, computers (e.g., notebooks, laptops, readers, and tablets), cameras (photographing), and Personal Digital Assistants (PDAs). Additionally, please refer to KWU cell phone etiquette in the KWU Student Handbook.

NURSING SKILLS LABORATORY AND COMPUTER USAGE

When students are utilizing the computers housed within the Department of Nursing Education, they are expected to use appropriate conduct and good computer etiquette. This includes:

1. No food or drink near the computers
2. Computers are to be used for class assignments only.
3. Students should save their files on a USB. The Department of Nursing Education is not responsible for students' documents and files.
4. Students will be held responsible for any damage they cause to the laboratory equipment or computers.
5. No additional programs or software is to be downloaded on Nursing computers.
6. The printer is to be used only for course work or school related activities. No large documents or personal material may be printed.

PLEASE NOTE: Students who do not adhere to these policies jeopardize losing all computer privileges. Their names will be submitted to the Provost for further action.

EMPLOYMENT POLICY

1. Unless otherwise qualified, certified or licensed as a specific health care provider (LPN, LMHT, MSW, RT, OT, PT or other) the student nurse who is employed in a health care setting may work only as an unlicensed assistive personnel (UAP).
2. The number of hours of employment per week should be balanced with the student's educational commitment. Full-time employees should consider carrying a partial academic load (6-9 hours); whereas, a full-time student should consider working no more than 16 hours per week.
3. KWU nametags and uniform components that would identify a student with KWU **must not** be worn during employment in a health care agency or during activities not associated with being a KWU nursing student. The KWU Nursing Education program does not have flexibility in the course schedule or the ability to offer part-time education. Therefore, nursing students are urged to limit their employment hours in order to succeed in the program.

ALCOHOL AND DRUG POLICY

Substance abuse is a patterned use of a drug in which the user consumes the substance in amounts or with methods which are harmful to themselves or others, and is a form of substance-related disorder.

In keeping with the responsibility of the nursing profession for protecting the public from harm while providing nursing care, clinical agencies, and/or the Department of Nursing Education may ask nursing students to submit to drug screenings.

All new students will be required to get a drug screen in the spring before their junior year. Applicants transferring to KWU for admission to the nursing program in the fall of the same year, will be asked to get a drug screen within two weeks after being provisionally accepted. If drug screen results are positive, the applicant will be withdrawn from the applicant pool for:

1. being unable to practice with skill and safety due to current abuse of drugs or alcohol; and/or
2. exhibiting professional incompetency, defined as a pattern of practice or other behavior which demonstrates a manifest incapacity or incompetence to practice nursing.

Kansas Nurse Practice Act section 65-1120-a)-4 and 651120-e)-3.

At the discretion of the faculty or nursing administration, students will be required to have a drug screening "for cause" at any time while in the nursing program. Students will pay all fees for such screenings. Refusal to allow mandatory or requested drug testing will result in immediate program dismissal and potential university disciplinary actions. If drug screening is required, the student will be dismissed from a didactic class or the clinical setting for the day and will receive an unexcused absence.

Positive results will be grounds for immediate dismissal from the nursing program. KWU's Student Development Office will be called to make arrangements to drive the student home. A student dismissed from the nursing program for substance abuse will have no appeal for readmission to the program.

The student must not be mentally impaired and must be able to function optimally in the clinical setting in any case. A student using any medication which impairs cognitive or functional abilities, even if prescribed by a physician, will not be permitted to participate in clinical experiences.

PRECEPTOR GUIDELINES FOR THE BS NURSING DEGREE PROGRAM

Definition:

"Preceptor" means a professional registered nurse licensed in the State of Kansas who is not employed by the KWU nursing program but who provides clinical supervision for nursing students in nursing courses taken during the nursing education program. For more detail please see the preceptor guidelines located in the Kansas State Nurse Practice Act 60-2-103 (a)(1) – (3) included in this handbook.

Purposes:

The purposes of using preceptors in the education of nursing students are to:

1. Provide role models for nursing students.
2. Expose nursing students to the expertise of practicing nurses.
3. Provide greater variety of learning experiences and/or those unique to a particular setting.
4. Strengthen the integration of theory and practice.

