CALIFORNIA STATE UNIVERSITY
BAKERSFIELD

Department of Nursing

UNDERGRADUATE NURSING STUDENT POLICY HANDBOOK 2023-2025

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Section I. Overview of the Department and Program

A. **Introduction**

California State University Bakersfield (CSUB) opened in September 1970 as the 19th member of the 23-campus CSU system. Its vision is to become the leading campus in the CSU system in terms of faculty and academic excellence and diversity, quality of the student experience and community engagement.

CSUB is located at the southern end of the San Joaquin Valley approximately 110 miles north of Los Angeles. As the only four-year institution within a 100-mile radius, CSUB is located in the city of Bakersfield, a commercial, medical, and educational center for the area. The university serves a regional population of over 900,000 including the city and unincorporated areas. The campus, located on a 375-acre site that was donated from the private sector, sits on the growing western edge of metropolitan Bakersfield. Thirty buildings provide classroom, laboratory, administrative, and technical support facilities. Enrollment in the university for Fall 2022 included 9,261 students, served by over 1,334 faculty and staff members. CSUB has 57 different undergraduate and graduate degree programs.

The university is fully accredited by the Western Association of Schools and Colleges, Senior College and University Commission (WSCUC, formerly known as WASC), with six programs also accredited by national organizations. Accreditation by WSCUC was reaffirmed in 2020 and the university's next comprehensive review will be held in 2027.

CSUB is a comprehensive regional University and is committed to excellence in its four schools: Arts and Humanities, Business and Public Administration, Natural Sciences, Mathematics and Engineering (NSME), and Social Sciences and Education. The Department of Nursing (DON) is one of eight departments in the School of NSME.

B. **Overview of the Department of Nursing**

Undergraduate Program

Over the past 50 years, more than 3,000 students have earned a BSN through CSUB's two undergraduate nursing programs. Non-licensed students can obtain a BSN and eligibility for permission to take the National Council Licensure Examination (NCLEX-RN) through the Traditional BSN Program, a rigorous 3-year experience. Registered nurses can earn a bachelor's degree through the RN-BSN Program, which features online didactic courses and a face-to-face clinical course in Community Health Nursing.

As of January 2023, there are 185 Traditional BSN students and 13 RN-BSN students enrolled at CSUB. As a result of heavy demand, the Traditional BSN Program and the RN-BSN Program have both been granted Impacted Status designation from the CSU Chancellor's Office (Exhibit A). In the CSU system, a program is granted Impacted Status when the number of applications received exceeds program capacity. At CSUB, admissions standards and ranking criteria for the Traditional BSN and RN-BSN Programs are established by the Undergraduate Program Committee (UPC), and cohorts are comprised of the top-ranking candidates. Graduates of the Traditional BSN and

RN-BSN Programs have provided an excellent pool of candidates for admission to the Master of Science in Nursing (MSN) Program at CSUB.

Graduate Program

The DON opened the MSN Program in 1987 with a graduate degree in Nursing Administration and secured National League for Nursing (NLN) accreditation in 1991. After the implementation of the Family Nurse Practitioner (FNP) Track in 1996, the BSN and MSN programs transitioned successfully to accreditation by the Commission on Collegiate Nursing Education (CCNE) in 1998. Additional MSN tracks were also introduced and discontinued over the years, based on student demand and available resources. Between 1990 and 2010, the MSN program graduated 114 FNPs and 87 Clinical Nurse Leaders, Clinical Nurse Specialists, Nurse Educators, and School Nurses. Most MSN graduates have remained in Kern County and are leaders within the local healthcare community.

During a period of economic recession and statewide budget cuts in higher education, the difficult decision was made to temporarily close the MSN Program in 2010. Between 2010 and 2014, leaders within the community and on campus monitored the trends within the healthcare system, the community's needs, and the professional goals of current and prospective students. A feasibility study was conducted, which indicated a tremendous need for more FNPs; a healthy MSN/FNP Program is a critical resource for the Central Valley of California. Through the dedication and expertise of the DON faculty, the MSN/FNP Program was reopened in Fall 2014.

Cohorts were accepted to the MSN Program on an every-other-year basis until Fall 2019, when annual admissions were initiated. As of January 2023, there are 16 first-year and 15 second-year students enrolled, for a total of 31 graduate students. The MSN/FNP Program requires five semesters of full-time coursework, including 585 hours of clinical practice. Since reopening in 2014, the program has graduated 86 well-prepared FNPs.

In accordance with the commitment by the National Organization of Nurse Practitioner Faculties (NONPF) to establish a doctorate as the entry-level degree for NP practice by 2025, the DON has initiated the process to develop a Doctor of Nursing Practice (DNP)/Nurse Practitioner (NP) degree at CSUB. The university Provost and President, as well as the Academic Senate, have approved placement of the DNP on the Academic Master Plan for CSUB, verifying that the necessary support for this critical transition has been secured.

Nursing Faculty

The Department's nursing faculty are highly qualified nurse scholars and educators prepared in research and practice of their respective nursing disciplines. Faculty members meet the California Board of Registered Nursing expectations for clinical competence, the University and the Commission on Collegiate Nursing Education's expectations for scholarship, teaching, practice and leadership.

Resources

In the summer of 2022, the Department of Nursing renovated all learning spaces to better meet the needs of our students. The Department maintains two technical areas for nursing students on the CSUB campus: a nursing skills laboratory (located in the Romberg Nursing Education Center

(RNEC) and the Don C. and Diane S. Lake Family Simulation Center (located in SCI II) which contains low, medium, and high-fidelity mannequins and skills trainers. Additionally, the simulation center has an attached smart classroom to support multiple forms of technology-assisted classroom instruction. The nursing skills laboratory has 13 patient care learning stations.

Community Partners

Students practice their nursing skills at many locations in Bakersfield and in the surrounding Kern Country area. These facilities include hospitals, physicians' offices, health clinics, schools, public health agencies, homeless shelters, hospices, and specialty care centers.

CSUB Non-Discrimination and Non-Harassment Policy

The Department of Nursing follows the CSUB policy on non-discrimination and non-harassment and does not discriminate on the basis of race, religion, sex, age, handicap, color, marital status, sexual or national origin. The CSUB Policies can be found at the following site: http://www.csub.edu/bas/hr/hr_policies_procedures/

C. California State University, Bakersfield Mission Statement

California State University, Bakersfield is a comprehensive public university committed to offering excellent undergraduate and graduate programs that advance the intellectual and personal development of its students. An emphasis on student learning is enhanced by a commitment to scholarship, diversity, service, global awareness and life-long learning. The University collaborates with partners in the community to increase the region's overall educational attainment, enhance its quality of life, and support its economic development

D. Department of Nursing Mission, Vision, and Values

Mission

The Department of Nursing provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced nursing education. The faculty provides a collaborative, inclusive, and interactive learning environment committed to excellence in teaching, scholarship, service, and practice. The Department of Nursing accomplishes the mission through collaboration with the communities of interest.

The Department of Nursing fosters an environment that encourages lifelong learning and advancement within the profession. Graduates will have the acquired knowledge, skills, attitudes, and values essential to the practice of advanced professional nursing. As professional nurses, our graduates will engage in evidence-based practice in an interprofessional healthcare environment. In recognition of the health needs of a multicultural society, advanced professional nurses who are graduates of CSUB will address healthcare issues and needs of their community.

Vision

The CSUB Department of Nursing pursues innovative ways to advance nursing practice and address the growing complexities associated with creating a healthier population in California's Central Valley.

Values

The Department's values align with those of the university, including academic excellence, freedom of inquiry and statement, global awareness and cultural sensitivity, diversity, honesty and fairness, democratic governance, community engagement, and personal responsibility. The DON embraces professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.

Revised 03/12; 01/14; 12/15; 03/16; 2/21 by UPC

E. **Goals of the Department of Nursing**

The DON goals reflect professional nursing standards. These standards are provided in the following documents, which serve as a foundation for the curricula and policies of the DON:

1) *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* (CCNE, 2018)
2) *The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021)*
3) *National Task Force Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2022)
4) *Nurse Practitioner Core Competencies Content* (NONPF, 2022)
5) *Population-Focused Nurse Practitioner Competencies* (NONPF, 2013)
6) *Quality and Safety Education for Nurses: Prelicensure Competency KSAs* (QSEN, 2007)
7) *Quality and Safety Education for Nurses: Graduate Competency KSAs* (QSEN, 2012)
8) *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2015)
9) *Nursing's Social Policy Statement: The Essence of the Profession* (ANA, 2015)
10) *Nursing: Scope and Standards of Practice, 4th edition* (ANA, 2021)
11) *California Code of Regulations (CCR)* pertaining to nursing education (California BRN, regularly updated)

Based on the statements in the philosophy, the overall goal of the Department of Nursing is the continuing development and preparation for graduation of individuals who will provide professional nursing through clinical practice, leadership, research and education. To realize this overall goal, it is imperative that the following specific goals, objectives, and key strategies to be achieved by the Department of Nursing over the next 5 years:

Strategic Goals and Objectives of the DON

The following major objectives and key strategies will be achieved by the Department of Nursing over the next 5 years:

1. Demonstrate student outcomes that reflect program excellence through ongoing and consistent Program Evaluation to determine efficiency and effectiveness.
    a. Maintain quality indicators in all programs:

i. Traditional BSN
    1. Maintain NCLEX first attempt pass rates of >92%.
    2. Maintain academic attrition rates of <10%.
    3. Develop and implement benchmark targets for ATI Content Mastery Exams.
    4. Achieve employment rates of 80% within one year of graduation.

ii. RN-BSN Completion
    1. Maintain a completion rate > 75%
    2. Maintain academic attrition rate of <25%.
    3. Continue to provide outreach and collaboration with community colleges in CSUB Campus Service area to facilitate pipeline for ADN to BSN degrees.

iii. MSN
    1. Maintain graduation rate of > 80%
    2. Maintain national FNP certification first time pass rates of >80%
    3. Achieve employment rates of >80% within one year of graduation.

b. Initiate strategies that effectively foster growth in all programs.
    i. Traditional BSN
        1. Increase Traditional enrollment, based on community needs
    ii. RN-BSN
        1. Increase student advisor to full-time to facilitate advising prior to program entry.
        2. Establish each incoming cohort of students as a learning community to foster student success and satisfaction.
        3. Increase enrollment based on community needs
    iii. MSN
        1. Transition the NP program to post BSN to DNP program based on the NONPF initiative: DNP to entry level practice by 2025.
        2. Establish a post master's DNP program
        3. Explore a non-NP MSN program option for CSUB approval

2. Recruit and retain highly qualified faculty.
    a. Increase proportion of doctorally-prepared faculty in full-time positions to 50%
    b. Achieve competitive salaries
        i. Undergraduate Faculty: 75% of the Western United States average salary (AACN)
        ii. Graduate Faculty: 85% of the Western United States average salary (AACN).
    c. Revise faculty web page to highlight faculty accomplishments and promote faculty recruitment.
    d. Facilitate pursuit of doctoral degrees for current nursing faculty members through encouragement, information sharing, mentoring, and release time when possible.
    e. Value diversity in the search and screening process.
    f. Increase the ratio of tenure-track/tenured faculty to 50%.

3. Support Services for Students and Faculty

a. Simulation Center
    i. Full-Time Simulation Director
    ii. Full-Time Simulation Specialist
    iii. Explore requirements for National Accreditation
    iv. Explore innovative simulation technology to improve student learning and outcomes
b. Full time Graduate Student Advisor
c. Clinical Placement Coordinators:
    i. Graduate Program
    ii. Undergraduate
d. Promote Alumni Engagement and Faculty Development
    i. Annual engagement even with CEUs offered, Keynote Speaker on Nursing Topics
    ii. Advance development of faculty in teaching, scholarship, service, practice, and leadership.
e. Advocate equitable workload for faculty by providing reassigned time for full-time lecturers to facilitate participation in curriculum development, program evaluation, and promotion of student success activities.
f. Support faculty grant-writing including funding for attending workshops and pursuing grants.
g. Continue to refine the faculty leadership development plan for the DON.
h. Support and encourage faculty sabbaticals.

4. Support community health promotion and disease prevention through use of CSUB DON community and service-learning activities.
    a. Increase visibility of CSUB DON community and service-learning activities to increase community participation in health promoting activities and model health behaviors to targeted populations. Focused health promotion activities through a campaign that highlights community service activities through press releases and scholarly work.
    b. Develop global service-learning outreach opportunities for Nursing students.
5. Collaborate with university departments interested in creating interprofessional learning courses.
    a. Create online and hybrid courses with interprofessional appeal to university departments.
    b. Co-teach and coordinate interdisciplinary projects with other departments on campus.

Approved by Faculty Organization on February 2, 2006; April 24, 2014 Revised May 13, 2010; revised April 2014; November 3, 2016, March 2020, October 2021

F. **Strengths, Weaknesses, Opportunities, and Threats**

A SWOT analysis conducted by the Department of Nursing identifies the following internal and external attributes which exert influence over the organization's ability to meet its objectives. Areas of improvement and threats include both actual and potential influences.

Strengths	**Weaknesses**
・CCNE accredited/BRN approved BSN program and MSN/FNP program ・Experienced, high quality faculty and staff ・Academic preparedness of students; Impacted Status designation ・Rigorous MSN and BSN curricula ・Excellent student outcomes (high NCLEX and FNP certification pass rates, low attrition) ・Advanced technology-mediated instruction, including courses (hybrid and fully online) and Simulation Center ・Certified faculty to teach online courses ・High-quality student activities, including CPHC and CNSA ・Positive faculty-student relationships	・Pending faculty retirements ・Large number of part time faculty increase workload for full time faculty (orientation, etc.) ・Limited resources for faculty research, faculty development, and travel. ・Insufficient technological support ・Need for more full-time doctorally-prepared faculty ・Limited funds to maintain and update Simulation Center equipment ・Low tenure/tenure-track density of faculty ・Need for leadership succession planning and mentoring
Opportunities	**Threats**
・Improve health of community through CSUB Nursing initiatives ・Increase MSN and RN-BSN Program enrollment in response to community need and IOM recommendations ・Increase community support for CSUB Nursing ・Obtain external funding through grants/donations ・Strengthen alliance between members of the Nursing Advisory Committee ・Increase number of MSN and BSN students engaging in research and scholarly writing with faculty mentors ・Increase faculty and student diversity ・Increase tenure/tenure-track density	・Insufficient funding to provide for competitive faculty salaries ・Insufficient financial support from the state ・Private programs threaten clinical placements and faculty recruitment ・National nursing faculty shortage ・Limitations in clinical site type and quantity, especially for nursing specialties

G. **Philosophy of Nursing**

The outstanding faculty of the CSUB Department of Nursing has designed the departmental philosophy and curriculum around the Nursing metaparadigm concepts of client, environment, health and the nurse.

We assume nursing is a scientific discipline and as a discipline makes a distinctive contribution to the maintenance and promotion of health. This contribution is achieved through facilitating maximum functional health status by collaborating with individuals, families, groups and the community. Activities to accomplish nursing goals are viewed as congruent with society's expectations and needs.

Professional nursing draws upon the related disciplines of natural and social sciences, humanities and nursing science for its theory as a foundation for practice. In addition, nursing continues to develop and refine its knowledge base through scientific inquiry into its theory and practice. Critical thinking, progressive inquiry, and decision-making skills are emphasized through the use of the nursing process, which is directed toward achievement of maximum functional status for the client. The use of this process results in complex independent judgments based on accurate data and knowledge. We believe that the ability to engage in this process necessitates a baccalaureate level of nursing education. Such education is the essential preparation for beginning professional nursing practice.

Client

The client of nursing is the recipient of nursing care and may include the person across the lifespan, family, group or community. The faculty believes in the integrity, dignity, and worth of the person as an open, goal-directed, humanistic being. We assume each person as an open system includes distinct, but integrated physiological, psychological and socio-cultural systems. The person as an open system actively engages in interchange of energy with the environment and tends to achieve a balance among the various forces operating within and upon it. As an open system, the individual attempts to achieve balance with respect to these forces by utilizing, conserving, and replenishing energy in order to function effectively and efficiently. The motivating energy underlying this interchange with the environment is assumed to be present from conception through the lifespan. Developing through the process of adaptation, each person is engaged in modification through interaction with the environment. Effective adaptation during development can be defined as momentary periods of balance and maximum functional status. Genetic factors, spiritual orientation, education, occupation, and cultural/ethnic group membership influence individualized development. Although individuals strive to achieve balance and maximum functional status, they also actively seek new experiences that may disturb their balance at least temporarily. These new experiences may require variable behavioral modifications to re-establish balance. Further, we believe that individuals are rational, ever-changing, and capable of making critical choices.

