

Bachelor of  
Science in  
Nursing

# RN to BSN Student Guidelines

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**School of Nursing  
California State University, Chico**

**2020 & 2021 Cohorts**

# Table of Contents

<b>Introduction</b> .....	<b>1</b>
<b>Mission of the School of Nursing</b> .....	<b>1</b>
<b>University Goals and Strategic Priorities</b> .....	<b>2</b>
<b>Organizing Framework of the School of Nursing</b> .....	<b>2</b>
<b>Student Learning Outcomes for BSN Graduates</b> .....	<b>4</b>
<b>The Nursing Curriculum</b> .....	<b>4</b>
<b>Program Progression</b> .....	<b>4</b>
<b>BSN Essentials</b> .....	<b>5</b>
<b>Nursing Standards and Professional Behavior Expectations</b> .....	<b>5</b>
ANA Standards of Nursing Practice.....	5
ANA Standards of Professional Performance.....	9
American Nurses Association (ANA) Code of Ethics for Nurses.....	13
<b>Professional Nursing Practice</b> .....	<b>14</b>
Professional Behavior and Safe Nursing Care Expectations.....	14
Guidelines for Student Behavior.....	15
Consequences of Student Violations.....	15
Patient Confidentiality.....	16
<b>Nursing Licensure (Information for New Graduates)</b> .....	<b>16</b>
Public Health Nursing Certificate.....	17
<b>Clinical Requirements, Health Policies and Regulations</b> .....	<b>17</b>
Emotional Requirements.....	17
Physical Requirements.....	17
Agency Contracts.....	18
Dress Code.....	18
Clinical Agency Requirements.....	<b>Error! Bookmark not defined.</b>
Health Insurance.....	<b>Error! Bookmark not defined.</b>
Automobile Access and Insurance.....	<b>Error! Bookmark not defined.</b>
Cardio-Pulmonary Resuscitation (CPR).....	<b>Error! Bookmark not defined.</b>

Immunizations .....	<b>Error! Bookmark not defined.</b>
Professional Liability Insurance Coverage.....	<b>Error! Bookmark not defined.</b>
Background Checks, Drug Testing and Verification of Immunizations .....	<b>Error! Bookmark not defined.</b>
Student Expectations in Clinical Courses .....	<b>Error! Bookmark not defined.</b>
Clinical Absence Policy .....	23
Reporting an Illness or Accident.....	24
<b>Potential Risks Involved with Nursing Practica, Related Policies, and Procedures .....</b>	<b>24</b>
Standard Precautions.....	26
Bloodborne Pathogen Exposure Nursing Student Protocols .....	28
<b>Substance Abuse and Patient Safety: The Risks and the Consequences .....</b>	<b>30</b>
Chemical/Substance Abuse in Nursing.....	30
Policy for Students Suspected of Drug or Alcohol Use/Abuse/Dependency .....	31
Indications for Suspicion of Drug/Alcohol Impairment, Abuse, or Dependency .....	33
<b>Academic Policies .....</b>	<b>36</b>
Testing Policy .....	36
Academic Standing.....	36
Academic Honesty .....	36
Marijuana Use Following Proposition 64 .....	37
Leaving the Program .....	37
Writing Proficiency.....	38
Student Participation in Governance and Decision Making.....	40
Student Grievance Procedure .....	40
<b>Student Support Services .....</b>	<b>40</b>
Advising.....	40
Tutoring and Other Learning Assistance .....	41
Counseling Center .....	41
Textbooks and Course Supplements.....	41
Student Learning Center .....	41
Nursing Scholarships and Loans.....	41
Graduation, Commencement, and the End of Program Pinning Ceremony.....	42
<b>Commencement, Pinning Ceremony, and Nursing Pins .....</b>	<b>42</b>

Honors Program .....	43
Sigma Theta Tau International/Kappa Omicron .....	43
<b>Appendix A - Student Nurse Background Check and Drug Testing Policy .....</b>	<b>44</b>
<b>Applicability and Purpose .....</b>	<b>44</b>
<b>Policy .....</b>	<b>44</b>
<b>Rationale .....</b>	<b>44</b>
<b>Background Check and Drug Screening Reports.....</b>	<b>45</b>
<b>Student Rights .....</b>	<b>46</b>
<b>Review Standards.....</b>	<b>47</b>
<b>Other Provisions.....</b>	<b>47</b>
<b>Appendix B - Using SentryMD/Precheck .....</b>	<b>Error! Bookmark not defined.</b>
<b>Background Check, Drug Screen, and Tracking Immunizations .</b>	<b>Error! Bookmark not defined.</b>

# CALIFORNIA STATE UNIVERSITY, CHICO SCHOOL OF NURSING

## RN-BSN STUDENT GUIDELINES

### Introduction

The faculty of the School of Nursing at California State University, Chico would like to welcome you to the Nursing Program. We hope you will find the study of nursing through our university interesting and rewarding. The course of study is demanding though, and we want to be sure that you have the information you need to be successful in achieving your goals.

The guidelines in this booklet are a supplement to the "University Catalog" and have evolved over years of student and faculty participation in the nursing curriculum of California State University, Chico. They were developed to help you understand certain expectations of this nursing curriculum. Your suggestions to make these guidelines continuously useful are welcomed.

Successful completion of the RN-BSN program leads to the Bachelor of Science in Nursing. This program combines both general and professional education to prepare well-educated citizens who are also professional practitioners. Our program is accredited by the State of California Board of Registered Nursing. Graduates are eligible to apply for the State of California Public Health Nursing Certificate. The baccalaureate degree in nursing at California State University, Chico is accredited by the Commission on Collegiate Nursing Education (<http://www.ccnaccreditation.org>).

The School of Nursing is an integral unit of the College of Natural Sciences at California State University, Chico, and, in accord with the primary goal of the University, provides a quality education. The School of Nursing further subscribes to the University's commitment to serve the population of northern California.

The School of Nursing office is currently located in Trinity Hall, room 121. The Nursing Office hours are Monday through Friday from 8:00 a.m. to 5:00 p.m., during the school year. Summer hours vary. The phone number is (530) 898-5891. The Administrative Coordinator and the Administrative Support Assistant are available to assist students. The RN-BSN Coordinator/Advisor is the first line of assistance for RN-BSN students. Email [rguynn@csuchico.edu](mailto:rguynn@csuchico.edu) is often the most efficient way of communication. Time for phone consultation can be arranged in that manner.

**Note: During the COVID-19 pandemic, most student services will be provided through telecommunication. Students needing assistance from the School of Nursing, may email the office at [nursstudent@csuchico.edu](mailto:nursstudent@csuchico.edu) or call at the number given above.**

### Mission of the School of Nursing

“To prepare professional nurses who are leaders, excellent clinicians and lifelong scholars.”

As such, the school provides high quality, student-centered learning environments that incorporate evidence-based care and clinical reasoning. The school supports faculty and student scholarly activities and encourages lifelong learning. The school also fosters service to others through our extensive community and regional collaboration with external healthcare stakeholders.

## University Goals and Strategic Priorities

The University, College of Natural Sciences, and School of Nursing have identified six goals known as strategic priorities, which are as follows. These priorities form a foundation for your nursing education at California State University, Chico.

**Strategic Priority #1:** Believing in the primacy of student learning, we will continue to develop high quality learning environments both in and outside of the classroom.

**Strategic Priority #2:** Believing in the importance of faculty and staff, and their role in student success, we will continue to invest in faculty and staff development.

**Strategic Priority #3:** Believing in the value of the wise use of new technologies in learning and teaching, we will continue to provide the technology, the related training, and the support needed to create high quality learning environments both in and outside of the classroom.

**Strategic Priority #4:** Believing in the value of service to others, we will continue to serve the educational, cultural, and economic needs of Northern California.

**Strategic Priority #5:** Believing that we are accountable to the people of the State of California, we will continue to diversify our sources of revenue and manage the resources entrusted to us.

**Strategic Priority #6:** Believing that each generation owes something to those that follow, we will create environmentally literate citizens who embrace sustainability as a way of living. We will be wise stewards of scarce resources and, in seeking to develop the whole person, be aware that our individual and collective actions have economic, social, and environmental consequences locally, regionally, and globally.

## Organizing Framework of the School of Nursing

A visual depiction of the mission, vision, values, strategies, program structural elements, curricular foundations, and student learning outcomes for the undergraduate nursing program at CSU, Chico are noted on the following page. These elements provide the foundation for the development of the undergraduate curriculum and are consistent with the mission and goals of the College of Natural Sciences and the university.

CSU Chico  
School of Nursing  
Organizing  
Framework

**Vision**

Empower and transform graduates to meet global health care challenges in the 21st century

**Mission**

To prepare professional nurses who are leaders, excellent clinicians and lifelong scholars.

**Values**

Students

Integrity Accountability Caring Diversity Innovation Respect

Faculty

**Strategies**

Creative Student teaching centered methods learning

Community engagement

Integration of clinical and theoretical learning

interdisciplinary collaboration

**Program Structural Elements**

Clearly defined student selection criteria

Maintain a well-qualified faculty

A positive supportive culture

Active solicitation of student input

Continuous program assessment and improvement

Acquire resources needed to achieve program vision and mission

**Curricular Foundations**

psychomotor skill development	clinical reasoning	quality and safety	patient centered care	evidence based practice	nursing therapeutics	population health
Internship	advocacy	Legal issues	ethical issues	global health	clinical prevention	lifelong learning
health promotion	economics	policy	communication	collaboration	information management	professional role development

**Student Learning Outcomes**

Integrate liberal education to inform baccalaureate generalist nursing practice.

Demonstrate the knowledge and skills in leadership, quality improvement, and patient safety necessary to provide high quality healthcare.

Demonstrate professional practice grounded in current evidence and best practices.

Demonstrate cultural awareness when caring for diverse patient populations.

Use knowledge and skills in information management and technology to the delivery of quality patient care.

Describe how financial and regulatory healthcare policies influence the nature and functioning of the healthcare system.

Demonstrate communication and collaboration among healthcare professionals to achieve quality and safe patient care.

Utilize clinical prevention at the individual and population level to improve health.

Demonstrate professional behavior (as fundamental to the discipline of nursing).

Provide nursing care to patients, families, groups, communities, and populations across the lifespan.

Demonstrate the appropriate individualized application and use of the nursing process in all baccalaureate generalist nursing roles.

## **Student Learning Outcomes for BSN Graduates**

Baccalaureate Graduates of the CSUC School of Nursing will:

1. Integrate liberal education to inform baccalaureate generalist nursing practice.
2. Demonstrate the knowledge and skills in leadership, quality improvement, and patient safety necessary to provide high quality healthcare.
3. Demonstrate professional practice grounded in current evidence and best practices.
4. Use knowledge and skills in information management and technology to the delivery of quality patient care.
5. Describe how financial and regulatory healthcare policies influence the nature and functioning of the healthcare system.
6. Demonstrate communication and collaboration among healthcare professionals to achieve quality and safe patient care.
7. Utilize clinical prevention at the individual and population level to improve health.
8. Demonstrate professional behavior as fundamental to the discipline of nursing.
9. Provide nursing care to patients, families, groups, communities, and populations across the lifespan.
10. Illustrate cultural awareness when caring for diverse patient populations.
11. Demonstrate the appropriate individualized application and use of the nursing process in all baccalaureate generalist nurse roles.

## **The Nursing Curriculum**

The curriculum throughout the RN-BSN Program is designed to expand on the nursing role learned in the A.D.N. program, providing content, clinical practice, feedback and evaluation that enable students to integrate their nursing knowledge into their science, art and humanity foundation. The result is the progression of the student to more complex application of critical thinking, communication and nursing therapeutics to individuals, groups and communities that culminates in the meeting of the baccalaureate student learning outcomes previously noted.

## **Program Progression**

**Initial Summer Session** focuses on self-assessment, characteristics of the adult learner, academic writing professional nursing roles, and career planning. The coursework equips students with the information and skills needed to be successful throughout the program. (Courses N300 RN-BSN Bridge Course and N310



Academic Writing for Nurses)

**Fall Semester** focuses on Nursing Research and its application to nursing practice, a Nursing Informatics course, and the first Upper Division General Education (GE) course World Religion and Global Issues. (Courses N342W, N316, and RELS 332); RELS 332 is waived for those students with a previous Baccalaureate degree.

**Winter-session** provides the 2<sup>nd</sup> Upper Division GE Course, LGBTQ Issues and Identities. This course is waived for those with a previous Baccalaureate degree (Course MCGS 310).

**Spring Semester** will focus on Leadership and Management in Nursing and Professional Values and Ethics in Nursing (Courses N420W and N427).

**Final Summer Session** has each student complete theoretical and clinical courses in community health nursing with a focus on nursing care delivery to diverse cultural family systems with impaired adaptation mechanisms within a rapidly changing health care environment (Courses N477 and N478).

The curriculum for the CSUC School of Nursing provides the following content identified by the American Association of Colleges of Nursing as essential to BSN education:

## **BSN Essentials**

Essential I: Liberal education for baccalaureate generalist nursing practice.

Essential II: Basic organizational and systems leadership for quality care and patient safety.

Essential III: Scholarship for evidence-based practice.

Essential IV: Information management and application of patient care technology.

Essential V: Healthcare policy, finance, and regulatory environments.

Essential VI: Interprofessional communication and collaboration for improving patient health outcomes.

Essential VII: Clinical prevention and population health.

Essential VIII: Professionalism and professional values.

Essential IX: Baccalaureate generalist nursing practice.

## **Nursing Standards and Professional Behavior Expectations**

The American Nurses Association has defined standards and codes by which all nurses are expected to practice. As a professional program it is expected that CSU Chico nursing students will demonstrate behaviors that reflect the defined standards of nursing throughout their academic experience.