Selection Criteria for Preceptors:

1. Must meet KSBN preceptor guidelines specified in Kansas State Nurse Practice Act 60-2-103.
2. Must be licensed as a registered professional nurse in Kansas.
3. Must agree to orient and participate as a preceptor for nursing students.
4. Should be a positive role model both as a practitioner and as a member of the nursing profession.
5. Should have prior experience in directing new graduate nurses or nursing student learning experiences. Should also have prior experience in providing feedback of new graduate or student nurse's clinical performance.

Selection Process:

Potential preceptors may volunteer or may be nominated by faculty members or clinical supervisors (clinical coordinators/directors). The selected preceptor completes an orientation with a KWU nursing faculty member or online.

Role/Expectations of the Course Faculty:

1. Provides reminders of the course objectives and desired learning experiences to the preceptor.
2. Guides the preceptor in planning student assignments and clinical experiences.
3. Validates the student's ability to perform a broad array of nursing skills.
4. Emphasizes opportunities for student leadership.
5. Assists students in applying problem-solving techniques to clinical situations.
6. Promotes student self-evaluation of the effectiveness of his/her clinical performance.
7. Retains overall responsibility for selection of learning experiences and evaluation of student performance.
8. Provides communication with each preceptor in order to effectively mentor, monitor, and evaluate his/her effectiveness.

Role/Expectations of the Preceptor:

1. Orients the student to the facility, the staff, patient population, and its policies.
2. Serves as a role model for the practice of nursing in a specific area.

3. Guides the student in the planning, organization, and implementation of clinical experiences.
4. Promotes autonomy of functioning for the student when and where appropriate.
5. Provides constructive feedback.
6. Works with student and course faculty in directing the experiences for the student.
7. Reports any concerns regarding errors or quality of care promptly to the student and course faculty.
8. Completes the course documentation validating the student experience.
9. Preceptor feedback form must be signed by the preceptor.

Expectations of the Student:

1. Participates in preceptor-guided learning experiences.
2. Modifies previously acquired knowledge and skills to meet the needs of client populations specific to the course.
3. Demonstrates ability to perform procedures safely, legally, and ethically.
4. Participates in self-evaluation using specified objectives and criteria.
5. Strengthens time management and organizational skills.
6. May contribute to the improvement of nursing care at the site through projects, teaching, staff development programs, or other means.

PROTOCOL FOR GRADUATION FROM THE NURSING PROGRAM

Potential graduates will be notified by campus administration regarding additional graduation requirements and procedures.

	Activities	When	Responsible Person(s)
DNE	Order nursing program pins from pin company	January/February prior to May graduation	Graduating students (DNE Admin. Assistant confirms with faculty date/time for pin company representative to come to class).
DNE	Students with special state board application needs (e.g. misdemeanors/felonies) contact the Practice Specialist at the State Board of Nursing Office. 785-296-4325	January	Individual graduating students with reminder from DNE faculty or Director.

PINNING CEREMONY POLICY

The-pinning ceremony is planned by the DNE Student Activities Committee and held at KWU.

- Students must order and pay for their own nursing pin.
- Only students who have met requirements for graduation may participate in the pinning ceremony.
- The pinning ceremony will be scheduled at the end of the spring semester to coincide with the university's graduation/commencement ceremony.
- Plans will be made with oversight by the DNE Student Activities Committee, which includes the faculty chair of the committee and designated student representatives.
- The DNE will use a pre-determined budgeted amount to pay for supplies, decorations, facilities and services, requested by the Student Activities Committee and at the discretion and approval of the Director.

- The President and Provost of KWU will be asked to present a brief welcome speech.
- The Director of the DNE will give a speech during the ceremony.
- If the class would like to hear from a special speaker, the class must choose a senior class member or a member of the current nursing faculty.
- If a class officer presents a speech, it must be approved in advance by the DNE Director, or designee.
- Graduating students will wear clean and pressed white scrubs with white shoes. Students may wear the traditional white nursing cap, if they choose to do so.
- During the ceremony, students will have the nursing pin placed on their uniform. Students will have the opportunity to acknowledge their friends and families for the support given during the student's educational career.