Within our philosophical framework, the person across the lifespan, as an open system, interacts with, is part of, and influences other systems. The family is a dynamic social system which responds to the needs and desires of its members and the community in which it is located. As the primary reference group for the individual, the family serves to protect, educate, and nurture. Individuals or sub-populations sharing a common purpose or problem are the group/aggregate clients of nursing. A community, also a client of nursing, interacts with individuals, groups and

institutions for their mutual protection and common good. Because we believe in the value of relationships, linking people to each of the above social systems, we view the individual not in isolation, but as an integral part of the larger whole. These relationships are significant because they influence the individual's development, systems stability, functional status and health.

Environment

The environment may be defined as a composite of all the conditions and elements that make up the internal and external surroundings and influence the development of individuals. Additionally, the environment may be conceptualized as human, social, political, economic, geographic and physical factors influencing each other. We view society as the network of dynamic relationships that links individuals to other systems such as family, other individuals, group/aggregates, community, nation and the universe. The individual and society are linked to and part of the environment. Further, individuals, society, and the environment mutually influence each other through exchange of energy. One aspect of the interaction of these multiple factors is their influence on health.

Health

Health can be defined as a state of maximum wellness/functional health status at a given point in time. The concept of maximum wellness has been classically defined as an "integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable within the environment where he is functioning" (Dunn, 1959, p. 18). Hence our belief that health consists of the ability to function optimally within an ever-changing environment and that health influences one's growth and development. Health is composed of multiple factors, some of which include the presence or absence of a disease state and the ability to adapt to internal and external stressors. Personal responsibility for an individual's health is assumed by virtue of the individual's health promoting behaviors.

Nurse

We believe the professional nurse works autonomously and collaboratively with others to promote the health of individuals, families, and communities. Nurses are individually accountable to the public they serve. As a patient advocate and change-agent, the nurse works with others to facilitate growth and needed changes in the healthcare delivery system by evaluating and utilizing research findings. The professional nurse not only interacts with patients/clients during the provision of care but also supervises and coordinates the care given by others. Advanced communication, education, leadership, research and clinical skills are used to carry out these nursing functions.

Professional nurses provide nursing services to individuals of all ages and to families in a wide variety of healthcare settings where they function with various degrees of independence and complexity. Increasingly, evolving nursing roles in the healthcare delivery system will require even greater independent decision-making, accountability, and autonomy of practice. Scientific and technological advances necessitate commitment to life-long learning and may include higher education. While ensuring the welfare of the public, the nurse also has the added responsibility to enhance the welfare of the profession of nursing. This is accomplished by being actively involved with political and social forces impacting upon the profession.

Approved by Faculty Organization May 13, 2010; Update/Review 02/21; 2/06; 9/15, 9/20

H. **Philosophy of the Teaching Learning Process and Professional Education**

Learning is an active, experiential process that is lifelong, dynamic, continuous, and growth-producing. This faculty views teaching as a deliberate endeavor to guide a learning situation in order to bring about a desired learning outcome. We believe that our goal as professional nursing educators is to provide experiences for students to become mature, skilled, responsible practitioners of nursing who arrive at independent, complex judgments. These judgments are based on complete and accurate data coupled with theory and knowledge, not only from nursing, but also from the liberal arts and sciences. Because of the complexity of the evolving body of knowledge we believe that professional nursing education is a life-long process.

Development of the student in the acquisition of nursing knowledge takes place through the student's interaction with the environment. The nature of the learning environment is therefore a significant factor in learning. The Department of Nursing structures the learning environment that proceeds from simple to complex experiences. Teaching/learning practice provides the student with opportunities to care for individuals, families and communities. The student comes to the learning situation with a specific cultural and ethnic background. Each student's learning style, strengths, and goals have evolved out of past interactions between innate characteristics and the environment. With the assistance of the faculty, it is the student's responsibility to identify personal strengths and weaknesses and to achieve self-understanding, which enhances personal and professional growth.

We view faculty members as educators and facilitators of learning with the goal of stimulating student interest and encouraging students to assume responsibility for their own learning. We recognize that the faculty member's expertise, perceptions, beliefs and expectations influence the learning process. The faculty member exposes students to attitudes, experiences, skills, and knowledge, encouraging students to discover meaningful relationships relevant to nursing practice. The faculty member serves as a role model to the student by demonstrating a variety of nursing skills, not the least of which is sensitivity in human relationships. The elements of openness, trust and caring in the student-faculty relationship are critical to the establishment of an environment conducive to learning.

Creativity and flexibility in teaching allow for responsiveness to changing environmental and societal needs. Thus, we recognize various instructional methods in promoting learning. Individual needs of the student, based on their cultural and ethnic backgrounds, available experiences, content to be learned, and environmental conditions all influence the Department of Nursing choice of instructional methodology. We believe that the most effective methods are those which actively involve the student with the material to be learned. In addition, the faculty utilizes academic and personal counseling as well as the campus educational support system which provides assessment and tutorial help.

A planned nursing curriculum, subject to ongoing evaluation by faculty, students, and the community of interest, is essential to guide students in becoming professional nurses. The curriculum is designed to foster behaviors consistent with professional standards and guidelines. The intent of the curriculum is to stimulate intellectual curiosity, analytical ability, critical thinking, ethical reasoning, and individual creativity in all settings. The effectiveness of the program is measured ultimately by the extent to which students: (1) demonstrates achievement of

the program's terminal objectives; (2) are valued by patients/clients and employers; (3) derive satisfaction from their nursing activities; and (4) make significant contributions to the improvement of healthcare and the profession of nursing.

I. **Development of Concepts in the Curriculum**

Degree Roadmap

	ENVIRONMENT			
	CLIENT	HEALTH	NURSE	
Levels	Clients of Nursing	Systems Stability	Nursing Roles	Nursing Process
2: Systems Theory (N2110, 2111, 2120, 2121, 2130, 2131)	Person Family Community Population	Development of Systems & Subsystems Problems of Systems & Subsystems Modes of Intervention	Introduction to Roles of Professional Nursing (Clinician, Leader, Researcher, Educator) Historical, Legal, & Ethical Aspects of Nursing Beginning Clinician Skills Nursing Care for Adult Clients	Communication Assessment of Multiple Systems (Physiological, Psychological, Sociocultural) Functional Health Patterns Nursing Diagnosis Plan: Setting Goals & Objectives Intervention Evaluation
2: Adult Theory (N2110, 2111, 2120, 2121, 2130, 2131)	Life Span: Adult Aging, Contracting Family	Health Problems: Effects on Physiological, Psychological, Sociocultural Systems of Adults	Expansion of Clinician Role Nursing Care for Adult Clients Beginning Leadership Skills Beginning Educator Skills	Assessment, Nursing Diagnosis, Planning, Intervention, & Evaluation of Health Problems of Adult Clients
3: Family Theory, Group Theory (N3110, 3111, 3120, 3121, 3130, 3131, 3150)	Life Span: Expanding Family: Pre-Conception through Adolescence Psychiatric/Mental Health Clients	Systems Development Developmental & Health Problems & Their Effects on Physiological, Psychological, Sociocultural Systems of Maternal/Child & Psychiatric Clients	Continuing Development of Level II Roles: Clinician Roles with Maternal/Child & Psychiatric Clients Beginning researcher Skills	Continuing Use of the Nursing Process for Expanding Families from Pre-Conception through Adolescence & for Clients with Psychiatric/Mental Health Problems

3: Aging Theory (N3140, 3141)	Life Span: Adult Aging, Contracting Family	Health Problems: Effects on Physiological, Psychological, Sociocultural Systems of Adults	Expansion of Clinician Role Nursing Care for Adult Clients	Assessment, Nursing Diagnosis, Planning, Intervention, & Evaluation of Health Problems of Adult Clients
4: Aggregate & Community Theory (N4128, 4129, 4908, 4901)	Client/Family in Communities Group-Aggregates & Community as Clients Diversity	Systems & Subsystems Stability & Instability in Families, Groups, Aggregates, & Communities Systems for Health Care Delivery	Independent Decision Maker Management Skills & Application Nursing Care for Groups, Aggregates, & Families Application of Researcher Roles	Application of Nursing Process to Families, Group-Aggregates, & Communities
4: Advanced Adult Theory (N4110, 4111)	Person/Family	Systems & Subsystems Instability in Clients/Families	Independent Decision Maker Advanced Beginner Clinician Role Legal & Ethical Aspects of Nursing Nursing Care for Persons/Families Application of Researcher Roles	Application of Nursing Process to Persons/Families with Health Problems

Updated 2/06; 2/21; Approved by Faculty Organization May 13, 2010; 6/11; 6/16; Reviewed 9/20

J. **CSUB Conceptual Model**

The Department of Nursing faculty has developed the CSUB Department of Nursing Conceptual Model to reflect the Department's philosophy and to provide a framework within which the objectives, major concepts and primary strands of the curriculum can be articulated. It is based on general systems theory, Quality and Safety Education for Nurses (QSEN) competencies, and views the client (individual- family-community-population) as a multi-system entity. The CSUB Conceptual Model represents the nurse (in the roles of clinician, educator, leader, and researcher)

as operating within the framework of the nursing process and interacting with the client within the environment in which both exist.
Concepts in the curriculum are developed in five major areas:

1. Clients of Nursing
2. Functional Health Patterns
3. Nursing Roles
4. Nursing Process
5. QSEN Competencies

Conceptual Model Definitions

Client

The client of nursing is seen as an individual across the lifespan, family, community, or population in need of nursing services. Each client of nursing functions within an external environment and includes and is influenced by physiological, psychological, and sociocultural systems.

Individual Across the Lifespan

An open humanistic individual system which consists of a number of distinct, integrated systems, including physiological, psychological, and sociocultural. The individual lives in or interacts with the family, community, and population.

Family

Two or more persons involved in an ongoing living arrangement, usually residing in the same household, experiencing common emotional bonds and sharing certain obligations toward each other and toward others. An extended family is a larger kinship group who, although not residing in the same household, continue to experience common emotional bonds and share certain obligations.

Community

Individuals working together who share a common problem, purpose, or interest.

Population

Group or groups of people with shared characteristics in personal, environmental or common traits in terms of special interest, circumstance or geography (Stanhope & Lancaster, 2012).

Functional Health Patterns

Functional Health Patterns is defined as a relationship of behaviors and actions that occur within the time continuum of human life. Some individuals have strengths or effective functioning capability while others need assistance to achieve positive or higher functioning in life (Carpenito, 2016).

The Nurse

The nurse is a student/professional who provides services to the client through incorporation of the roles of clinician, researcher, educator and leader. Nurses utilize clinical judgment, QSEN competencies, and life-long learning while using the nursing process to achieve client system stability/maximum function. Nurses encounter clients when “life processes” involve health issues.

The ANA Social Policy Statement (2010) says that nursing is "the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities and populations."

Nursing Roles

In each of the identified roles, the nurse uses the nursing process, communication skills, and client advocacy. Historical, legal and ethical aspects of client care are also included.

Clinician. Provides care to clients.

Researcher. Uses the research process as a problem-solving approach to systematically address nursing problems that advance the knowledge of the nursing profession.

Educator. Uses learning theories and the teaching process in an interactive way to increase the client's knowledge.

Leader. Uses informal or formal power and decision-making skills to move a group or organization toward one or more goals.

QSEN competencies

Provides a framework to prepare "future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work." (QSEN, 2014, para. 1, from: http://qsen.org/competencies/pre-licensure-ksas/) The competencies consist of: 1) patient centered care; 2) teamwork and collaboration; 3) quality improvement; 4) safety; 5) informatics; and 6) evidence-based care. The model addresses areas that affect the relationship between the client, the nurse, and the environment.

Nursing Process

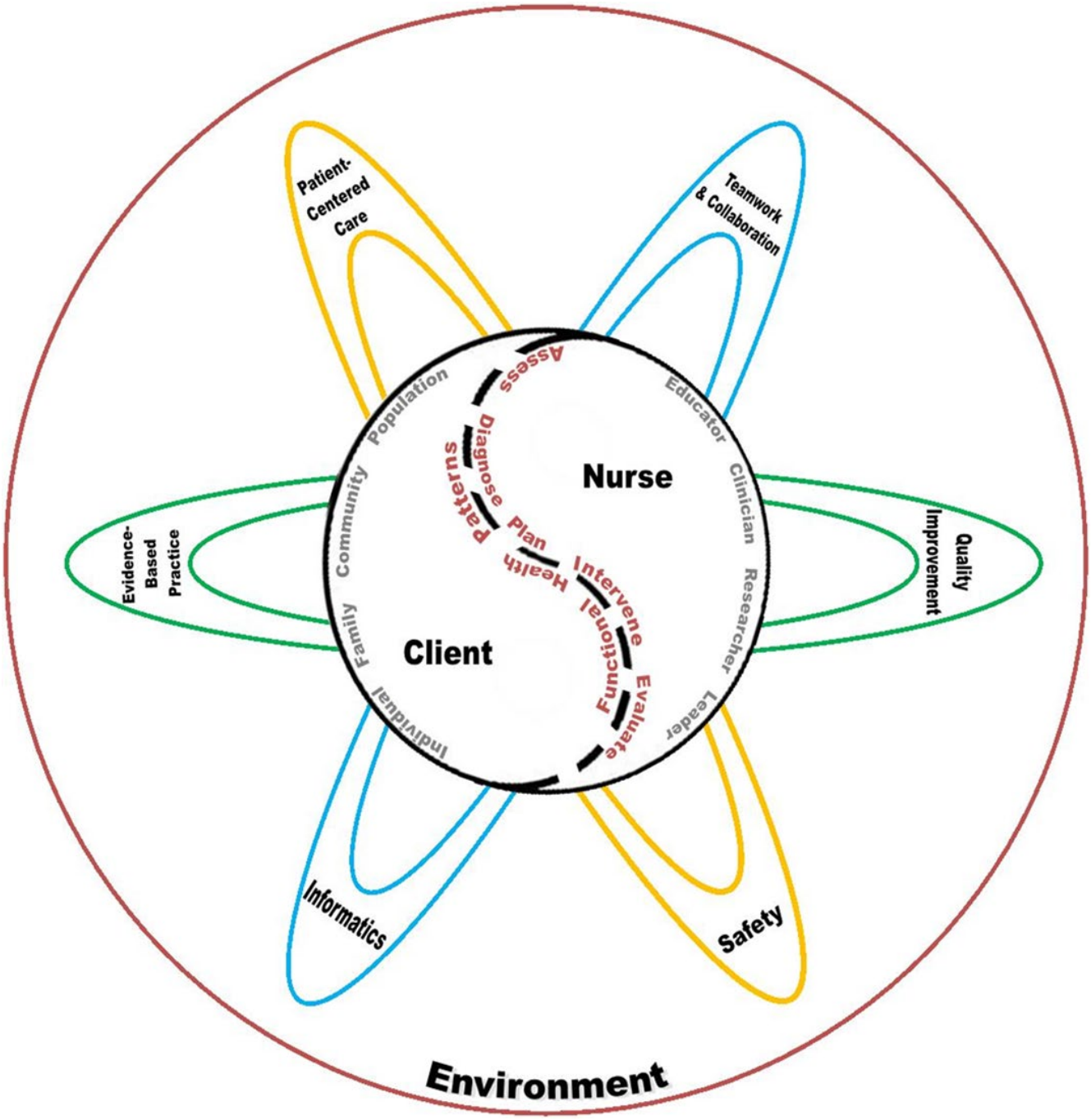
A deliberative, systematic approach for making decisions about a client's health state and improvements that can be achieved through nursing interventions, the specific nursing implementation to accomplish these changes, and the effectiveness of the implementation. It is seen to occur in five phases: (1) assessment, (2) nursing diagnosis, (3) planning, (4) intervention, and (5) evaluation.

Environment

The environment may be defined as a composite of all the conditions and elements that make up the internal and external surroundings and influence the development of individuals. Additionally, the environment may be conceptualized as human, social, political, economic, geographic and physical factors influencing each other. We view society as the network of dynamic relationships that links individuals to other systems such as family, other individuals, community, and populations. The individual and society are linked to and part of the environment mutually influencing each other. One aspect of the interaction of these multiple factors is their influence on health.

Health Outcomes

The client and the nurse interact with the environment to develop positive health outcomes. The nurse uses QSEN competencies, nursing roles, and nursing process to elicit health promoting behaviors which result in those positive health outcomes (Pender, Murdaugh & Parsons, 2017).



Health Outcomes

Approved by Faculty Organization: April 24, 2014, Reviewed 9/20

K. **Major Strands of the CSUB Undergraduate Curriculum**

The major strands of the curriculum are important selected concepts that are relevant to nurses and nursing practice. Although not part of the model, these strands are integral to the nursing program, and are addressed in a variety of courses across the curriculum.

Communication

Communication forms the matrix of the nurse-client/patient relationship and is an essential component of the theory and practice of nursing. Observation, interpretation, and intervention are the essence of a nurse-client/patient relationship (Finkelman & Kenner, 2016). Nurses use communication skills to: (1) provide new information, (2) correct misinformation, (3) promote understanding of client responses to health problems, (4) explore options for care, (5) assist in decision-making, and (6) facilitate the well-being of clients through verbal, nonverbal, and written formats.