### **ANA Standards of Nursing Practice**

#### **Standard 1. Assessment**

The registered nurse collects comprehensive data pertinent to the healthcare consumer's health or the situation.

#### **Competencies**

The registered nurse:

- Collects comprehensive data including but not limited to physical, functional, psychosocial, emotional, cognitive, sexual, cultural, age-related, environmental, spiritual/transpersonal, and

economic assessments in a systematic and ongoing process while honoring the uniqueness of the person.

- Elicits the healthcare consumer's values, preferences, expressed needs, and knowledge of the healthcare situation.
- Involves the healthcare consumer, family, and other healthcare providers as appropriate, in holistic data collection.
- Identifies barriers (e.g. psychosocial, literacy, financial, cultural) to effective communication and makes appropriate adaptations.
- Recognizes the impact of personal attitudes, values, and beliefs.
- Assesses family dynamics and impact on healthcare consumer health and wellness.
- Prioritizes data collection based on the healthcare consumer's immediate condition, or the anticipated needs of the healthcare consumer or situation.
- Uses appropriate evidence-based assessment techniques, instruments, and tools.
- Synthesizes available data, information, and knowledge relevant to the situation to identify patterns and variances.
- Applies ethical, legal, and privacy guidelines and policies to the collection, maintenance, use, and dissemination of data and information.
- Recognizes the healthcare consumer as the authority on her or his own health by honoring their care preferences.
- Documents relevant data in a retrievable format.

### **Standard 2. Diagnosis**

The registered nurse analyzes the assessment data to determine the diagnoses or issues.

#### **Competencies**

The registered nurse:

- Derives the diagnoses or issues from assessment data.
- Validates the diagnoses or issues with the healthcare consumer, family, and other healthcare providers when possible and appropriate.
- Identifies actual or potential risks to the healthcare consumer's health and safety or barriers to health, which may include but are not limited to interpersonal, systematic, or environmental circumstances.
- Uses standardized classification systems and clinical decision support tools, when available, in identifying diagnoses.
- Documents diagnoses or issues in a manner that facilitates the determination of the expected outcomes and plan.

### **Standard 3. Outcomes Identification**

The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.

#### **Competencies**

The registered nurse:

- Involves the healthcare consumer, family, healthcare providers, and others in formulating expected outcomes when possible and appropriate.
- Derives culturally appropriate expected outcomes from the diagnoses.
- Considers associated risks, benefits, costs, current scientific evidence, expected trajectory of the condition, and clinical expertise when formulating expected outcomes.
- Defines expected outcomes in terms of the healthcare consumer, healthcare consumer cultural, values, and ethical considerations.

- Includes a time estimate for attainment of expected outcomes.
- Develops expected outcomes that facilitate continuity of care.
- Modifies expected outcomes according to changes in the status of the healthcare consumer or evaluation of the situation.
- Documents expected outcomes as measurable goals.

#### **Standard 4. Planning**

The registered nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes.

##### **Competencies**

The registered nurse:

- Develops an individualized plan in partnership with the person, family, and others considering the person's characteristics or situation, including, but not limited to values, beliefs, spiritual and health practices, preferences, choices, developmental level, coping style, culture and environment, and available technology.
- Establishes the plan priorities with the healthcare consumer, family, and others, as appropriate.
- Includes strategies in the plan that address each of the identified diagnoses or issues. These may include, but are not limited to, strategies for: promotion and restoration of health; prevention of illness, injury, and disease; the alleviation of suffering; and supportive care for those who are dying.
- Includes strategies for health and wholeness across the lifespan.
- Provides for continuity in the plan.
- Incorporates an implementation pathway or timeline in the plan.
- Considers the economic impact of the plan on the healthcare consumer, family, caregivers, or other affected parties.
- Integrates current scientific evidence, trends, and research.
- Utilizes the plan to provide direction to other members of the healthcare team.
- Explores practice settings and safe space and time for the nurse and the healthcare consumer to explore suggested, potential, and alternative options.
- Defines the plan to reflect current statutes, rules and regulations, and standards.
- Modifies the plan according to the ongoing assessment of the health care consumer's response and other outcome indicators.
- Documents the plan in a manner that uses standardized language or recognized terminology.

#### **Standard 5. Implementation**

The registered nurse implements the identified plan.

##### **Competencies**

The registered nurse:

- Partners with the person, family, significant others, and caregivers as appropriate to implement the plan in a safe, realistic, and timely manner.
- Demonstrates caring behaviors toward healthcare consumers, significant others, and groups of people receiving care.
- Utilizes technology to measure, record, and retrieve healthcare consumer data, implement the nursing process, and enhance nursing practice.
- Utilizes evidence-based interventions and treatments specific to the diagnosis or problem.
- Provides holistic care that addresses the needs of diverse populations across the lifespan.
- Advocates for health care that is sensitive to the needs of healthcare consumers, with particular

- emphasis on the needs of diverse populations.
- Applies appropriate knowledge of major health problems and cultural diversity in implementing the plan of care.
- Applies available healthcare technologies to maximize access and optimize outcomes for healthcare consumers.
- Utilizes community resources and systems to implement the plan.
- Collaborates with healthcare providers from diverse backgrounds to implement and integrate the plan.
- Accommodates for different styles of communication used by healthcare consumers, families, and healthcare providers.
- Integrates traditional and complementary health care practices as appropriate.
- Implements the plan in a timely manner in accordance with patient safety goals.
- Promotes the healthcare consumer's capacity for the optimal level of participation and problem-solving.
- Documents implementation and any modifications, including changes or omissions, of the identified plan.

### **Standard 5A. Coordination of Care**

The registered nurse coordinates care delivery.

#### **Competencies**

The registered nurse:

- Organizes the components of the plan.
- Manages a healthcare consumer's care in order to maximize independence and quality of life.
- Assists the healthcare consumer in identifying options for alternative care.
- Communicates with the healthcare consumer, family, and system during transitions in care.
- Advocates for the delivery of dignified and humane care by the inter-professional team.
- Documents the coordination of care.

### **Standard 5B. Health Teaching and Health Promotion**

The registered nurse employs strategies to promote health and a safe environment.

#### **Competencies**

The registered nurse:

- Provides health teaching that addresses such topics as healthy lifestyles, risk-reducing behaviors, developmental needs, activities of daily living, and preventive self-care.
- Uses health promotion and health teaching methods appropriate to the situation and the healthcare consumer's values, beliefs, health practices, developmental level, learning needs, readiness and ability to learn, language preference, spirituality, culture, and socioeconomic status.
- Seeks opportunities for feedback and evaluation of the effectiveness of the strategies used.
- Uses information technologies to communicate health promotion and disease prevention information to the healthcare consumer in a variety of settings.
- Provides healthcare consumers with information about intended effects and potential adverse effects of proposed therapies.

## **Standard 6. Evaluation**

The registered nurse evaluates progress toward attainment of outcomes.

### **Competencies**

The registered nurse:

- Conducts a systematic, ongoing, and criterion-based evaluation of the outcomes in relation to the structures and processes prescribed by the plan of care and the indicated timeline.
- Collaborates with the healthcare consumer and others involved in the care or situation in the evaluation process.
- Evaluates, in partnership with the healthcare consumer, the effectiveness of the planned strategies in relation to the healthcare consumer's responses and the attainment of the expected outcomes.
- Uses ongoing assessment data to revise the diagnoses, outcomes, the plan, and the implementation as needed.
- Disseminates the results to the healthcare consumer, family, and others involved, in accordance with federal and state regulations.
- Participates in assessing and assuring the responsible and appropriate use of interventions in order to minimize unwarranted or unwanted treatment and healthcare consumer suffering.
- Documents the results of the evaluation.

## **ANA Standards of Professional Performance**

### **Standard 7. Ethics**

The registered nurse practices ethically.

### **Competencies**

The registered nurse:

- Uses Code of Ethics with Interpretive Statements (ANA, created 2001, revised 2008) to guide practice.
- Delivers care in a manner that preserves and protects healthcare consumer autonomy, dignity, rights, values, and beliefs.
- Recognizes the centrality of the healthcare team consumer and family as core members of any healthcare team.
- Upholds healthcare consumer confidentiality within legal and regulatory parameters.
- Assists healthcare consumers in self-determination and informed decision-making.
- Maintains a therapeutic and professional healthcare consumer-nurse relationship within appropriate professional role boundaries.
- Contributes to resolving ethical issues involving healthcare consumers, colleagues, community groups, systems, and other stakeholders.
- Takes appropriate action regarding instances of illegal, unethical, or inappropriate behavior that can endanger or jeopardize the best interests of the healthcare consumer or situation.
- Speaks up when appropriate to question healthcare practice when necessary for safety and quality improvement.
- Advocates for equitable healthcare consumer care.

## **Standard 8. Education**

The registered nurse attains knowledge and competence that reflects current nursing practice.

### **Competencies**

The registered nurse:

- Participates in ongoing educational activities related to appropriate knowledge bases and professional issues.
- Demonstrates a commitment to lifelong learning through self-reflection and inquiry to address learning and personal growth needs.
- Seeks experiences that reflect current practice to maintain knowledge, skills, abilities, and judgment in clinical practice or role performance.
- Acquires knowledge and skills appropriate to the role, population, specialty, setting, role, or situation.
- Seeks formal and independent learning experiences to develop and maintain clinical and professional skills and knowledge.
- Identifies learning needs based on nursing knowledge, the various roles the nurse may assume, and the changing needs of the population.
- Participates in formal or informal consultations to address issues in nursing practice as an application of education and a knowledge base.
- Shares educational findings, experiences, and ideas with peers.
- Contributes to a work environment conducive to the education of healthcare professionals.
- Maintains professional records that provide evidence of competence and lifelong learning

## **Standard 9. Evidence-Based Practice and Research**

The registered nurse integrates evidence and research findings into practice

### **Competencies**

The registered nurse:

- Utilizes current evidence-based nursing knowledge, including research findings, to guide practice.
- Incorporates evidence when initiating changes in nursing practice.
- Participates, as appropriate to education level and position, in the formulation of evidence-based practice through research.
- Shares personal or third-party research findings with colleagues and peers.

## **Standard 10. Quality of Practice**

The registered nurse contributes to quality nursing practice.

### **Competencies**

The registered nurse:

- Demonstrates quality by documenting the application of the nursing process in a responsible, accountable, and ethical manner.
- Uses creativity and innovation to enhance nursing care.
- Participates in quality improvement. Activities may include:
  - o Identifying aspects of practice important for quality monitoring;

- o Using indicators to monitor quality, safety, and effectiveness of nursing practice;
- o Collecting data to monitor quality and effectiveness of nursing practice;
- o Analyzing quality data to identify opportunities for improving nursing practice;
- o Formulating recommendations to improve nursing practice or outcomes;
- o Implementing activities to enhance the quality of nursing practice;
- o Developing, implementing, and/or evaluating policies, procedures, and guidelines to improve the quality of practice;
- o Participating on and/or leading Interprofessional teams to evaluate clinical care or health services;
- o Participating in and/or leading efforts to minimize costs and unnecessary duplication;
- o Identifying problems that in day-to-day work routines in order to correct process inefficiencies;
- o Analyzing factors related to quality, safety, and effectiveness
- o Analyzing organizational systems for barriers to quality healthcare consumer outcomes; and
- o Implementing processes to remove or weaken barriers within organizational systems.

### **Standard 11. Communication**

The registered nurse communicates effectively in a variety of formats in all areas of practice.

#### **Competencies**

The registered nurse:

- Assesses communication format preferences of healthcare consumers, families, and colleagues.
- Assesses her or his own communication skills in encounters with healthcare consumers, families, and colleagues.
- Seeks continuous improvement of communication and conflict resolution skills.
- Conveys information to healthcare consumers, families, the interprofessional team, and others in communication formats that promote accuracy.
- Questions the rationale supporting care processes and decisions when they do not appear to be in the best interest of the patient.
- Discloses observations or concerns/related to hazards and errors in care or the practice environment to the appropriate level.
- Maintains communication with other providers to minimize risks associated with transfers and transition in care delivery.
- Contributes her or his own professional perspective in discussions with the interprofessional team.

### **Standard 12. Leadership**

The registered nurse demonstrates leadership in the professional practice setting and the profession.

#### **Competencies**

The registered nurse:

- Oversees the nursing care given by others while retaining accountability for the quality of care given to the healthcare consumer.
- Abides by the vision, the associated goals, and the plan to implement and measure progress of an individual healthcare consumer or progress within the context of the healthcare organization.
- Demonstrates a commitment to continuous, lifelong learning and education for self and others.

- Mentors colleagues for the advancement of nursing practice, the profession, and quality health care.
- Treats colleagues with respect, trust, and dignity.
- Develops communication and conflict resolution skills.
- Participates in professional organizations.
- Communicates effectively with the healthcare consumer and colleagues.
- Seeks ways to advance nursing autonomy and accountability.
- Participates in efforts to influence healthcare policy involving healthcare consumers and the profession.

### **Standard 13. Collaboration**

The registered nurse collaborates with healthcare consumer, family, and others in the conduct of nursing practice.

#### **Competencies**

The registered nurse:

- Partners with others to effect change and produce positive outcomes through the sharing of knowledge of the healthcare consumer and/or situation.
- Communicates with the healthcare consumer, the family, and healthcare providers regarding healthcare consumer care and the nurse's role in the provision of that care.
- Promotes conflict management and engagement.
- Participates in building consensus or resolving conflict in the context of patient care.
- Applies group process and negotiation techniques with healthcare consumers and colleagues.
- Adheres to standards and applicable codes of conduct that govern behavior among peers and colleagues to create a work environment that promotes cooperation, respect, and trust.
- Cooperates in creating a documented plan focused on outcomes and decisions related to care and delivery of services that indicates communication with healthcare consumers, families, and others.
- Engages in teamwork and team-building process.

