

DEPARTMENT OF NURSING

BSN Student Handbook 2024-2025

(Updated 8/2024)





COLLEGE OF HEALTH AND HUMAN SERVICES

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INTRODUCTION

Welcome! This handbook has been designed to provide you with information about Saginaw Valley State University's BSN program for prelicensure students and RNs.

The Crystal M. Lange College of Health and Human Services dean's office is located on the second floor of the Health and Human Services Building (BA 260). The nursing department chairperson and faculty can be found at: <http://www.svsu.edu/nursing/faculty/>. The faculty secretaries are located at BA 230 and BA 254 for assistance. HHS academic advisors are located at BA 255 and BA 253. The RN to BSN Coordinator is located at BA 249. The clinical coordinators are located at GN 253 and GN 257. They are all happy to answer any questions you may have.

Mission

We empower nursing students to become transformative, culturally sensitive leaders in interprofessional healthcare, delivering equitable, evidence-based care to diverse communities through inclusive partnerships, research, and lifelong learning.

Vision

The Department of Nursing will provide professional programs of the highest level of quality and service and achieve recognition for its programs. The Department's graduates will distinguish themselves through service to nursing and to interprofessional health care for a diverse society. The Department will be a premier intellectual resource for nursing and health care in this region.

Program Outcomes

Expected Learning Outcomes for the BSN Program
1. Graduates will have the knowledge of nursing practice as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences.
2. Graduates will utilize person-centered care that focuses on the individual within multiple complicated contexts, including family and/or important others.
3. Graduates will promote population health that spans the healthcare delivery continuum for the improvement of equitable population health outcomes.
4. Graduates will foster the generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care.
5. Graduates will cultivate quality and safety by employment of established and emerging principles of safety and improvement science.
6. Graduates will participate in intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience and strengthen outcomes.
7. Graduates responds and lead within complex systems of health care to provide safe, quality, equitable care to diverse populations.
8. Graduates will utilizes information and communication technologies and informatics processes to provide care, gather data, form information to drive decision-making, and support professionals.
9. Graduates will form and cultivate a sustainable professional nursing identity including accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.
10. Graduates will participate in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership.

Professional Behaviors Policy

Nursing has earned the public trust by adhering to the standards of responsibility, accountability, self-directedness, and professionalism. SVSU Department of Nursing understands that the process of becoming a professional begins when entering the nursing program. SVSU's Code of Student Conduct determines the expected behavior for all students and is to be followed by students in the Department of Nursing.

The Code can be found at <http://www.svsu.edu/studentconductprograms/codeofstudentconduct/>

The American Nurses Association (ANA) Code of Ethics shapes the professional behavior of the nurse. The SVSU Student Nursing Professional Behaviors Policy supports and observes the Code of Ethics in academic and clinical endeavors. The Code of Ethics:

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

The National Student Nurses' Association (NSNA) Code of Academic and Clinical Conduct provides a format for adhering to the ANA Nursing Code of Ethics. The bold headings for the following are direct from the NSNA Code of Academic and Clinical Conduct with statements below for SVSU School of Nursing.

- 1. Advocate for the rights of all clients**

Nondiscrimination: Students will provide care to patients/clients without discrimination based on race, creed, color, sex, age, national origin, sexual orientation, or disability.

- 2. Maintain client confidentiality**

Nursing students shall be educated and adhere to HIPAA policies and the privacy policies in the clinical settings. Health records may not be photocopied or removed from simulation and the

clinical setting. Students may write information from the patient medical record without the use of any patient identifiers (name, birthdate, ID number, initials, etc.). Access to and sharing of information must be limited to only those personnel with the need to know and family members authorized by patient and institutional policy.

3. Social networks

Social networks are not to be used for posting or communicating anything related to simulation, the clinical agency, patients, conditions, care or activities of the providers. All questions about the use of social media should be clarified with nursing faculty.

In discussing client cases in the classroom setting, attention must be paid to the selection of time, place of discussion, people attending the discussion and omitting data not necessary to the purpose of the discussion.

4. Take appropriate action to ensure the safety of clients, self, and others.

The nursing student will anticipate the supplies and equipment required in the class, simulation, and clinical setting. Equipment may include stethoscope, watch with a second hand, SVSU Nursing photo ID, and written assignments as requested by faculty/course syllabi or agency/clinical requirements.

5. Provide care for the client in a timely, compassionate, and professional manner.

The nursing student will demonstrate accountability in accepting assignments for patient care and carrying out responsibilities within the designated time frame. The student will communicate his/her location (break, lunch, meetings, etc.) and will assure continuity of care at all times. The student will take exams as scheduled and complete assignments in a timely manner as stated in course syllabi. Individual faculty will discuss the communication standards for their course.

6. Communicate client care in a truthful, timely and accurate manner.

Accurate and timely communication allows for assessments, interventions, and changes to the plan of care to be started and completed. The student nurse will relay assessment and status changes to the clinical instructor and nurse responsible for the patient in a timely manner.

7. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.

Accept responsibility for one's own actions including adequate preparation for class, simulation, and clinical. The student nurse is a representative of SVSU and the SVSU Nursing Program in all campus and clinical settings. Since the nursing student can be identified as a SVSU nursing Student by any means, that student has the responsibility to act in a moral and ethical fashion to aid in maintaining moral and ethical relationships with our clinical partners. Use your own knowledge and skills to write all papers, complete all examinations or compile research information. Using the answers of other students, old examinations, papers or other materials unless specifically permitted by the instructor is forbidden. During testing, students may not use technological devices to transmit or download materials without permission from the proctor. Quoting or copying other person's work without giving proper recognition is plagiarism. In practicum, all documentation must be completed honestly and thoroughly. (Please refer to the SVSU Academic Dishonesty policy.)

8. Promote excellence in nursing by encouraging lifelong learning and professional development.

The nursing student will provide care and engage in learning to meet his/her course objectives.

9. Treat others with respect and promote an environment that respects human rights, values, and choice of cultural and spiritual beliefs.

The student will interact with others including peers, faculty, staff, patients/clients, and families in an honest, respectful, and non-judgmental manner that accounts for individual differences.

The student will refrain from the use of inappropriate language, gestures, or remarks and coercion, intimidation, or deception in working with patients/clients, families, faculty, staff, peers, or other students. The student's body language, non-verbal behaviors, and personal opinion must demonstrate professionalism at all times.

Respect the time and space of others by turning off cell phones, avoid disruptive sidebar conversations and refrain from texting others in class, simulation, or clinical.

Cellular or smart phones, tablets or other electronic devices are not to be used or on your person in simulation or the clinical setting.

10. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of care.

A nursing student shall seek consultation and supervision whenever the student's ability to carry out patient/client care is deficient or inadequate due to lack of knowledge or experience. The student nurse has the responsibility to ask questions in areas of incomplete knowledge regarding patient care and disease process to ensure patient safety.

11. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.

Each nursing student shares the responsibility for ongoing evaluation of clinical performance and classroom learning and participates as an active learner by demonstrating that clinical, simulation, and classroom objectives have been met and completed.

12. Encourage faculty, clinical staff, and peers to mentor nursing students. The nursing student will be accepting of constructive critique and be eager to mentor others.

13. Refrain from performing any technique or procedure for which the student has not been adequately trained.

The nursing student must inform the faculty/instructor if the student has been assigned an intervention or procedure that the student has not been prepared to safely perform. This allows the faculty/instructor to provide the needed information to the nursing student prior to the procedure to maintain patient safety.

14. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.

Nursing students are representatives of Saginaw Valley State University and the School of Nursing. The behavior of the nursing student may positively or negatively affect the public image of the University. A SVSU nursing student is required to apply professional behavior both on and off campus and in "virtual" sites.

15. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment and research.

The student nurse may observe and assist the nurse or preceptor with education and care of the client but the primary responsibility for informed consent and managing plan of care remains with the primary care provider.

16. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.

The nursing student must refrain from the use of any substance that may impair judgment. The nursing student must turn in the Health Appraisal Form at the beginning of each semester and disclose any medications or restrictions that have occurred since the preceding semester. Any changes to the health of the nursing student must be immediately disclosed to the nursing faculty on record for the clinical course, including pregnancy.

17. Strive to achieve and maintain an optimal level of personal health.

The student must make sound decisions related to attending clinical when ill as the student's illness may put patients/clients at exposure risk. The student in event of illness that requires not attending clinical must notify the clinical instructor and the nursing faculty on record for the clinical course. See the clinical make-up policy related to making up days missed due to illness.

18. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse, mental or physical issues. Impairments that impact the ability of the student nurse to complete clinical or classroom assignments must be reported to the nursing faculty to assist in addressing nursing school needs related to these issues.

19. Uphold the University, College, and Department policies and regulations related to academic and clinical performances, reserving the right to challenge and critique rules and regulations as per school grievance policy. The nursing student will be aware of the SVSU grievance procedure as stated in the Nursing Student Handbook.

Clinical Information (See appendix F for more information)

Clinical Scheduling: Multiple factors influence the scheduling of clinical experiences, including the availability of space at an agency or hospital. Students should be prepared for those experiences to include all different shifts (days, evenings, and midnights) and days of the week (including weekends). Ordinarily, the only times clinical experiences will not be scheduled are when the university is closed, which is on Memorial Day, July 4th, Labor Day Monday and Tuesday, Thanksgiving Thursday and Friday, and Christmas holiday break (Christmas holiday dates change).

Unexpected Required Clinical Changes: Every attempt will be made to maintain the regularly scheduled clinical assignment, however, at times unexpected situations arise that necessitate a change in clinical scheduling such as, an accreditation visit, instructor illness, etc. Should such an event occur, students will be contacted, and an alternate day will be determined as to when the clinical time will be rescheduled. Should a situation arise that a student cannot attend the rescheduled day the faculty member will determine appropriate actions to take in consultation with the Department Chair which could include a student not being able to progress in the program until the time is made up.

Fit for Clinical: Fit for clinical means that an individual is in a physical, mental, and emotional state which enables the student to perform the essential tasks for his or her clinical assignment in a manner which does not threaten the safety or health of oneself, staff members, patients, or the public at large. Therefore, students are expected to come to clinical rested, alert, and prepared. If the clinical instructor feels a student is not fit for clinical, the student will be sent home. The clinical instructor can require the student to get drug or alcohol tested at their discretion.

Code of Student Conduct and Responsibility for Making up All Absences: All clinical experiences (seminars, simulation center, hands-on-practice, and observation) must be attended as scheduled. Tardiness is unprofessional and therefore not acceptable. It is always the student's responsibility to make up all missed clinical time that occurs because of tardiness, absence, or suspension, in a manner acceptable to the clinical and lead faculty and in accordance with the clinical course syllabus: Failure to do so will result in course failure.

Additional Fees for Making up Missed Clinical Time: Due to the complexity of clinical experiences and scheduling, there are no built-in make-up days.