PLANNING GUIDE FOR PINNING CEREMONY

Activities	When	Who's Responsible
Reserve space for pinning rehearsal, ceremony (and reception, if requested)	Fall semester	DNE office staff
Graduates order nursing pins	February / March	Graduates & DNE office staff
Plan the Pinning Ceremony	February / March	Student Activities Committee (SAC) with input and assistance from the graduating students.
Refer to previous pinning programs to add to the list below as needed.	February	SAC
1) Choose musicians as follows: a) Prelude/Postlude b) Music/songs during ceremony	March March	Senior Class President & SAC Graduating students & SAC
2) Ask President and Provost of KWU to present a brief welcome speech.	February/March	DNE office staff
3) Select and request keynote speaker, if any. The DNE Director will give a welcome speech as well.	February/March	Graduating students & SAC
4) Arrange for Benediction	February/March	DNE office staff
5) Physical Area Arrangements: ▪ Seating arrangements for graduates, faculty and dignitaries ▪ Podium ▪ Platform chairs ▪ Tables/Stands ▪ Lighting ▪ Piano ▪ Sound System ▪ Visual Media	February / March	DNE office staff
6) Inform Production Manager of above technology needs.	February/March	DNE office staff

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Activities	When	Who's Responsible
7) Establish order of Pinning Ceremony Program and send to Marketing Director	March	Senior Class President, SAC, & DNE office staff.
8) Request photographer via Marketing Director	March	DNE office staff
9) Order a peach rose for each graduate.	March (special order, so order early)	DNE office staff
10) Send out invitations for Pinning and Graduation to: <ul style="list-style-type: none"> ▪ KWU faculty ▪ Nursing faculty emeriti ▪ Nursing Advisory Council ▪ Board of Trustees ▪ KWU non-graduating nursing students ▪ Preceptors ▪ Agencies ▪ Scholarship donors ▪ Special DNE Supporters 	Early April	DNE office staff
11) Graduates provide statements of dedication or gratitude, and give names of persons presenting the nursing pin.	April	Each graduating student gives their statement of gratitude, their mission statement and photo to DNE office staff.
12) Volunteers from Junior class requested to assist with Pinning Ceremony and serve as ushers.	April	List of Junior class volunteers finalized by SAC Chair
13) Prepare line-up and seating chart.	April	DNE office staff
14) Graduates participating in the ceremony submit written speeches to the DNE office staff	April	Select Graduates DNE office staff compiles ceremony script including all speeches, prayer, pledge, etc.
15) Place pins on ribbon lanyard	April	DNE office staff
16) Purchase items for reception (if applicable).	April / May	SAC
17) Set up platform, check sound system, computer projector, etc.	Day before pinning ceremony	DNE faculty & staff
18) Attend Pinning Ceremony practice	Day before pinning ceremony	Anyone involved in the ceremony.
19) Display the Wall of Inspiration framed posters 20) Rope off seats for graduates & families. 21) Set up reception area.	Day of ceremony	DNE faculty & staff

A nurse must understand
and apply these
guidelines for the use
of social media.

A Nurse's Guide to the Use of Social Media

The use of social media and other electronic communication is expanding exponentially as the number of social media outlets, platforms and applications available continue to increase. Individuals use blogs, social networking sites, video sites, online chat rooms and forums to communicate both personally and professionally with others. Social media is an exciting and valuable tool when used wisely. The very nature of this medium, however, can pose a risk as it offers instantaneous posting opportunities that allow little time for reflective thought and carries the added burden that what is posted on the Internet is discoverable by a court of law even when it is long deleted.

Nurses are welcome to use social media in their personal lives. This may include having a Facebook page, a Twitter feed or blogging on various websites. Nurses can positively use electronic media to share workplace experiences, particularly those events that are challenging or emotionally charged, but it is imperative not to mention patients by name or provide any information or details that could possibly identify them in order to protect patients' right to privacy.



Social Media in the Workplace

Social media can benefit health care in a variety of ways, including fostering professional connections, promoting timely communication with patients and family members, and educating and informing consumers and health care professionals. Social media provides nurses with a way to express their feelings, and reflect or seek support from friends, colleagues, peers or virtually anyone on the Internet. Journaling and reflective practice are recognized as effective tools in nursing practice, and the Internet provides an alternative media for nurses to engage in these helpful activities. Without a sense of caution, however, these understandable needs and potential benefits may result in the nurse disclosing too much information, and violating patient privacy and confidentiality.