### **Standard 14. Professional Practice Evaluation**

The registered nurse evaluates her or his own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations.

#### **Competencies**

The registered nurse:

- Provides age-appropriate and developmentally appropriate care in a culturally and ethnically sensitive manner.
- Engages in self-evaluation of practice on a regular basis, identifying areas of strength as well as areas in which professional growth would be beneficial.
- Obtains informal feedback regarding her or his own practice from healthcare consumers, peers, professional colleagues, and others.
- Participates in peer review as appropriate.
- Takes action to achieve goals identified during the evaluation process.
- Provides the evidence for practice decisions and actions as part of the informal and formal evaluation processes.
- Interacts with peers and colleagues to enhance her or his own professional nursing practice or role performance.
- Provides peers with formal or informal constructive feedback regarding their practice or role performance.



## **Standard 15. Resource Utilization**

The registered nurse utilizes appropriate resources to plan and provide nursing services that are safe, effective, and financially responsible.

### **Competencies**

The registered nurse:

- Assesses individual healthcare consumer care needs and resources available to achieve desired outcomes.
- Identifies healthcare consumer care needs, potential for harm, complexity of the task, and desired outcome when considering resource allocation.
- Delegates elements of care to appropriate healthcare workers in accordance with any applicable legal or policy parameters or principles.
- Identifies the evidence when evaluating resources.
- Advocates for resources, including technology, that enhance nursing practice.
- Modifies practice when necessary to promote positive interaction between healthcare consumers, care providers, and technology.
- Assists the healthcare consumer and family in identifying and securing appropriate services to address needs across the healthcare continuum.
- Assists the healthcare consumer and family in factoring costs, risks, and benefits in decisions about treatment and care.

## **Standard 16. Environmental Health**

The registered nurse practices in an environmentally safe and healthy manner.

### **Competencies**

The registered nurse:

- Attains knowledge of environmental health concepts, such as implementation of environmental health strategies.
- Promotes a practice environment that reduces environmental health risks for workers and healthcare consumers.
- Assesses the practice environment for factors such as sound, odor, noise, and light that threaten health.
- Advocates for the judicious and appropriate use of products in health care.
- Communicates environmental health risks and exposure reduction strategies to healthcare consumers, families, colleagues, and communities.
- Utilizes scientific evidence to determine if a product or treatment is an environmental threat.
- Participates in strategies to promote healthy communities.

American Nurses Association (2010). *Scope and Standards of Practice* (2nd ed.). Silver Spring, MD: American Nurses Association. BHE/MONE, 2006.

## **American Nurses Association (ANA) Code of Ethics for Nurses**

The ANA Code of Ethics for Nurses as revised in 2015 follows. The professional issues in the first three statements are concerned with protection of clients' rights and safety; those in the next three pertain to qualifications for professional encounters with clients. The social issues of the last three statements of the

code relates to the nurse's obligations to society and the profession. Students are expected at all times to act in accordance with the ANA Code of Ethics for Nurses.

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and 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, 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 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 human diplomacy, and reduce health disparities.
9. The profession of nursing, 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.

## **Professional Nursing Practice**

### **Professional Behavior and Safe Nursing Care Expectations**

Throughout this program the student will be required to demonstrate professional behavior and safe nursing care. The student will in no instance demonstrate any unsafe or potentially unsafe behavior that could endanger not only the physical well-being, but also the emotional well-being of any client, family member, faculty, staff, or peer. Unsafe behavior includes, but is not limited to, being under the influence of drugs or alcohol, failing to use Standard Precautions at all times, failing to apply basic safety rules, failing to report an abnormal finding, and not submitting required clinical immunization, background check, and drug testing data in a timely manner.

Unsafe behavior is the failure to perform in the manner that any prudent student nurse, at the same level of preparation, would perform in a particular clinical situation. Individual course supplements may designate other specific behaviors considered unsafe in specific settings. Students are expected to be familiar with all information that is published in the course supplements, course syllabi, and student guidelines. Failure to read this material cannot be cited as a reason for non-compliance with information that promotes safe and professional nursing practice.

Students who exhibit behavior and/or performance that is potentially or actually unsafe or unprofessional will be immediately removed from clinical and classroom settings. **Unsafe practice or unprofessional behavior can result in a failing grade for the course regardless of the course grade earned academically.**

Students in the nursing program are expected to adhere to professional standards in their experiences and relationships with nursing faculty, agency staff, clients and family members. The student will in no instance demonstrate any behavior deemed unprofessional or inappropriate by the nursing faculty or agency staff. Professional behavior includes, but is not limited to, following directions, adequate preparation for clinical, meeting deadlines for assignments, being dressed appropriately, meeting appointments, being on

time, truthfulness in all statements or documentation, and adherence to academic integrity expectations.

The BSN is a degree that signifies readiness for beginning professional nursing practice. The faculty recognizes a responsibility to both the student and potential patients to produce graduates whose attitudes and behavior indicate suitability for carrying out their professional functions. If unprofessional behavior is exhibited, the Director of the School of Nursing, in consultation with the Executive Committee of the School of Nursing, will determine if, and under what conditions the student can continue in the nursing program. If, in the best professional judgment of the Executive Committee, a student appears to be unsafe or potentially dangerous to patients and colleagues, or if a student fails to meet professional behavior expectations, the School will refuse to allow the student in the practice setting, thus preventing him/her from completing the program.

### **Guidelines for Student Behavior**

It is expected that nursing students conduct themselves in a mature, professional manner. Students are to be respectful of their peers and instructors. Orientation days are mandatory and students are expected to arrive on time. Absences from orientation will only be approved with prior notification and for a serious and compelling reason (as determined by the Faculty). Absences from a mandatory orientation may result in student not being allowed to take the course. Leaving a class early or arriving late is disruptive and is not acceptable except under rare circumstances. Children and infants can be disruptive and, therefore, are not allowed in class or class-related activities without prior instructor approval.

1. It is the instructor's prerogative to require students to leave the classroom for rude, disrespectful, and disruptive behavior. Disciplinary action may be taken.
2. Though we understand that unexpected issues can present themselves during a semester, students are expected to complete semester requirements as scheduled, unless there is a serious and compelling reason. All students will be required to sign an *Absence or Missed Deadline Report* form in order to take a test at a time other than when regularly scheduled, or to hand in a paper after an established deadline, or to complete any missed clinical time. Additional information may be requested at the discretion of the faculty member. Completed forms will be kept in student files in the School of Nursing office. Note that failure to comply with these requirements may result in a failing grade for the portion of the course missed, with no make-up permitted.
3. Students must comply with the School of Nursing's test policies.
4. At the instructor's discretion, participation and attendance may be a component of the grading process. This will be delineated in the course supplement.
5. It is not acceptable for students to go to hospitals or other health care agencies and make their own contacts; this is the responsibility of faculty, unless otherwise directed by the School of Nursing.

### **Consequences of Student Violations**

1. Request by instructor to stop disruptive behavior.
2. Letter to student with copy to go in student's permanent file in the Nursing Office.
3. Referral to School of Nursing Executive Committee for disciplinary action.
4. Referral to Student Judicial Affairs for disciplinary action. See campus policy at <http://www.csuchico.edu/sjd/>

### **COVID-19**

#### **Face Mask Requirement**

In compliance with the [California Department of Public Health](#) state mandate, Chico State requires

that all students, staff, and faculty, wear a face covering in all indoor spaces on campus, including classrooms, labs, studios, and offices, and outside when physical distancing is not possible. Accordingly, all students are required to wear a face mask covering the nose and mouth in order to participate in this course. Failure to comply with this requirement will result in a referral to Student Conduct, Rights, and Responsibilities and disciplinary action being taken against you by the University.

Individuals unable to wear a face covering due to a medical condition should contact the [Accessibility Resource Center](#) by phone at (530) 898-5959 or by email at [arcdept@csuchico.edu](mailto:arcdept@csuchico.edu).

For more information about the state mandate, please visit the [Chico State COVID-19 News & Information](#) page.

**Note: Students at clinical sites must follow facility's COVID-19 protection policies, not to be less restrictive than the policies provided above. Refusal to follow the mandated precautions will result in immediate removal from class or clinical and referral to Student Conduct, Rights and Responsibilities.**

**Illness:** Students must not attend a face-to-face class or an in-person clinical if they are ill. Everyone will be required to self-assess for symptoms **each day before coming to class or clinical.**

- Here is a link to the CDC self-assessment tool: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html#>

Students who are placed in quarantine may not attend face-to-face class or in-person clinical. Please communicate with the instructor as soon as possible if you are unable to attend class or clinical so reasonable accommodations can be considered.

If a student tests positive for COVID-19, they should notify their clinical instructor and report their COVID-19 positive test result as soon as possible by contacting the COVID- 19 Hotline at [530-898-2222](tel:530-898-2222). If you call after University business hours, please leave a voicemail message to include your name and contact information.

Please visit the CSU Chico COVID-19 News & Information website at <https://www.csuchico.edu/coronavirus/>

## **Patient Confidentiality**

Patient names, initials, or pseudonyms should never be used in nursing care plans or case studies. Assignment sheets used in the clinical setting should be destroyed in such a way that patient data cannot be linked to name or room number. You may not photocopy any portion of a patient's medical record. You also cannot take any photos of patients or other objects in the clinical setting as patients could potentially be identified. No clinical or patient information should ever be shared on social networking sites.

## **Nursing Licensure (Information for New Graduates)**

Proof of California licensure as an RN is required prior to commencement of the fall semester immediately after the student enters the program (approximately 3 months after program entry). If proof of RN status is not provided by the day of orientation to the fall semester, the student will not be allowed to take classes. The student must apply for a Personal Educational Leave or be dropped from the program.

Some coursework in the RN-BSN Program draws upon work experience as an RN. Any new graduate RN or RN without work experience as an RN (in any setting) must apply to enroll in the Rural California Nursing Preceptorship (RCNP) program, or equivalent as determined by the RN-BSN Coordinator, by the September RCNP deadline (as shown on the RCNP website), following students' first summer session of the program. This nursing preceptorship will take place during the winter session. Information about this preceptorship, including costs, can be found on the RCNP website: <http://www.csuchico.edu/rcnp/> . Candidates for the Winter RCNP program are selected from the applicants who have applied by the September deadline. Those RN-BSN students who apply but are not chosen to participate in the RCNP Program will work with the RN-BSN Coordinator on other potential options.

### **Public Health Nursing Certificate**

Upon successful completion of all BSN degree requirements, graduates are eligible to apply for the State of California Public Health Nursing Certificate. Applications are available at the BRN web site [www.rm.ca.gov](http://www.rm.ca.gov). To receive your California Public Health Nursing Certificate, you must submit the application and copies of all official transcripts with your fee to the BRN.

To obtain your official CSU, Chico transcript, visit the Student Records & Registration Office website at [www.csuchico.edu/sro/forms/transcript.shtml](http://www.csuchico.edu/sro/forms/transcript.shtml) . PLEASE NOTE: The BRN's *Request for Transcript/Public Health Nurse Certification* form is processed separately. Complete and mail this form to the School of Nursing office (CSU, Chico, School of Nursing, 400 W. 1<sup>st</sup> St, Chico, CA 95929-0200) for completion and submission to the BRN, to be matched up with your application packet. See the School of Nursing website at [www.csuchico.edu/nurs/cert-ph.shtml](http://www.csuchico.edu/nurs/cert-ph.shtml) for further information.

### **Clinical Requirements, Health Policies and Regulations**

To enter into and to complete the nursing program, students must be able to meet the emotional and physical requirements of the School of Nursing and the agencies in which students are placed for clinical practica.

#### **Emotional Requirements**

The student must have sufficient emotional stability to perform under stress produced by both academic study and the necessity of performing nursing care in real patient situations while being observed by the instructors and other health care personnel.

#### **Physical Requirements**

In order to participate in CSU, Chico's Nursing Program, students may be required to travel to agencies and hospitals, and to homes with unpredictable environments. Students need to have the endurance to adapt to a physically and emotionally demanding program. The following physical requirements are necessary to participate in the clinical application courses in nursing:

1. Strength: Sufficient strength to lift, move and transfer most patients; to restrain and carry children; to move and carry equipment; and to perform CPR, which requires sufficient body weight and adequate lung expansion.
2. Mobility: Sufficient to bend, stoop, get down on the floor; combination of strength, dexterity, mobility and coordination to assist patients; ability to move around rapidly.
3. Fine Motor Movements: Necessary to manipulate syringes and IVs; to assist patients with feeding and hygiene; to write in charts; to perform sterile procedures and other skilled procedures.
4. Speech: Ability to speak clearly in order to communicate with staff, physicians and patients; need to be understood on the telephone.
5. Vision: Sufficient to make physical assessments of patients and equipment; to read.
6. Hearing: Sufficient to accurately hear on the telephone, to be able to hear through the stethoscope to discriminate sounds.
7. Touch: Ability to palpate both superficially and deeply and to discriminate tactile sensations.
8. Health Nursing is considered to be a high risk profession for exposure to Hepatitis B and other contagious diseases. Immunizations required by the School of Nursing reduce this risk for nursing students, but do not eliminate it entirely. Pregnant students need to be evaluated by their obstetrical health care provider to determine what if any immunizations are contraindicated during the pregnancy as well as any other limitations which should be put in place for the student to participate in the nursing program during the pregnancy. Students with impaired or deficient immune systems may be at risk for contracting serious diseases. Such students must have physician approval for participation in clinical courses, and must discuss their situation with the clinical instructor.