Making up Clinical Days. Situations where no makeup fee will be assessed to the student

The university will provide clinical make up expenses for up to two clinical days for any of the following reasons:

1. A student has an illness documented by a note from a healthcare provider (physician, nurse practitioner, physician assistant)
2. A student needs to attend a funeral or viewing for a loved one
3. A student has a personal/family emergency that could not be reasonably predicted

In order to accommodate these situations students must speak with the lead faculty member when these events occur and provide documentation as soon as they are able to do so.

Making up Clinical Days. Situations where a makeup fee will be assessed to the student

The university will NOT provide clinical make up experiences for any of the following reasons:

1. A student elects to miss a clinical day for any reason not related to a funeral/viewing, illness or family emergency. This could include, but is not limited to vacations, concerts, parties, or weddings. If a student has a scheduled clinical day and they elect not to attend clinicals the student will be held responsibility for the payment of the clinical instructor for the number of missed hours. By way of example, if a clinical instructor is paid \$45/hour and the student elects to miss a 6-hour clinical day, the fee assessed to the student for the makeup time will be ($\$45 \times 6 \text{ hours} = \270). Please note, all clinical instructors are not paid the same hourly wage. The clinical coordinator will communicate to the faculty and student the hourly wage of the instructor.

In the event that the lead faculty is able to arrange for a student to join another clinical group within the same hospital location, a flat fee of \$150 per day will be assessed. For example, a student who is assigned to clinicals at McLaren Bay Regional could join another clinical group at McLaren Bay Regional, but not McLaren Bay Central. The student is to work with lead faculty for this arrangement and NOT contact the clinical instructor.

Arranging the Makeup Clinical Days

1. Any clinical time (with or without an assigned fee) will be at the discretion of the clinical site and may occur on a separate scheduled day.
2. All students must make up all missed hours in a manner acceptable to the faculty, clinical site, and clinical instructor or they may be prohibited from attending further clinical experiences. It is the responsibility of the faculty member supervising the clinical rotation & the clinical coordinator to negotiate makeup days and time.

3. If applicable, fees must be paid prior to the scheduled make-up time. If fees are not paid in advance, the make-up time will be cancelled. If invalid payment is made (bounced check, etc.), the course grade will be recorded with the Registrar as an "INCOMPLETE" until proper and full payment is made.

Extenuating circumstances regarding missed clinical time and payment need to be discussed with the faculty member involved. See each course syllabus for specific policies and directions.

Transportation: The student is responsible for the costs and responsibilities associated with transportation to and from all courses and/or practice settings. Students must have reliable transportation which is to be available for all days of the week and all times of the day and night. When creating clinical assignments, priority is given to selecting a variety of meaningful learning activities; therefore, practice assignments and clinical agency experiences may occur in various geographical locations and during different days and hours. See the course syllabus for specific information associated with each clinical.

Leaving the Clinical Site: Students are not allowed to leave a clinical site during assigned hours, unless individually asking the clinical instructor for permission.

Agency Orientations: Agencies used for clinical experiences may require student attendance at an agency orientation prior to beginning a clinical placement there. This may also include educational sessions on using electronic records at the facility. Failure to attend any such orientations or educational sessions at the scheduled time will result in clinical suspension, and possibly additional fees, until a plan of resolution is approved by the involved faculty.

Professional Attire: Practice attire and appearance in general:

- Clothing should reflect the professional status of the nurse, with suitability determined by agency policy and practice faculty. Refer to your clinical syllabus for the most current clothing requirements. Skirts and dresses are to be knee length or below. Clothing should not be tight or revealing (no cleavage and no thongs). Appropriate undergarments must be always worn and not visible. Clothing and footwear are to be clean and in good repair.
- When selecting jewelry, safety and moderation are to be kept in mind. Rings should avoid stones or settings that may injure the patient or self, which includes creating a potential for infection risk. Facial jewelry or piercings, which includes anything in front of the ears, such as tongue, eyebrows, lips, etc., are not permissible, except for a single small nose stud or stone. Gauges of any size are not allowed within the clinical setting. No more than 1 post earring per ear.
- Nails are to be trimmed so as not to interfere with patient care; nail polish, free from chips, is permitted, except in areas where you scrub in (ie. OR, interventional radiology, and labor and delivery). Artificial nails and extenders are prohibited.
- Hair is to be off the collar or tied back. Head wear that is appropriate includes headbands one inch wide or less and one centimeter high, hair ties/scrunches, and barrettes/hair clips. All head wear and hair accessories must be a neutral solid color (tan, black, navy, white or red). Inappropriate headwear is at the ultimate discretion of the clinical instructor (agency) and faculty. Religious headwear is acceptable in neutral solid colors. Hair must be a natural color. Beards and mustaches are to be neatly trimmed. Makeup should not be excessive.
- Unscented deodorant must be worn.
- Perfume and aftershave are not appropriate for the practice setting.
- Tattoos that are considered to be extreme or offensive to patients, fellow students, faculty, and others in the clinical setting are not permissible and may be asked to be covered. Extreme and/or offensive tattoos include, but are not limited to, those containing violent or graphic images, foul or profane language, and

attributes of a sensitive or legally protected nature. The level of discretion is the decision of faculty and the management within the clinical setting, which may include patient or employee complaints. No other body art, such as artificial nails, nail polish, shellac, or nail piercings are permissible.

Students are required to have the following items with them for specified practice settings (check with faculty for supplies needed per practice setting):

- Bandage scissors
- Stethoscope
- Penlight

(The above items may be purchased at a significant discount from SVSU SNA during scrub sales, or at a medical supply company or uniform shop)

- Wrist watches with a second hand
- Name tags are purchased from the Cashier's Office for a nominal fee. Name tags are required for every practicum and lab experience.
- Uniforms
- Shoes (Shoes must meet the agency's requirements with no open toe shoes.)

Upon admission, students are required to purchase SVSU Nursing scrubs and an SVSU Nursing polo shirt to wear throughout the program. Student Nurses are required to wear the SVSU Nursing scrubs during clinical experiences. Scrubs and polo shirts are available only through the SNA, which holds a sale at the beginning of each semester. Check the SNA Facebook for information regarding scrub sales.

It is to be understood that these scrubs serve as an SVSU Student Nurse uniform and are therefore not to be worn unless you are in clinical as a student nurse at that moment. Scrubs and nametags are also not to be worn in public except during transportation to and from assigned clinical experiences. Violation of this policy is cause for referral to the Professional Conduct Committee.

Quality Improvement Clinical Event/Near Miss Form: The Quality Improvement Clinical Event/Near Miss form will be filled out for any instance occurring in the clinical setting or simulation lab. The form will be filled out by the student and clinical instructor and forwarded to the clinical lead faculty. This form will not be placed in the student file. The information from the form will be forwarded to the Root Cause Analysis Committee for continued program quality improvement.

Insurance: Malpractice insurance is required for each student and is provided by the university for basic (unlicensed) nursing students. All students need to carry their own health insurance. Clinical agencies and SVSU are not responsible for any medical expenses a student might incur while in classes, simulation laboratory, or clinical settings.

Trinity Clinical Site Expectations:

Students are required to have automobile liability insurance, and they may be asked to product coverage of this at any time by SVSU or by a clinical agency. Students are prohibited from transporting patients, visitors and or employees of clinical agencies while operating a vehicle on organization premise.'

CPR: Students are required to maintain CPR certification throughout the program. CPR course is available the American Heart Association. The course must be approved for health care professionals and include adult, child, infant, two -person CPR and the use of a pocket mask and foreign body obstruction (choking). Complete online CPR certification or renewal/ recertification is not acceptable. The

certification must be renewed prior to the start of the semester in which it expires. Proof of current status must be submitted prior to the start of each semester.

TB: TB testing must be renewed annually. This must be renewed prior to the start of the semester in which it expires. Proof of current status must be submitted prior to the start of each semester.

Flu Vaccination: The Flu vaccine is required every new flu season. The date required will be sent each semester by the Clinical Coordinator. Students not receiving the flu vaccine by the required date may be suspended from clinical. If the student has an allergic contraindication to the flu vaccine, that student must notify the Clinical Coordinator upon admission to the program or at first notice of allergy.

COVID Vaccination: The COVID Vaccination is strongly encouraged unless the student has documented medical reasons for avoiding. Clinical agencies can require that students be vaccinated to obtain clinical experience, therefore clinical experiences may be difficult to find or not available at all to unvaccinated students.

ACEMAPP: To facilitate ease of student transition from one clinical agency to another, multiple local agencies joined together to form a unified set of online and hospital orientation requirements for placement in their facility; this is called ACEMAPP. Students will be notified by the Clinical Coordinator of necessary information to complete. It is the student's responsibility to complete all required training and assessments in ACEMAPP by the specified deadline every semester. If this information is not completed by the deadline, suspension from clinical and/or additional fees may be required. Students will be required to pay \$50 for the cost of ACEMAPP annually while in the program.

CastleBranch: Used for compliance documents for clinical this includes (compliance tracker, background check, and urine drug screen. Initial cost is ~\$80 and ~\$40 for urine drug screen. Then an annual fee ~\$10 and ~\$40 for urine drug screen.

Student Responsibility to keep their File Updated: Each semester students must report all necessary changes to their own administrative record (i.e. acquisition of a felony conviction or misdemeanor) by completing a form at the beginning of the semester. Change in current mailing address, phone and email must be reported to the University Registrar's office.

Health Information Update: Each semester the student will fill out a Health Information Update sheet and return to faculty in charge of clinical.

Background Check: Yearly criminal background checks are required and will be reviewed by clinical coordinator and clinical faculty coordinator. The cost of this will be paid by the student. Each semester the student will fill out a Background check sheet and return to the lead clinical faculty.

Drug Testing: All students are required to complete yearly drug testing and the cost will be paid by the student. This is done through CastleBranch and can take up to 6 days to get results. To be compliant, you must upload your results by the due date- please plan accordingly.

ADN/RN to BSN Students: If students are doing clinical or projects outside of their own employer agency, all clinical requirements will need to be submitted prior to the start of the semester. This involves an additional cost, depending on agency requirements. Students are responsible to contact the clinical coordinator one semester in advance of the clinical semester to find out the requirements for that agency.

Personal and Professional Nursing Student Safety

Adverse Weather Policy: Weather conditions can be unpredictable at times. It is important to have a process by which your instructor can communicate with you in a timely manner to update you related to any changes in clinical attendance. Generally, if the university is closed then students will not report to the clinical site. Should students be at the clinical site at the time of the university closure an assessment of what is in the best interest of safety will be made. Students could stay and complete their clinical day especially if it is anticipated that weather conditions will improve and make travel safer when the clinical day is complete. Since clinical rotations are held in wide geographic areas, should clinical sites be in areas where no delays or dangerous travel is occurring or expected then students may be able to report to the clinical site as scheduled if approved by the lead faculty. The weather emergency information phone number is 989-964-4477.