Communication is viewed as a circular rather than a linear process and is best understood within the context of a relationship. Relationships take place between people, and the self is central to the development of any relationship. Exploring meanings of feelings and behaviors is relevant to a full understanding of the client as a person (Kearney-Nunnery, 2015).

Critical Thinking

Critical thinking is a creative, reflective and scientific thinking process by judging, questioning, examining, inferencing, assuming, arguing, and reasoning to come up with conclusion in problem solving, addressing issues, making statements and taking actions (Wilkinson, 2011).

Culture

The sum total of the way of living within a human group, includes the following but not limited to relationships, practices, habits, likes/dislikes, rituals, values, beliefs, standards, language, thinking patterns, behavioral norms, communication styles. Culture also depends on social matrix of knowledge, art, law, morals and customs. It guides decisions and actions of a group through time (Spector, 2017).

Economics

The aspects of healthcare associated with costs related to provision of care, cost containment, and distribution of resources.

End-of-Life Care

End-of-life care is an essential nursing function, working along with the interprofessional team, to provide palliative and hospice care to promote better care of the dying individuals and their families. (AACN, 2016)

Ethics

A standardized code that governs professional behavior and acts as a guide for decision making. The four major ethical principles that guide nursing actions include: 1) Autonomy, 2) Beneficence, 3) Justice, and 4) Veracity (Finkelman & Kenner, 2016).

Evidence-based Practice
Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care (www.qsen.org).

Genomics
The study of the genetic structure of humans for the purpose of determining the cause of disease, effects of treatments such as radiation, and the development of gene therapy to treat specific diseases (Ellis & Hartley, 2018).

Gerontology
Gerontology is a term used to describe the study of aging and/or the aging process (Mauk, 2017). Biopsychosocial considerations are included in this definition.

Health-Illness Continuum
The concept of a health-illness continuum related to the health status of patients/clients is used to differentiate the level of nursing care required. Health status is conceptualized as an ever-changing process, with the potential for health and illness to coexist to varying degrees.

Health Promotion
A focus of health care that is directed at maintaining and improving health. Strategies include disease prevention, health education, and control of environmental hazards (Finkelman & Kenner, 2016).

Historical Perspective
The view of nursing which includes the progression of nursing from its early beginnings to the present.

Human Development
The life process through which each individual progresses from infancy to senescence.

Informatics
Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making (www.qsen.org).

Legal Issues
The issues or aspects of nursing practice which are governed by law and involved with providing quality healthcare and protecting society from unsafe nursing practice.

Patient-centered care
Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values and needs (www.qsen.org).

Political Issues

Healthcare and nursing issues related to the way in which scarce healthcare resources are allocated, including the development and application of health care policy (Milstead & Short, 2017).

Professionalism
The qualities exhibited by nurses as individuals or as a group that fulfill the characteristics ascribed to a profession, including being self-conscious of own actions, being knowledgeable in the disciplines and being responsible of others (Potter & Perry, 2016).

Quality Improvement (QI)
Use data to monitor outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems (www.qsen.org).

Safety
Minimize risk of harm to patients and providers through both system effectiveness and individual performance (www.qsen.org).

Teamwork & Collaboration
Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect and shared decision-making to achieve quality patient care (www.qsen.org).

L. **Alignment of Strands with BRN Requirements and AACN Essentials**

Content required by the Board of Registered Nursing (BRN) and in alignment with the *Essentials for Baccalaureate Nursing Education* (AACN, 2008) is included in the Strands. The DON at CSUB is currently revising the curriculum to be in alignment with the new Essentials (AACN, 2021)

M. **References**

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N. **Alignment of Baccalaureate Program and Level Objectives**

Goal A: BSN graduates will be prepared to function in the four professional nurse roles of clinician, researcher, leader, and educator.

Goal B: BSN graduates will be prepared for graduate study and value lifelong learning to support excellence in nursing practice.

Goal C: Traditional BSN graduates will successfully complete the RN licensure examination (NCLEX).

	CSUB BSN Objectives The program objectives are to prepare students for graduation who:	Level 2	Level 3	Level 4
I.	Integrate the knowledge and methods of the humanities, social sciences, and natural sciences as a foundation for nursing practice.	Apply theory and knowledge from the humanities, social and natural sciences as a foundation for nursing practice.	Analyze and integrate the knowledge and methods of the humanities, social sciences, and natural sciences as a foundation for nursing practice.	Combine theory and knowledge from the humanities, social and natural sciences as a foundation for nursing practice.
II.	Incorporate knowledge, skills, and attitudes in leadership, quality improvement, and client safety as necessary components of high-quality health care.	Identify the knowledge, skills and attitudes of leadership, quality improvement, and client safety to promote high quality nursing care.	Apply knowledge, skills, and attitudes in leadership, quality improvement, and client safety as necessary components of high-quality health care.	Analyze the knowledge, skills and attitudes of leadership, quality improvement, and client safety to promote high quality nursing care.
III.	Evaluate current evidence and incorporate evidence-based practices to improve client outcomes.	Describe current evidence-based practices and use evidence-based practices to improve client outcomes	Analyze current evidence and incorporate evidence-based practices to improve client outcomes.	Evaluate current evidence-based practices and use evidence-based practices to improve client outcomes.
IV.	Utilize knowledge, skills, and attitudes in client care technologies, information systems, and communication devices to deliver safe and effective nursing care.	Discover the knowledge, skills and attitudes in client care technologies, information systems, and communication devices to deliver safe and effective care	Demonstrate knowledge, skills, and attitudes in client care technologies, information systems, and communication devices to deliver safe and effective nursing care.	Utilize knowledge, skills and attitudes in client care technologies, information systems, and communication devices to deliver safe and effective care.

	CSUB BSN Objectives	Level 2	Level 3	Level 4
V.	Demonstrate an understanding of healthcare policies, including financial, legal, and regulatory, and their direct and indirect influences on the nature and functioning of the healthcare system.	Describe healthcare policies, including financial, legal and regulatory and their direct and indirect influences on the nature and functioning of the healthcare system	Demonstrate an understanding of healthcare policies, including financial, legal, and regulatory, and their direct and indirect influences on the nature and functioning of the healthcare system.	Analyze healthcare policies, including financial, legal and regulatory and their direct and indirect influences on the nature and functioning of the healthcare system.
VI.	Use effective communication and collaborative skills as part of an inter-professional team to deliver patient-centered care.	Demonstrate effective communication and collaborative skills as part of an inter-professional team to deliver patient-centered care.	Implement effective communication and collaborative skills as part of an inter-professional team to deliver patient-centered care.	Evaluate effective communication and collaborative skills as part of an inter-professional team to deliver patient-centered care.
VII.	Deliver population-focused nursing care, with an emphasis on health promotion and disease prevention in a diverse, multicultural society.	Define population focused care, with an emphasis on health promotion and disease prevention in a diverse, multicultural society.	Discuss population-focused nursing care, with an emphasis on health promotion and disease prevention in a diverse, multicultural society.	Practice and evaluate population focused care, with an emphasis on health promotion and disease prevention in a diverse, multicultural society
VIII.	Demonstrate professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.	Demonstrate professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to each role of the professional nurse (clinician, researcher, educator, leader).	Evaluate professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to each role of the professional nurse (clinician, researcher, educator, leader).	Integrate the roles of the professional nurse (clinician, researcher, educator, leader) with respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to each role of the professional nurse (clinician, researcher, educator, leader).
IX.	Engage in clinical nursing practice with clients, including individuals, families, groups, communities, and diverse populations across the lifespan and the continuum of healthcare environments.	Engage in clinical nursing practice with adult clients and their families across the continuum of healthcare environments, utilizing the nursing process and the Department of Nursing philosophy and conceptual model.	Engage in clinical nursing practice with clients and families across the lifespan and the continuum of healthcare environments, utilizing the nursing process and the Department of Nursing philosophy and conceptual model.	Engage in clinical nursing practice with clients (individuals, families, groups, communities, and diverse populations) across the lifespan and the continuum of healthcare environments, utilizing the nursing process and the Department of Nursing philosophy and conceptual model.

O. **Nursing Organization Bylaws**

Article I – Department of Nursing (DON)

Section 1: The DON of California State University, Bakersfield, hereafter shall be referred to as the "Department." The name of the faculty/staff association shall be the "Nursing Organization." The purpose of the Nursing Organization (NO) is to assist the Department of Nursing (DON), faculty, staff, and students to achieve goals and objectives. (See Article II.)

Section 2: In order to meet the Mission, Philosophy, Goals/Objectives of California State University, the NO promotes and supports activities to attain the specific student and faculty goals and objectives.

Article II – Goals and Objectives

Section 1: Faculty Goals/Objectives

Faculty goals and objectives are congruent with those of the University and specify expectations for teaching, scholarship, service, and practice. The intent of these goals and objectives is the:

A. Promotion of excellence in teaching.
B. Support for scholarship and research.
C. Provision of service to the community of interest.
D. Evaluation of faculty goals/objectives.

1.1 Promotion of Excellence in Teaching
- 1.1a Maintain currency in methodology and course content.
- 1.1b Participate in professional practice.
- 1.1c Participate in recruitment and retention of an excellent faculty with an effort to maintain a diverse faculty.
- 1.1d Collaborate with nurse educators and other nursing professionals within the community

1.2 Support for Scholarship and Research
- 1.2a Conduct research studies that add to the body of knowledge.
- 1.2b Disseminate research findings.
- 1.2c Perform scholarly activities that may include such items as research, program evaluation, research grant writing, presentations at conferences, publications. (See RTP criteria.)

1.3 Provision of Service to the Community of Interest.
- 1.3a Providing grant writing and service.
- 1.3b Act as a consultant in the community, state, and nation.
- 1.3c Collaborate with community agencies for promotion of health care.
- 1.3d Facilitate continuing education for nurses in the community.

1.3e Actively collaborate with academic faculty to promote the mission/goals of the University.

1.4 Evaluation of Faculty Goals/Objectives

1.4a Determine attainment of stated faculty goals and objectives via the *Master Plan for Evaluation*.

1.4b. Recognize the significant teaching, scholarship, service, and practice contributions of the faculty.

Section 2: Curriculum Goals/Objectives

Curriculum goals and objectives are congruent with those of the University and specify expectations of the undergraduate and graduate programs. The programs within the DON are approved by the DON, the School of Natural Science, Mathematics, and Engineering and the University. The intent of the DON is to maintain appropriate state approval and national accreditation. The following programs are currently offered:

2.1 Undergraduate Programs

a) Traditional BSN program
b) RN to BSN program

The following are goals of the Undergraduate program:

2.1a Provide pathways for pre-licensure students and registered nurses who are seeking a Bachelor of Science in Nursing (BSN).

2.1b Prepare graduates with the knowledge, skills, attitudes, and values essential to the practice of entry-level professional nursing.

2.1c Prepare graduates who have competency in evidence-based practice, populated-focused care, and nursing leadership.

2.1d Build upon a foundation and integration of liberal education which not only prepares knowledgeable, analytical practitioners who will be able to function professionally, but also provides a core of content upon which graduate programs in nursing can be built.

Undergraduate Program Objectives: www.csub.edu/nursing

2.2 Graduate Programs

MSN (FNP option only at this time)

The following are the goals of the Graduate program:

2.2a Prepare graduates to assume positions as Advanced Practice Registered Nurses (APRNs) in a variety of settings.

2.2b Prepare graduates to assume leadership positions and advocacy roles that influence healthcare outcomes and contribute to the advancement of the nursing profession.

2.2c Develop and offer options, in response to community needs, that prepare APRNs to use theory and evidence-based practice to optimize the health status of the client and community.

MSN and FNP Program Objectives: www.csub.edu/nursing

2.3 Evaluation of Curriculum Goals and Objectives

The evaluation process is designed to identify the effectiveness and achievement of curricular and program objectives. The *Master Plan for Evaluation* details the systematic process and procedures for the evaluation of both faculty and curricular goals and objectives.

Article III – Functions

Section 1: The Nursing Organization of the Department shall:

A. Have jurisdiction over matters of curricular, educational, and faculty policy affecting the Department within the regulations of the School, University, and the CSU System, and accrediting entities.
B. Receive committee reports and act on the recommendations.
C. Make recommendations to the Chair concerning business affairs of the DON.
D. Maintains an on-going relationship with the community.

Article IV – Membership

Section 1: Membership in this organization shall be open to:

A. All full-time tenured, tenure-track, and full- or part-time temporary DON faculty/staff.
B. An elected student representative or alternate from each class in the Traditional BSN program, RN-BSN Program, and MSN Program.
C. Staff members of the DON.

Section 2: Associate membership shall be open to:

A. Nurse Administrators of contract agencies within the Greater Bakersfield area.
B. Individual members of other departments in the University.
C. Individual members with CSUB Nursing Emeritus Faculty status.
D. Associate members do not have voting privileges.

Section 3: Voting Privileges:

A. All tenured, tenure-track, and full- or part-time temporary faculty in the DON shall have one vote each in the conduct of faculty business.
B. Student representatives may have one vote per class in the conduct of business at NO meetings. Specific voting privileges and attendance requirements for student representatives on committees are designated each year by faculty in the first fall meeting.

C. Staff members shall have one vote each in the conduct of business at NO meetings. Staff members will not have a vote in curricular matters.
D. The NO shall act by a simple majority vote of the members present at any meeting provided there is a quorum. (See Article V, Sec. 3.)
D. Electronic voting shall be used if an issue is determined to be urgent.
E. The Chair does not vote but will cast the final vote if needed to break a tie vote.

Article V – Meetings

Section 1: Meetings of the NO shall be held at least once a month during the academic year.
Section 2: Special meetings of the faculty may be called at any time by the Chair of the DON or the Chair's assigned designee and shall be called by the Chair at the request of the majority of full-time tenured, tenure-track, and full-time temporary faculty and staff.
Section 3: A quorum for conduct of business at any faculty meeting shall consist of one-half plus one of the full-time tenured, tenure-track, and full-time temporary faculty.
Section 4: Meetings shall be conducted according to the most recently revised edition of *Robert's Rules of Order.*
Section 5: The administrative staff member shall record the minutes of the meetings of the NO, shall be responsible for distribution of the copies of these minutes prior to the next meeting, and shall submit such minutes at the next meeting for approval.

Article VI –Nursing Organization (NO)

Section 1: The Executive Committee of the NO shall consist of:
1. The Chair
2. The Assistant Chair
3. The Graduate Program Director
4. The FNP Program Director
5. The RN-BSN Program Director
6. The Undergraduate Program Director
7. The Program Evaluation Committee Chair
8. The Simulation Director(s)
9. The Student Success Coach(es)
Section 2: The Chair is elected for a three-year term, renewable once. The Assistant Chair will be appointed at the discretion of the Chair, must meet BRN criteria for appointment, and those specified in the job description. All Directors will be appointed by the Chair for a term of two years.
Section 3: The Chair of the Department shall preside over all meetings of the NO.
Section 4: Assistant Chair shall be responsible for the Department activities in the absence of the Chair. In the absence of the Chair, the Assistant Chair shall conduct any necessary meetings.
Section 5: The process for appointment of Program Directors and Committee Chairs is as follows:
a. The NO discusses Program Director and Committee Chair assignments.

b. The NO makes a motion to recommend these assignments to the Department Chair for appointment.
c. The Department Chair accepts the recommendations and appoints the Program Directors/Committee Chairs.

Section 6: The Undergraduate Program Director shall meet the qualifications specified in the job description and be responsible for maintaining accreditation and professional organization standards of the Traditional BSN program. The Undergraduate Program Director shall preside over all meetings of the Undergraduate Program Committee.

Section 7: The RN-BSN Program Director shall meet the qualifications specified in the job description and be responsible for maintaining accreditation and professional organization standards of the RN-BSN Program.

Section 8: The Graduate Program Director shall meet the qualifications specified in the job description and be responsible for maintaining accreditation and professional organization standards of the MSN Program. The Graduate Program Director shall preside over all meetings of the Graduate Program Committee. The Graduate Program Director is elected for a three-year term, renewable once.

Section 9: The FNP Director shall meet the qualifications specified in the job description and be responsible for maintaining accreditation and professional organization standards of the FNP Program.

Section 10: The Program Evaluation Chair, appointed by the Chair, shall meet the qualifications specified in the job description and be responsible for evaluation of the curriculum through implementation of the Master Plan for Evaluation.

Article VII – Committees

Section 1: General

A. All standing committees and the Chair of each committee are elected by the faculty.
B. Ad hoc committees are constituted by faculty election according to the needs of the DON. Membership is appointed by the Chair. On presentation of its final report to the NO, an ad hoc committee is dissolved.
C. Chairs of committees do not vote but will cast the final vote if needed to break a tie vote.