Health care organizations that utilize electronic and social media typically have policies governing employee use of such media in the workplace. Components of these policies often address personal use of employer computers and equipment, personal computing during work hours, and the types of websites that can be accessed from employer computers. Health care organizations also maintain careful control of websites maintained by or associated with the organization, limiting what may be posted to the site and by whom.

The employer's policies, however, typically do not address the nurse's use of social media to discuss workplace issues outside of work on home computers, personally-owned phones and other hand-held electronic devices. It is in this context that the nurse may face potentially serious consequences for the inappropriate use of social media.

Jamie has been working in hospice care for the last six years and one of her patients, Maria, maintained a hospital-sponsored communication page to keep friends and family updated on her battle with cancer. One day, Maria posted about her depression. As her nurse, Jamie wanted to provide support, so she posted, "I know the last week has been difficult. Hopefully the new happy pill will help, along with the increased dose of morphine. I will see you on Wednesday." The site automatically listed the user's name with each comment. The next day, Jamie was shopping at the local grocery store when a friend stopped her to ask about Maria's condition. "I saw your post yesterday. I didn't know you were taking care of Maria," the friend said. "I hope that new medication helps with her pain."

This is an example of a violation of confidentiality through social media. While Jamie had Maria's best intentions at heart by trying to offer her words of support, she inadvertently disclosed information about a patient on a social media site. Everyone who read that post now knows about Maria's medication and increase in morphine, violating her right to privacy and confidentiality. Instances of inappropriate use of electronic media by nurses such as this have been reported to boards of nursing (BONs) and, in some cases, reported in nursing literature and to the media.

Confidentiality and Privacy

To understand the limits of appropriate use of social media, it is important to have an understanding of confidentiality and privacy in the health care context.

Confidentiality and privacy are related, but distinct concepts:

- Any patient information learned by the nurse during the course of treatment must be safeguarded by that nurse.
- Such information may only be disclosed to other members of the health care team for the purpose of providing care for the patient.
- Confidential information should be shared only with the patient's informed consent, when legally required or where failure to disclose the information could result in significant harm. Beyond these very limited exceptions, a nurse is obligated to safeguard confidential information.

As a licensed practical nurse for more than 20 years, Bob knew the importance of safeguarding a patient's privacy and confidentiality. One day, he used his personal cell phone to take photos of Claire, a resident in the group home where he worked. Bob received permission from Claire's brother to take the photo since she was unable to give consent due to her mental and physical condition. That evening, Bob ran into William, a former employee of the group home. While catching up, he showed William the photo of Claire and discussed her condition with him. The administrator of the group home later learned of Bob's actions and terminated his employment for breach of confidentiality.

Bob thought it was okay for him to take Claire's photo because he had the consent of a family member. He also thought it was acceptable for him to discuss Claire's condition because William previously worked with Claire. So why was this behavior wrong? Because, first, merely asking Claire's brother for permission is not obtaining a valid consent. Second, confidential information should not be disclosed to persons no longer involved in the care of a patient. Even though Bob made an honest mistake, confidentiality rules must be strictly enforced to protect a patient's right to privacy.

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Privacy relates to the patient's expectation and right to be treated with dignity and respect.

Effective nurse/patient relationships are built on trust. Patients need to be confident that their most personal information and their basic dignity will be protected by the nurse.

Patients will be hesitant to disclose personal information if they fear it will be disseminated beyond those who have a legitimate "need to know."

Any breach of this trust, even inadvertent, damages the nurse/patient relationship and the general trustworthiness of the profession of nursing.

Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient privacy and confidentiality by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances. The definition of individually identifiable information includes any information that relates to the past, present or future physical or mental health of an individual, or provides enough information that leads someone to believe the information could be used to identify an individual.

Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways. Nurses may breach confidentiality or privacy with information they post via social media sites. Examples may include comments in which patients are described with enough sufficient detail to be identified, referring to patients in a degrading or demeaning manner, or posting videos or photos of patients.



Privacy is the patient's expectation to be treated with dignity and respect.