Latex Allergy: It is the student's responsibility to notify their assigned course and clinical faculty of their latex allergy or possible latex allergy or sensitivity. Latex allergy can be progressive and latex sensitive students may be placing themselves at long-term risk.

Blood Borne Pathogens Policy: Students must read and understand the SVSU College of Health and Human Services blood borne pathogens policy. Students must report all BBP exposure incidents to the Dean's office by completing the form contained in Appendix B and submitting a photocopy of the clinical agency's exposure incident report within 48 hours.

General Personal Safety and Safety Related to Clinical: Students are ultimately responsible for their own safety and their decision-making in this regard. Students must understand and apply strategies to ensure their safety in all clinical situations (including clinical agency, community, and home care environments). Students are strongly encouraged to have cellular phone access for community-based practicum experiences. Specific student nurse safety guidelines are discussed in the appropriate clinical. Students are encouraged to voice any safety concerns with their clinical faculty.

Academic Policies

The grading scale for courses in the Department of Nursing is as follows:

93-100	A	4.0
90<93	A-	3.7
87<90	B+	3.3
84<87	B	3.0
81<84	B-	2.7
78<81	C+	2.3
75<78	C	2.0
68<75	D	1.0
0<68	F	0.0

Below 75% in undergraduate courses is considered failing by the Department of Nursing in all cases and prohibits progression to other courses within the program. Course syllabi may require additional criteria such as achieving a higher percentage on exam grades in order to pass a particular course. When the grading policy differs between the handbook and the individual course, the course syllabi shall override the grading policy outlined in this handbook.

Rounding grades is at the discretion of the faculty member(s) teaching the course and the policy will be outlined in the individual course syllabus.

Clinical courses require students to earn a minimum of 75% and also to demonstrate satisfactory achievement in the practice components of the course (Pass) to successfully pass the clinical course. Students who earn at least 75% but have not successfully met the practice component objectives will receive a failing grade and will not be able to progress in the nursing program.

Academic Concerns/Chain of Command: Please refer to SVSU's Problem Resolution information: <https://www.svsu.edu/studenthandbook/studentproblemresolutionprocedures/>

The University Ombudsman is available for consultation to all students ([Student Problem Resolution Procedures](#)). For academic concerns related to a grade, the SVSU [Grade Grievance Policy](#) should be followed. [See SVSU Student Handbook](#).

1. **Course Discontinuance:** Students withdrawing from a nursing course are encouraged to discuss their situation with the appropriate nursing faculty and take notice of the dates and process for withdrawing. Students must notify the Department Chairperson in writing if they decide to withdraw from a course. If such students withdraw while in good standing, they may request to be readmitted once, based on availability of space. There is no guarantee that space will be available for students who have withdrawn and wish to be readmitted, therefore contact the Department Chairperson to discuss your specific situation.

Continuation in Registered Courses: Integration courses combine the knowledge of all the courses in a semester. Therefore, if a student is unable to continue in the clinical course (for academic or health reasons), they are also unable to continue in the integration course. If a student drops any of the other concurrent courses except the Designer course in a semester, they must also drop integration and clinical.

Progression and Retention Policies: Students must read and understand the Department of Nursing policies regarding progression and retention as described in detail in the SVSU catalog. Nursing courses ordinarily are offered fall and winter semesters and full-time nursing students are expected to attend these two semesters. Nursing students may elect to complete other graduation requirements during spring and summer terms. Progression into any nursing course at any level cannot take place if a student has a grade of "I" in any prerequisite course. A grade of "C" or better is required for each nursing course to permit student progression. A student who earns an unacceptable grade (less than "C") in one course must apply to the Department of Nursing for readmission and, if re-admitted, satisfactorily repeat the course in order to progress in the nursing major. One (1) failure of a nursing course is allowed throughout the program. If a student fails two or more nursing courses, they will be dismissed from the program.

Graduation Information

Official Audit: Students are encouraged to check their degree audit every semester (available on Cardinal Direct) before graduation. Students are responsible to obtain an official audit no later than the deadline date published in the University course schedule (recommend prior to the final semester). This is accomplished by applying for graduation online.

Nursing Symposium Event: Although not a university sponsored event, each graduating class has, historically, planned a Nursing Symposium event with the N-5 faculty. Class representatives are encouraged to take on the responsibility of planning if it is desired by the class.

Class Pictures: Class pictures are optional and the responsibility of the graduating class. Allow considerable time for retakes and processing. Each class may choose a photographer of their choice.

Commencement Ceremony: Information concerning graduation announcements, caps and gowns, and nursing pins can be obtained from the bookstore. The commencement ceremony dates are listed online.

VALUABLE INFORMATION

Resources

Student Communication: All university students must contact IT to access their email address and for services. Their phone number is 964-4225 and their email address is support@svsu.edu

Lockers: Student's lockers are available on the first and second floors of the Health and Human Services Building on a first come, first serve basis. Lockers are to be used for personal belongings to keep both the simulation lab and classrooms tidy. It is recommended that students purchase their own locks for use. The locks must be removed at the end of each semester.

Library Facilities: Saginaw Valley State University library is dedicated to meeting student needs. Instructional Technology Services is housed on the first floor of the library and available to assist students with their technology needs, e.g., Canvas, email, PowerPoint presentations, and website development.

In addition, the following libraries in the area are available to nursing students:

- a. Saginaw Health Sciences Library 1000 Houghton, Saginaw (in the medical center between Covenant-Copper and Covenant Harrison)
- b. McLaren Bay Library
- c. Columbus Avenue at Mulholland, Bay City
- d. My Michigan Regional Medical Center Library, Midland
- e. Aleda E Lutz V.A. Medical Center
- f. Small medical libraries are available in most of the other area hospital and community health agencies
- g. Delta College

Computer Labs: Computer labs are available throughout the campus with extended hours (HHS second floor, Gilbertson mezzanine level, Brown, Curtiss, Pioneer, and Wickes).

Writing Center (Zahnaw Library Second Floor): The Writing Center is available to assist students with writing skills. Students are encouraged to use this resource as needed.

Covenant and University Health Services (Located at corner of Pierce & Bay Rd): Health Services include some immunizations. The cost and availability may change. Check with Health Services for the current availability of any needed immunizations.

Campus Mental Health and Wellness Center (Curtiss Hall, Room 112, 964-7078) Services include:

- a. Individual counseling for personal issues such as depression, low self-esteem, family conflicts, substance abuse, sexual abuse, interpersonal relationship difficulties, identity issues, stress management, grief and loss, etc.
- b. Crisis Intervention

- c. Community Resources and Referrals
- d. Test Anxiety

Office of Accessibility Resources and Accommodations: Students with disabilities that may restrict their full participation in course activities are encouraged to meet with the instructor and contact the SVSU Office of Accessibility Resources and Accommodations, Wickes Hall, 260B for assistance (964-7000).

Other SVSU Resources on Campus:

- Public Safety...964-4141
- Student Life...964-4170
- Scholarships and Student Financial Aid...964-4900

Tutoring Services: Tutoring services are available both in the library and in the simulation laboratory. In addition, the nursing department employs student tutors who can make individual or small group appointments with students for tutoring sessions.

Scholarships: Various nursing scholarships are available. Contact the SVSU Scholarships and Financial Aid office for more detailed information.

MEMBERSHIP in Sigma Theta Tau (International Honor Society of Nursing)

Our local chapter is Theta Chi. There are faculty counselors available to answer questions. Sigma Theta Tau International does not discriminate. Candidates are qualified for membership so long as eligibility requirements are met. Student candidates shall have demonstrated superior academic achievement, academic integrity, and professional leadership potential. Students in Basic Program:

- a) Definition – Basic program is defined as an accredited baccalaureate or equivalent nursing degree program that leads to the first professional nursing degree.
- b) Academic Achievement – Students in basic programs shall be eligible for membership if they have achieved excellence according to the standards approved by the Society.
- c) Rank in class – Basic students who are elected shall rank not lower than the highest 35 percent of their class in scholarship.
- d) Curriculum – Students shall have completed at least one-half of the required nursing curriculum.
- e) Exceptions – Exceptions may be made at the discretion of the chapter’s governance committee following the guidelines adopted by the International Board of Directors.

Please see the Faculty Counselors for the Theta Chi Chapter for more specific details.

All students are invited to visit the website www.nursingsociety.org and utilize the Student Section.

Technology and Networking Policy: The use of technology shall not be permitted and is considered unprofessional in the clinical, classroom, and lab simulation settings, unless given permission by the instructor. Technology resources include any and all technologies that produce, store, communicate information, or serve to provide access to social networking sites, such as cell phones, video and voice networks, computers, and other devices.

NCLEX (National Licensure Exam): Upon graduation, students must successfully pass the NCLEX (“State Boards”) exam in order to be licensed to practice as an RN. To assist students in preparation for the NCLEX, the Department of Nursing has incorporated material and standardized testing throughout the nursing courses. In order to take the NCLEX, the Nursing Department must send to the State Board of Nursing a Nursing School Certification form for every graduate. This certification form will not be issued until each student has successfully completed all program requirements. See individual course syllabi for further information.

STUDENT REPRESENTATION ON NURSING DEPARTMENT COMMITTEES

The following is a list of Nursing Department committees with student representation.

1. Undergraduate Program Committee

- a. The Undergraduate Program Committee shall evaluate and propose appropriate revisions in the curriculum.
- b. The Undergraduate Program Committee shall consist of all full-time faculty members and as many as three student representatives as appropriate to the agenda. One basic student representative is sought through the SNA. Sharing of information is disseminated through the student representatives.

2. Student Development Committee

- a. The Student Development Committee shall function in a liaison capacity among faculty and students.
- b. The undergraduate Student Development Committee shall consist of two faculty members, and an elected/volunteer member from each nursing N semester class.
- c. This committee meets a minimum of once per year.

3. RN/ADN to BSN Committee

- a. The RN/ADN to BSN Committee shall maintain responsibility for the RN to BSN curriculum.
- b. The committee is composed of the RN to BSN Program Coordinator, all full-time department members who teach in the RN to BSN and/or the ADN to BSN Concurrent programs, and up to three invited student representatives from the RN/ADN to BSN Program.
- c. This committee meets a minimum of once per semester.

SVSU STUDENT NURSES ASSOCIATION

Purpose of the SNA: Promote participation in a professional nursing organization for nursing and pre-nursing students. Develop members as professional nurses through professional networking, community outreach, university and social activities, education, and leadership. Students are encouraged to elect a representative from their class, who is active in SNA, to function as a communication liaison. See Facebook for a list of meetings and activities with dates and times.

PROGRAMS FOR LICENSED RNS (RN TO BSN, RN TO MSN)

Registered Nurses seeking the RN to BSN/MSN degree at SVSU will have 39 validated articulation credits of nursing coursework recorded after successful completion of NURS-301. ADN to BSN students will receive 39 validated articulation credits upon passing the NCLEX and becoming a Licensed RN and submitting a copy of their license and an updated Resume to the RN to BSN Coordinator.