Section 2: The Joint Bakersfield College/CSUB Advisory Committee

A. This committee shall assist in the development of the DON and promote optimal health care through nursing education for the community.
B. Membership: The Advisory Committee shall consist of members with the following representation:
    1. Chair and/or Assistant Chair, DON, CSUB
    2. Director and/or Assistant Director, Nursing programs at BC
    3. CSUB Undergraduate Program Director
    4. CSUB RN-BSN Program Director
    5. CSUB Graduate Program Director
    6. Student Services Professionals (CSUB and BC)

7. Simulation and Skills Lab Coordinators (CSUB and BC)
8. Private and public acute care hospitals
9. Rehabilitation hospitals
10. Appropriate Community of Interest representative

C. Functions of the Advisory Committee will include:
   1. Assist the Chair and faculty by becoming informed about all of the nursing program options and by making opportunities to share this information in a manner that will best serve the purposes of the DON.
   2. Serve as liaison between the DON and the community for the purpose of promoting understanding, cooperation, and mutual respect.
   3. Provide various points of view on the role of nurses as members of the health team (which are relevant to nursing education).
   4. Assist in the recruitment of students for all programs.
   5. Assist in the recruitment and retention of nurse educators as members of the faculty.
   6. Advise and assist faculty with scholarly activity.
   7. Assist in gaining financial support from private sources for scholarships for students, travel assistance for faculty, funds for visiting lecturers, and discretionary funds for use by the Chair of the Department.

D. Meetings: The Advisory Committee will meet twice per year. A Chair and a Secretary of the Advisory Committee will be elected by the committee at the fall annual meeting. The Chair will preside at the meeting.

E. The Advisory Committee makes recommendations to the Chair of the DON who will provide a report to the NO.

Section 3: Standing Committees of the Nursing Organization (NO)

A. Undergraduate Program Committee (UPC)
   1. Membership of the Undergraduate Program Committee shall consist of the Undergraduate Program Director, at least four faculty (preferred at least two representatives from each Level.) 4), the pre-licensure Student Success Coach, the Student Services Professional, elected student representation or alternates from each class (these students will be present for curricular matters only), and the Department Chair.
   2. The functions of this committee include:
      a. Maintain a process for the systematic development, evaluation and modification of the undergraduate curricula based on the accepted mission, goals, and policies of the department and the University.
      b. Develop and modify policies related to curriculum and student performance.

c. Review and revise the Undergraduate Student Handbook bi-annually.
d. Review and revise the catalog copy annually.
e. Solicit student input as indicated for policy development regarding admissions, progression, and/or graduation.
f. Review student petitions for consideration for entry, re-entry, and progression.
g. Review and update appropriate publications relating to admissions and progression on an annual basis.
h. Monitor admission criteria for Impacted Status and amend as needed.
i. Make recommendations to the NO.
j. Report monthly to the NO. Submit an annual report to the NO in June.

B. RN-BSN Committee
1. Membership of the RN-BSN Committee shall consist of the RN-BSN Director, at least two RN-BSN faculty members, the post-licensure Student Success Coach, the Student Services Professional, the Administrative Support Coordinator and an RN-BSN student
2. The functions of this committee are:
a. Collaborate with the Undergraduate Program Committee to maintain a process for the systemic development, evaluation, and modification of the RN-BSN curricula based on the accepted mission, goals, and policies of the department and the University.
b. Develop and modify policies related to curriculum and student performance. Consult with the Undergraduate Program Committee on curriculum issues that pertain to all undergraduate students.
c. Review and revise the RN-BSN student handbook biannually.
d. Review and revise the catalog copy annually.
e. Solicit student input as indicated for policy development regarding admissions, progression, and/or graduation.
f. Review student petitions for consideration for entry, re-entry, and progression.
g. Review and update appropriate publications relating to admissions and progression on an annual basis.
h. Make recommendations to the NO.
i. Report monthly to the NO. Submit an annual report to the NO in June.

C. Graduate Program Committee (GPC)
1. Membership of the GPC shall consist of the Graduate Program Director, the FNP Program Director, an additional graduate program faculty member, Student Services Professional, Post-licensure student Success Coach, Standardized Patient Program Coordinator,

Project and Outreach manager, assigned student representation from each class (these students will be present for curricular matters only), and the Department Chair.

2. The functions of this committee include:
    a. Maintain a process for the systematic development, evaluation and modification of the graduate curricula based on the accepted mission, goals, and policies of the department and the University.
    b. Develop and modify policies related to curriculum and student performance.
    c. Review and revise the Graduate Student Handbook biannually.
    d. Review and revise Graduate Preceptor Handbook
    e. Review and revise the catalog copy annually.
    f. Solicit student input as indicated for policy development regarding admissions, progression, and/or graduation.
    g. Review student petitions for consideration for entry, re-entry, and progression.
    h. Review and update appropriate publications relating to admissions and progression on an annual basis.
    i. Make recommendations to the NO.
    j. Report monthly to the NO. Submit an annual report to the NO in June.

D. Program Evaluation Committee (PEC)

1. Membership: The Program Evaluation Committee (PEC) shall consist of PEC Chair, the Department Chair, Undergraduate Program Director, Graduate Program Director, RN-BSN Director, one undergraduate student representative, one RN-BSN student, one graduate student, and an administrative staff member. Members also may include appointed faculty consultants.
2. The functions of this committee include:
    a. Establish evaluation plans and necessary documentation as required by the *Master Plan for Evaluation.*
    b. Monitor the collection of documentation from the evaluation process.
    c. Evaluate aggregate faculty outcomes.
    d. Evaluate aggregate student outcomes.
    e. Review and revise the *Master Plan for Evaluation* biannually.
    f. Report monthly to the NO.
    g. Submit an annual report to the NO in June.
    h. Participate in university evaluation activities (such as WASC).
    i. Evaluate the pass rate for the NCLEX exam.
    j. Evaluate the pass rate for FNP national certification.

E. Level Workgroups
    1. Membership: Each Level Workgroup (II, III, IV, V/VI) will consist of a Level Coordinator (elected by the NO) and faculty who teach in the respective level.
    2. The functions of the committee include:
        a. Review course evaluations for courses taught at the level, evaluate the need for curricular change, report to the UPC or GPC.
        b. Evaluate student outcomes (such as standardized testing) and evaluate potential deficits in the current level curriculum.
        c. Support Level colleagues in developing teaching strategies, and evaluation methods that support the needs of students at the level.

F. Community Preventive Health Collaborative Committee (CPHC)
    1. Membership: CPHC Director, at least one faculty member, the CPHC student assistant, CPHC Club President, Medical Director, and Lab Director. Community agencies may attend at the discretion of the CPHC Director.
    2. The functions of this committee include:
        a. Direct CPHC policies and protocols
        b. Review CPHC program updates and outcomes and provide feedback and recommendations.
        c. Engage with the local community through service to address population health needs.
        d. Promote student leadership through club activities that emphasize health promotion and prevention in the campus community and Kern community.
        e. Submit an annual report to the NO in June.

G. Scholarship and Awards Committee
    1. Membership: The Scholarship and Awards Committee shall consist of at least one faculty member from each level.
    2. The functions of this committee include:
        a. Collaborate with the Financial Aids Office and University Advancement regarding scholarship requirements.
        b. Inform nursing students of scholarship availability and criteria.
        c. Select students for scholarships.
        d. Recommend and facilitate student award recipients to the NO.
        e. Report each semester to the NO.
        f. Provide assistance with planning for awards ceremonies.
        g. Submit an annual written report to the NO in June.

H. Learning Resources Committee (LRC)
    1. Membership: The Learning Resources Committee shall consist of two faculty members and one staff member.
    2. The functions of this committee include:
        a. Maintain a list of departmental needs.
        b. Review library holdings in the fall.

c. Recommend purchase of library resources, and equipment with input from faculty.
d. Make recommendations to the NO for management of the nursing laboratories.
e. Report each semester to the NO.
f. Submit an annual report to the NO in June.

I. California Nursing Students' Association (CNSA)
   1. Membership: The CNSA committee shall consist of at least one faculty member, and undergraduate nursing students.
   2. The functions of this committee shall include:
      a. "Creating the Future by Leading the Way": Core values of Education, Advocacy and Activism, Professionalism, Stewardship
      b. Participate in new student orientation for each new undergraduate nursing class entering the program.
      c. Mentor undergraduate nursing students
      d. Participate in community service activities that promote a positive image of nursing and the undergraduate nursing program at CSUB.
      e. Attend professional student nursing conventions
      f. Submit an annual report to the NO in June.
   3. CNSA mission statement: https://www.cnsa.org/

Article VIII – Bylaws

Section 1: Amendments: The bylaws of the faculty in the DON at California State University, Bakersfield, may be amended by a vote of two-thirds of the members present and eligible to vote at any meeting of the NO provided written notice of such proposed action is sent to faculty members at least two weeks prior to the meeting.

Section 2: Bylaw Review: These bylaws shall be reviewed at least biannually.

Bylaws Committee 2022-2025
Executive Committee

Approved by Nursing Organization: 10/2023

P. **Organizational Charts**

Organizational Plan, Lines of Authority, and Channels of Communication

The administrative and organizational structure of California State University, Bakersfield is illustrated in Chart 1. The academic and organizational structure of the university with its three schools and the academic departments which reside in each school is shown in Chart 2. The Academic Senate Organization is depicted in Chart 3. The line of authority and communication for the Department of Nursing is illustrated in Chart 4. The Department of Nursing Organizational Plan is displayed in Chart 5. Department of Nursing secretarial/clerical staff assignments are shown in Chart 6. The Department of Nursing charts are located in the Department of Nursing Faculty Policy Handbook and the Undergraduate and Graduate Nursing Student Policy Handbooks.

California State University, Bakersfield

Responsibility for California State University, Bakersfield is vested in the Board of Trustees, whose members are appointed by the Governor. The Trustees appoint the Chancellor, the chief executive officer of the CSU system. The Trustees, the Chancellor, and the Presidents develop system-wide policies, with actual implementation at the university level taking place through broadly based consultative procedures. The Academic Senate of the California State University system, composed of elected faculty representatives from each campus, recommends academic policy to the Board of Trustees through the Chancellor.

California State University, Bakersfield Administrative Structure

The administrative organization of California State University, Bakersfield provides the operational structure of the university. The University is administered by its President through various organizational units with the advice of consultative groups. Administrators, faculty members, students, and support staff are incorporated within the university's structure of governance.