Confidentiality is safeguarding patient information.

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Emily, a 20-year-old junior nursing student, wasn't aware of the potential repercussions that could occur when she took a photo of Tommy, a 3-year-old leukemia patient in a pediatric unit, on her personal cell phone. When Tommy's mom went to the cafeteria, Emily asked him if she could take his picture, which Tommy immediately consented to. Emily took his picture as she wheeled him into his room. She posted Tommy's photo on her Facebook page with this caption: "This is my 3-year-old leukemia patient who is bravely receiving chemotherapy! He is the reason I am so proud to be a nurse!" In the photo, Room 324 of the pediatric unit was visible. Days later, the dean of the nursing program called Emily into her office. A nurse from the hospital found the photo Emily posted of Tommy on Facebook and reported it to hospital officials who also contacted Emily's nursing program.

While Emily never intended to breach the patient's confidentiality, the hospital faced a HIPAA violation. From Emily's post, people were able to identify Tommy as a cancer patient and the hospital where he was receiving treatment. School officials expelled Emily from the nursing program for breaching patient confidentiality and HIPAA violations. The nursing program was also barred from using the pediatric unit for their students. Emily's innocent, yet inappropriate action of posting a patient's photo had repercussions for her, the nursing program and the hospital.

But what if Emily removed the photo hours later? If it's taken down, no harm, no foul, right? No. Anything that exists on a server is there forever and could be retrieved later, even after deletion; therefore, it would still be discoverable in a court of law. Further, someone could have taken a screen shot of her Facebook page and posted it on a public website. Patient information and photos should never be posted on social media websites. Even after being deleted, the photo is still on a server and possibly posted somewhere else on the Internet.

Potential Consequences

As we've seen with Jamie, Bob and Emily, potential consequences for inappropriate use of social and electronic media by nurses vary. Consequences depend, in part, on the particular nature of the nurse's conduct.

Instances of inappropriate use of social and electronic media may be reported to the BON. Laws outlining the basis for disciplinary action by a BON vary between jurisdictions. Depending on the laws of a jurisdiction, a BON may investigate reports of inappropriate disclosures on social media sites by a nurse on the grounds of:

- Unprofessional conduct;
- Unethical conduct;
- Moral turpitude (defined as conduct that is considered contrary to community standards of justice, honesty or good morals);
- Mismanagement of patient records;
- Revealing a privileged communication; and
- Breach of confidentiality.

If the allegations are found to be true, the nurse may face disciplinary action by the BON, including a reprimand or sanction, assessment of a monetary fine, or temporary or permanent loss of licensure.

Improper use of social media by nurses may violate state and federal laws established to protect patient privacy and confidentiality. Such violations may result in both civil and criminal penalties, including fines and possible jail time. A nurse may face personal liability and be individually sued for defamation, invasion of privacy or harassment. Particularly flagrant misconduct on social media websites may also raise liability under state or federal regulations focused on preventing patient abuse or exploitation.

If the nurse's conduct violates the policies of the employer, the nurse may face employment consequences, including termination. Additionally, the actions of the nurse may damage the reputation of the health care organization, or subject the organization to a lawsuit or regulatory consequences.

Social Media's Impact on Patient Safety and Care

Another concern arising from social media misuse is its effect on team-based patient care. Online comments by a nurse regarding co-workers, even if posted from home during nonwork hours, may constitute lateral violence. Lateral violence includes disruptive behaviors of intimidation and bullying, which may be perpetuated in person or via the Internet. This is sometimes referred to as "cyber bullying." Such activity is a cause for concern for current and future employers, and regulators because they negatively affect team-based care, thus creating patient-safety ramifications. The line between speech protected by labor laws, the First Amendment and the ability of an employer to impose expectations on employees outside of work is still being determined.

Nonetheless, negative comments can be detrimental to a cohesive health care delivery team and may result in sanctions against the nurse.