RNs seeking RN to BSN degrees should review their educational plans with the RN to BSN Coordinator when starting the program and as new questions arise. Please keep plan of study updated on a yearly basis or as changes arise. The coordinator can be reached by calling 989-964-4184.

RN to BSN Program: RN to BSN nursing courses are mostly online. Technology support is available for the students.

APPENDIX A

Saginaw Valley State University Crystal M. Lange College of Health and Human Services Nursing Simulation Center Policies and Code of Conduct

Purpose

The Nursing Simulation Center (NSC) is dedicated to supporting the vision, mission, and philosophy of Saginaw Valley State University (SVSU) and the College of Health and Human Services. The NSC strives to design learning activities that replicate real-life clinical experiences and assist students in their critical thinking and decision-making skills. The faculty that interacts with students in the simulated learning experiences provide students with support and constructive feedback regarding individual and team performance through debriefing sessions, which allows students the ability for self-reflection of their own performance during the reflective process.

Nursing Simulation Center Mission

The Nursing Simulation Center fosters intellectual growth by offering evidence-based simulation experiences and adhering to professional standards. Our goal is to facilitate the acquisition of knowledge, skills, and attitudes among a diverse group of learners in healthcare professions and interprofessional education.

Nursing Simulation Center Vision

The Nursing Simulation Center aims to be renowned for enhancing experiential learning and recognizing diverse learning needs using innovative simulated activities and teaching methodologies that support learners in pursuing education in healthcare careers. We strive to provide a safe learning environment that fosters teamwork, collaboration, communication, and community engagement.

General Guidelines

The following guidelines are in place to enhance the learning experience and promote the safety for all participants during their learning experiences while in the NSC. It is expected that everyone in the NSC will adhere to these guidelines, including faculty, staff and students. The Coordinator of the NSC will update the contents of this manual as needed and will advise users of these changes as they occur. These guidelines must be followed at all times.

Code of Conduct

The NSC is an area that fosters active learning and active participation by all students. The simulation center is intended for educational purposes and not for therapeutic use. Students are expected to be prepared for each simulation experience and ready to actively participate. All simulation scenarios in the center are to be used as learning opportunities within the NSC only. No discussion regarding the simulation scenario or actions of other students should take place outside of the NSC environment. Debriefing sessions may be conducted during certain stages of the simulation and/or after all simulations. All course faculty and instructors are expected to support the mission and vision of the SVSU Nursing Clinical Simulation Center. All students, faculty, and staff should exercise the highest level of professionalism, integrity, ethics, objectivity, and mutual respect as well as a safe learning environment for colleagues while participating in and observing simulated learning experiences. The NSC staff have the right to remove anyone (instructors, students, etc.) that does not abide by the guidelines.

- ❖ Policies and Procedures: All participants must have on file a signed Acknowledgement of Policies and Procedures as part of the student handbook. SVSU Health policies and procedures take precedence over any circumstances not covered in this document.
- ❖ Hours of Operation: NCS normal hours of operation are subject to change. The open practice hours for the NSC are posted on the Nursing Simulation Lab calendar in canvas. Students should sign up for a time slot in order to ensure a practice space in the lab. The lab is set up with the skills equipment from the N2 semester. Students should email the NSC Coordinator 48 hours in advance if specific equipment is needed. After hours and weekend access needs to be approved in advance by the NSC Coordinator at least one month before scheduling a simulation event.
- ❖ The Simulation Center is intended for educational purposes and not for therapeutic use. Therefore, equipment, solutions, and supplies are not to be used on humans. Exceptions may only occur with specific permission of instructor and NSC Coordinator. Violation of this rule may result in serious injury or death.
- ❖ The student may occasionally be called upon to act as a “patient” in simulation. Any assessments or procedures performed during simulations are for educational practice only and do not provide actual therapeutic or diagnostic care.
- ❖ Lab equipment may not be moved without NCS center staff consent, see equipment check out guidelines.
- ❖ Perform only those activities authorized by the instructor. Carefully follow all instructions, both written and oral. Unauthorized activities are prohibited.
- ❖ Be prepared for your work in the NSC. Horseplay, practical jokes, and pranks are dangerous and prohibited.
- ❖ Know the locations and operating procedures of all safety equipment including the first aid kit, fire extinguisher, and spill kit. Know where the fire alarm and the exits are located.
- ❖ Students are never permitted in the storage rooms or preparation areas unless given specific permission by their instructor.
- ❖ Cell phones are not permitted in the NCS.
- ❖ Medication usage: The NCS does not use real medication during simulation. At the end of any session, it is essential to leave all simulated medication in the NSC facility. Following all simulations for the day medications are stored in a secured room.
- ❖ Biohazard Materials: The Nursing Clinical Simulation Center will not permit, at any time, any biohazard material.
- ❖ Food and Beverages: Food and beverages are not permitted in the simulation laboratories. They are only permitted in the lobby, classroom and hallway areas of the building or designated eating areas. Only beverage cups with closable lids are permitted in H110. All spills must be reported immediately to the simulation center staff.
- ❖ Dress Code:
 - o Staff and instructors are expected to always present with professional appearance.
 - o Participants are expected to wear the appropriate attire for their department or organization, during all simulation experiences, as listed in BSN handbook.
- ❖ Backpacks and other materials not being used for simulation must be stored in lockers, designated areas, or remain in the classroom.
- ❖ Students may not work in the NSC without instructor or staff present.
- ❖ A visible school ID badge is required at all times.
- ❖ Simulated learning experiences are to be used for learning purposes only. Discussion of scenarios or the actions of fellow students should NOT take place outside of the NSC.

- ❖ Perform only those activities authorized by the faculty and instructor. Read all procedures thoroughly before entering the NCS. Carefully follow all instructions, both written and oral. Unauthorized activities are prohibited.
- ❖ Notify the NSC Coordinator or Simulation Educator if equipment is damaged, working improperly, or at risk of exposure to bodily fluids.
- ❖ Labels and equipment instructions must be read carefully before use. Set up and use the prescribed apparatus as directed in the instructions or by your instructor.
- ❖ Please be respectful of the simulation area. These areas should be kept clean at all times. Students must return equipment to its proper location and cleanup work areas prior to leaving the NSC.
- ❖ Mannequins, simulators, and equipment should only be relocated or removed as instructed by the staff and faculty in the NSC.
- ❖ All personal electronics are prohibited during simulation experiences unless prior authorized by NSC staff. Resources, such as reference books and laptop computers, are housed in the NSC for student reference during simulation and practice experiences.
- ❖ All students are required to swipe in and out when using the Nursing Simulation Center outside of scheduled class time.
- ❖ All clinical instructors are required to sign in and out of the Simulation Center. The sign in/ out book is located in H100.
- ❖ Report any accident (spill, breakage, etc.) or injury (needle stick, cut, burn, etc.) to the instructor or staff member immediately, no matter how trivial it may appear. A Quality Improvement Clinical Event or Clinical Near Miss form must be completed (Appendix C).
- ❖ Never handle broken glass with your bare hands. Use a brush and dustpan to clean up broken glass. Place broken or waste glassware in the designated glass disposal container.
- ❖ When removing an electrical plug from its socket, grasp the plug, not the electrical cord. Hands must be completely dry before touching an electrical switch, plug, or outlet.
- ❖ Report damaged electrical equipment immediately. Look for things such as frayed cords, exposed wires, and loose connections. Do not use damaged electrical equipment.

Reporting Issues

Malfunctioning equipment should be reported to the simulation staff who will work to resolve the problem. If the problem cannot be resolved alternative equipment will be used or a room change will take place when possible. For concerns regarding faculty or staff, please contact the Nursing Simulation Center coordinator.

Confidentiality

All students are expected to maintain all the requirements of the Health Insurance Portability and Accountability Act (HIPAA), the Family Educational Rights and Privacy Act (FERPA), and all other federal and state laws requiring confidentiality. These requirements also hold true in the NSC area. Due to the realistic nature of the scenarios used in the NCS and to provide the best learning experiences. All individuals using the NCS are expected to protect information pertaining to the actions of students and peers and are expected to keep these experiences within the clinical group for learning purposes only. All individuals agree to report any violation to the Coordinator of the NSC, Simulation Educators, or nursing faculty. Simulation scenarios have the potential of being recorded, and all individuals in the NSC are required to protect these recorded simulations as if they were a real situation. The photos and videos are used by the NSC and for public relations purposes. Students are not permitted to share these recordings/photos with anyone. Sharing of recorded NSC activities will result in disciplinary action and referred to the Professional Conduct Committee. All learners utilizing the NSC are required to sign the handbook

acknowledging having read and understood this statement and agree to maintain the strictest confidentiality regarding experiences in the simulation center.

Remediation

Remediation of simulation performance as well as actual clinical performance is recommended by faculty and clinical faculty on an individual basis. If it is determined that remediation is warranted, the student is asked to return to the NSC based on the recommendation of the faculty, clinical faculty, or NSC coordinator and Simulation Educator. Students referred to the NSC are notified by the faculty when a plan has been drafted and will collaborate with the NSC regarding the day and time of remediation.

Equipment Check Out

Faculty, staff, and/or students may check out equipment (blood pressure cuffs, stethoscopes, glow germ, etc.) for teaching and learning experiences as approved by the Coordinator of the NSC. Equipment is checked out and returned within 48 hours through the NSC staff by utilizing the appropriate checkout form located in the equipment binder. If equipment will be needed longer than 48 hours, approval by the Coordinator of the NSC is required.

Clean Up

All users of the NSC have the responsibility for maintaining the NSC in proper working condition. The NSC should be returned to the way it was found. All trash should be disposed of appropriately and reusable supplies and resources should be returned to their designated areas. Beds need to be remade and returned to the lowest position, bed rails down, and over bed tables should be placed at the foot of the bed. Curtains should be placed against the wall and securely fastened. Soiled linens should be placed in the covered linen hampers. Soiled linen is laundered by the NSC staff utilizing the washer and dryer in the ADL apartment. Reusable supplies should be restocked when not in use. Sharps containers are replaced by the NSC staff. The Coordinator of the NSC is responsible for disposing of the filled containers appropriately. Lights should not be turned off when leaving as they are on motion sensors.

Media: Videos

The NSC has the capacity to display a variety of media. Multiple microphones and cameras are located throughout the simulation center, case study suites, Activities of Daily Living lab, and ICU rooms. This equipment has the capability to record all activity in these areas. The audiovisual equipment should only be used by those who have received appropriate training. Recordings are used for educational purposes and debriefing opportunities with appropriate faculty, staff, and students. The confidentiality agreement protects privacy and discourages inappropriate discussion of video contents or student performance in the simulation scenarios. Any unethical viewing or publication outside of the classroom, such as posting on YouTube or Facebook, is considered unacceptable behavior and is subject to disciplinary action.

“Clean” Needle Stick Guidelines

According to the CDC guidelines, all sharps are to be handled safely and disposed of in a designated sharps container. In the event of a “clean” needle stick, the Coordinator of the NSC or nursing faculty is to be notified immediately to ensure proper first aid assistance. An Event/Near Miss Form (Appendix E) is to be filled out and reported according to the Department of Nursing guidelines.