Chart 1: CSUB Organization for Operations

Chart 2: CSUB Organization for Academic Affairs

Chart 3: Academic Senate Organization

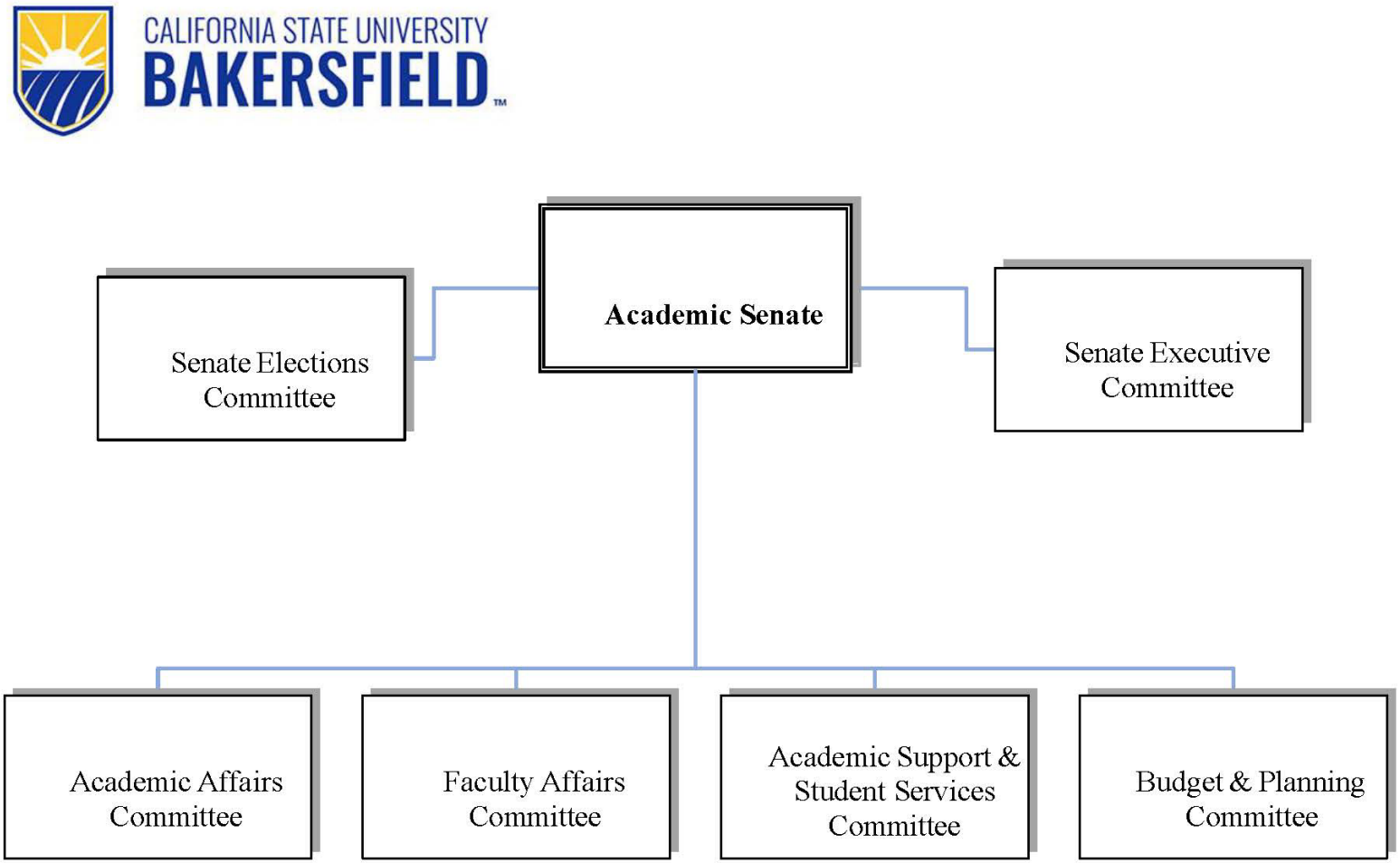


Chart 4: Department of Nursing Line of Authority and Communication

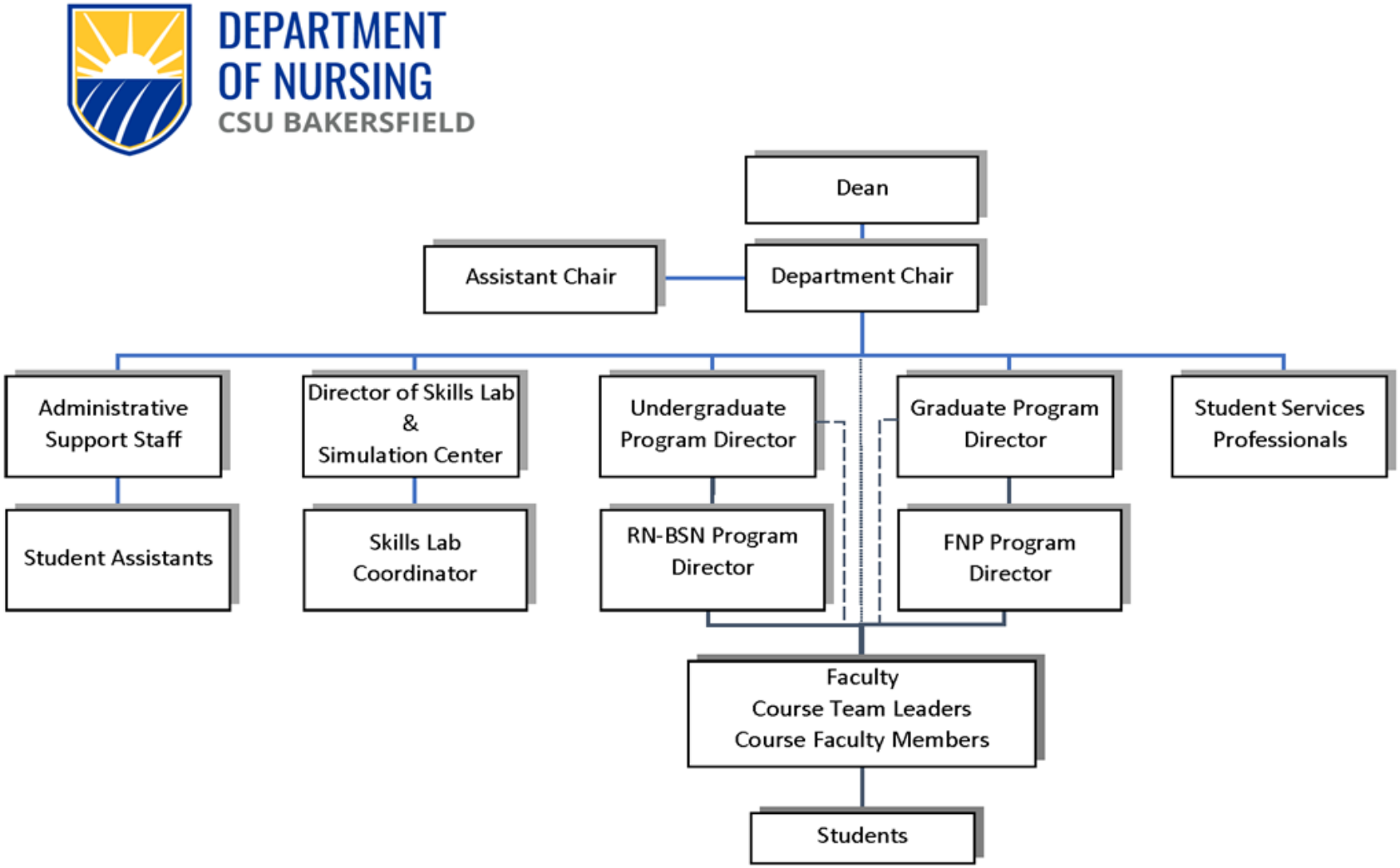


Chart 5: Department of Nursing Organization Plan

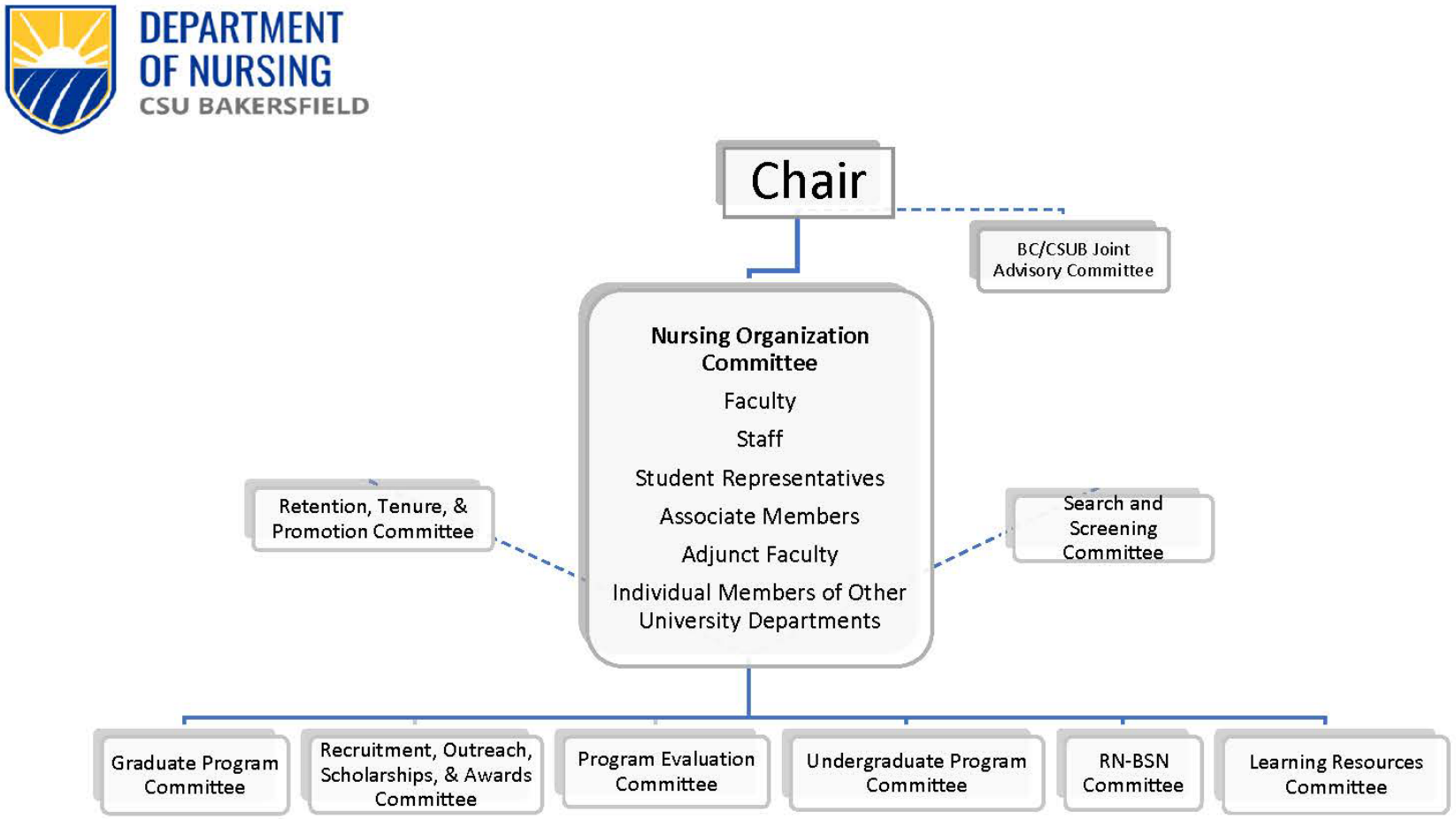
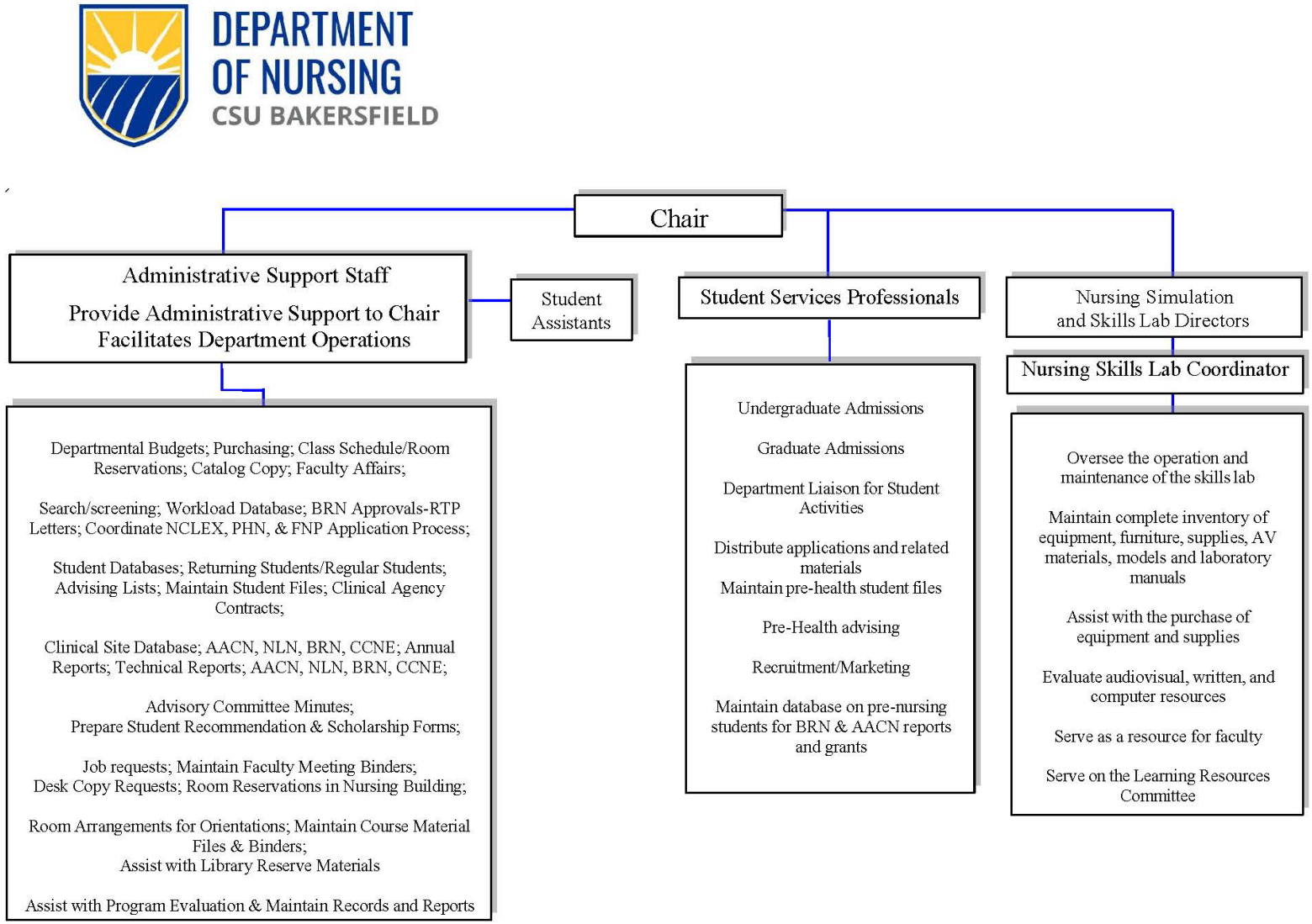


Chart 6: Department of Nursing Administrative Staff Assignments



Section II. Admission and Progression Policies

A. Admission

For CSUB Traditional BSN Admission Policies please refer to the Pre-Licensure Student Handbook

B. Post Acceptance Requirements

Background Check and Drug Test

Upon conditional acceptance to the program, a background check and drug screen will need to clear. This is ordered at the expense of the student through an agency contracted with the Department of Nursing. Nursing students must meet clinical placement requirements. Our contracted community partners can refuse placement based on criminal convictions. Convictions and traffic violations of over $1000 must be reported to the Board of Registered Nursing (BRN) when applying to take the licensure exam (NCLEX). A more extensive background check will need to clear with the BRN for licensing. If a student is concerned of how their particular situation may be affected, they are encouraged to discuss this with the pre-health advisor. More information on prior convictions may be found on the BRN website at http://www.rn.ca.gov/applicants/lic-faqs.shtml#disc.

Nursing Student Background Check

Access to Background Check information is limited to the Nursing Department Chair, or an appointed designee. Background Check information remains confidential. If an area of concern is identified on the background check:

a. The chair will notify the individual nursing student.

b. The nursing student may elect to have a second background check completed by a company approved by the Department of Nursing.

c. The nursing student has the right to correct any misinformation from the background check with the company that completed it.

d. Background check results may be released to: a) CSUB Human Resources, b) Clinical agency Human Resources, and/or the BRN.

CSUB nursing students are assigned to clinical agencies that have included students in the category of individuals that must complete background checks. As a result, the background check requirement for nursing students is a necessary component of Joint Commission accreditation for these clinical agencies (BRN, EDP-I-33, 2010).

When a nursing student's background check reveals a criminal offense, this information is shared in a confidential manner with the identified contact person for the clinical agency to which the student has been assigned. Based on the number, type, severity, and recency of offenses, the

clinical agency may decline to accept the nursing student for clinical placement based on the agency's policy. The clinical agency's right to deny a nursing student's placement is recognized by the California Board of Registered Nursing (BRN, EDP-I-33, 2010).

In the event that a nursing student is denied clinical placement at a clinical agency, the Department of Nursing will attempt to place the student in another existing clinical group at a different location. If no clinical agency will accept a nursing student's placement, then the student would not be able to complete the required clinical course objectives and would be administratively dropped from the CSUB Nursing Program. An Annual Arrest/Conviction Attestation is required each Fall Semester to be completed (See Appendix A). Students who provide inaccurate or incomplete information regarding criminal background are subject to immediate dismissal from the BSN Program.

Non-NIDA Drug Testing

Initial Non-NIDA drug screening is required for all undergraduate students. This is completed one time for each new student entering the nursing program. Drug testing will be done at the student's expense through a third-party vendor contracted with the DON. Drug testing MUST be completed prior to the beginning of the semester in which the student is admitted. Information about obtaining drug testing will be provided by the third-party vendor. Results from the laboratory will be sent directly to the third-party vendor and the DON. The Department of Nursing Chair, or an appointed designee, will be notified of the results. Repeat drug testing may be required, if the student exhibits suspicious behavior in the clinical setting, at the discretion of the clinical instructor or the clinical agency. The repeat drug test will be at the student's expense. Students who do not test within the required time frame will be considered to have failed.

C. **Annual Health and Safety Requirements**

Our contracted agencies require students to annually complete workplace safety training that meets the Occupational Safety and Health Administration (OSHA) guidelines. Your annual requirements are to be submitted prior to the first day of class of fall semester, each year. These requirements are required by the university and clinical agencies. **If you fail to complete these requirements, you will be administratively dropped from your nursing courses.**

The following annual requirements will be submitted to the DON for review and approval. All nursing students are required to update their clinical requirements documentation annually. The required annual documentation includes:

Requirement	Completed upon acceptance to program	Requirements renewed annually
Physical Exam	X	X
Measles, Mumps, and Rubella (MMR)	X	
Tetanus, Diphtheria, and Pertussis (Tdap)	X	
Varicella (Chicken Pox)	X	
Hepatitis B	X	
Tuberculosis	X	X
Influenza (Flu shot)	X	X
CPR Certification	X	
Professional Liability Insurance	X	X
Annually Signed Forms (Available for review in Appendix)	X	X
Annual Arrest/Conviction Attestation		X
Clinical Compliance Modules	X	X
Mask Fit	X	X

Students who have not met the requirements will not be allowed in clinical settings. Students should keep the original documents for their own records.

D. **CDC/ACIP Recommendations**

Recommended Adult Immunization Schedule
https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html
Guideline for Hand Hygiene in Health-Care Settings
http://www.cdc.gov/handhygiene/

E. **Essential Functions**

The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. A student with a disability must have the disability verified by the Services for Students with Disabilities office at CSUB. It is to the student's advantage to do this as soon as possible in the semester to ensure that approved

accommodations can be granted in a timely manner. Students requesting accommodations must demonstrate their ability to meet the Essential Functions (available for review in the Appendix of this document).

If, after admission to the nursing program, a student develops a physical or mental disability that limits their ability to meet the Essential Functions, it is the student's responsibility to bring this information to the attention of the clinical faculty before they begin the clinical course. If unable to meet the clinical course objectives, the student will not be allowed to participate in clinical activities. The student must provide documentation from their physician prior to returning to clinical which states that the student is able to meet the Essential Functions. See sample – Physician's letter in the Appendix of this document.

The Essential Functions form must be signed dated and submitted to the Department of Nursing prior to start of your classes. You will complete this form annually certifying that you are able to meet the essential functions required by the Department of Nursing.

F. **Progression Policy**

Academic Standards and Progression

According to CSUB Department of Nursing standards, a grade of "C" is the minimal grade acceptable for progression into subsequent nursing courses. Students who fail to achieve at least a "C" in a nursing course may request reentry into the program (based on seat availability and approved by UPC) to repeat the course one time. Students who have previously failed a nursing course will be ineligible to remain in the nursing program if any subsequent nursing course (repeat of same course OR different course) is failed. Students with two nursing course failures in the same semester may request to be evaluated individually by the Undergraduate Program Committee. Clinical refresher courses (N2771/N3771/4771) count as a nursing course.

A student who earns a C- or less in a nursing course will be contacted by the Undergraduate Program Director for follow up.

G. **Grading Policy**

Grading criteria for each course will be given to students at the beginning of the semester. The grade of "C" is the minimal grade acceptable in any course required for the nursing major. All required nursing courses must be taken for credit and a letter grade. The grading system for nursing prerequisites, cognates and nursing courses is the same as that for the University. However, the Department of Nursing does not consider a grade of less than "C" to be a passing grade for prerequisite, cognate and nursing courses. In nursing courses, 73% is the minimum score for passing. The Department of Nursing does not round-up to the highest percentage. The Undergraduate Program Director and Chair of the Department of Nursing are notified by the course team leader of any student who receives a failing course grade.

***Grading Scale**:*

A =	93 – 100	B- =	80 – 82	D+ =	67 - 69
A- =	90 – 92	C+ =	77 – 79	D =	63 - 66
B+ =	87 – 89	C =	73 – 76	D- =	60 - 62
B =	83 – 86	C- =	70 – 72	F =	59 or below

Procedure for Changing Grades:

The procedures and policy for changing a course grade is included for student information. Once a final grade has been assigned, it can be changed only in the case of a declared clerical error or through the auspices of a student academic grievance procedure. The definition of a clerical error is an error made by the instructor in grade estimating or posting. No grade change may be made as a result of work completed or presented following the close of the grading period except for completion of work when an incomplete "I" or report in progress "RP" was issued, or, in cases of emergency, as approved by the Dean. Grade changes can only be made by the instructor of record. To request a change of grade please navigate to the Office of the Registrar website.

The grade of "Incomplete" can only be assigned according to all of the following criteria:

- at the discretion of the instructor, *and*
- when a majority of the course has been satisfactorily completed by the student with a "C" or better, *and*
- when the student is unable to complete the coursework on time due to unforeseen and fully justified reasons, *and*
- when completion of the remaining coursework does not require unreasonable Department of Nursing resources.