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Common Myths and Misunderstandings of Social Media

While instances of intentional or malicious misuse of social media have occurred, in most cases, inappropriate disclosure is unintentional. A number of factors may contribute to a nurse inadvertently violating patient privacy and confidentiality while using social media, including:

- A mistaken belief that the communication or post is private and accessible only to the intended recipient. The nurse may fail to recognize that content once posted or sent can be disseminated to others.
- A mistaken belief that content deleted from a site is no longer accessible. The moment something is posted, it lives on a server that can always be discoverable in a court of law.
- A mistaken belief that it is harmless if private information about patients is disclosed if the communication is accessed only by the intended recipient. This is still a breach of confidentiality.
- A mistaken belief that it is acceptable to discuss or refer to patients if they are not identified by name, but referred to by a nickname, room number, diagnosis or condition. This too is a breach of confidentiality and demonstrates disrespect for patient privacy.
- Confusion between a patient's right to disclose personal information about himself or herself (or a health care organization's right to disclose otherwise protected information with a patient's consent) and the need for health care providers to refrain from disclosing patient information without a care-related need for the disclosure.

The ease of posting and the commonplace nature of sharing information via social media may appear to blur the line between one's personal and professional lives. The quick, easy and efficient technology enabling use of social media reduces not only the time it takes to post, but also the time to consider whether the post is appropriate and what ramifications may come from posting inappropriate content.

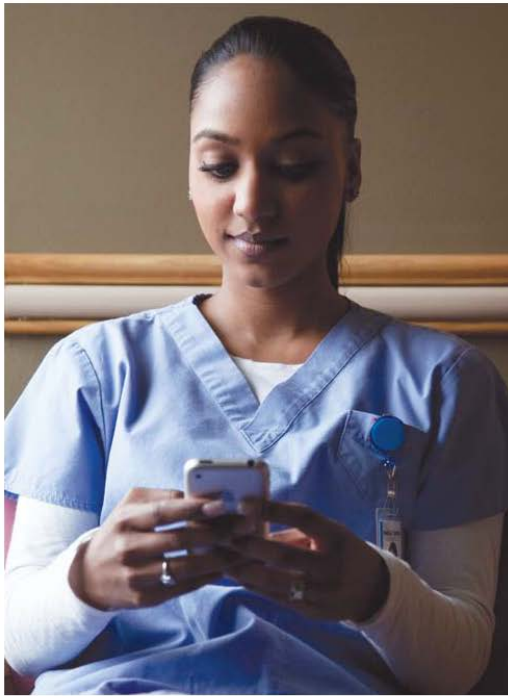
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How to Avoid Disclosing Confidential Patient Information

With awareness and caution, nurses can avoid inadvertently disclosing confidential or private information about patients. The following guidelines are intended to minimize the risks of using social media:

- Nurses must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
- Nurses are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Nurses must not share, post or otherwise disseminate any information or images about a patient or information gained in the nurse/patient relationship with anyone unless there is a patient-care-related need to disclose the information or other legal obligations to do so.
- Nurses must not identify patients by name, or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Nurses must not refer to patients in a disparaging manner, even if the patient is not identified.
- Nurses must not take photos or videos of patients on personal devices, including cell phones. Nurses should follow employer policies for taking photographs or videos of patients for treatment or other legitimate purposes using employer-provided devices.
- Nurses must maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has an obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.¹ Nurses must consult employer policies or an appropriate leader within the organization for guidance regarding work related postings.
- Nurses must promptly report any identified breach of confidentiality or privacy.
- Nurses must be aware of and comply with employer policies regarding use of employer-owned computers, cameras and other electronic devices, and use of personal devices in the workplace.
- Nurses must not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Nurses must not post content or otherwise speak on behalf of the employer unless authorized to do so and must follow all applicable policies of the employer.

¹ Nurses may want to consult NCSBN's "A Nurse's Guide to Professional Boundaries" for more information on this issue.



Conclusion

Social and electronic media have tremendous potential for strengthening personal relationships and providing valuable information to health care consumers, as well as affording nurses a valuable opportunity to interface with colleagues from around the world. Nurses need to be aware of the potential consequences of disclosing patient-related information via social media, and mindful of employer policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality and its application to social and electronic media. By being careful and conscientious, nurses may enjoy the personal and professional benefits of social and electronic media without violating patient privacy and confidentiality.

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THE NURSE'S CHALLENGE

- Be aware.
- Be cognizant of feelings and behavior.
- Be observant of the behavior of other professionals.
- Always act in the best interest of the patient.

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