Simulation Medications

All simulated medications will be clearly labeled as “simulated medication” and will be stored in locked cabinets when not in use. Simulated medications will be used during simulation experiences within the Nursing Simulation

Center and will not be transferred off site. The simulated medications will never be administered to any learners or staff members.

Latex Warning

The NSC is NOT a latex-free environment. If you have a latex allergy or sensitivity, please notify the agency, course faculty, and clinical faculty of your allergy or sensitivity. Every effort will be made to provide a latex-free substitution. However, if you have a latex allergy or sensitivity, please use the same protective measures as stated in the CDC guidelines. Link to information: <http://www.cdc.gov/niosh/docs/98-113/>

Security and Emergencies

All faculty and staff in the NSC are to ensure that the simulation rooms are secure and safe when in use. The doors to the NSC are to be locked at all times when not in use. Campus Facilities should be notified if the NSC is scheduled to be open on weekends. The University Police should be notified by calling 4141, if the NSC needs opened after regular business hours (evenings and weekends). It is the responsibility of the faculty and students to be aware of the location of emergency exits on each floor of the College of Health and Human Services Building. In the event of a fire, all persons are expected to evacuate the building and Police are to be called at 9911. In the event of any other emergencies please contact Police at 9-911. Fire extinguishers on the first floor are located outside room 106e, 111, and at the major exits. Fire pull alarms are located at each major stairwell.

Infection Control

Participants of simulated scenarios are expected to adhere to all the standard precautions and transmission specific precautions (contact, droplet, airborne) as recommended by the Centers for Disease Control and Prevention (CDC). Anyone infected as well as equipment coming in contact with them are considered contaminated and must be handled accordingly. Personal protective equipment (PPE) is used and disposed of as if this were an actual event. Needles and sharps are to be placed in the appropriate designated sharps containers located throughout the NSC. The Coordinator of the NSC is to be notified when sharps containers are full to ensure that the container is changed and disposed of properly. The sharps containers will be checked at the end of each semester and as needed.

Physical Safety

Students are instructed on safe handling, repositioning, and transfer techniques and are expected to use caution when practicing patient transfer and lifting skills. Assistance should be requested when lifting mannequins or heavy equipment. A first aid kit is stored in the NSC office. All incidents or injuries need to be reported immediately to the faculty or NSC Coordinator. The appropriate Event/Near Miss Form will be completed by the NSC Coordinator, Clinical Instructor, Simulation Educator or Faculty and a copy of the completed report will be placed in the individual's file. The completed form is given to the Nursing Department Chair and the incident is reviewed at the Root Cause Analysis meeting. A copy of the Event/Near Miss Form is found in the BSN student handbook (Appendix E). If immediate medical attention is needed emergency medical services is contacted. If the injury does not require emergency attention, the learner is advised to seek treatment at the nearby MedExpress or their primary care provider.

Incident Reporting

Any incident on SVSU property or an employee's work involving an injury or illness must be reported as soon as reasonably possible, no matter how minor an injury may appear and regardless of whether the injured or exposed person received medical attention.

In the event of **ANY** medical emergency call 911. SVSU employees are not permitted to transport any injured/ill individual.

<https://www.svsu.edu/hr/injuryincidentreportingprocess/>

Psychological Safety

Student participation in simulation experiences is a requirement as part of the integration course for all students. The NSC provides a safe learning environment for all students, faculty, and staff. There may be certain simulation situations where certain scenarios or questions may cause a potential negative emotional response. In this situation, students must inform the NSC Coordinator and the nursing faculty of the concern and may withdraw and discontinue participation at any time with no negative consequences. An alternative experience will be decided between the student and the faculty member. Students are provided with on campus resources including Student Counseling Center and crisis numbers prior to emotionally laden simulation scenarios.

Moulage Use

At times students will be asked to play the patient role to include the use of moulage or make up to simulate injuries/medical conditions. Prior to applying moulage for each simulation experience, students will be asked about any personal or medical condition that would prohibit use of moulage. It is the student's responsibility to inform Simulation Educators of any conditions or concerns. If the student is unable to have moulage applied a new role will be assigned.

Handling Chemicals

The Material Safety Data Sheets (MSDS) kept in the Safety Manual supply details about each chemical, specifically: Product identification, emergency and first aid, toxicology and health data, physical data, fire and explosion data, reactivity data, special protection necessary, special precautions to take, spill/leak/disposal procedures, and transportation information. You should refer to these sheets if you have questions about a chemical. Whenever you are uncertain of the hazards, risks, or proper and safe procedures to be followed, you should consult the reference materials and MSDS available in the MSDS binder located in H100. If you are still unsure, or for any reason feel that you cannot safely accomplish the assigned task, you should *not* continue. Once again, you have not only the legal right, but the responsibility, to work safely.

APPENDIX B

Saginaw Valley State University Crystal M. Lange College of Health and Human Services Policy on Blood Borne Pathogens

Statement of Purpose

Human Immunodeficiency Virus (HIV), Hepatitis B and Hepatitis C infections, as well as other infectious diseases affect the SVSU community. It is the intent of this policy to address the specific needs of nursing faculty and students, while remaining in compliance with the SVSU Blood Borne pathogen exposure control plan policy.

Definitions

For purposes of this policy, "exposure" is a significant occupational exposure of one of three types, requiring immediate action:

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

Policies

1. The nursing faculty acknowledges that exposure to HIV or other infectious diseases could occur during classroom/simulated practicum or practicum courses.
2. Students are advised of this policy upon admission to the nursing program. The policy is found in the student handbook. Students are asked to sign that they have received a copy.
3. This policy is based on current health care guidelines and is reviewed and updated as necessary. A bibliography is included.
4. Nursing faculty and students are required to complete Hepatitis B vaccination series prior to practicum courses unless immunity is documented, or the vaccine is contraindicated,
5. The department does not discriminate against any person who has a blood-borne infection when considering admission and/or employment.
6. Students or faculty who are carriers of blood-borne pathogens may continue to engage in activities/duties.
7. The department does not advocate mandatory testing or disclosure of HIV or HBV status, but recommends voluntary testing and disclosure based on individual circumstances. If a student or faculty member believes herself/himself to be at risk, she/he has an ethical responsibility to know his/her HIV/HBV status. Referral resources shall be made available for students and faculty desiring confidential or anonymous testing.

8. Undergraduate students are taught infection control principles and Universal Precautions prior to practicum experience. Students must demonstrate mastery of these principles and their application in N274 Practicum I. Application of these principles in Practice will be considered safe clinical practice. It is assumed graduate students enter with knowledge of Universal Precautions and infection control principles and apply these in practice settings. Failure in application at any time shall be handled in accordance with department policies on safe clinical practice.
9. The nursing practicum laboratory at SVSU has equipment and facilities required to comply with current CDC and OSHA guidelines regarding Universal Precautions.
10. Students are expected to care for clients with infectious diseases as part of routine practicum experiences. Students or faculty who are immunocompromised or who have non-intact skin are not expected to care for clients with HIV or HBV infection.
11. The department faculty is responsible for keeping abreast of new developments related to HIV infection and treatment, and other infectious diseases.
12. The nursing faculty assumes responsibility for integrating care of HIV-infected and HBV-infected clients as well as care of clients with other infections in the curriculum.

Procedures for Exposure to Blood Borne Pathogens

1. Immediately following an exposure to blood or body fluids:
 - Needle sticks and cuts should be washed with soap and water. Splashes to the nose, mouth, or skin should be flushed with water. Eyes should be irrigated with clean water, saline, or sterile irrigates.
 - No scientific evidence shows that the use of antiseptics for wound care or squeezing the wound will reduce the risk of transmission of HIV. The use of a caustic agent such as bleach is not recommended.
2. Report the exposure immediately to the faculty member, agency, and complete the facility paperwork. Complete the "Exposure Incident Investigation Form" (B₄) only if the facility does not have their own form. Prompt reporting is essential. In some cases, HIV post-exposure treatment may be recommended, and, if so it should be started as soon as possible—preferably within 1-2 hours.
3. Students should be aware that they are responsible for health care costs incurred related to any exposure.
4. Students are encouraged to refer to current CDC information on exposures to blood borne pathogens (see attached) as an aid for decision-making regarding post-exposure follow-up.
5. Complete the Clinical Event/Near Miss Form.

B₃

Complete this form (Post-exposure to Blood Borne Pathogens) and send it to the Dean's Office.
File immediately with the dean's office

EXPOSURE INCIDENT INVESTIGATION FORM

Date of Incident: _____ Time of Incident: _____

Location: _____

Person(s) Involved: _____

Known Infection Status: _____

Potentially Infectious Materials Involved: _____

Type: _____

Source: _____

Circumstances (What was occurring at the time of the incident):

How was the incident caused (accident, equipment malfunction, etc. List any tool, machine, or equipment involved):

Personal protective equipment being used at the time of the incident:

Actions taken (decontamination, clean-up, reporting, etc.):

Recommendations for Avoiding Repetition of Incident:

Student Signature

Date

Faculty Signature

Date

Date received in the Dean's office: _____

APPENDIX C

Saginaw Valley State University Department of Nursing Baccalaureate of Science in Nursing Policy for Testing, Standardized Testing Remediation, and Evaluation

Comprehensive testing including standardized testing is used as part of the overall education and evaluation of students in the BSN program. Historically, we, like other nursing programs, have used standardized testing to monitor program quality based on national benchmarks. The tests and materials are supported by student fees assigned to specific courses and are incorporated into the learning and evaluation experience. To practice as a registered nurse in any state, graduates must pass the NCLEX-RN licensure examination. SVSU's program assists students to prepare for the NCLEX-RN examination through a variety of teaching-learning methods, including comprehensive examinations and standardized testing.

A. STANDARDIZED TESTING

Beginning in the Fall 2024, our program adopted a comprehensive standardized testing product from ATI called Content Mastery Series (CMS). We will phase out the previous standardized testing product, HESI, from Elsevier Publishing Company.

What is Content Master Series (CMS) ?

- The Content Mastery Series (CMS) includes proctored and online practice assessments that evaluate students' mastery of nursing concepts across specific content areas, including targeted tests for individual body systems.
- The series provides proficiency levels to measure students' knowledge acquisition and includes the RN Comprehensive Predictor® to assess NCLEX® readiness, with a practice version available for preparation.
- Students and faculty can generate score reports after assessments, with students receiving individualized Focused Reviews® to guide remediation and improve content understanding.
- Comprehensive, evidence-based online Review Modules cover essential core content in nine areas, featuring NCLEX-style items, interactive learning templates, and links to additional resources.

What is HESI?