A clinical grade of "I" cannot be assigned to make up clinical hours unless clinical supervision will be available under existing scheduled sections of the same course. A grade of "I" may prevent the student from continuing in nursing courses until the "I" is replaced with a passing grade through satisfactory completion of the remaining coursework according to the student/instructor contract. The "I" grade will automatically convert to an "F" if the student fails to complete the contract within one semester. A grade of "I" cannot be assigned as a way for a student who is failing a course to earn additional points through additional coursework.

Revised & approved by UPC 12/30/11

Approved by FO 1/12/12

Program Standards and Progression

According to the policies of the CSUB Department of Nursing, students must meet the standards set by the program. Program standards are based on the policies of contracted clinical agencies, the California Board of Registered Nursing, the ANA Code of Ethics, state and federal laws, and the profession of Nursing. Students whose professional performance and behavior does not meet these standards may be dismissed from the CSUB nursing program regardless of their academic performance. This includes, *but is not limited to:*

1) Social Media policy violations
2) Breaches of patient confidentiality standards under HIPAA
3) Academic Integrity violations, including but not limited to cheating, unauthorized possession of an examination, or dishonesty in academic matters or patient care

4) Falsification of patient records or academic documents
5) Unauthorized access to clinical agency facilities, equipment, supplies, or medical records
6) Scope of practice violations, including performance of RN-level patient care activities outside of authorized clinical hours
7) Drug or alcohol related offenses
8) Theft
9) Other criminal activities substantially related to the qualifications, functions, and duties of a registered nurse
10) Inability to meet the Essential Physical and Mental Qualifications of the nursing program
11) Disruptive or violent behavior, under the CSUB Zero Tolerance policy
12) Severe maladaptation to the educational process as evidenced by a pattern of:
    a. Inadequate classroom or clinical preparation
    b. Late completion of assignments
    c. Poor communication and/or irresponsible behavior
    d. Absence from scheduled classroom or clinical hours
    e. Incivility during classroom or clinical hours that disrupts the teaching and learning environment

A student who fails to meet CSUB nursing program standards will be dismissed from the program. For more information on disciplinary actions see Section 4.

Leave of Absence

All students enrolled in the program must complete the courses in the sequence as set by the program schedule, unless registration is waived via an approved leave of absence.

Students who find it necessary to interrupt their progression in the program due to a non-emergency reason must make their request to the Undergraduate Program Director prior to the beginning of the semester in which the leave is intended. Students wishing a leave of absence due to emergency must make their request as soon as practicable after the emergency is known. Students shall provide all relevant facts and documentation necessary to support their request. If a student fails to do so, they will need to follow the re-entry process as detailed in Section 4.

The Undergraduate Program Committee, through the Undergraduate Program Director will notify the student of the terms of separation and return to the department. This notification shall include 1) the approved maximum length of the leave; 2) the expectations of the Department concerning the student's duty to maintain communication; and 3) any other terms the Undergraduate Program Committee assigns.

Students who are on an approved leave must make the Department aware of any change of status that will affect their ability to return.

Students who do not abide by the terms of an approved leave of absence will be considered to have taken an unapproved leave of absence.

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Section III. Student Responsibilities

A. **Ethical Standards**

A hallmark of professional practice is a Professional Code of Ethics. Ethical Codes for Professional Nursing Practice have been developed and revised by the American Nurses Association (ANA):

Code of Ethics for Nurses by the American Nurses Association (Revised 2015)			
Definition		**Interpretive Statements**	**Examples**
Provision 1	1.1 Respect for Human Dignity 1.2 Relationships with Patients 1.3 The Nature of Health 1.4 The Right to Self-Determination 1.5 Relationships with Colleagues and Others	The nurse practices with compassion and respect for every person.	Establishing relationships of trust with patients and colleagues; supporting the patient's right to make decisions about their healthcare, following Advance Directives.
Provision 2	2.1 Primacy of the Patient's Interests 2.2 Conflict of Interest for Nurses 2.3 Collaboration 2.4 Professional Boundaries	The nurse's primary commitment is to the patient; family, group, community, or population.	Collaborate to provide high-quality patient-centered health care, avoid intimate relationships with patients.
Provision 3	3.1 Protection of the Rights of Privacy and Confidentiality 3.2 Protection of Human Participants in Research 3.3 Performance Standards and Review Mechanism 3.4 Professional Responsibility in Promoting a Culture of Safety 3.5 Protection of Patient Health and Safety by Acting on Questionable Practice 3.6 Patient Protection and Impaired Practice	The nurse promotes, advocates for, and protects the rights, health and safety of the patient.	Not talking about patients in the elevator, cafeteria, or at home. No talking about patients or their situation on any social media site. No patient identifiers on care plan or any other documents. Report errors. Notify if another student has made an error. (Condoning errors through silence is unacceptable.)
Provision 4	4.1 Authority, Accountability, and Responsibility 4.2 Accountability for Nursing Judgments, Decisions, and Actions 4.3 Responsibility for Nursing Judgments, Decisions, and Actions 4.4 Assignment and Delegation of Nursing Activities or Tasks	The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and acts consistent with the obligation to promote health and to provide optimal care.	Maintaining sterile technique when performing procedures. Not performing procedures for which you have not been trained. Notifying the Professor and Preceptor if you need further supervision.

Provision 5	5.1 Duties to Self and Others	The nurse owes the same duties to self as to others.	Leading a healthy lifestyle. Never abandon a patient. Commitment to lifelong learning and education in the nursing profession.
	5.2 Promotion of Personal Health, Safety, and Well-Being		
	5.3 Preservation of Wholeness of Character		
	5.4 Preservation of Integrity		
	5.5 Maintenance of Competence and Continuation of Professional Growth		
	5.6 Continuation of Personal Growth		
Provision 6	6.1 The Environment and Moral Virtue	The nurse establishes, maintains, and improves the ethical environment of the work setting that are conducive to safe, quality health care.	Giving pain meds on time. Giving reassurance to patients and their families.
	6.2 The Environment and Ethical Obligation		
	6.3 Responsibility for the Healthcare Environment		
Provision 7	7.1 Contributions through Research and Scholarly Inquiry	The nurse, in all roles, advances the profession through research and scholarly inquiry, professional standards.	Nursing research must conform to ethical standards.
	7.2 Contributions through Developing, Maintaining, and Implementing Professional Practice Standards		
	7.3 Contributions through Nursing and Health Policy Development		
Provision 8	8.1 Health is a Universal Right	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.	If child abuse is suspected, mandatory reporters of abuse. Offer immunizations.
	8.2 Collaboration for Health, Human Rights, and Health Diplomacy		
	8.3 Obligation to Advance Health and Human Rights and Reduce Disparities		
	8.4 Collaboration for Human Rights in Complex, Extreme, or Extraordinary Practice Settings		
Provision 9	9.1 Articulation and Assertion of Values	The profession of nursing, through its professional organizations, must articulate nursing values, maintain integrity and integrate social justice into nursing.	Apply hospital rules fairly for all patients/families. Treat other healthcare professionals respectfully.

B. Code of Academic Conduct

The principles of truth and integrity are recognized as fundamental to a community of teachers and scholars. Students are expected to do all work assigned to them without unauthorized assistance and without giving unauthorized assistance. Students must adhere to the University's Academic Integrity Policy. This policy is part of CSUB's Student Conduct Code, which is administered through the Division of Student Affairs and the Dean of Students.

Academic dishonesty is a broad category of actions that may involve plagiarism, cheating, fraud or deception to gain an unfair academic advantage. These areas, and the disciplinary policies related to academic dishonesty, are detailed in Section IVA.

C. Responsibilities of Students

The following is required of students:

1. Be honest at all times.

2. Act fairly toward others. For example, do not disrupt or seek an unfair advantage over others by cheating, or by talking or allowing eyes to wander during exams.

3. Take group, as well as individual responsibility for honorable behavior. Collectively, as well as individually, make every effort to prevent and avoid academic misconduct, and report acts of misconduct which you witness.

4. Do not submit the same work in more than one class. Unless otherwise specified by the instructor, all work submitted to fulfill course requirements must be work done by the student specifically for that course. This means that work submitted for one course cannot be used to satisfy requirements of another course unless the student obtains permission from the instructor.

5. Unless permitted by the instructor, do not work with others on graded coursework, including in-class and take-home tests, papers, or homework assignments. When an instructor specifically informs students that they may collaborate on work required for a course, the extent of the collaboration must not exceed the limits set by the instructor.

6. Know what plagiarism is and take steps to avoid it. When using the words or ideas of another, even if paraphrased in your own words, you must cite your source. Students who are confused about whether a particular act constitutes plagiarism should consult the instructor who gave the assignment.

7. Know the rules – ignorance is no defense. Those who violate campus rules regarding academic misconduct are subject to disciplinary sanctions, including suspension and dismissal.

8. Be familiar with HIPAA (Health Insurance Portability and Accountability Act). Students are informed and trained about the HIPAA Privacy Rule upon admission into the CSUB Nursing Program. Students are expected to know and abide by HIPAA privacy requirements and

what information must be protected (also known as the Protected Health Information Identifiers) including, but not limited to: name, address, medical record number, date of birth, social security number, or telephone number. Students who violate HIPAA privacy requirements may be subject to disciplinary action, not limited to dismissal from the CSUB Nursing Program.

Nursing Student Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment.

The Commitment reads as follows:

A unique aspect of higher education is its attempt to instill in the student a sense of honor and high principles that includes and extends beyond academics. An essential feature of the Department of Nursing at California State University, Bakersfield is its commitment to an atmosphere of integrity and ethical conduct.

As a Nursing student at CSUB, I accept as my personal responsibility the vigorous maintenance of high standards of honesty, truth, fairness, civility, and concern for others. My devotion to integrity establishes that I will not cheat in academic work and that I will adhere to the University's Code of Student Conduct as outlined by the Dean of Students, at https://www.csub.edu/housing/student-conduct

According to the dictates of my own conscience, I will report behavior in violation of established standards. In addition, and beyond the requirements of any code or law, I confirm my own commitment to personal honor and integrity in all matters large and small.

By implementing this ideal, I join the faculty, staff and students of the Department of Nursing at California State University Bakersfield in making the concept of honor a reality.

(Adapted from the Honor Commitment of Duke University)

Students must read, agree to, and sign a copy of this Honor Commitment (Appendix A1) when admitted to the Program. The signed Commitment will be kept in the student's record.

D. **Social Media Policy**

All cell phones and social media devices should be turned off during class and clinical time. This includes no text messaging or postings on social media sites during class or clinical time. Cell phones may only be used during breaks and mealtime (if mealtime is not utilized as part of clinical time for conference).

There is no such thing as a "private" social media site. Search engines can locate items many years after the publication of the original post. Comments can be forwarded or copied. It is often wise to delay posting if you feel angry or passionate about a particular subject. If you are unsure about posting something, ask your faculty.

No inappropriate content should be text messaged, or posted on social media networks; this includes responding to another student's post. Inappropriate content includes: patient information, stories or pictures related to patients or families cared for during clinical even if they give permission, and information related to health care agencies, co-workers, faculty and/or managers. Information should not be shared with family members, friends, or posted on social media even if names or other identifying information are not used. Absolutely no pictures should be taken, saved, forwarded, or posted of patients or family members, even if you have their permission. Patient confidentially must be upheld at all times. Future employers hold you to the highest standards of behavior.

Violating privacy or confidentiality of others can affect the reputation and well-being of patients, family, faculty, co-workers and peers, and the University. Violation of HIPAA policies or breeching of confidentiality can result in fines and litigation for individuals, including students. In the Nursing Department, violation of privacy and confidentiality is considered a Professionalism Violation. Disciplinary actions for a Professional Violation may result in grade reduction, course failure, and/or dismissal from the Program. These disciplinary policies are detailed in Section IV.

E. **Guidelines for Professional Appearance**

Dress

CSUB nursing students represent the University and the Department of Nursing when interacting with patients, their families, staff, and others in the health care environment. The way students dress demonstrates respect for the University they represent and for the patients and families they serve. Students purchase and wear the uniforms of the Department throughout their clinical experience unless the clinical instructor advises otherwise. While wearing the CSUB uniform, students are clearly recognized at the University and by the clinical agencies accommodating the student experience. Professional attitudes and clothing reflect the same respectful behavior and professional attitudes even when the CSUB uniform is not required in the clinical area. Information regarding uniform purchase is provided during orientation. Uniform purchase, including the polo shirt and khakis worn during some clinical experiences, is mandatory. Students who fail to purchase their uniform in a timely fashion will be dropped from clinical courses.

The clinical uniform scrub top is light blue and includes the monogrammed CSUB Department of Nursing logo (with optional first name). The scrub pants are light blue (the same color and fabric as the traditional top) with straight leg scrub pants, or knee to mid-calf length skirts. The CSUB blue scrub jacket with the CSUB monogrammed Department of Nursing logo with optional student first name may be worn over the uniform. Appropriate undergarments must be worn and must be covered by the uniform. Students may opt to wear a neutral-color long-sleeved or short-sleeved T-shirt under the uniform if desired and if not prohibited by the clinical facility. No other color T-shirts will be accepted.

Students in courses assigned to community experiences are required to wear the community uniform. The top is the CSUB Nursing dark blue polo shirt ordered through the Department of Nursing or another appointed vendor. The pants are self-purchased straight leg khaki colored, slacks or knee to mid-calf skirt. No 'skinny' style pants, no jeans, no rips in pants/slacks. Students may opt to wear a neutral-color long-sleeved or short-sleeved T-shirt under the uniform if desired. No other color T-shirts will be accepted.

Casual attire, such as shorts, jeans, flip-flops, or short midriff tops are not permissible in the clinical setting, including the skills lab and simulation center at any time. Faculty may have additional requirements for specific clinical areas. Please clear any exceptions to these items with your clinical faculty.

Identification Badge

The CSUB Identification badge includes: student picture, student name and title "Nursing Student" in a minimum of 18-point font. This complies with a Board of Registered Nursing requirement. The identification badge must be worn above the waist, and the photo must be displayed outward. The identification badge must be worn at all times during clinical hours at any clinical sites. If the student reports to the clinical site without their badge, they will be sent home and given an unexcused absence. Student must also wear their identification badge when, in the CSUB Nursing Skills/SIM Lab(s) and Computer Lab(s).

Footwear

Wear clean shoes in neutral color with closed toe and heel, with nonskid soles. Sneakers may be worn in the colors stated above without excessive design. For questions or shoe approvals, refer to your clinical team leader. Shoelaces and socks should not be of distracting color or design.

Hair

Hair is neatly maintained, clean and kept off the collar. Hair is pulled back to prevent it from falling forward over the face while performing routine nursing duties. Color should be those that occur in nature (no pink, purple, blue, etc.). Students may choose neatly trimmed facial hair. Facial hair is maintained in short style to insure adequate seal for respiratory isolation masks/particulate respirators. No handlebar style mustaches or long beards are acceptable.

Makeup

Makeup, if worn, should be natural in appearance. No heavy makeup, glitter, or extremes in color.

Nails

No acrylic nails, extenders, or polish is permitted. Nails must be clipped close to the fingertips. Hands and nails must be clean and free of any stains.

Perfume

Perfume or cologne is not allowed. All personal care products including deodorants and body sprays must be unscented

Sunglasses

Sunglasses may be perceived as blocking interpersonal communication. Do not wear them indoors.

Jewelry and Body Accessories

The following jewelry is allowed: a) One small post earring (with no dangles) in each ear; b) One small ring; c) Small necklaces and neck chains inside the uniform; d) ankle chains that are not visible or audible; e) small wrist watches with second hands; f) digital-type watches that are clean, and not of a distracting color or design; No other jewelry and/or visible body piercing is allowed in the clinical area. (Please don't assume because the pierced ornament is in your tongue that it is invisible. It is not acceptable professional dress).

Faculty may have additional requirements for specific clinical areas. Please clear any exceptions to these items with your clinical faculty.

Tattoos

No visible tattoos are permitted in the clinical area (including skills and sim). Cover any tattoos that may be visible.

Hygiene

Personal hygiene must be of the highest standard.

Do not chew gum, mints or smokeless tobacco while in clinical areas. Students may not smoke cigarette, e-cigarettes, or vape while in uniform at any time. It is expected that patients will not experience any exposure to second-hand or third-hand smoke. CSU Bakersfield is a smoke free campus and students are expected to abide by the University rules on smoking.

Exceptions

Requests for exceptions must be submitted to the faculty and/or agency in writing before the day of the clinical experience.

This dress code policy, established by CSUB students and faculty, will be enforced for all students in the Nursing program. Violation of the policy is considered a Professionalism Violation, as described in Section IV. Any student failing to comply will be asked to leave the clinical area and may not return until modifications are made. Students should be aware that additional dress restrictions and infection control policies might be required in specific departments of agencies or hospitals.

F. **Policy on Drug and Alcohol Abuse**

Clinical Attendance

The instructor will immediately excuse from the clinical area any student whose behavior indicates* that they are impaired due to the use of drugs and alcohol.