## **Agency Contracts**

Students achieve many of the course requirements through practical experience in many different health care agencies. Student access to facilities is regulated by contracts between the University and the agency, covering policies such as immunizations, workmen's compensation insurance, malpractice, background checks, drug testing, and car insurance requirements. Students who do not meet an agency's requirements will be denied access to that facility. It should be noted that the student is not considered an employee of the agencies involved, and has no claim for any employee benefits such as sick leave, vacation pay, social security, retirement benefits, worker's compensation or unemployment benefits. Students cannot make their own clinical agency arrangements as University and agency legal contracts are required.

## **Dress Code**

In all clinical experiences and professional contact with the public as a CSUC nursing student, students must follow the dress code. Faculty will inform students whether a uniform or professional attire is required. The School of Nursing must comply with the policies of various hospitals, clinics, and other agencies where clinical practice is scheduled. Students should be aware that additional dress restrictions and infection control policies might be required in specific departments of agencies or hospitals. Any other concerns will be addressed through your clinical instructor who has the final decision on dress code implementation. If unprofessional attire is reported in clinical agencies, students will be sent home. In addition, clinical grades may be lowered and preclinical access to patient records may be restricted. See

## Student Guidelines for School of Nursing Standards on Safe and Professional Nursing Practice.

In all areas:

- Acceptable jewelry includes only a wedding ring (or cultural wedding symbol), and a watch.
- Earrings must be studs only and are limited to no more than two per ear lobe.
- Necklaces will not be worn outside the uniform when providing patient care.
- No other visible body jewelry or piercing is permitted.
- No visible tattoos are permitted. Previous tattoos should be covered.
- Long hair must be worn up or back from the face, with no extravagant hair ornamentation.
- Hair may be dyed naturally occurring colors only.
- Make-up should be used only in moderation.
- No fragrances should be worn in clinical settings.
- Long fingernails are not permitted; nails must be kept neat in appearance and clean.
- No acrylic (false) nails will be allowed.

Some clinical areas will have more stringent requirements for jewelry due to potential safety hazards.

### Uniform

Uniform requirements for RN-BSN students will be discussed in the one clinical course (N478 Practicum in Community Health Nursing) orientation.

Under-garments must not be visible through the uniform; no thong underwear outlines should be observable

- Solid white or black shoes (in accordance with agency policy), with an enclosed toe and back. These shoes must be kept clean.
- CSU, Chico photo ID (in good condition) identifying you as a RN-BSN student; obtained during one of your orientation visits to campus or as coordinated by the RN-BSN Advisor/Coordinator.
- Lab coats will be white.

### Professional Attire

When a uniform (scrubs) is not required, **students must dress in a professional manner**. Regardless of the clinical agency setting, students must conform to the following:

- CSU, Chico photo ID name tag
- Tops must have sleeves
- No breast tissue or cleavage may be visible
- No skirt above knee length
- No open-toed shoes
- No shorts, no jeans, no short tops showing midriff
- No torn clothing.

**Note: During the COVID-19 pandemic, appropriate face coverings are also required.**

A laboratory coat **may** be required for your clinical. (Do not purchase unless your instructor tells you it is needed.) When a lab coat is worn, professional attire is always required. If required, the lab coat must be worn with your CSU, Chico photo ID name tag when in the hospital other than for clinical labs (for example, when selecting patients, going to medical records, or reviewing charts). These requirements are in accordance with contractual agreements with clinical agencies for individuals when in the agency in a professional student role.

## **Clinical Agency Requirements**

The following requirements must be completed and documentation submitted to SentryMD or Precheck by the date indicated in your course information handout for the upcoming semester. This is typically three to four weeks prior to the beginning of the semester. (See Appendix A — at end of this document). Students not submitting these requirements before the published deadline may be dis-enrolled from their courses, and/or will lose points in their clinical course(s). Additionally, if students are not compliant by the deadline, they are at risk of losing their clinical placement for the semester altogether. All clinical requirements must be current for the academic semester, through the last day of finals.

## **Health Insurance**

The University does not provide health insurance coverage for students. The Student Health Center provides limited treatment for illnesses or injuries while you are a registered student (if you have paid for these services) but no hospitalization, prescription medications, or special care. Some diseases or injuries you may risk could require long-term hospitalization and care. Therefore, supplemental major medical insurance coverage is required for students. You may purchase such a policy through the Student Health Center. Note that hospitals and other clinical agencies used for practica typically do not provide free services to you for emergency treatment if you are injured in that agency. If such care is given you will be billed by the hospital.

If you receive financial aid, you may include the added cost of the insurance on your financial aid request. The student is responsible to determine that health insurance coverage includes provisions for emergency room visits or other immediate care in the event of a needle stick or other high risk exposure in the clinical setting, as well as the costs of anti-HIV drugs if the physician determines they are warranted. For example, Kaiser coverage does not always extend to emergency room visits out of their area of service.

Since the School of Nursing policy for needle stick and other blood borne pathogen exposures may involve an emergency room visit and may require an initial course of anti-HIV drugs, started within one hour, complete insurance coverage is especially important. These costs could easily reach \$1000 or more for the initial incident. If you have to start on anti-HIV drugs for a prolonged period, it would be quite expensive. Several students experience needle sticks each year, so it is not an uncommon problem.

Please note that Student Health Services provided on campus are not available evenings and weekends, do not cover emergency room treatment, or the costs of anti-HIV therapy, so additional coverage is necessary. Supplemental health insurance may be purchased through CSU, Chico's student accident and sickness insurance plan at the time of registration. Descriptions of the policy are available online at: <https://www.csuhealthlink.com/>

## **Automobile Access and Insurance**

Laboratory experiences are in various settings such as health departments and schools through-out the state, and require that students have access to a car. A current driver's license and automobile registration are mandatory. The car MUST be insured with an agency that is registered in the State of California. Currently, the minimum acceptable coverage in the state of California is for bodily injury of \$15,000/\$30,000 and for damage to the property of a third person of \$5,000. The public and mental health agencies require an Affidavit of Coverage in order for the student to be assigned for experience. Insurance verification is required in all semesters of the nursing program prior to enrolling in clinical courses.



## Basic Life Support (BLS)

You must hold a current BLS card from either the American Heart Association (AHA) or American Red Cross (ARC). AHA certification is highly encouraged. ARC certification currently meets the requirement, but facilities have discussed switching to AHA certification only.

## Immunizations

The School of Nursing at CSU, Chico requires all new students to have the following immunizations and tests (listed below) before beginning the N478 Practicum in Community Health Nursing course; they are to be kept current throughout the semester. Immunizations may be obtained at the Student Health Center or any CSU Health Center (if you have paid the extra fees to cover the Health Center), any Public Health Department, or by a healthcare provider of your choice.

Also note that it is assumed that all new students have previously received the usual childhood immunizations (which are required during public school attendance) for: diphtheria, tetanus, whooping cough, measles, mumps, rubella, varicella (chicken pox), and polio. If a student has not had these immunizations, or is unsure, it is highly recommended the student discuss their past immunization history with their personal healthcare provider and obtain the appropriate immunizations or have titers drawn to verify immunity.

### Requirements

Vaccine/Test	Requirement
TB Testing	***2 negative PPD skin tests. Tests can be 1 to 3 weeks apart. In lieu of the PPD tests, a negative Quantiferon Gold Test or a clear chest x-ray will be accepted.
*Measles, Mumps, & Rubella (MMR)	2 vaccines (after age 12 months) or a positive titer
Hepatitis B	3 vaccines or a positive titer
*Varicella (Chicken Pox)	2 vaccines or a positive titer
Tdap	1 dose in last 5 years (must be age 19 or older at time of last booster). Td vaccine is not acceptable.

Other Items	Requirement
BLS	American Heart Association (recommended) or American Red Cross (this may not be accepted at some facilities)
Auto Insurance	**Proof of active coverage with your name on the documentation
Personal Health Insurance	**Proof of active coverage with your name on the documentation
Dependable Transportation	Proof does not need to be submitted, but you will be expected to attend all off site/clinical classes

**\*For MMR and Varicella, you must complete your TB tests prior to receiving a booster if one is required.**

\*\*It is acceptable to be on your parent's or spouse's policy; however, you must be able to provide documentation showing you are on the policy.

\*\*\*For TB renewal, a single PPD skin test fulfills the requirement as long a year has not passed between tests.

## **Professional Liability Insurance Coverage**

There is also the risk that you could be sued for malpractice as a result of your participation in nursing practica. We strongly recommend (not required) that you purchase professional liability insurance prior to beginning practicum courses although the University currently maintains a blanket policy which provides some coverage for students enrolled in clinical courses. The cost for such policies is low. For example, the cost for professional liability insurance for a student nurse through the Nurses Service Organization (NSO) <http://www.nso.com/professional-liability-insurance/student-coverage.jsp> as of summer 2016 was \$23.00 annually. To better protect yourself, never accept responsibility for procedures for which you feel you lack the education, training, or skill set required. Follow clinical policies regarding faculty and staff supervision.

## **Background Checks, Drug Testing and Verification of Immunizations**

To participate in clinical courses, all students in the program must have a background check and 10-panel drug screen completed through SentryMd or Precheck (See Appendix B). No other background clearances or drug tests you may have received can be used to meet this requirement. **By virtue of your enrollment in the CSU, Chico School of Nursing, you are authorizing the School to release any and all information contained in your background check and drug screening to any clinical facility that may require that information to approve your participation in clinical courses there.**

The package set-up also includes document storage. At the end of the order process, you will be prompted to upload specific documents required by the School for immunization, medical or certification records.

The background check searches multiple databases including the following listed below. The package price includes a search of all counties of residence, within the last seven years. Additional county criminal searches will be performed at no additional cost.

- County Criminal Records
- Nationwide Database
- Nationwide Sexual Offender Index
- Nationwide Healthcare Fraud & Abuse Scan
- Social Security Verifications
- Residency History

Any prior convictions (particularly those related to child abuse, sexual abuse, violent crimes, etc.) will likely result in students being barred from access to clinical settings which involve vulnerable populations. In addition, several of the clinical agencies (as part of our contracts) in which we place students, require us to report any misdemeanors, especially those that are less than three years old. It is possible that a clinical agency may refuse to allow a student to complete a clinical rotation in their agency as a result of an infraction. In such a case, the School of Nursing would do what it could to place this student with another agency to complete clinical requirements, but this alternate placement would be contingent upon the agency's review of those background check results and their willingness to take that student into their clinical agency.

Students with any disciplinary action on their RN license should notify the RN-BSN Coordinator

immediately. The Director of the School of Nursing will review disciplinary documents and determine eligibility of clinical placement.

### **Student Expectations in Clinical Courses**

- \* Notify N478 faculty of scheduled days/times at your clinical agency, once arranged with your preceptor.
- \* Communicate with N478 faculty ANY schedule/time changes BEFORE date of change.
- \* Communicate with assigned preceptor about plan for the shift.
- \* Communicate any concerns about patient health or safety to preceptor as soon as possible.
- \* Provide periodic updates as needed.
- \* Do not perform procedures without preceptor's supervision.
- \* Follow all safety measures while administering all medications including vaccines, and testing agents.
- \* Maintain patient care within your scope of practice (i.e. RN licensure).
- \* Adhere to policy and procedure statements of institution/agency in which Community Health Practicum course is held.
- \* Carry out plan of care as it exists - consult preceptor if you want to make changes in plan of care or initiate additional interventions.
- \* Before leaving:
  - Double-check that all meds are given and signed on the correct record.
  - Make certain you have charted all your patient care.
  - Report off to preceptor.
- \* Take advantage of all opportunities to learn.
- \* Be professional in dress and behavior.
- \* Post your assignments by the due date.

### **Clinical Absence Policy**

Clinical practicum experiences are required for students to successfully complete this program. Students are required to report in to all clinical experiences and be on time. If the student will be late or absent, the student must notify the clinical instructor before the experience begins or as required by the instructor. Any absence in which the instructor is not notified will be considered unexcused and cannot be made up.

Clinical absence make-ups must be arranged by the instructor. Absences of more than 10% of total clinical time due to accidents, illness, pregnancy or other circumstances may result in students failing the clinical course. This is regardless of whether make-ups are completed.

Failure to comply with any of the above will result in the clinical grade being lowered or failure of the clinical course. A "Report of Absence or Missed Deadline" form must be completed for each missed clinical experience or late arrival to clinical. See the course syllabus for specifics related to that clinical experience.

### **Reporting an Illness or Accident**

1. If unable to attend an on-campus orientation or clinical assignment, the student must notify the instructor. (Instructors should be notified ahead of time except in the most emergent situations). Exposure to any contagious disease must be reported immediately to the appropriate clinical instructor.

2. If physical illness and/or emotional problems are noted by the instructor to be interfering with a student's ability to function in either the classroom or clinical area, the student may be required to obtain a physical examination and/or psychological counseling, as appropriate, in order to continue in the course.
3. In case of illness, students are financially responsible for providing their own medical care.
4. If a student is involved in an accident occurring either on campus or during a clinical session, the student should report that accident to his/her instructor immediately, who will then immediately notify the School of Nursing. If the injuries are more substantial than can be treated by the Student Health Center, the student should seek treatment in a hospital emergency department or emergency care center. Treatment costs are typically borne by the student. An accident form and work-related injury and illness incident report (OHSA 301 form) must be filled out by the instructor within 24 hours of the accident and submitted to the Director of the School of Nursing.
5. If you have any injury in the clinical setting, fill out an accident form with your clinical instructor. Include the same information you would include on an incident report. Students generally are held accountable for all costs incurred for needed medical treatment. Non-emergency accidents should be followed up at the Student Health Center.
6. For needlesticks and/or potential infectious exposures, the Blood borne Pathogen Policy will be followed.