- HESI offers an Assessment-driven Review (ADR) program designed to increase student pass rates on the nursing licensing exam and lower program attrition.
- At SVSU, we use HESI as a comprehensive program from the beginning of the program through your final semester.
- Used as a comprehensive program, HESI tools can help students prepare more efficiently, as well as increase confidence and familiarity with content.
- This program includes case studies, online practice and proctored testing over concepts covered in SVSU's nursing program. It also is a program that includes testing of indicators of academic success in nursing school, tests critical thinking, and tests the student comprehensively on a test that is like the NCLEX-RN board exam.

How the CMS & HESI Tests Count in the Course Grade?

- Up to 10 percent of the Course Grade can be tied to performance on N level exams.
- Some additional tests or activities may be required for a course. See individual course syllabus for additional information.

Standardized Testing for Competence in Major Nursing Content: BSN*

Students in the undergraduate nursing major will be required to take a combination of concept based and specialty CMS or HESI exams. Testing will take place on campus and will be proctored. The CSM or HESI testing schedule will be provided by the instructor early in each course.

Nursing Level	HESI Products Used:	CMS products Used:
N1	Pharmacology Specialty Exam Pathophysiology Specialty Exam Case Studies & Online practice exams	Pharmacology practice and specialty exams
N2	Fundamentals specialty Exam Case Studies & Online practice exams	Mental Health practice and specialty exams Fundamentals practice and specialty exams
N3	Community Health HESI exam Case Studies & Online practice exams	Community practice and specialty exams Nutrition practice exam
N4	Customized N4 concept-based proctored test Medical-Surgical Specialty Exam Case Studies & Online practice exams	Maternal/Newborn practice and specialty exams Med/Surg practice and specialty exams Peds practice and specialty exams
N5	RN Exit (Version 1 & Version 2) RN Exit computerized adaptive test Case Studies & Online practice exams HESI/Saunders Online Review for NCLEX-RN Exam	Leadership practice and specialty exams Comprehensive Predictor Exam
Internship	Fundamentals specialty Exam- version 2	Nutrition practice and specialty exams

*The CMS & HESI tests planned may change based on product development, availability, and student learning needs.

What is remediation?

To remediate means to go back to an area that you did not fully understand and review. Your instructor will provide you with a description of the remediation plan for each course you are in. Most HESI exams will provide a printout of the topics you need to review, in a list format, case studies, and remediation packets. You should use these topics and tools as a study guide. CMS provides a focused review that focuses on the student learning needs. These will be available on your ATI dashboard. These focused reviews include eBook modules, post study quizzes, personalized learning goals, and quiz performance leveling reports. The levels are below Level 1 (does not meet), Level 1 (just meets), Level 2 (readily meets), and Level 3 (exceeds). The goal is for students to meet level 3 by the end of the program.

When completing remediation activity that is not proctored (i.e. on the internet at home or out of the classroom) the instructor has access to detailed information about the timing and duration of remediation activity, and if the course instructor believes that the student has not taken the time to remediate seriously, the instructor has the authority to have the student come to campus to take another remediation test in a proctored environment. Remediation is intended to help the student learn or relearn essential information missed on the initial test. We believe remediation is key for students to be successful on the NCLEX exam, thus all students are expected to remediate to increase HESI scores or level up CMS scores and ensure understanding of NCLEX material. In a course, Elsevier Adaptive Quizzing will be utilized as a remediation tool. The focus review is individualized to the student and found on the ATI dashboard. It is highly recommended that students actively engage in remediation beyond classroom requirements. Below is a summary of the HESI products used at each nursing course level:

Nursing Level	Testing product
N1	Pharmacology Specialty Exam Pathophysiology Specialty Exam Adaptive Quizzing Course content exams
N2	Fundamentals specialty Exam Adaptive Quizzing Course Content Exams
N3	Community Health Specialty Exam Adaptive Quizzing Course Content Exams
N4	Customized N4 concept-based proctored test Adaptive Quizzing Course Content Exams Medical-Surgical Specialty exam
N5	RN Exit (Version 1 & Version 2) RN Exit computerized adaptive test Case Studies & Online practice exams HESI/Saunders Online Review for NCLEX-RN Exam Adaptive Quizzing Course Content Exams

* Instructors will indicate the content mastery level on standardized testing in the course syllabus.

How are HESI exams scored?

HESI scores range from 0 to over 1,000 and can be as high as 1,500 (depending on the difficulty level of the exam). An acceptable level of performance is achieved by earning the benchmark score (which is a raw score of 900 and above for all HESI tests). However, the recommended level of performance is 900 and above for all scores provided. When preparing for the NCLEX®, it is recommended that students seriously remediate any subject area category in which they obtained a score of less than 900. We believe remediation is key for students to be successful on the NCLEX exam, thus all students are expected to remediate to increase HESI scores and ensure understanding of NCLEX material. It is highly recommended that students actively engage in remediation beyond classroom requirements. **Students are expected to use their testing report to remediate using the adaptive quizzing product from Elsevier.**

Grading Rubric for HESI Testing and Remediation

HESI score	Grade**
>950	100%
900-949	90%
850-899	80%
800-849	70%
750-799	60%
700-749	50%
650-699	40%

Remediation is automatically assigned based on student HESI scores. This appears as case studies and essential packets in their HESI Assessment Next Generation course, linked to the exam they took. The number of and content of the essential packets are based on the score received in each category of the HESI. The recommended benchmark, to be successful on the NCLEX, is 850 (NCSBN, 2022). This is the standard students will be held to for all HESI examinations. Any portion of the test you did not reach 850, regardless of the overall score, will result in a remediation packet. For example, if a student receives less than 850 in basic care/comfort, an essential packet will be triggered for remediation. All students will automatically be assigned 3 case studies that are based on the concepts that need reviewed, as determined by their performance during the exam.

Grading Rubric for CMS Practice & Proctored Exams

Using a combination of the practice and proctored assessment to achieve 10% of the course grade.

PRACTICE ASSESSMENT	
4 points	
<p>Complete Practice Assessment A.</p> <p>Remediation:</p> <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on initial attempt • For each topic missed, complete an active learning template as part of the required remediation process.* <p>Take Post Study Quiz (if available)** and complete an active learning template for each topic missed.</p>	<p>Complete Practice Assessment B.</p> <p>Remediation:</p> <ul style="list-style-type: none"> • Minimum 1-hour Focused Review on initial attempt • For each topic missed, complete an active learning template as part of the required remediation process.* <p>Take Post Study Quiz (if available)** and complete an active learning template for each topic missed.</p>

STANDARDIZED PROCTORED ASSESSMENT			
Level 3 = 4 points	Level 2 = 3 points	Level 1 = 1 point	Below Level 1 = 0 points
<p>Remediation = 2 points:</p> <ul style="list-style-type: none"> • Minimum 1-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.* 	<p>Remediation = 2 points:</p> <ul style="list-style-type: none"> • Minimum 2-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.* 	<p>Remediation = 2 points:</p> <ul style="list-style-type: none"> • Minimum 3-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.* 	<p>Remediation = 2 points:</p> <ul style="list-style-type: none"> • Minimum 4-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.*
10/10 points	9/10 points	7/10 points	6/10 points
Proctored Assessment Retake***			
No retake required	No retake required	Retake required/recommended	Retake required/recommended

Remediation is based on the student’s score. ATI Focused Review facilitates the post CMS assessment remediation experience for students. This personalized learning is based on student’s individual performance on the CMS practice and proctored assessments to address student learning needs. When the student has completed their first round of remediation (practice assessments only), they can take a post-remediation quiz that provides similar questions to identify content gaps. The focus review will provide a study guide, comprehensive predictor, and NCLEX test taking strategies based on the individual student needs. The focus review also identifies what level the student is currently at, with strategies to level up. All students must complete the focus review associated with each CMS exam.

RN Exit Comprehensive Exam & CMS Comprehensive Predictor Exam

Upon graduation, students must successfully pass the NCLEX-RN® exam to be licensed to practice as an RN. To assist students in preparation for the NCLEX-RN®, the Department of Nursing has incorporated material and standardized testing from CMS & HESI throughout the nursing courses. In the last semester of the program, students must take the CMS Comprehensive predictor or HESI RN Exit comprehensive exam in N494. This test offers an assessment of the student’s mastery of basic principles including fundamentals of nursing; pharmacology; adult medical-surgical nursing; maternal newborn care; mental health nursing; nursing care of children; nutrition; leadership and community health nursing. The student’s goal is to achieve the HESI benchmark (900 raw score) on the HESI RN Exit Exam which corresponds to a 98% predicted probability of passing NCLEX on the first attempt. Students must achieve a 900 raw score on the exit examination in order to pass N494 course regardless of grades received on all other assignments. Students not receiving a 900 raw score on testing must take the following approach:

- Student must remediate any areas indicated on their HESI exit comprehensive exam (as applicable or as directed by their faculty member).
- If the benchmark is not met (900 raw score), a grade of “incomplete” for the course will be submitted.
- The student must make arrangements to take an NCLEX review course and provide documentation to the faculty. The NCLEX review course may involve an additional cost to the student.

- Student must submit proof of attendance to the faculty on record to fulfill the incomplete.

The student’s goal is to achieve the CMS benchmark of 95% or above passing predictability. Students not receiving a 95% or above passing predictability must take the following approach:

- Students must remediate any areas indicated on their Virtual ATI –personalized assessment driven NCLEX review in an online class (as applicable or as directed by their faculty member).
- If the benchmark is not met, a grade of “incomplete” for the course will be submitted.
- Students must make arrangements to take an NCLEX review course with ATI and provide documentation to the faculty. The NCLEX review course may involve an additional cost to the student.
- Student must submit proof of attendance to the faculty on record to fulfill the incomplete.

CMS Comprehensive Predictor Grading Rubric

PRACTICE ASSESSMENT			
4 points			
Complete Practice Assessment A. Remediation: • Minimum 1-hour Focused Review on initial attempt • For each topic missed, complete an active learning template as part of the required remediation process.* Take Post Study Quiz (if available)** and complete an active learning template for each topic missed.		Complete Practice Assessment B. Remediation: • Minimum 1-hour Focused Review on initial attempt • For each topic missed, complete an active learning template as part of the required remediation process.* Take Post Study Quiz (if available)** and complete an active learning template for each topic missed.	
STANDARDIZED PROCTORED ASSESSMENT			
95% or above Passing predictability = 4 points	90% or above Passing predictability = 3 points	85% or above Passing predictability = 1 point	84% or below Passing predictability = 0 points
Remediation = 2 points: • Minimum 1-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.*	Remediation = 2 points: • Minimum 2-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.*	Remediation = 2 points: • Minimum 3-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.*	Remediation = 2 points: • Minimum 4-hour Focused Review • For each topic missed, complete an active learning template as part of the required remediation process.*
10/10 points	9/10 points	7/10 points	6/10 points
Proctored Assessment Retake***			
No retake required	No retake required	Retake required/recommended	Retake required/recommended

How do I purchase and receive HESI materials?

The cost for the comprehensive HESI package is divided and added to course fees. The materials will be distributed early each semester by your instructor.