Please note that although cannabis may be legally used in the state of California, students may not test positive on a drug test. Cannabis is not considered legal at the Federal level and is

regulated as a Schedule 1 drug; "defines as a drug with no currently accepted medical use and high potential for abuse" (DEA, https://www.dea.gov/drug-information/drug-scheduling).

The following procedure will be followed:

1. If drug or alcohol use is suspected, the student will be sent for a mandatory substance test at the student's expense.

2. The student will be given a clinical warning and be referred to the Chair of the Department of Nursing.

3. The Chair will refer the student to the campus Student Counseling Center or to a therapist.

4. The student will be informed by the Chair that they will not be able to return to the clinical area until they have been assessed by an appropriate physician or therapist.

5. A letter will be required from the physician or therapist indicating the student is capable of performing safe nursing care.

6. Absence from clinical practice will be regarded as an unexcused absence.

7. If the period of time required for therapy and/or treatment is beyond the time to makeup missed clinical days and to successfully complete course objectives, it will then be necessary for the student to withdraw from the nursing program.

8. The student will be allowed to reapply for admission. At this time, the student will be required to present a current assessment letter from the physician or therapist indicating the student is able to perform safe nursing care.

*Such behavior would include inappropriate behavior for the situation and erroneous nursing judgment.

Class Attendance

The instructor will give an unexcused absence to any student from class whose behavior indicates that they are impaired due to the use of drugs or alcohol and who is interfering with the purpose of the class. The student will be counseled to make an appointment at the campus Student Counseling Center or with a physician or therapist. Please refer to the sections on Student Discipline and Privacy Rights of Students in Academic Records in the current University General Catalog

G. **Classroom Behavior, Online Etiquette, & Email Policy**

Classroom Behavior

Professional behavior is expected. It is the responsibility of each student to support a productive learning environment and avoid behavior recognized as "classroom incivility."

What is Classroom Incivility? (adapted from UCSC Center for Teaching Excellence)

- Annoyances, minor disruptions: talking on cell phone or texting, surfing internet, reading newspaper, side conversations, arriving late or leaving early, packing up noisily before end of class.
    - Solution: Be aware that one student's activities do affect the experience of the entire class. Avoid these behaviors.
- Dominating discussion: The student who won't let anyone else talk or fails to recognize the instructor's intent to "move on" with the discussion.
    - Solution: Pay attention to "cues" from your instructor and classmates. Remember that office hours are available to answer lingering questions.
- Aggressive challenges of teacher: The student who takes up class time questioning the instructor's authority, expressing anger about grading, or generally undermining the ability of the instructor to teach.
    - Solution: State your questions and concerns in a clear, courteous manner through effective word choice and professional tone. If you become frustrated, use a private meeting during office hours to fully explore your concerns.
- Disputes between students; demeaning comments: When classroom discussion gets out of hand, or a student uses demeaning or stereotyping language.
    - Solution: Recognize that controversial subjects and viewpoints will be explored, and that divergent opinions may be expressed. However, it is expected that students will "disagree without being disagreeable." Do not use slurs (based on race, ethnicity, gender, sexual orientation, religion, etc.) or engage in personal attacks.

Online Etiquette/Netiquette:

Professional behavior is expected. It is the responsibility of each student to support a productive learning environment and avoid behavior recognized as "classroom incivility." In an online course, it is particularly important that students review etiquette related to electronic communication. Please review the Netiquette Guidelines at http://www.albion.com/netiquette/corerules.html

Emails Between Students, and Between Students and Faculty/Staff

1. All faculty, staff, and students are required to use their "csub.edu" account when emailing information or questions pertaining to aspects of the programs of nursing provided at CSUB.
    a. The university provides a "csub.edu" email to every faculty, staff, and student who are a part of the CSUB community.
    b. Faculty and Staff are not required to respond to email from other email accounts so questions by students may go unanswered and information may not be distributed as needed.

    c. Exception: It is important to note that new faculty and prospective RN-BSN and MSN students may use personal address until receiving their csub.edu addresses which may take 3-4 weeks at the beginning of the semester.
2. All faculty, staff, and students will respond to emails within 48 hours on Sunday-Thursday and within 72 hours on Friday-Saturday when classes are in session.
3. The confidentiality of "csub.edu" email is not guaranteed so emails containing patient information of any type must not be sent via email. This information should be discussed in person between faculty, staff, and students.
4. All faculty, staff, and students will only use their own "csub.edu" account and not that of another faculty, staff, or student.
5. Use professional tone when writing an email message. You should:
    a. Use professional greetings instead of colloquial expression (Dear Professor_____ rather than "hey," "yo," or "'sup").
    b. Always end email with a thank you and a signature block.
    c. Wait until your message is written and proofread to add the recipient(s). This will prevent you from accidently sending an email at the wrong time or to the wrong person.
    d. https://www.lifewire.com/fundamental-email-etiquette-1171187

H. **Testing Policy**

Students should familiarize themselves with the following expectations prior to testing.

General Guidelines:

1. Arrive on time to avoid distracting other students.
2. Store all belongings as directed.
3. Sit every other seat as much as possible. Instructors reserve the right to use assigned seating.
4. No hats.
5. No food or drink without instructor permission.
6. No looking at other students' responses, i.e. papers or computer screens
7. No talking to other students.
8. No leaving the room during the test without permission of the faculty member.
9. No papers or books of any kind.
    a. Exception: if an "open-book" quiz is given, or if blank paper is needed for mathematical calculations, the instructor will provide specific, clear instructions about which materials may be used.
10. NO RECORDING ALLOWED during review sessions after tests. This includes written or electronic recording.

11. All test reviews will be conducted "eyes only" without paper or pencil/pen, or electronic devices. Attempting to copy test questions during test review constitutes academic dishonesty.

12. Generally, there are no makeups for in-class quizzes or assignments unless arrangements are made with instructor related to a medical emergency or other extenuating circumstances. Refer to syllabi for course specific policies.

13. Students must take all tests and the final exam on scheduled dates and times unless special pre-arrangement is made with instructor. A student who misses a test without pre-arrangement must have evidence of a documented emergency. It is the responsibility of the student to promptly notify the instructor and produce the required documentation. A student who experiences a documented emergency will be scheduled to take the test at the convenience of the instructor. The student may receive an alternative test, covering the same material but with *different* questions.

For Paper Quizzes/ Exams:

- Use one #2 pencil for Scantron testing.
- No electronic devices of any sort may be used, left on, or even visible. Cell phones etc. should be off & stored with belongings.
- If calculators are required for testing, the instructor will notify students in advance. If a student brings a calculator, then only a simple calculator would be allowed. No cell phones, graphing calculators, or calculators on clipboards will be permitted. No additional notes may be added to calculator.
- Time limit: Pencils down at scheduled end time. It is the student's responsibility to manage time wisely & finish the exam, including name. Failure to stop when directed is an attempt by a student to gain an unfair advantage (more time than other students), which is academic dishonesty.
- Scores are based on recorded responses only. Omitted or mis-bubbled Scantron answers will be marked wrong.

For Online Quizzes/Exams (via Learning Management Systems such as Canvas or ATI)

- If the quiz/exam is being given via an online learning management system, the student may be required to bring their own electronic device for the purpose of test taking only.
- Instructors have the authority to require students be logged into a proctoring program (such as Proctorio or Respondus Lockdown Browser). Students will be notified of this need prior to the date of the quiz/exam.
- No additional electronic devices of any sort may be used, left on, or even visible. Cell phones etc. should be off & stored with belongings.
- If calculators are required for testing, the instructor will notify students in advance. The instructor will notify students if a calculator will be available via the proctoring program, or if the student is required to bring their own calculator. If a student brings a calculator, then only a simple calculator would be allowed. No cell phones, graphing calculators, or

calculators on clipboards will be permitted. No additional notes may be added to calculator.

Any violation of this Testing Policy will be viewed as a violation of academic integrity. See Section IV for details on Academic Integrity policies.

I. **Attendance Policy**

Clinical Attendance

1. Clinical Orientation is mandatory. There are no makeup sessions for missed orientations. Students who arrive late or are absent from Clinical Orientation will be administratively dropped from the course. The Board of Registered Nursing expects that theory and clinical courses will be taken concurrently; therefore, a student who is dropped from a clinical course will also be dropped from the concurrent theory course. The policies for course failure and concurrent theory/clinical courses are detailed in Section IV.
2. In the case of an emergency that prevents a student from attending or being on time for a theory or optional course, the student is expected to contact the instructor by email or phone prior to the start of the respective class. In the case of an emergency that prevents a student from attending or being on time for a clinical or simulation course, the student is expected to contact the instructor by phone prior to the start of the respective class.
3. Contacting the instructor 'by phone' is defined as direct voice contact. A text message or voicemail message left for an instructor is not considered to be 'contact' made with the instructor.
4. Students who fail to respond to faculty within the allotted time period will be subject to appropriate consequences (clinical warning).
5. An excused absence consists of time missed due to illness or extenuating circumstances. The student is responsible for notifying the instructor, and make direct voice contact with the instructor, about the illness or extenuating circumstances prior to the start of the assigned clinical day. The need for makeups of clinical hours will be determined by the student's ability to complete course objectives. All excused absences in excess of one week of clinical hours must be made up during the semester, by arrangement with the instructor; otherwise, course failure will occur.
6. An unexcused absence is any absence not due to illness or extenuating circumstances, or without prior notification of the instructor. A clinical warning will be issued. All unexcused absences must be made up subject to the availability of the clinical instructor. An unexcused absence which is not made up will result in a failure of the course. Clinical warnings and course failure policies are detailed in Section IV.
7. Late Policy: Students are expected to arrive to the clinical unit on time. If a student knows they are going to be late, the clinical instructor must be notified by direct voice

contact. Students failing to arrive to the clinical setting at the appointed time will be considered late. Refer to the individual course syllabus for specific guidelines.

8. Illness Policy: Students whose condition limits their ability to give nursing care or who have an illness of a chronic or contagious nature must submit documentation from a medical provider stating that it is safe for them to perform nursing care before returning to the clinical area. All absences more than one clinical day, even if excused, must be made up and at the discretion and availability of the nursing faculty.
9. Provision for makeup labs may be offered at the discretion and based on the availability of the instructor, with priority given to those students with excused absences before students with unexcused absences.
10. Meals & Breaks: Students are required to remain on the clinical campus during meals and breaks. Refer to the individual course syllabus for specific guidelines.

In-Person Lecture Attendance

1. Class attendance is expected of all students enrolled at the University. The instructor in each course sets the standard expected in this regard. When students are absent from classes, it is their responsibility to inform instructors of the reason for the absence-the student should consult with faculty regarding missed work and assignments. Faculty reserve the right to subtract points from the total grade for each class absence. Guidelines will be listed in the students' specific class syllabus.
2. Students' guests are allowed in lecture only with special permission from the instructor.
3. Students must obtain permission from the instructor prior to recording in the classroom.
4. Children are not permitted in the classroom, computer lab, simulation center or skills lab.

Online Attendance

All students enrolled in online courses (which includes hybrid courses) must log in to the course and complete any assignment(s) or other activities that are required during the **first week.** Students who fail to complete first-week assignments/activities within the instructor's deadline may be dropped. After the first week, and during the time period before the University's established deadline to withdraw from a course without a 'W' being recorded, students are responsible for officially withdrawing from any class or classes in which they no longer wish to be enrolled.

Instructors may drop a student from a course when absences number the equivalent of two weeks of class recorded from the first day of instruction. In the case of online courses, "absences" shall be defined as "non-participation". Non-participation shall be defined as, but not limited to:

- Not following the instructor's participation guidelines as stated in the syllabus
- Not submitted required assignments
- Not contributing meaningful discussion in required chat rooms, discussion boards or other online forums

- Not participating in scheduled activities
- Failure to communicate with the instructor as required

Simply logging into the course does not constitute participation. Students must demonstrate that they are actively participating in the course by submitted required assignments.

J. **Transportation**

The University does not provide transportation. Students are required to provide their own transportation to clinical and other field areas. Students engaged in community health clinical experiences must have access to a car.

K. **Simulation Center & Skills Laboratory Rules**

The Simulation Center and Skills laboratory setting is intended to simulate the agency environment. It is expected that behavior in the Simulation Center and Skills laboratory will reflect an understanding of proper behavior in the clinical setting. Your safety is of utmost importance. We utilize syringes, biohazard waste, and sharp objects. Your clinical nursing courses will require lab safety agreements each semester to utilize the Nursing Simulation Center and Skills Laboratory. Please pay special attention to your instruction at the beginning of each semester. The 2022 Nursing Lab Safety Agreement, Appendix C, is included as an example.

L. **Policy for Students Practicing Procedures on Each Other**

In the course of the nursing program, when learning new skills, it is often useful for students to take the role of the patient. This enhances the learning experience in several ways:

1. For the practicing students in that a live "patient" gives them a more realistic experience.

2. For the student "patient" since it gives her/him an idea of what the procedure is like from the patient's perspective and should help her/him be a more sensitive care-giver.

In asking the individual student to take on the patient role, the student's right to privacy and right to refuse a given procedure will be protected. See Appendix D, Student Agreement for Practicing Procedures On Each Other

M. **Syringe Disposal Policy**

1. Impermeable containers are to be stored in RNEC 115B, Simulation Center, or CPHC storeroom when not in use.

2. Collection and segregation: The nursing department generates medical wastes including used hypodermic needles and fingerstick lancets. These are to be collected at the point of origin in puncture-resistant, leak-proof containers.
3. When impermeable containers are three quarters (3/4) full, they should be capped, topped, and placed in red, double-lined biohazard bags.
4. Impermeable syringe containers should be placed in the biohazard bin in the Simulation Lab laundry room, where they will be picked up by a contracted disposal company.

N. Clinical Section Reassignment

The team leader of clinical courses reserves the right to reassign students to another clinical section, based upon hospital request and/or team leader request. Clinical reassignment may be made without approval from the student. The student will be notified via email that their clinical section has been changed.

O. Priorities for Clinical Rotation Assignments

Tuesdays and Wednesdays are CSUB clinical days; Thursdays and Fridays are reserved in the clinical agencies for use by Bakersfield College (BC). To avoid conflicts with seniors, preceptors, students from other colleges, and clinical rotations, here are the priorities for clinical rotation assignments:

First Priority: Regularly scheduled clinical rotations for courses required in the first three levels of the curriculum. Nurse Externs or Senior Practicum students should not schedule themselves for a day/unit when or where CSUB or BC students are there. The exception would be if the clinical instructor gives permission (this includes the BC instructors). For example, if BC students take the "back" patients on 4th floor at Memorial, an Extern or Senior Practicum student could work in the "front" without compromising the learning for the other clinical students – provided the BC clinical instructor agrees.

Second priority
Senior Practicum students: If both a Senior Practicum student and an Extern student show up the same day for the same preceptor, the Extern needs to go elsewhere. The reason is that the Extern student is in an elective course; Senior Practicum is a required clinical course in the curriculum. As an agency employee, you may be told by the agency that you "must" work at the scheduled time on the scheduled unit. If this occurs, inform the faculty team leader for the course and the situation will be resolved.

P. Policy for the Process of Evaluation of Students in Clinical

1. Evaluation of clinical performance is based on letter grades received on Nursing Process assignments and/or other items specific to particular courses. As with other nursing courses, a student must achieve a minimum of 73% to pass the course. In addition, performance is rated by

the Clinical Performance Evaluation Tool (CPET) based on the course objectives. Failure in receiving a 73% or failure to pass the CPET will result in failure in the clinical course.

2. Student clinical practice performance is rated by the performance evaluation tool at mid-semester and during the final examination period.

Procedure for these evaluations:

a. Prior to the mid-semester and final conference, both instructor and student rate the student's performance, based on records of the student's performance in the clinical setting using the CPET. During the conference, examples of the student behaviors are shared.

b. Students sign the CPET indicating they have read it after adding, at their discretion, additional statements.

c. Students who disagree with the ratings on the CPET, must first take steps to resolve the disagreement on an informal departmental basis.

d. Completed CPET's are to be submitted by the clinical faculty to the Department of Nursing office for filing.

3. For students who have missed clinical practicum time that prevent them from achieving course objectives, arrangements must be made for makeup time as soon as possible to successfully complete the course. (See *Nursing Student Policy Handbook*, "Attendance Policy").

4. Course failure is to be reported to the Team Leader, Undergraduate Program Director, and the Chair of the Department of Nursing within three business days.

Q. Student Safety in the Clinical Setting

When a nursing student sustains an injury during their clinical practice, such as a physical injury, needle-stick injury, or exposure to communicable disease, the goal is to obtain the appropriate treatment in a timely manner. The following protocols should be adhered to ensure appropriate treatment and documentation.

1) Student will report the injury to the faculty member immediately.

2) Student/faculty member will inform the supervisor at the clinical site.

3) Student will complete an incident report per the clinical site's protocol and provide a copy of the incident report to the faculty member.