## **Potential Risks Involved with Nursing Practica, Related Policies, and Procedures**

As a reminder, nursing is a profession with many rewards, but one that is not without some risks. As you enter the RN-BSN program, you should be aware of these risks, and of ways in which you and the nursing faculty and preceptor will work to minimize those risks. Please read carefully. Ask questions if you want more information. You will sign one copy and keep one copy for your reference.

- I. **Exposure to Communicable Diseases.** There are many. The most serious of these are HIV (Human Immune deficiency Virus, which can lead to AIDS); Infectious Hepatitis (which can cause liver damage and may cause liver cancer); tuberculosis (which has some strains resistant to treatment).

Precautions:

- a. Standard precautions (formerly referred to as universal precautions) for handling body fluids and contaminated items.
- b. TB clearance and up-to-date immunization documents are required to be uploaded to the Clinical Requirements documentation program prior to beginning your Community Health Practicum course.
- c. Students must follow the agency's isolation protocols when caring for patients with highly communicable infections and methods for handling contaminated instruments, such as needles.
- d. Be aware of open cuts and abrasions on your own body, and protect them from exposure to patient body fluids.

- e. Report any exposure (sticking yourself with a needle, splashing of body fluids, caring for patients who later are determined to have a contagious disease, etc.) to your clinical instructor immediately.
- f. If you are particularly vulnerable to infection, i.e. have recently had radiation therapy or any type of immunosuppressive therapy, or have any chronic condition that limits your immune response, you must make your clinical instructor aware of the problem. You will be asked to submit verification from your healthcare provider as to your ability to participate in the clinical course.

**II. Musculoskeletal injuries due to moving/lifting patients.** Back injuries are common problems for nurses.

Precautions:

- a. Use proper body mechanics and proper techniques when assisting patients.
- b. Report any injury, even if minor, to your preceptor and instructor immediately.

**III. Exposures to medications and chemical products.** It is possible to react to drugs you work with if you have an allergy to them. For example, some drugs are toxic and require special handling; some general anesthesia gases may be linked with high rates of miscarriage; latex is a component in gloves that nurses use daily and is a common cause of allergic reactions.

Precautions:

- a. Discuss allergies with your clinical instructor to determine any necessary modifications needed when you work with these products.
- b. Look up all drugs you give or that are being given to your patients. If special handling is indicated, look up the agency protocol.
- c. Be aware of the ingredients of solutions you are using or administering to patients.

**IV. Exposure to X-rays and other forms of radiation.**

Precautions:

- a. Do not stay in your patients' rooms when X-rays are being done. If a patient needs to be attended during an X-ray, get proper shielding (unless you are pregnant, in which case, get someone else to attend the patient).
- b. If your patient has radioactive implants, look up the protocol and discuss with your instructor before you give any patient care.

**V. Exposures for Pregnant Students.** The School of Nursing and its faculty cannot eliminate all risk factors faced by pregnant students in the clinical setting and pregnant students are not covered by the University for any accidental exposures or health problems related to clinical experiences. Exposures to some infectious diseases may be of great consequence to the developing fetus. As a result, a primary health care provider's consent to fully participate in the clinical setting is required of all pregnant nursing students.

Pregnant students must seriously consider what, if any, increased risk there is to the pregnancy from exposure to contagious disease, environmental agents, radiation, chemotherapeutic drugs and physical exertion in the clinical setting. The pregnant student should discuss these issues with her prenatal healthcare provider in making her decision on whether to participate in clinical courses.

Pregnant students may choose to take a leave from the nursing program for medical reasons, or to

postpone the clinical portion. Ability to return to clinical courses following a leave will be dependent on space availability. Pregnant students who continue in the program with healthcare provider's consent must be vigilant to avoid undue risks, such as exposure to X-rays, volatile gases such as anesthetics and cancer chemotherapy drugs. Be especially careful to abide by standard precautions (see clinical policies). Be certain to consult with your clinical instructor if you have any indication that a client has an infectious disease.

**Precautions:**

- a. Complete all required immunizations before entering the program. If you are pregnant on entering the program, consult with your healthcare provider before completing the immunizations.
- b. Inform your clinical instructor and the director of the program as early as you are aware of being pregnant.
- c. Check with your prenatal care provider as soon as you learn you are pregnant, to discuss these risks. Your prenatal care provider must verify that you are physically able to participate in the Community Health Practicum course and indicate if any reasonable accommodations are needed. Please notify your instructor of any changes that might impact your health or safety during clinical.
- d. Notify your instructor of any risk of exposure you may have had during clinical and your prenatal care provider of any exposures.

- VI. **Travel to and from clinical settings.** You may be traveling early or late hours, for distances requiring up to 90 minutes of driving each way.

**Precautions:**

- a. You must wear your seat belt and obey traffic laws.
- b. Keep your car in good repair.
- d. Keep your car doors locked.

- VII. **Dealing with an unpredictable public.** Clients who are ill may have unpredictable behavior. Likewise, distraught families may act unpredictably. Always be alert for and protect yourself against potentially violent situations. Precautions: Review agency policies regarding security so you know how to get help immediately.

- VIII. **Home visits.** You may be in unfamiliar neighborhoods, visiting clients who may be from abusive families, violent backgrounds, etc.

**Precautions:**

- a. Never visit a patient in the home setting unless your instructor or agency preceptor has reviewed the need for the visit and the parameters of the visit.
- b. If you are unsure of your safety, arrange to meet the client at a neutral, public place.
- c. Follow protocol for home visits, including detailed safety guidelines in your Community Health Practicum syllabus/supplement.

## Standard Precautions

In order to protect nursing students against a broad range of bloodborne diseases that are transmitted by direct or indirect contact with infective blood or other body fluids, the School of Nursing has adopted a policy of standard body substance precautions. Infectious diseases requiring such precautions are those that result in the production of infective blood or body fluids and may include, but not limited to,

Hepatitis B, Hepatitis C, Human Immunodeficiency virus (AIDS), Syphilis and other sexually transmitted infections, Malaria, Leptospirosis, Creutzfeld-Jakob diseases, and the arthropod-borne viral fevers such as dengue fever, yellow fever, and Colorado tick fever or others that produce infective body fluids.

Body substances include blood and all body fluids. Standard refers to the blood and body fluids of all patients, not just known infected patients. Treating all patients' blood and body fluids as hazardous provides the best protection for student nurses without compromising patient care and confidentiality. Standard precautions which are expected to be followed:

1. Standard precautions apply to blood and other body fluids containing visible blood. **BLOOD IS THE SINGLE MOST IMPORTANT SOURCE OF HIV, HBV, AND OTHER BLOODBORNE PATHOGENS IN THE OCCUPATIONAL SETTING.**
2. All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids of any client is anticipated. Gloves should be worn when touching blood and body fluids, mucous membranes, or non-intact skin of all clients, for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other body fluids. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or other body fluids.
3. Standard precautions are intended to supplement rather than replace recommendations for routine infection control, such as hand washing and using gloves to prevent gross microbial contamination of hands.
4. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or body fluids. Hands should be washed immediately after gloves are removed.
5. All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures, when cleaning used instruments during disposal of used needles, and when handling sharp instruments after procedures.
6. **DO NOT RECAP** used needles by hand; do not remove used needles from disposable syringes by hand; do not bend or break or otherwise manipulate used needles by hand. Place used disposable needles, syringes, scalpel blades, and other sharp items in puncture-resistant containers for disposal. Locate the puncture-resistant (Sharps containers) as close to the use area as is practical.
7. Use sterile gloves for procedures involving contact with normally sterile areas of the body. Use examination gloves for procedures involving contact with mucous membranes unless otherwise indicated and for other client care or diagnostic procedure that do not require the use of sterile gloves. Gloves should be changed after contact with each client. Do not wash or disinfect surgical or examination gloves for reuse. Use general purpose utility gloves (e.g. rubber household gloves) for housekeeping chores involving potential blood contact and for instrument cleaning and decontamination procedures.
8. Health care workers who have exudative lesions or weeping dermatitis should refrain from all client care and from handling client care equipment until the condition resolves.
9. Although saliva has not been strongly implicated in HIV transmission, to minimize the need for

emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, and other ventilation devices should be available in areas where the need for emergency mouth-to-mouth resuscitation may be required.

10. Handle soiled linens as little as possible and minimize shaking or other agitation to diminish contamination of air and personnel. Wet linen soiled with bloody fluids must be placed in leak resistant bags in the room in which it was used.
11. Put all specimens of blood and body fluids in well-constructed containers with secure lids to avoid leakage during transport. Avoid contaminating outside of container when collecting specimen.
12. Follow agency policies for the disposal of infective waste, both when disposing of and when decontaminating materials. Excretions containing blood should be poured down drains that are connected to a sanitary sewer.

Students are responsible for learning and complying with the written policies of the hospital or agency to which they are assigned for clinical experience.

### **Bloodborne Pathogen Exposure Nursing Student Protocols**

This document provides a guide to safeguarding your health following an exposure to blood-borne pathogens in the clinical setting. Keep this document handy when in clinical or refer to the School of Nursing website. Keep information on your health insurance handy as well. All costs involved in your testing and treatment are your responsibility. Your name badge for clinical should have an abbreviated list of steps to take in a Bloodborne pathogen exposure.

In the event that you experience a needle stick, cut, mucous membrane exposure or non-intact skin exposure (i.e. chapped or abraded skin) to:

- blood,
  - fluids containing blood,
  - other potentially infectious fluids (semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids) follow the procedures below:
1. Clean the area exposed immediately. For needlesticks or cuts, use soap and water to wash the area. For eye exposure, irrigate the area with clean water or saline. For splash exposures on nose, skin or mouth, flush the area with water.
  2. Immediately report, within 10 minutes, this exposure to your clinical instructor and preceptor or staff nurse, who should report to the nursing supervisor.
  3. With the assistance of your instructor or staff nurse, determine the risk of transmission and the status of the source (patient). Use the attached Public Health Service Guidelines to determine the exposure code and the HIV status code of the exposure source.  
Consider:
    - the type of exposure (intact skin, mucous membranes, percutaneous)
    - the type of fluid involved
    - depth of puncture
    - volume of fluid



- duration of contact
- age of specimen

Assess the Source (patient):

- Assessment of any risk factors for blood borne pathogens (history of IV drug use, blood transfusion or organ transplants prior to 1992; chronic hemodialysis; high risk sexual behaviors; received clotting factors before 1987.
- History of Hepatitis B, Hepatitis C or HIV?
- If known HIV positive, is there information on viral load or treatment history?
- Obtain HIV antibody, Hepatitis B surface antigen (HbsAG), Hepatitis B core and surface antibodies, and Hepatitis C antibody levels on the source patient if possible. If the patient is hospitalized, the patient's healthcare provider will be contacted and the patient will be asked for informed consent to have blood work drawn. Some hospitals can obtain stat results from an HIV test in 20 minutes.
  - If the patient is in a community setting, the patient's healthcare provider must be contacted for the lab work order, the patient must consent to the lab work and to the release of the results to your healthcare provider. Assistance may be needed to get the patient to the designated lab. The nursing instructor or preceptor may assist with this process. Cost of the lab work will usually not be covered by the patient's insurance coverage or by the agency where the injury occurred. The student will usually be responsible for the lab costs for the patient blood draw. (The student's health insurance is usually not willing to pay for lab work for the source patient, though this may be negotiable).
  - In community settings that don't have access to the STAT HIV test, you may not know the patient source HIV status for several days. In this case, you may start the PEP regimen, and then discontinue it once you know the patient's HIV status is negative.

If the combination of the exposure code and the HIV status code for the patient indicate that post-exposure prophylaxis (PEP) is needed (i.e. treatment with anti-HIV drugs), treatment should be started within one hour of the exposure. If the exposure code and the HIV status code for the patient are low, treatment may not be indicated, but the decision should be made within one to two hours, in consultation with a physician.

4. Seek treatment within one hour. Time is of the essence.

- Use hospital emergency rooms or prompt care centers that are close to you. Urgent care or prompt care type facilities may be able to get you in more quickly than a full-service ER. In Chico, Enloe Prompt Care on Cohasset or Bruce Road are recommended.
- The Student Health Center cannot do the initial lab screen and does not carry the PEP drugs.
- You may also contact your own healthcare provider, but don't delay getting treatment if you can't see your own healthcare provider within one to two hours.
- Treatment includes drawing baseline lab values for the student (HbsAG, Hep C antibody and HIV).
- All costs of lab work and treatment are the responsibility of the student. The institution or the agency where the exposure occurred has no responsibility to provide any testing or treatment related to the exposure.

1. A hotline for health professionals is available to help guide you through the process: 1-888-448-4911. This is staffed Monday through Friday 6:00 am to 5:00 pm, and Saturday and Sunday 8:00 am to 5:00 pm. Besides the initial lab work and decision about the need for PEP, the following is recommended:

Tetanus - If your last tetanus booster was over five years ago, get another.

### Hepatitis B

- If your HbsAG results indicate you are a ‘non-responder’, you will need a Hep B vaccine booster. You may be recommended to repeat the entire Hep B series.
- If the source (patient) was Hep B positive or unknown, you will likely need Hep B Immune Globulin (HBIG) also.
- If you have not yet completed the Hep B vaccine series, tell your healthcare provider where you are in the series to decide when the next booster should be given.
- No routine follow-up after treatment for Hep. B is recommended because postexposure treatment is highly effective.
- Report symptoms of hepatitis (yellow eyes or skin, loss of appetite, nausea, vomiting, fever, stomach or joint pain, extreme tiredness).