How do I purchase and receive CMS materials?

The cost of the CMS is included with your ATI bundle and fees. The material will be made available to you the semester it is utilized.

What if I have an accommodation?

All CMS and HESI products have been reviewed and approved by SVSU’s Office of Accessibility Resources and Accommodations office. If you have a registered accommodation that will affect test taking, you should bring your

letter documenting your approved accommodations to your instructor promptly at the beginning of each semester. We will discuss how to best help you succeed in your state board exam and set a plan for CMS or HESI testing that facilitates this- please note that some product feature limitations can occur. Accommodations require extra planning time to facilitate.

***** HESI is a product of Elsevier Publishing Company. All products are copyrighted. CMS is a product of ATI. All products are copyrighted. Any student who participates in any act of academic dishonesty may incur the full disciplinary sanctions under the Academic Honesty Policy. Misuse could include but not limited to students who participate in the improper sharing of information via electronic devices (i.e Quizlet, digital cameras, etc.) to engage in academic dishonesty. Also, see the SVSU Academic Dishonesty policy for additional details.**

B. INSTRUCTOR GENERATED EXAMINATIONS

1. In the development of course examinations, the following goals for cognitive leveling in the development of course examinations are as follows:

Blooms Cognitive Domains*	N241 Pharm	N242 Patho	N251	N341	N371	N441	N471
Knowledge	15-25%	15-25%	15-25%	0-10%	0-10%	0-10%	0-10%
Comprehension	30%	30%	30%	20%	20%	15%	15%
Application or higher	45-55%	45-55%	45-55%	70-80%	70-80%	75-85%	75-85%

*Bloom's cognitive domains are, in order, with definitions:

1. Knowledge: Involves the simple recall of information; memory of words, facts and concepts
2. Comprehension: The lowest level of real understanding; knowing what is being communicated
3. Application: The use of generalized knowledge to solve a problem the student has not seen before
4. Analysis: Breaking an idea or communication into parts such that the relationship among the parts is made clear
5. Synthesis: Putting pieces together to constitute a pattern or idea not clearly seen before
6. Evaluation: Use of a standard of appraisal; making judgments about the value of ideas, materials or methods within an area

If appropriate, include dosage calculations in your course examinations.

2. In addition to considering cognitive leveling, all Nursing course examinations should be developed to mirror the NCLEX-RN test plan:

Client Needs	Percentage of Items from Each Category/Subcategory
Safe & Effective Care Environments	
• Management of Care	15-21%
• Safety and Infection Control	10-16%
Health Promotion & Maintenance	6-12%
Psychosocial Integrity	6-12%
Physiological Integrity	
• Basic Care and Comfort	6-12%
• Pharmacological & Parenteral Therapies	13-19%
• Reduction of Risk Potential	9-15%
• Physiological Adaptation	11-17%

Source: NCSBN (2022). 2023 Next Generation NCLEX-RN Test Plan. Retrieved from

3. A final course grade below 75% is considered failing by the Department of Nursing in all cases and prohibits progression to other courses within the program. Course syllabi may require additional criteria such as achieving a higher percentage on exam grades in order to pass a particular course. When the grading policy differs between the handbook and the individual course, the course syllabi shall override the grading policy outlined in this handbook.
4. The following courses (N241, N242, N251, N341, N371, N471, N441, N471) will have a comprehensive final. The Final examination will be worth a higher percentage than other course examinations. It is recommended that all these courses have at least a total of three examinations.
5. A comprehensive final will include a combination of new and previously tested course content.
6. In all semesters, important words in the stem may be bolded or highlighted
7. All exams will consist of a minimum of 85 questions. Tests will be timed in a manner consistent with test content.
8. Exams will consist of at least 2 patient care scenarios. The patient care scenarios will have at least 6 questions of various formats, asked from it.
9. Exams will include approximately 15 percent question formats similar to the NCLEX-NextGen. These formats include bow tie, matrix, hotspot, audio and visual clips and evolving patient care scenarios.
10. When lab results are a part of a question or scenario reference ranges appropriate to the scenario will be included. E.g., when a patient scenario is about an adult patient only adult reference ranges will be provided. If the question is asking about a 6-month-old patient only the lab values for that age range will be provided.
11. Medications will all be generic names
12. Select all that apply will be given credit with penalty, but ordered and category items will continue to be scored dichotomous (right or wrong)
13. Reasonable accommodations for testing will adhere to the guidelines set by the Bureau of Professional Licensing and the National Council of State Boards of Nursing. This includes, but is not limited to, the use of electronic testing, 5-hour time limit, and the use of a natural reader is limited to testers who are blind or has low vision, as established by a medical provider.

Confirmation of Understanding:

I have read **Policy for Testing, Standardized Testing Remediation, and Evaluation** and agree to abide by its policies throughout the program.

Student Signature: _____ Date: _____

Approved: 8/2024

APPENDIX D

SAGINAW VALLEY STATE UNIVERSITY COLLEGE OF HEALTH AND HUMAN SERVICES PROFESSIONAL CONDUCT COMMITTEE

D1

PURPOSE

As future members of a profession, and current and future representatives of Saginaw Valley State University, it is vital that students understand as well as demonstrate professional behaviors, such as maintaining confidentiality, demonstrating respect, and being receptive to constructive criticism. Students must recognize that behaviors both in and out of a classroom or clinical setting reflect on them as individuals and professionals.

Recognizing that determination of unprofessional behaviors may be subjective, this committee assists in looking at circumstances and context to provide an objective interdisciplinary analysis of the situation. The goal of this committee is ultimately to facilitate the integration of professional growth and transition to the students' chosen professions.

COMPOSITION

(Note: "Faculty" as contained herein refers to both Faculty and Administrative/ Professional staff.) The Professional Conduct Committee ("PCC") shall consist of faculty and student representatives from each department within the College. Faculty will serve on a voluntary basis. Students will be solicited by faculty within their department and must be within one year of anticipated graduation.

One faculty representative will agree to serve as PCC Chair on an academic year basis.

Hearings will consist of a minimum of three faculty, representing at least two different departments, and two students (only one of these five shall be from the involved department). Faculty directly involved with a situation will not serve as members at the hearing for that situation. At the discretion of the PCC Chair, additional professionals (community or university) may be asked to attend, dependent on each situation.

PROCESS

1. Upon identification of an unprofessional behavior, it is expected that faculty will discuss this situation with the student involved. Faculty will use his/her discretion in deciding if the incident warrants either an anecdotal note be written and retained by faculty, and/or a referral be made to this or any other university committee. If a repetition of that same unprofessional behavior, or another unprofessional behavior is identified, a referral to the committee is initiated (sent to the PCC Chair). Referral forms are to be sent to the PCC Chair within three (3) working days of faculty becoming aware of the behavior. The faculty member will designate if the referral is "minor" or "major."
 - a. Minor referrals are either those unprofessional behaviors which the faculty has previously addressed (and written up as an anecdotal note), but have now recurred; or, the faculty has deemed that a minor referral to the Committee is warranted (this determination is based on the individual unprofessional behavior, the context in which it occurred, and the student's status in the program [early, mid-way, close to graduation]). In any of these situations, the faculty is confident the unprofessional behavior will be resolved and non-repetitive (examples: tardiness, inappropriate language, etc.). A minor referral will require completion of the referral forms (see attachments) by both faculty and student. The faculty form is then sent by the faculty member to the PCC chair in a sealed envelope, with the student's name,

- program, date, and "PCC: MINOR" written on the outside. The student is responsible for sending the student form to the PCC Chair.
- b. Major referrals are those unprofessional behaviors which need to be addressed by the committee as soon as possible (examples: HIPAA violations, safety issues, etc.). A major referral will require completion of the referral forms (see attachment) by both faculty and student. The form is then sent by the faculty member to the PCC chair in a sealed envelope, with the student's name, program, date, and "PCC: MAJOR" written on the outside. It is also suggested that the faculty send an email to the PCC Chair notifying them of the major referral.
 - c. If the involved student refuses to complete their portion of the referral form, the faculty will forward the form along with a notation of the student's intended refusal to complete their portion. (Student refusal to complete their form will not interfere with the processing of the referral.)
2. The student is aware of all referrals, and faculty will notify students of the designation (minor/major).
 3. The PCC Chair, upon receipt of a:
 - a. Minor referral will place the sealed envelope in a locked file. Envelopes are filed alphabetically by student name. If a file already exists for that student, the PCC Chair shall convene a Committee hearing within 5 working days. If this extends beyond the end of a semester, every effort will be made to meet prior to semester-end.
 - b. Major referral will review the enclosed material and convene a Committee hearing within 5 working days. If this extends beyond the end of a semester, every effort will be made to meet prior to semester-end. Faculty may decide to withhold the student from clinical placements until the hearing is held.
 4. Once the PCC Chair has determined the need for a hearing, they shall:
 - a. Notify Committee members immediately of the need for a hearing, including the time and place of the hearing. Those members unable to attend shall solicit a replacement from within their department, if available.
 - b. Notify the student and involved faculty of the time and place of the hearing. Both the involved faculty member and the student have the option of submitting additional material to the PCC Chair (including faculty's previous related anecdotal notes); this material must be received by the PCC Chair no less than 48 hours prior to the hearing.
 - c. Distribute copies of all material via sealed mail to the Committee members, student, and faculty.
 5. Hearing
 - a. The faculty will be asked to present his/her case, and Committee members may ask questions of the faculty. The faculty may then be asked to step out of the room.
 - b. The student will be asked to present their case, and Committee members may ask questions of the student. The student may then be asked to step out of the room.
 - c. If the Committee determines the need for more information, the student and/or faculty member may be asked to re-enter the hearing for further explanations.
 - d. The Committee will review and discuss the data.
 - e. The Committee shall reach a decision by a recorded vote. In the case of a tie, the Chair shall cast the deciding vote. The possible decisions of the Committee are:
 - i. Uphold the recommendation of the faculty (as listed on the referral form).
 - ii. Uphold the recommendation of the student (as listed on the referral form).
 - iii. Suggest an alternate outcome.

- f. A written summation of the hearing, including the outcome, is prepared by the PCC Chair and forwarded within one business day to Committee members, the referring faculty member, the appropriate Department Chair, and the student.
 - g. A copy of all submitted materials and the written summation are placed in a sealed envelope, labeled with the student's name, program, date, and "PCC: HEARING," and placed back in the PCC Chair's locked file and the student's permanent file within the department.
6. Response to Hearing Outcome
- a. The faculty and the student both have the right to disagree with the decision of the Committee.
 - i. If the faculty does not agree with the decision of the Committee, he/she may implement their own outcome within the context of the involved course/student and the grading thereof.
 - ii. If the student does not agree with the decision of the Committee, and the implementation of any involved grading, the next step would be referral to the University Grade Grievance Procedure. In the event of a grade grievance associated with this same unprofessional behavior(s), the involved faculty member has the right to request this Committee's file on that student be copied and forwarded to the involved faculty member for inclusion as part of the grade grievance paperwork.
7. Failure by the student to complete the final outcome (as determined by faculty subsequent to the hearing) may result in failure of the course, per the course syllabus.
8. At the end of each academic year, the PCC Chair will purge those files which are greater than five (5) years old. Any purged materials will be shredded.
9. The following statement may be placed in the syllabus of any classes within the College, at the discretion of each Department: "Students within this course are expected to demonstrate professional behaviors. Unprofessional behaviors will be subject to referral to the College's Professional Conduct Committee. Failure to fulfill outcomes of a referral to this Committee may result in failure of this course."