### Hepatitis C

- There is no vaccine against HCV, and no treatment after exposure that will prevent infection.
- Obtain baseline HCV testing, and testing 4-6 months after exposure.
- Be aware of signs and symptoms of hepatitis (see above) and report to your healthcare provider.

### HIV

- After baseline testing, follow-up testing should be done at 6 weeks, 12 weeks and 6 months. (Student Health Center can do the follow-up testing).
  - If you start PEP, you should be checked for drug toxicity (CBC, kidney and liver function tests) before starting treatment and two weeks after starting treatment.
  - Report sudden or severe flu-like illness, especially if you have fever, rash, muscle aches, tiredness, malaise, or swollen glands.
  - Follow recommendations for preventing transmission of HIV (don’t donate blood, organs, semen; avoid sexual intercourse or take precautions; avoid breast feeding).
2. Complete an accident form at the School of Nursing. This must be completed and received by the School of Nursing no more than 24 hours after the injury.
  3. Other information is available at:  
[www.cdc.gov/ncidod/diseases/hepatitis/index.htm](http://www.cdc.gov/ncidod/diseases/hepatitis/index.htm) (hepatitis)  
[www.cdcnpin.org](http://www.cdcnpin.org) (National Prevention Information Network)  
[www.cdc.gov/niosh](http://www.cdc.gov/niosh) (National Institute for Occupational Safety & Health)  
[www.cdc.gov/hiv](http://www.cdc.gov/hiv) (HIV/AIDS)

## **Substance Abuse and Patient Safety: The Risks and the Consequences**

### **Chemical/Substance Abuse in Nursing**

An estimated 144,000 – 192,000 of nurses (or 6-8%) have a chemical impairment problem. Surveys of these nurses indicate that at least 22% of them may have been chemically impaired during their nursing

education. Several factors were identified by these nurses that may have contributed to the dependence:

1. Family history -- children of alcoholics, or of dysfunctional families, which often lead to lack of positive self-concept and positive coping skills;
2. Economic status -- too little money was a source of stress; too much money was a factor in opportunity, permitting purchase of drugs or alcohol;
3. Social environment -- lack of strong support systems, or peer pressure to use chemical substances;
4. Negative self-perceptions, which were disguised by chemical use;
5. Pleasant sensations accompanying chemical use;
6. Nursing focus -- allowed students to focus on caring for others, while ignoring their own problems; also, a lack of curriculum content on chemical dependence in the professional caregiver.

It is important that nursing students be aware of the magnitude of the problem of substance abuse in nursing. It is also important that the problem be identified early, and that appropriate help is sought before someone's career is affected. There are many support programs on campus and in the community to help with the problem. The greatest difficulty is breaking through the denial of the person experiencing the problem. In nursing, it is sometimes difficult to accept that one or one's colleagues may actually be chemically impaired.

The following are signs/symptoms of student alcohol/substance use: unexplained drop in grades (although many impaired students are high achievers); irregular school attendance; odor of alcohol on breath in class; change in health or grooming; desire to be isolated or secretive; decreased interest in school organizations; performance shrinkage; frequent "flu" episodes, chronic cough, chest pains or "allergy" symptoms; unexplained mood changes -- irritability, hostility; sudden verbal mistreatment of peers or clients; impaired short term memory; frequent accidents; being hospitalized or arrested because of drinking or drug-related behavior.

If you feel you have a problem, please be willing to discuss it with your assigned nursing advisor or someone on the faculty to whom you feel close. The Campus Alcohol & Drug Education Center (CADEC) can also provide education, assessment and support. It is located in the Student Services Center, 190, at 898-6450. Hours are M-F, 8 a.m.-5 p.m. If you feel one of your colleagues has such a problem, you may wish to discuss with your faculty advisor, for advice on how to confront the individual and encourage him/her to seek help. If a student is impaired in the classroom or clinical setting, it is imperative that a faculty member be informed immediately, at the time of the incident. There is too much at stake for all of us to have a student who is impaired interacting with patients. You do have the right and the obligation to act on your concern about impaired peers. Students may register formal complaints if they are aware of incidents or behaviors that indicate chemical impairment. This process can be initiated by discussing your concerns with the semester coordinator or the Director. We need to direct as much concern to caring for ourselves and our peers as we do for our clients.

## **Policy for Students Suspected of Drug or Alcohol Use/Abuse/Dependency**

The California Board of Registered Nursing states that instructors have the responsibility and authority to take immediate corrective action with regard to the conduct and performance of students suspected of chemical abuse. If a nursing instructor suspects such impairment, he/she or the Director of the Nursing Program (or his/her designee) will immediately confront the student and remove the student from the classroom or clinical setting for drug testing. A letter of concern documenting the incident will be sent to

the Office of Student Judicial Affairs for formal disciplinary follow-up. Re-entry into the classroom or clinical setting is contingent upon acceptance by the student of all stipulations set forth by the Student Judicial Affairs Coordinator and the Director of the School of Nursing.

The above policy is in compliance with the guidelines of the California Board of Registered Nursing (BRN).

In the matter of nursing students impaired by alcoholism, drug abuse and emotional illness, the California Board of Registered Nursing recognizes that:

- a. these conditions are diseases and should be treated as such;
- b. personal and health problems involving these diseases can affect students' academic and clinical performance and that the impaired nursing student may pose a danger to self and a grave danger to the patients in her or his care;
- c. nursing students with these diseases can be helped to recover;
- d. it is the responsibility of the nursing student to voluntarily seek diagnosis and treatment for any suspected illness
- e. confidential handling of the diagnosis and treatment of these diseases is essential.

The Board expects that [nursing instructors] have the responsibility and authority to take immediate corrective action with regard to the student's conduct and performance in the clinical setting.

It is outside the Board's scope of function to endorse or recommend a particular course of therapy; however, it does wish to inform nursing students of the importance of seeking voluntary aid for conditions that could, if left unattended, may prevent them from being licensed to practice nursing in the State of California. (Board of Registered Nursing, 2007. EDP-B-03)

Because patient safety is of the utmost concern, a nursing instructor in any classroom or clinical setting is expected to take immediate corrective action if a student, from a professional discipline such as nursing, who provides patient care, is suspected based on inappropriate conduct, physical symptoms or other indicators of being under the influence of drugs or alcohol. If substance use/abuse is demonstrated, a student can be dismissed from the nursing program.

The School of Nursing adheres to the following clear prohibitions regarding drugs and alcohol.

Students may not possess, or be under the influence of alcohol or any drug while in clinical or nursing classroom settings.

1. Students may not be under the influence of drugs, i.e. controlled substances, or prescription drugs, when there is the possibility that such use may impair the student's ability to safely perform nursing care, or impair the learning in a classroom setting.
2. Even though California has legalized marijuana, students must have a clear drug test to participate in clinical activities. Note: According to the National Institute on Drug Abuse, "Marijuana has negative effects on attention, motivation, memory, and learning that can persist after the drug's immediate effects wear off—especially in regular users" and further, even though some states have approved the use of marijuana for prescription, "the FDA, which assesses the safety and effectiveness of medications, has not approved marijuana as a medicine" (US Department on Health and Human Services, March 2014). Website: [http://www.drugabuse.gov/sites/default/files/parents\\_marijuana\\_brochure\\_0.pdf](http://www.drugabuse.gov/sites/default/files/parents_marijuana_brochure_0.pdf) Consequently, the use of medical marijuana while in the nursing program is strictly prohibited.

3. Students may not be involved in the illegal possession, distribution, sale, diversion or purchase of a controlled substance.

Nursing faculty are obligated to take immediate action if a student involved in School of Nursing courses is suspected, based on inappropriate conduct, physical symptoms, or other indicators, of being under the influence of drugs or alcohol. The following policy describes actions that may be taken when students are suspected of violating drug or alcohol policies. The School of Nursing Student Guidelines describes risk factors, signs and symptoms, and resources for dealing with alcohol and drug abuse and dependency.

### **Indications for Suspicion of Drug/Alcohol Impairment, Abuse, or Dependency:**

#### Behaviors:

1. Observed/reported possession or use of a prohibited substance
2. Apparent drug or alcohol intoxication
3. Observed abnormal or erratic behavior
4. Deterioration of classroom or clinical performance
5. Medication diversion
6. Unusual behavior such as verbal abuse, physical abuse, extreme aggression or agitation, withdrawal, depression, mood changes, or unresponsiveness; inappropriate responses to questions or instructions; other erratic or inappropriate behavior such as hallucinations, disorientation, excessive euphoria, confusion.

#### Physical signs or symptoms:

1. Possessing, dispensing, or using controlled substance
2. Slurred or incoherent speech
3. Unsteady gait or other loss of physical control; poor coordination
4. Bloodshot or watery eyes
5. Dilated or constricted pupils or unusual eye movement
6. Extreme fatigue, drowsiness, sleeping
7. Excessive sweating or clamminess of the skin
8. Flushed or very pale face
9. Highly excited or nervous
10. Nausea or vomiting
11. Odor of alcohol on breath, body or clothing
12. Odor of marijuana
13. Dry mouth
14. Dizziness or fainting
15. Shaking of hands or body tremor/twitching
16. Irregular or difficult breathing
17. Runny sores or sores round nostrils
18. Inappropriate wearing of sunglasses
19. Puncture marks or “tracks”
20. Disheveled appearance

#### Behavioral patterns:

1. Repeated absences
2. Frequent absences from work area
3. Frequently coming in late or leaving early
4. Alternate periods of high and low productivity
5. Complaints from patients, families, staff or other students

6. Making poor decisions or using poor judgment
7. An increase in errors, forgetfulness, and difficulty following instruction
8. Accidents related to apparent lack of concentration.

Procedures:

1. Faculty or peers who suspect a student of alcohol or drug use/dependency (based on behaviors consistent with impairment or reported by individuals who directly observed such behaviors) will document specific behaviors or evidence of such impairment. These concerns will be reported to the Director who will determine the action to be taken. If the Director and involved faculty feel further investigation or action are warranted, any of the following may occur (actions are not limited to this list):
  - a. A warning, with continued observation; confidential consultation with all other nursing faculty who have contact with the student will occur, to involve them in continued observation.
  - b. Immediate request for a body fluid screen for alcohol or drugs. All costs of testing will be borne by the student. Refusal to comply with testing will result in immediate dismissal from the nursing program.
  - c. Referral to a drug or alcohol counselor for assessment of drug or alcohol problems. Resources will be suggested to the student; choice of counselor will be made by the student. All costs will be the responsibility of the student. The student will be asked to release provider recommendations to the School of Nursing.
  - d. Immediate administrative probation, resulting in removal of the student from all clinical courses. The student will be subject to a contract that must be signed and adhered to for continued participation in any portion of the nursing program.
  - e. Referral to Student Judicial Affairs for disciplinary action as appropriate.

The student's transcript could be marked to indicate School of Nursing Administrative Probation.

2. If reasonable suspicion of alcohol or drug use occurs in the classroom or clinical setting, the student will be immediately removed from that setting. The faculty member will discuss the concerns with the student. If reasonable suspicion still exists, the Director of the School of Nursing (or assistant director or Nursing Executive Committee member in his/her absence) will be informed and will determine what actions need to be taken. Screening for drugs or alcohol will be required. The student must give consent for such testing, and authorization for results to be made available to the School of Nursing.
  - a. If use of alcohol is suspected, the student will be transported to a testing site or the university police and will be required to submit to a breath test. If the student is in a clinical setting distant from campus, a blood alcohol may be drawn at an available health care agency.
  - b. If drugs are suspected, the student will be required to provide a witnessed urine sample or a blood sample. Such testing may occur at the Student Health Center during regular hours or at a healthcare agency such as a hospital emergency department or a prompt care center.
  - c. All testing costs will be borne by the student.
3. Contract Procedure - Any student with admitted or proven drug/alcohol abuse/dependency, or who has a pattern of impaired behaviors will be subject to the terms of a contract in order to continue in the Nursing program. The contract will include, but is not limited to:
  - a. A requirement for psychological counseling and rehabilitation, with verification provided to the School of Nursing. Costs of such counseling will be the responsibility of the student. Periodic reports from the counselor to the Director of the School of Nursing will be required.

- b. Consent by the student for random body fluid screens at the request of the School of Nursing. Any costs for testing will be the responsibility of the student. Refusal to submit to testing or failure to appear when requested for testing will be considered a positive test result and will lead to immediate and permanent dismissal from the nursing program.
  - c. Agreement by the student to absolutely refrain from use of involved substance(s) (e.g. alcohol, controlled substances and illicit drugs) during the period of the contract.
  - d. Program requirements for licensure will not be considered met until the student is determined to be rehabilitated by the School of Nursing Executive Committee, even if all coursework has been completed (i.e., the student will not meet the presumption of meeting the professional/ethical requirements of the program until a program of rehabilitation is complete). Normally, a student will not be certified to the Board of Registered Nursing as having met all the program requirements for licensure until one full year of negative random body fluid screens have been obtained.
  - e. Agreement that the concerns and conditions imposed for rehabilitation may be released to the Board of Registered Nursing at the time the student applies for Licensure (this includes all state boards where nursing licensure is applied for).
  - f. Violation of the terms of the contract will result in permanent dismissal from the program.
4. General Guidelines Governing Re-entry of Impaired Students into Classroom and Clinical Settings
- a. A student with known or suspected chemical impairment may participate in on-campus nursing courses if a contract is in place, and the student adheres to the terms of the contract.
  - b. Normally\*, a student with known chemical impairment will be restricted from participation in clinical courses until one year of negative random body fluid screens have been obtained.
  - c. A student with known chemical impairment will be restricted from access to controlled substances in the clinical setting. The student absolutely will not administer narcotics; will not work with PCAs, narcotic patches, or other drugs with abuse potential as specified in an individual contract. Students must notify the clinical instructor immediately when patients have changes in narcotic orders.
  - d. An impaired student who is readmitted to clinical courses must agree to inform immediate nursing supervisors on the day of care regarding the chemical impairment contract. All nursing faculty involved with the student will also be informed of the conditions of the contract.
  - e. Depending on the nature of the chemical impairment, the student may be restricted from participating in those clinical courses where supervision is less available, where the student might have access to prescription drugs in client homes, or might be exposed to illicit drugs in client homes.