COLLEGE OF HEALTH & HUMAN SERVICES
PROFESSIONAL CONDUCT COMMITTEE
REFERRAL FORM: FACULTY PORTION

Complete the following as accurately and succinctly as possible:

Faculty: Course: Student: _____

Type of concern (appearance, communication, timeliness, etc.): _____

Brief summation of event(s) which initiated referral (faculty to complete):

Proposed outcome:

Notification of this referral and the Student Referral Form were given to the student on:

_____ (Signature of Faculty) _____ (Date)

COLLEGE OF HEALTH & HUMAN SERVICES
PROFESSIONAL CONDUCT COMMITTEE
NOTIFICATION OF REFERRAL

This is notification that your faculty, _____, has referred you to the Professional Conduct Committee. The referral was designated as a:

_____ Minor _____ Major

The Professional Conduct Policy is attached. Please refer to it for further information.

Please note that also attached is the "Referral Form: Student Portion." This is to be completed immediately by yourself, and forwarded to: _____ (Chair, Professional Conduct Committee). If you want your portion to be included in this referral, it must be received by this Chair within three (3) working days of your receipt of this notification.

COLLEGE OF HEALTH & HUMAN SERVICES
PROFESSIONAL CONDUCT COMMITTEE
REFERRAL FORM: STUDENT PORTION

Complete the following as accurately and succinctly as possible:

Faculty: Course: Student: _____

Type of concern (appearance, communication, timeliness, etc.): _____

Brief summation of event(s) which initiated referral:

Proposed outcome:

_____ (Signature of Student) _____ (Date)

Appendix F

Nursing Department: Clinical Requirement/Delinquency Policy

Purpose

Clinical requirements for all nursing programs (BSN, RN and ADN to BSN, & Graduate) encompass immunizations, certifications, fingerprints, drug testing, and online orientation that are required by our clinical partners where our nursing students attend clinical rotations. It is important for our students to meet deadline dates to have all these clinical requirements submitted. Clinical agencies require two weeks prior to clinical starting for these requirements to be completed in order to allow them time to process badges, set up computer access, etc. If one student in a clinical group, does not meet deadline due dates, it holds up their entire clinical group for processing as the site will not accept a clinical group until ALL students are compliant with their clinical requirements.

Compliance Policy

For a student to be considered in full compliance, all clinical requirements, with the exception of the flu vaccine (flu vaccine policy explained below), must be valid throughout the entire upcoming semester. None of the clinical requirements, such as CPR and TB can expire during the upcoming semester in which the student will be attending clinical. This includes Fall and Winter semesters and may include Spring or Summer semester for internship students and Spring/Summer semester for graduate students if students are enrolled in clinical courses during those semesters.

**Due dates for the semesters are as follows:

Fall: all clinical requirements must be submitted by August 12th

Winter: all clinical requirements must be submitted by December 12th

Spring: all clinical requirements must be submitted by April 15th

Summer: all clinical requirements must be submitted by June 3rd

Flu vaccine due every Fall semester by October 12th

Flu Vaccine

Flu vaccines are required by clinical agencies. Therefore, this is a mandatory requirement for all nursing students who are attending clinical. For students who cannot receive this vaccine, it is the responsibility of the student to make an appointment to speak with the clinical coordinator to provide physician documentation on why they cannot receive the flu vaccine and to determine a clinical placement plan. Once a plan is in place for these special circumstance students, the student must follow the agency's flu vaccine policy, i.e. wearing a mask during flu season while at the clinical site. Students who do not follow agency policy may be subject to losing their clinical placement for the semester. (See below for flu delinquency policy.)

Process for Delinquents

If clinical requirements are not met by the deadline date as stated above each semester, students are subject to an initial \$50.00 fine and will be reported to professional conduct committee. If the student is still not compliant after the initial deadline due date, the student will receive an additional \$100.00 fine **every seven days**.

- SVSU is closed during Christmas break, therefore the clinical coordinators will not be checking compliance with clinical requirements during this time. Every **seven day** \$100 fines will be suspended during this time. If the student is still delinquent upon return from break, a \$100 fine will be given. If the student remains non-compliant, a \$100 fine will be **given every seven days** as stated above.

If the student remains non-compliant by the first day of the semester, they will not be allowed to attend any clinical orientation or clinical experiences. Once the student becomes compliant, the clinical coordinator has up to seven days to clear the student to attend clinical. Once the student is cleared by the clinical coordinator to start clinical, the agency then has the right to deny clinical time for up to two weeks to allow for student processing of badging, computer access, etc. The student will be responsible to pay for and make up any clinical time that is missed.

Flu Delinquency: If the student is not compliant by Oct 12th, the student will receive an initial \$100.00 fine. If still non-compliant, the student will receive a \$100.00 fine every seven days up to Oct 31st. If the student still non-compliant by Nov. 1st, the student will not be allowed to attend any clinical experiences. Once the student becomes compliant, the clinical coordinator has up to seven days to clear the student to attend clinical. The student will be responsible to pay for and make up any clinical time that is missed.

Process for payment:

The clinical coordinator will be responsible for sending a list of delinquent students to the manager of campus financial services and the general email for campus financial services (cfsc@svsu.edu) after each deadline date as explained above. The clinical coordinator will send each delinquent student an email notifying them of delinquency, fee, and process of how to pay the fee.

Extenuating Circumstances:

Extenuating circumstances, for example, extenuating financial/family circumstances should be brought to the attention of the clinical coordinators immediately. Each situation will be considered on an individual/case basis. The case will be discussed between the clinical coordinators, lead faculty, department chair, and Dean's office when necessary. If necessary, the student may be advised to write a petition regarding why they cannot fulfill their clinical requirements by the assigned deadline. A decision will be made, and the student will be notified of the outcome in a timely manner.

Clinical Requirement Delinquency

The dates for clinical requirements are communicated to students well in advance of the semester's start. While the due dates vary depending on the semester, students will have a minimum of 4 weeks from the notification of the clinical requirement to the deadline. However, an exception to the 4-week timeframe may be made if new vaccines or clinical requirements are mandated by the agency. In such a circumstance, the clinical coordinator will provide students with as much notice as possible.

Process of Applying Delinquent Fee

If a student fails to complete all clinical requirements by the clinical requirement deadline, the following procedure will be implemented:

Notification

The clinical coordinator will send an email notification to all students notifying them that the clinical faculty and the department chair will meet to discuss delinquencies. The student will be asked the reason why their clinical requirements were not met. Each student will reply all to share the reason why the requirements were not met. The faculty and the department chair will discuss each student on an individual basis and determine if any extenuating circumstances (e.g., student in quarantine, family bereavement, etc.) exists. In some cases, the faculty and department chair may ask for documentation of circumstances. For all students the following process will be followed.

The format for the email from the clinical coordinator to the faculty and department chair will be as follows:

- Student's name and student ID number
- A list of unmet requirements
- Any extenuating circumstances, if applicable

Responsibilities of the Department Chair and Clinical Coordinator

- If no extenuating circumstances exist, the department chair will authorize the clinical coordinator to assess a \$50 clinical delinquency fee to the student's account.
- The student will then be given an additional 7 calendar days to fulfill the clinical requirements.
- If the student fails to meet this deadline, the department chair will authorize an additional \$100 fee to be charged to the student's account.
- If another 7 days pass without the student achieving clinical compliance, the department chair will instruct the clinical coordinator to remove the student from the ACEMAPP roster and assess an additional \$100 fee.
- **If an extenuating circumstance does exist, the clinical faculty and the department chair may choose to not apply the fee to the student's account and work with the student on an individual basis.**
- In an email notification to the student informing them of the fee application, students should be aware that any outstanding fees on their account may prevent them from registering for classes.

Responsibilities of the Lead Clinical Faculty

The lead clinical faculty member will initiate a minor referral each time a student misses a clinical deadline. The faculty member will follow the process outlined in the BSN student handbook for minor referrals. Students should understand that failing to meet clinical requirements will result in referral to the PCC (Professional Conduct Committee), and sanctions beyond those outlined in this handbook may be imposed.

AY 2024-2025

Lead Clinical Faculty

N1-Emily Larocque

N2-Judi Cox

N3- Teri Hill

Internship-Jaime Huffman

N4-Tammy Hill

N5 Mindy Fabro

Department Chair

Tami Pobocik

Clinical Coordinators

Marielle Lewis, N1, N2, N4, Internship and N5

Kailyn Humphrey, N3

Appendix G

Saginaw Valley State University
College of Health and Human Services

Authorization to Release Health Information

Name: _____
(print)

Date of Birth: _____

I authorize Saginaw Valley State University to release any of my clinical requirements to the agencies where I may be attending clinical, upon their request.

This authorization applies to:

- Personal information such as phone number and date of birth
- Healthcare information such as immunizations and health appraisal forms
- Certifications
- Trainings completed
- Background check results and drug test results
- Other information as required to secure clinical placement

Student Signature: _____

Date: _____

Appendix H: CONFIRMATION OF UNDERSTANDING

1. I have read this BSN Program Handbook and (Print name here) _____ agree to abide by its policies throughout the program.

Student Initials: _____ *Date:* _____

2. I have read the Blood Borne Pathogen policies and agree to abide by them throughout the program.

Student Initials: _____ *Date:* _____

3. I have taken the HIPAA test and will maintain patient confidentiality throughout the program.

Student Initials: _____ *Date:* _____

4. I will maintain CPR, TB, and all records as outlined in this handbook.

Student Initials: _____ *Date:* _____

5. I have read the Nursing Simulation Center policies and agree to abide by them throughout the program.

Student Initials: _____ *Date:* _____

6. I have read the Policy for Testing, Standardized Testing Remediation, and Evaluation and agree to abide by its policies throughout the program.

Student Initials _____ *Date:* _

7. I have read the Clinical Requirement/Delinquency Policy in this handbook.

Student Initials _____ *Date:* _____

This page needs to be filled out by the student and turned into the N semester Clinical Leader during the first week of the semester:

N-1 Dr. Emily Larocque ealaroq@svsu.edu

N-2 Dr. Judi Cox jacox123@svsu.edu

N-3 Dr. Teri Hill tshill@svsu.edu

N-4 Dr. Tammy Hill tjhill@svsu.edu

N-5 Dr. Mindy Fabbro mafabbro@svsu.edu

ADN/RN to BSN Liaison Dr. Tina Thornton tmholtz@svsu.edu