*\*"Normally" is used to allow discretion based on type of impairment, course of rehabilitation, and recommendations of the School of Nursing Executive Committee.*

## Academic Policies

### Testing Policy

Exams must be taken as scheduled. Make up exams may or may not be allowed as specified in the course syllabus and at the discretion of the instructors

### Academic Standing

A student must be in good Academic Standing in all University courses before and during the nursing program. All courses taken to fulfill nursing major course requirements must be taken for a letter grade except those courses specified by the department as Credit/No Credit grading only. All required courses must be passed with grades of "C" or higher. Progression in the professional Nursing sequence depends upon maintaining a cumulative grade point average of 2.3 in Nursing and grades of "C" or better in all courses required for the Nursing major. Students failing to maintain a 2.3 average in nursing courses will be placed on School of Nursing probation for one (1) semester. Students who do not achieve the 2.3 in that semester must petition in writing to the Executive Committee to progress in the program. The Executive Committee will decide if and how the student may proceed.

By policy, a student receiving a grade of C- or less in a Nursing course may not progress in the Nursing program. The student may petition the School of Nursing Executive Committee to review the application of the policy in his/her situation, if serious and compelling conditions contributed to a failing grade.

**Barring exceptional circumstances, students will not be allowed to repeat more than one course in the nursing program.**

Students who are admitted into the Nursing sequence are expected to progress through each semester in a pre-established sequential pattern. If that pattern is interrupted for any reason, students are not guaranteed that a clinical space will be available to them at a later time when they desire it. This applies to students who fail a clinical course and must repeat a semester, who stop out for pregnancy or illness, or who take a PEL (Planned Educational Leave) for any reason. Only 10 students can typically be accommodated in any clinical section. Students who step out of sequence will be allowed to enroll in subsequent clinical courses only on a space available basis and with the permission of the School of Nursing.

### Academic Honesty

Academic honesty is an issue of serious concern at this University and faculty expect students to maintain a high standard of academic integrity. When violations of academic honesty are uncovered, and charges are proved, the consequences are severe, and can include failure in a course, removal from the nursing program, and long-term suspension from the University.

The University has specific policies/definitions about academic integrity, including what constitutes plagiarism, cheating, and misuse of sources. Academic integrity is defined by the University as "a commitment, even in the face of adversity, to five fundamental values: honesty, trust, fairness, respect, and responsibility. From these values flow principles of behavior that enable academic communities to translate ideals to action." (Center for Academic Integrity. "Fundamental Values Project" 23 March 2004) Student and faculty responsibilities about academic integrity are clearly defined by the University. Please visit the site outlining EM 04-36 (revised 10/18/07), to read about these important topics and how they apply to you when completing and submitting work for all courses in the nursing program [http://www.csuchico.edu/fs/supporting\\_docs\\_as/4-21-11/EM%2004-36%20Academic%20Integrity.pdf](http://www.csuchico.edu/fs/supporting_docs_as/4-21-11/EM%2004-36%20Academic%20Integrity.pdf). It is the expectation of this program that students uphold the ideals of academic integrity. This means to



be knowledgeable about how to paraphrase and cite the ideas of other people correctly, to do your own work, to contribute equally when submitting group work, and to seek help through peer review, the instructor, or the literature if assistance in these areas is needed.

You should obtain a copy of the University memorandum and become familiar with the several categories of dishonest behavior that are the causes of most charges. Of particular importance are plagiarism, cheating on examinations, and misrepresentation.

The School of Nursing expects rigid adherence to academic honesty, as part of the professional code of ethics for Nursing. Any student who violates these policies is placing future patients at risk as well as jeopardizing their own career potential. If such students are not caught early, they may become unsafe practitioners. As a Nursing professional you share in the responsibility for reporting peers who may be jeopardizing their clients by cheating.

Academic honesty also applies to clinical situations, i.e., accurate reporting of clinical incidents to your instructor and integrity in all clinical interactions. Integrity includes respect for patient confidentiality. Resources for Students are provided by the University Writing Center:

*Avoiding Plagiarism*  
*What is Plagiarism*  
*Documentation*

*English as a Second*  
*Language*

*Proofreading & Editing*  
*English 130*

### **Marijuana Use Following Proposition 64**

On November 8, 2016 California voters passed Proposition 64 legalizing growth, possession and use of marijuana in the state. However, please be advised that the federal Drug-Free School and Communities Act and Drug Free Workplace Act require Chico State and all CSUs to certify that we are taking reasonable measures to prevent the illegal use of drugs on our campuses. If we were unable to do so, we would lose eligibility for federal financial aid for students as well as federal grants and contracts. (As you may know, drugs as defined under the federal Controlled Substances Act include marijuana.)

As a result, students should be aware that they may be subject to disciplinary action by the University for the use/possession/manufacture/distribution of marijuana products, regardless of their age, on University premises or at University-sponsored activities; storage of marijuana products or drug-related paraphernalia at on-campus residences or vehicles; and driving while under the influence of marijuana.

In addition, the passage of Proposition 64 does not change restrictions applicable to Chico State and the CSU concerning marijuana research. Although legal in California, cannabis remains a controlled, Schedule I substance under federal law. Because of this, the federal Drug Enforcement Agency continues to regulate the cultivation of marijuana for research purposes through licensing requirements. At this time the CSU does not anticipate a change in policy and will remain in compliance with federal law.

If you have any questions about this topic, please consult the offices listed below or contact Drew Calandrella at 898-6131.

Faculty Affairs – 898-5029  
Human Resources – 898-6771  
Student Judicial Affairs – 898-6897  
University Housing – 898-6325  
University Police Department – 898-5555

## Leaving the Program

Students sometimes decide to leave the nursing program, temporarily or permanently. Because readmission to the major is not guaranteed and remains highly competitive, students should consider decisions to drop out or stop out very seriously. It is very common for students to regret decisions and request readmission at a later time. Reinstatement is more likely if you follow the procedures below:

1. Consult with the RN-BSN Advisor.
2. Submit a letter to the Director, explaining your reasons for leaving the program, and your plans, if any, for re-entering at a later date.
3. Dropping a course – if you drop a course after census (Week 4 of the semester) you will NOT receive a refund of your fees for that class (per RCE policy regarding refunds of course fees).
4. If you are leaving the University, but plan to return at a later date, you should apply for a Planned Educational Leave (PEL). This type of leave will avoid the costs of reapplying to the University if you return within a specific time frame. PELs are available for up to one year. Forms are available online.

Re-entry to the program is contingent on space availability in the cohort you wish to re-enter. You should petition to re-enter the semester before you wish to return. The Executive Committee of the School of Nursing evaluates all petitions and ranks them in the event that space is limited.

Priority for re-entry is usually given to those who left for medical reasons, followed by financial, followed by academic reasons. The petition to the Executive Committee should explain the circumstances that led to withdrawal, and how those circumstances will be different on return to the program.

## Writing Proficiency

The School of Nursing encourages writing assignments in all courses. Writing is used as a means of learning and communicating within the discipline. There are a variety of writing assignments within the School. Formal, scholarly papers have clearly specified evaluation criteria for the students to follow. There are also a variety of written assignments that are less formal and have other standards by which they are evaluated. There are impromptu in-class writing assignments that may not be evaluated at all. Writing that occurs in clinical settings must meet stringent criteria for clinical accuracy as well as meet legal charting requirements.

The purposes of written assignments vary. A formal paper may be written to demonstrate understanding or mastery of subject, or to communicate. More informal writing may be done to generate ideas, speculate, discover or to think on paper. A sampling of the types of writings expected throughout the curriculum will be listed. Listed under the type of written assignment will be the general criteria used to evaluate the writing. All instructors give specific guidelines for all written work.

In-class individual or group writing exercises  
-- may or may not be evaluated for content or format

Charting on patient care given  
-- evaluated for content and format; may or may not be graded

- Exams, brief or long essay
  - evaluated for content and format; graded
- Clinical worksheets or logs
  - evaluated for content; individual instructors suggest format; may or may not be graded.
- Specific formal papers
  - evaluated for content; graded
- Comprehensive formal papers
  - detailed guidelines given; graded for content and format

## GWAR

Policies and procedures relating to the graduation writing assessment requirement (GWAR) are in accordance with AAO 85-10 guidelines for scheduling, staffing, prerequisite and certification.

### I. Policies

- a. Both Nursing 342W Nursing Research and Nursing 420W Leadership/Management and Professional Issues in Nursing, are designated *Writing Intensive* (WI) courses as well as the writing proficiency (WP) courses. Successful completion of the course (grade of "C" or better) is dependent upon certification of writing proficiency.
- b. In the event a student has transfer credit equivalent to N342W and/or N420W, then one or more of the following courses is designated to meet the WP requirement: N478 or a course to be determined by the Director. After successful completion of the alternative course, the Director will then submit a graduation writing assessment requirement form (GWAR) certificate to Admissions and Records.

### II. General Criteria for Competent Writing

- a. Identification and development of an issue with supporting data using correct language.
- b. Explore, expand and analyze complex concepts.
- c. Neatness, and the style and format required by the School of Nursing (Publication Manual of the American Psychological Association, most recent edition).
- d. Writing relevant to the topic.
- e. Grammar and/or punctuation.
- f. Sentence and paragraph structure.
- g. Spelling and/or typographical errors.
- h. Each course will define format and expectations for required writing.

NOTE: Faculty reserve the right to require writing competency as part of their grading policies.

### III. Procedure for Implementing Writing Proficiency Policy

Upon identification of a student needing remediation, the faculty member will implement the following procedure:

1. Conference with the student to discuss specific problems and recommendations for remediation.
2. Complete "Remediation for Writing Proficiency" form in duplicate. The original will be

- placed in the student's file and a copy will be given to the student.
3. The faculty member will notify the semester coordinator of the action. This will be reported at the Nursing Executive Committee.

#### IV. Determination of WP

1. Students not considered to be proficient in writing in the major by faculty of the designated writing proficiency course will have their written work re-evaluated by two other faculty members from another semester. Anonymity of the student will be guaranteed.
2. Two out of the three faculty must agree that the student has not met the criteria (See II).
3. Faculty readers will be selected on a rotating basis

### **Student Participation in Governance and Decision Making**

RN-BSN students may elect representatives to participate in nursing faculty meetings and committee meetings. Procedures for participation will be announced at the program orientation by the RN-BSN Advisor.

The Director of the School of Nursing reserves the right to appoint students on an interim basis as emergencies arise.

### **Student Grievance Procedure**

Students who feel they have been treated unfairly or arbitrarily are entitled to use the University-wide Student Grievance Procedures. However, most complaints (grievances) are resolved during the informal process. An informal process starts at the School level: the student should talk to the instructor(s) involved. The second step is to talk with the RN-BSN Coordinator. If a solution satisfactory to the student is not reached, the student then discusses the matter with the Director of the School of Nursing. The final step in the informal process is to talk with the Dean of the College of Natural Sciences.

Formal grievances are initiated ONLY after the informal process has been attempted and found unsatisfactory in reaching a solution.

Students may also be directed to contact the Coordinator for Student Judicial Affairs in Kendall Hall. The Student Grievance Procedure and other related forms are available at:  
[http://www.csuchico.edu/sjd/stud\\_griev.shtml](http://www.csuchico.edu/sjd/stud_griev.shtml)

### **Student Support Services**

#### **Advising**

All nursing majors are assigned a faculty advisor. The RN-BSN Advisor is the Advisor for all RN-BSN Students. Your advisor will be there for you to discuss any questions/issues you may have while completing the nursing program, including academics, signing up for courses, your graduation degree progress report, new GE requirements, scholarship opportunities, and so on. The RN-BSN Coordinator serves as a faculty advisor and is also there to help you talk about and problem solve any personal struggles you may be having while in the nursing program.

## **Course Registration**

Information about course registration will come to you via email from the Regional and Continuing Education (RCE) Department.

## **Tutoring and Other Learning Assistance**

There are a variety of services available on campus to help students successfully complete their course preparation. Please refer to the Student Learning Center services website at <http://www.csuchico.edu/slc/> for assistance with writing, mathematics, reading and study skills. This assistance is available through workshops and courses, as well tutors. Please see your adviser for help in selecting services if you need assistance with any of these skills.

Students who are having difficulty in any area of the academic program should meet with his/her instructor but may also meet with the Assistant Director or the Director of the School of Nursing. Access to these services is by faculty referral. Limited tutoring will be available for specific problems designated by the faculty.

## **Counseling Center**

The Counseling Service offers you an opportunity to talk with someone in complete confidence about anything you would "just like to talk with someone about." This includes anything you feel the need to "deal with", such as inability to concentrate, loss of confidence or a sense of meaning or of individuality, problems with roommates, parents, your marriage partner, puzzling feelings, drugs, sexuality, divorce, your major or career. You may talk with a counselor about anything you feel a need to talk about. The counselors are men and women who are counseling psychologists, social workers or graduate psychology interns trained and selected to be of maximum assistance.

Group counseling is available for a variety of issues including couples, women's problem solving/personal growth, and special interest, such as veterans, divorced or separate persons, minorities, weight loss or quitting smoking. Another service available to you is self-assessment testing. Interest, personality, ability and achievement tests may be taken if you decide they might be helpful.

## **Textbooks and Course Supplements**

Textbooks for all courses can be purchased on campus at the Associated Students' Bookstore. Most RN-BSN students purchase their textbooks on-line. Course syllabi/supplements will be available via Blackboard Learn online for students to print.

## **Student Learning Center**

The Student Learning Center offers assistance in improving your learning skills, managing your time (working out a realistic schedule), reading, listening, note taking, writing, concentration and examination skills for both objective and essay tests.

## **Nursing Scholarships and Loans**

Numerous scholarships are available to students enrolled in the nursing program. Some scholarships are specific to or give preference to RN-BSN students. Applications are secured from the Financial Aids Office. Students are advised to begin the application process as soon as summer registration opens in order to meet the normal deadline of Feb. 1. The amount and number of awards vary and are dependent upon earnings of these permanent funds. Information about CSU, Chico scholarships or loan funds for nursing students can be found at

<http://www.csuchico.edu/nurs/scholarships.shtml>

### **Graduation, Commencement, and the End of Program Pinning Ceremony**

Graduation fees are due one year prior to graduation (in July of the first summer session for RNs).

All students apply and pay for graduation online:

[http://www.csuchico.edu/evaluations/forms/grad\\_app.shtml](http://www.csuchico.edu/evaluations/forms/grad_app.shtml). See the University Catalog for graduation filing dates.

The **Degree Progress Report** provides access to current student academic record information, including completion of major and university graduation requirements. The Degree Progress Report will be utilized as the official *major clearance form* and basis for final graduation evaluation. \*

#### **TO OBTAIN YOUR GENERAL EDUCATION/DEGREE AUDIT:**

- Log on to your Portal account
- Select “Records and Registration”
- Select “Records and Registration Services”
- Select “Student Information”
- Under “Student Records,” select “Degree Audit.”

\*At the time of this writing, second baccalaureate students are not able to use the on-line Degree Progress Report process for final graduation evaluation. If you are a second baccalaureate student, please check with the RN-BSN Advisor/Coordinator to see if a Major Clearance Form has been submitted to the Academic Evaluations office on your behalf.

**Academic Evaluators** are available to answer questions regarding eligibility for graduation. They are located in the Student Services Center, Room 120 - Phone: 530-898-5957 - e-mail: [evaluations@csuchico.edu](mailto:evaluations@csuchico.edu) .

### **Commencement, Pinning Ceremony, and Nursing Pins**

In accordance with the broad academic preparation of the nursing program, the concluding ceremony is the University Commencement. Participating in the Commencement Ceremony ("walking") is separate from filing to graduate or attending the School of Nursing Pinning ceremony. You will need to register to participate in the commencement ceremony. Commencement exercises are held at the end of each spring semester on the weekend following final examination week. Students graduating with honors (cum laude, magna cum laude, and summa cum laude) are given special recognition. You may also wear your honor cord if you are a member of Kappa Omicron.

For more information, review the CSU, Chico Commencement Information web site at <http://www.csuchico.edu/commencement/index.shtml>

RNs are eligible to purchase a CSU, Chico Nursing pin and to participate in the May pinning ceremony. To arrange for participation or to make a pin purchase, contact the School of Nursing, (530) 898-5891, early (before April 15<sup>th</sup>) in spring semester. If you place your order prior to the deadline date, you will be eligible to receive the group discount.

Attending the Pinning Ceremony - All graduating nursing students can participate in the Pinning Ceremony (regardless if you order a pin or not). It is normally held on campus the Friday of finals week in spring semester. This is a beautiful ceremony and very meaningful to families. If you wish to participate in the pinning ceremony, please contact the School of Nursing office and the RN-BSN Advisor/Coordinator before April 15th.

## **Honors Program**

The Nursing Honors Program, which is consistent with University Guidelines, is comprised of a six-unit culminating experience: NURS 399H, Honors in Nursing, 3 units each. These courses are normally taken in the last two semesters of the nursing sequence (for RNs spring and summer).

Students are eligible for consideration into the Nursing Honors Program at the time they enroll in N 420W. Typically, one RN-BSN student is selected from each cohort, based on the highest cumulative nursing GPA, which must be at least 3.5 or above and be within the top five percent of their semester class. Upon verification that selection criteria have been met, eligible students will be notified in writing. Completion of honors in the major is noted on the student's final Chico State transcript. Please note that students in the RN-BSN program must pay the normal tuition/fees imposed by RCE to register for participation in Honors in the Major.

## **Sigma Theta Tau International/Kappa Omicron**

The Chico Honor Society of Nursing, established in spring, 1984 was chartered on April 30, 1988, as Kappa Omicron Chapter of Sigma Theta Tau International (STTI). STTI was organized in 1922 at Indiana University to encourage and recognize superior scholarship and leadership achievement at the undergraduate and graduate levels in nursing. RN-BSN students must have completed one-half of their nursing sequence (usually when you are enrolled in N420W) to be considered. Only the top 35 percent of the class in terms of cumulative GPA are generally eligible although exception requests are considered. In addition, faculty, alumni and community nurse leaders who meet specific criteria are eligible for membership.

Chapters have at least two educational programs each year as well as a semi-formal induction ceremony in the spring. In addition, scholarships, recognition and awards are available from both the local chapter and national parent organization. STTI encourages eligible students to join in recognizing professional and scholastic achievement and to participate actively in the nursing profession.

## **Appendix A - Student Nurse Background Check and Drug Testing Policy**

### **Applicability and Purpose**

This policy applies to all students enrolled in the California State University Chico (CSUC) School of Nursing (SON) undergraduate and graduate programs and addresses required background checks and drug testing for students. The goal of these screening requirements is to assure compliance with clinical contracts and to promote safety of clients served in clinical agencies.

### **Policy**

Students must submit to and satisfactorily complete a background check and urine drug screening as a condition for admission into all programs within the CSUC School of Nursing. RN-BSN students will complete this process as part of their N422W course or at a time designated by the RN-BSN Advisor/Coordinator. Admission may be denied or rescinded based on these results. Additionally, students who are enrolled in the School of Nursing may be required to complete additional background checks and drug screenings during the course of their study (this may be required by a clinical agency or for reasons described in the CSUC School of Nursing Student Guidelines). Students who refuse to submit to the background check and drug screening will be dismissed from the program.

### **Rationale**

Health care providers are entrusted with the health, safety and welfare of patients, have access to controlled substances, confidential information and operate in settings that require the exercise of



good judgment and ethical behavior. Thus, an assessment of a student or applicant's suitability to function in such a setting is imperative to promote the highest level of integrity in health care services.

Clinical facilities are increasingly required by accreditation agencies, such as the Joint Commission on Accreditation of Healthcare Organization (JCAHO), to conduct background checks and drug screening for security purposes on individuals who provide services within the facility and especially those who supervise care and render treatment.

The Joint Commission on Accreditation of Healthcare Organization (JCAHO) Comprehensive Accreditation Manual for Hospitals 2004 added to their Human Resources Standards (HR.1.20) a section related to criminal background checks. The JCAHO standard requires agencies to include nursing students in criminal background checks when required by state law, regulation or hospital policy.

According to the California Board of Registered Nursing document on background checks for student nurse placement, clinical agencies have the right to establish criteria that would exclude a student from placement at their facility. Those clinical agencies that have a policy that includes student nurses in their requirement for criminal background checks will need to comply with their own policy to be compliant with the JCAHO Standard. HR 1.20. On the other hand agencies may use different criteria for students than are used for employees or exempt them entirely and still meet JCAHO Standards.

Clinical rotations are an essential element in nursing programs. Students who cannot participate in clinical rotations due to activities revealed in a background check or have illegal substances found in their drug screening are unable to fulfill the requirements of the program and may not be admitted to or may be removed from the program.

## **Background Check and Drug Screening Reports**

A. The CSU, Chico School of Nursing will designate an approved company to conduct the background checks and drug screening. Students and applicants are required to self-disclose any criminal conviction or any potentially positive drug screening information when they apply to the program, or when subsequent drug screening may be required. The designated company will issue reports directly to the SON. Results from a company other than the designated company will not be accepted.

Students and applicants will contact the designated company and arrange for the background check and drug screening, complying with the requirements for obtaining the checks and drug screening, and reporting of the results. This will include authorization for obtaining the background check and drug screening and release of information to the SON.

B. Students and applicants are responsible for payment of any fees charged by the designated company.

C. Background checks and drug screenings must be completed prior to the start of the clinical course, or by the date established by the RN-BSN Advisor/Coordinator.

D. When reviewing results, the Director of the SON or her/his designee may consider the nature and circumstances of criminal convictions, or positive drug screen. *Criminal convictions*

(such as the time frame, severity and circumstances surrounding the conviction) will be examined in terms of the student's ability to meet the requirements of the program as well as his/her eligibility to take the NCLEX exam. In reviewing background checks and drug screening, the Director or her/his designee may seek advice from University counsel, University police, or other appropriate advisors. Evaluation of a *positive drug screen* will consider disclosure of medications used and the student's ability to safely meet the requirements of the program and our clinical agencies.

E. Results of the background check and drug screens will be made available to the student, the CSUC School of Nursing and any clinical facility that requires this information, before a student may begin a clinical rotation. Should a clinical agency refuse to place a student based on the outcome of either the background check or drug screen, the SON is not required to arrange alternate clinical placements but will attempt to make such placements, if possible, on a case-by-case basis. If alternate placement is not possible, the student cannot continue in the nursing program. All background checks and drug screenings are considered confidential and are placed in a student's file.

F. Derogatory information of the following nature, which is obtained as the result of the background investigation, may make clinical placement impossible and will likely result in dismissal from the nursing program.

Any felony convictions including plea agreements to felony convictions

1. Sexual assault, rape, indecent exposure, lewd and lascivious behavior, or any crime involving nonconsensual sexual conduct committed
2. Child abuse, sexual exploitation of children, child abduction, child neglect, contributing to the delinquency or neglect of a child, enticing a child for immoral purposes, exposing a minor to pornography or other harmful materials, incest, or any other crime involving children as victims or participants committed at any time.
3. Any charge related to illegal drugs, such as (but not limited to) possession of drugs or paraphernalia, or trafficking.
4. Abuse, exploitation or neglect of a vulnerable adult (disabled or elderly) committed at any time.
5. Offenses involving substantial misrepresentation of any material fact to the public or an employer, including embezzlement, bribery, fraud, racketeering or allowing an establishment to be used for illegal purposes.
6. First or second degree arson
7. Kidnapping
8. Any offense in another state or country, the elements of which are substantially similar to the elements of the above offenses.

The procedures that are followed for students or applicants who are suspected of being under the influence of alcohol or drugs are contained in the student guidelines.

## **Student Rights**

Students and applicants have the right to review the information reported by the designated company for accuracy and completeness and to request that the designated company verify that the information provided is correct. If any applicant or student believes the information is inaccurate, he/she has the right to appeal the decision and request a review with the SON. It is the student or applicant's burden to produce substantial evidence to prove the reports are incorrect.

## **Review Standards**

In reviewing the background checks and drug screening results, the Director of the SON or designee in consultation with the Executive Committee will consider the following factors in making his/her determination of the student's ability to enter or progress in the program: the nature and seriousness of the offense or event and the relevant circumstances surrounding the offense or event. This determination will prioritize the safety interests of the patient and the clinical agencies where students are placed.

## **Other Provisions**

A background check and drug screening will be honored for the duration of the enrollment if: the student is continuously enrolled unless required more frequently by a clinical agency in which the student is placed; or there is suspicion that the student has violated the student guidelines related to drug and/or alcohol use/dependency or is convicted of one of the crimes listed above during his/her time in the program. A student who has a break in enrollment is required to complete a new background check and drug screening prior to his/her return to the clinical setting.

Falsification of information on background checks and drug screening, including omission of relevant information, may result in denial of admission or dismissal from the nursing program.

## Appendix B - Using SentryMd/Precheck

### ACCOUNT ACCESS

Please note your account will only be available after you have registered and sent Part I of this packet into Sentry MD. You should have received instructions sent along with your semester 1 packet. Your account allows you to see your status and download/print documents that have been processed by Sentry MD.

Please make sure to submit document requirements to the Upload link

<https://mysentrymd.com/sentrymd.html#/upload/59> as you are not able to upload directly to your account, all documents are reviewed and processed prior to showing in your account (*processing can take 24 to 48 business hours*).

**Link to Sentry MD system:** <https://mysentrymd.com/sentrymd.html#/home>

1. Enter your User ID: (email address in all lowercase)
2. Click on Set Password
3. Enter your email address (your User ID will be the email address you registered with in all lowercase)
4. You will be sent a token to your email address
5. Enter Token from email onto site
6. Create a Password
7. Click link to go to login screen

Once you are logged into your account, you will note on the landing page how easy it is to see if you are compliant or not with the requirements for your program. A blue checkmark next to each of the requirements means you are compliant. Requirements without the blue checkmark indicate you are missing documentation and these items need your attention.

In addition to viewing your status at any time, you can download and print your landing page checklist and any or all the documents you have submitted by clicking the Documents Button. Only documents that have completed processing will appear in your account; please note processing can take 48 business hours. We hope these tools help you stay on top of your status and keep you compliant with your program requirements.

### SUBMITTING DOCUMENTS

All documents must be submitted in PDF format. Documents should be submitted as a PDF attachment via email to [CSUCHICO@SentryMD.com](mailto:CSUCHICO@SentryMD.com) or uploaded to the Secure Student Uploader at <https://mysentrymd.com/sentrymd.html#/upload/59>.

If you have any questions regarding this packet, please email us at [CSUCHICO@SentryMD.com](mailto:CSUCHICO@SentryMD.com).