Student will complete CSUB Student/Visitor Injury Illness Report and submit to faculty. Form can be found at: https://maindata.csub.edu/media/42901/download?inline

4) Student/faculty will decide on the appropriate level of medical treatment that should be sought based on the injury sustained and treatment be rendered within 24 hours of the injury

R. Nursing Student Lounge Guidelines

1. The nursing student lounge is reserved for students currently enrolled in the nursing program.
2. Students must demonstrate professional behavior and respect for the environment.
3. Be courteous towards others and respectful of all property.
4. Be mindful of other classrooms/offices nearby that may be in use.
5. Comply with Staff instructions and/or requests.
6. All individuals that use the Student Lounge must clean up after themselves.
7. Students are responsible for their personal items.
8. Do not tamper with artwork, fixtures, furniture, and/or property.
9. Report non-functioning equipment to the department administrative staff.
10. The fridge and coffee maker are available for students to use, however do not leave behind items.
11. Use of the Lounge is at your own risk—Staff, Faculty and CSUB are exempt from liability regarding lost, stolen, and damaged items and/or bodily injury.
12. Staff and Faculty reserve the right to close the student lounge and/or ask students to leave due to inappropriate behavior and/or conduct.

S. Mailbox Security Policy

Nursing faculty and staff members have internal mailboxes in The Nursing Administrative office. Students have internal mailboxes (designated by last name initial) in the Nursing Student Lounge.

The internal mailboxes and external mail drop areas are treated with the same respect as the U.S. mail delivery. It is not appropriate to go through another student's or faculty member's mail. Students are not to enter the mailroom in the Nursing administrative offices without expressed consent from the department chair, nursing faculty or administrative office personnel. Faculty or administrative office personnel must accompany the student while in the Nursing mailroom.

T. Student Representation on Departmental Committees

Each nursing class will identify a representative to attend three of the Nursing Department Committee meetings: The Nursing Organization Committee, the Undergraduate Program Committee, and the Program Evaluation Committee. It is the responsibility of the student representative to attend or send an alternate, and to report back to the nursing students in their respective class. It is also the responsibility of the students to provide the elected representatives with input so that they may adequately represent their colleagues at the meetings. Topics to be discussed at meetings must be addressed with the Departmental Committee Chair prior to the meeting for the item to be placed on the agenda.

U. Student Feedback

Student evaluation of specific courses, faculty, and level objectives is sought at many points during the nursing program as part of the Program Evaluation Plan. Course and Program evaluations are conducted using surveys. Students in each required course offered in the Nursing Department are asked to complete these evaluation surveys which report their assessment of the course content. In addition, evaluation of the faculty member's teaching is done in a formal manner through the SOCI (Student Opinionnaire on Courses and Instruction). These SOCIs are used both by individual faculty members and the University administration in a continuing effort to ensure that California State University, Bakersfield's instructional program is as effective as possible. The SOCI is administered during the last week of the semester prior to finals.

V. Lines of Communication

If students are having academic difficulty or other problems in any course, they should first ask their instructor for help to resolve the problem. If this does not result in resolution of the problem, the student needs to seek the assistance of the Team Leader for the course. If the difficulty and/or problems still persist, the student may then seek the assistance of the Undergraduate Program Director for problem resolution. If there is still a problem, the student should then seek the help of the Department of Nursing Chair.

Any unresolved issues can be referred to the CSUB ombudsman:
http://www.csub.edu/counselingcenter/ombudsman/index.html

W. **Policy for Written Work and Use of APA Publication Manual**

The Department of Nursing has adopted the APA guidelines as a standard for all written student papers, theses and reports. The APA Manual is available for purchase from the University Bookstore, and is a required textbook for each theory course.

The Publication Manual of the American Psychological Association (APA) provides guidelines to be used for writing and citations of others' work. Citations and referencing sources of information is an important component of professional writing. Failure to use citations can constitute plagiarism and may initiate the Academic Integrity violation process as detailed in Section IV. Students are required to use the latest version of the manual.

The Department of Nursing and individual faculty members will advise students of any accepted variations from the manual on a specific assignment or in a specific course. All papers will be typed unless expressly excused by individual faculty.

The APA *Publication Manual* contains guidelines for both student papers and professional manuscripts. Students are encouraged to be familiar with both but are required to use the guidelines for student papers found in the manual.

The most current Department APA Policy and Resources can be found on the CSUB Nursing Communication Center page on Canvas.

Section IV: Disciplinary & Related Policies

A. **Academic Integrity-Violation Process**

The principles of truth and integrity are recognized as fundamental to a community of teachers and scholars. Students are expected to do all work assigned to them without unauthorized assistance and without giving unauthorized assistance. Students must adhere to the University's Academic Integrity Policy. This policy is part of CSUB's Student Conduct Code, which is administered through the Division of Student Affairs and the Dean of Students.

Academic dishonesty is a broad category of actions that may involve plagiarism, cheating, fraud or deception to gain an unfair academic advantage. These actions are detailed below:

Cheating: A broad category of actions that involve fraud and deception to improve a grade or obtain course credit e.g. submission of the same paper, or essentially the same paper for credit in a different course or intentionally utilizing someone else's work.

Plagiarism: Consists of the misuse of publications or unpublished works of another by claiming them as one's own. Plagiarism may consist of handing in someone else's work as one's own, copying or purchasing a pre-written composition and claiming it as one's own, using paragraphs, sentences, phrases, words or ideas written by another without giving appropriate citation, or using data and/or statistics compiled by another without giving appropriate citation. Reuse of student's own work is also considered plagiarism.

Fabrication: Intentional falsification of information on class assignments or presentations.

Unauthorized Collaboration: Working with others without the specific permission of the instructor on assignments that will be submitted for a grade. This rule applies to in-class or online exams, papers, labs, or homework assignments. Student may not collaborate without faculty authorization.

Failure to Collaborate: Not contributing in a satisfactory manner to a group assignment/project.

In the Department of Nursing, Academic Integrity and Professionalism Violations will be handled in the following three ways:

1. **Written Assignments:**

   Minor violations will be documented using the "Notification of Violation of Academic Policies in Written Assignments" (see appendix) form. A student who violates the academic policy can receive a deduction in points or an assignment grade of zero. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. The second minor violation in subsequent assignments and/or courses will be treated as a major violation and referred to the Dean of Students Office.

Major violations will be documented using the "Notification of Violation of Academic Policies in Written Assignments" and CSUB University's "Academic Integrity Violation Reporting" forms. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. These violations will be reported to the Dean of Student's Office for adjudication to determine additional disciplinary sanctions.

2. Professional Appearance Violations:

Students are given appropriate dress code rules and regulations. Following these rules is essential for compliance with all clinical sites. Hospital and clinical agency policies are reviewed every two years to ensure the DON is following the appropriate guidelines. Student dress code will reflect the most stringent rules to ensure we are meeting all community agency needs. Additional dress code rules may be added to the syllabus depending on hospital department or clinical agency needs. Students who report to clinical without proper dress code will be given a Professional Appearance Violation. These warnings will be kept in the student file. If the student receives two Professional Appearance Violations, they will receive one clinical warning.

3. Clinical or Theory Violations:

Minor Violations will be documented as a Theory or Clinical Warning, depending upon which type of course the violation occurs in. See course syllabus for further explanation. A student who violates the professionalism, clinical or theory expectations can receive a deduction in points, an assignment or course grade of zero, sent home with an unexcused absence, or expulsion. A copy of the Warning will be placed in the student file along with any appropriate documentation. Two minor violations in the same semester will initiate the DON Probation Policy.

Major Violations will be documented as a Theory or Clinical Warning, depending upon which type of course the violation occurs in. A copy of the notification will be placed in the student file along with any appropriate documentation. Major Violations will initiate the DON Probation Policy. These violations may also be reported to the Dean of Students Office for adjudication to determine additional disciplinary sanctions.

B. **Policies Related to Theory and Clinical Warnings**

Overview

A student who fails to meet the ethical, professional, academic or clinical standards of the Department of Nursing (DON) will receive a written warning, a possible failing grade, placed on DON probation, or may be dismissed from the nursing program.

Written Clinical or Theory Warning

A faculty member may issue a written Clinical or Theory warning to a student who has exhibited behavior that violates the standards of the DON. The procedure for a written warning is followed unless the circumstances warrant an immediate dismissal from a course or from the program.

Procedure for Written Clinical or Theory Warning

- The faculty member may issue a student a written warning with or without prior verbal corrections and/or counseling.
- A student may receive a written warning:
    - If their course grade is below the C (73%) grade requirement during the midterm evaluation period.
    - At any time when a faculty member determines that a student has violated the ethical, professional, academic and/or clinical standards of the DON.
- The faculty member and student will review the violation and written plan of action for remediation and correction including timelines, expected changes in student behavior, and remedial activities.

- The faculty member issues the written warning with their signature and the date it was presented to the student. The student is requested to sign and date the warning, acknowledging that the student agrees that the document has been read and understood. If the student does not sign, the faculty member notes the student's refusal to sign and places the document in the student's file with a summary of the faculty member's student conference.

- The student receives the copy of the written warning. The written warning may be delivered by hand, or through campus email.
- The original written warning is placed in the student's file.
- Written warnings are tracked on the Clinical / Theory Warning Academic Integrity / Failure Notification Log Sheet by the Nursing Office.
- Second violations or major violations will place a student on DON Probation.

C. **DON Probation Policy**

When a student is placed on DON probation, the following actions will take place:

1. Faculty notifies the student via email, includes the Academic Learning Improvement Plan (ALIP) and required date of completion. The Student Success Coordinator is also notified via email.
2. The student is required to complete the ALIP as directed and make an appointment with the Student Success Coordinator to complete and review the ALIP.
   The student success coordinator and the student will jointly develop a plan outlining the actions that must be completed for DON probation to be removed. A copy of the completed ALIP will be placed in the student's file.
3. The involved faculty members and Student Success Coordinator will determine the level of participation allowed by that student in Nursing Department extracurricular/ service-learning activities. (Example: CNSA, CPHC, Global Learning, and Class Officer position)).

4. discuss the Academic Learning Improvement Plan (ALIP) and other strategies for success.
5. Student will meet with Assistant Chair or Department Chair to review their progress if deemed necessary by the Student Success Coordinator.

DON probation will be removed, and a student returned to 'good standing' when all the following conditions exist:

1. All course final grades are 73% or above
3. Satisfaction of Academic Learning Improvement Plan (ALIP)

D. **Policies Related to Course Failure**

A course failure is defined as a failure to meet ethical, professional, academic, and/or clinical standards of the Department of Nursing and/or course. A clinical failure may be assigned at any point during the course. A theory failure will be assigned upon final grade determination.

Procedure for Course Failure:

- A verbal or written warning may precede a course failure. However, no previous warning is required if ethical, professional, or clinical behaviors have occurred that constitute a serious departure from the standards of practice or if the student has demonstrated that they are incapable of rendering safe care.
- The student is informed that they have failed when a faculty member determines that:
    - The student has violated ethical, professional, and/or clinical standards OR
    - The student has not met the clinical course objectives OR
    - The student has not met the course objectives with a grade of C (73%) or better.
    - The student has demonstrated that they are not capable or rendering safe care
    - The student has demonstrated that they are not capable of rendering safe care
- The faculty member's final decision to fail a student is made in collaboration with the Team Leader. The Team Leader notifies the Director of the Undergraduate Program and the Department Chair of the failure.
- The student is no longer permitted to practice in the clinical setting upon notification of a clinical failure.
- The faculty member provides the student with written documentation of the course failure within five business days of the incident following verbal notification of the course failure.
- Written documentation includes:
    - Description of the incident(s) that constitute the breach, deficiencies and or practices leading to the clinical failure, or standards of practice violated, as applicable.
    - Dates, times, places, and other evidence, as applicable.
    - Results of final grade calculation.
- The faculty member reviews and dates the written documentation, and both the faculty and student sign the document. By signing the documentation, the student agrees that the document has been read and understood.

- If the student does not sign, the faculty member notes the student's refusal to sign and places the document in the student's file with a summary of the faculty member's student conference.
- The student receives the written course failure notice document by campus email
- The student has five business days after receiving written notification of the course failure to respond to the faculty member and Director of the Undergraduate Program if they disagree with the course failure.
- The student and Department Chair or Undergraduate Program Director will meet to resolve any areas of disagreement.
- After one course failure, the student may petition the Undergraduate Program Committee for consideration to continue in the nursing program. The student, if allowed to continue, must complete a refresher course during the semester prior to repetition of the failed course. The student must then repeat the entire failed course. Admission to the course is based on space availability and other Departmental resources. Student will be placed in a theory refresher course if repeating a clinical course.
- If a second course is failed, the student will be dismissed from the program. Exception if two courses are failed in the same semester the student can petition for re-entry.
- A clinical failure may result in dismissal from the nursing program (see Criteria for Dismissal).
- The student is allowed to complete non-clinical nursing courses in which they are enrolled for that semester.
- Student should follow up with Financial Aid and / or Admissions in regard to their CSUB student status.

The Chair of the Department of Nursing will:

- Apprise the student verbally of the decision for dismissal from the Nursing Program.
- Send a letter to the student concerning the dismissal.
- The student is not allowed to register for any future nursing courses.

Student Grievance Process

California State University, Bakersfield offers students a process whereby they may grieve a grade or non-academic situation. Complaints and grievances are covered under the policy known as "Student Complaint and Grievance Procedures". Students may initiate a complaint or grievance against faculty, administrators, staff in admissions and records, financial aid, counseling, placement or other student services offices. The complaint and grievance may be filed if an individual or office has failed to comply with written campus policies or procedures.

The Student Complaint and Grievance Procedures are detailed here:

https://maindata.csub.edu/media/34846/download?inline=

Additional information about Student Complaints and Grievances are at this website:

https://www.csub.edu/academicprograms/student-complaints-and-grievances

E. **Clinical Remediation Policy**

Rationale:

Clinical Instructors are sometimes faced with students who are unable to perform clinical skills satisfactorily in the clinical setting. There is a need for a process that is uniformly applied within the Department of Nursing when this need arises and that clearly outlines the responsibilities of the nursing student, the nursing faculty, and the nursing sim center and skills lab staff.

Process:

1. When the clinical instructor identifies a student, who is performing below expectations, a clinical warning may be issued (See Undergraduate Student Policy Handbook (UNSPH) outlining the deficient behavior and required expectations, including the timeline for completion of remedial activities. In addition, the instructor should complete the Clinical Remediation form (Appendix F), and distribute a copy to:

    a. The student with their clinical warning
    b. The student's file
    c. The Clinical Team Leader

2. The student is responsible for arranging skills lab practice time. The student should refer to Open Skills Lab schedule to determine when the skills lab staff will be available to oversee practice. If there are no available practice times, the student will need to consult with the clinical faculty.

3. Required practice hours must be documented by the skills lab staff.

4. Clinical remediation may be evaluated in one of two ways: 1) the student simply completes the required didactic review and clinical practice hours; and/or 2) the student must return demonstrate the deficient skill. If return demonstration is required, it is the responsibility of the clinical faculty to oversee the return demonstration (i.e. the skills lab staff student's will not document skill proficiency only that practice has occurred).

Documentation:

When the remediation plan is successfully completed, the clinical faculty should document this in the student file under "Evaluation" on the Remediation Form. Additional narrative notes should be placed in the students file, as needed.

Section V. Support Services/Student Organizations

A. **Financial Aid**

Financial Aid & Scholarships

Please make an effort to visit the CSUB Financial Aid & Scholarships home page at www.csub.edu/finaid. The home page provides detailed information about how to apply for financial aid as well as a description of the various types of financial aid including grants, loans, scholarships, tax credits, and work-study.

Special Scholarships

Various organizations make money available to student nurses who are in need of financial assistance. These scholarships usually defray the expenses of books, uniforms, and fees. For any of these types of scholarships, announcements will be posted on the Nursing Communication Canvas Page.

B. **Special Scholarships Awarded by the Scholarship and Awards Committee**

Procedures

1. Students will be given information about the availability of scholarships through the financial aid office (see link above).
2. The Financial Aid Office and the Dean's office will notify the ROSA committee when scholarships are ready to be awarded.
3. The ROSA Committee (in the nursing department) will select the recipients of scholarships and awards based on specified selection criteria from the financial aid office.
4. The ROSA Committee will notify students, nursing faculty, and appropriate administrative officials about their selection of recipients.

C. **Support Services and Resources**

Several support services and resources are available to all students at CSUB. Please access these services through the links provided below.

- CSUB Counseling Center
- Student Health Services
- Services for Students with Disabilities (SSD)
- Basic Needs
- Tutoring Center/ Writing Resource Center
- Center for Community Engagement and Career Education

D. **Service-Learning Courses**

NURS 4844: Service Learning and Nursing Leadership in the Community (California Student Nurses Association)

The California Nursing Student Association (CNSA) at CSUB is one of the fifty state constituent units of the National Student Nurses Association (NSNA). CNSA is a statewide community advancing the transition of the student to professional nurse through leadership development, education, mentorship, advocacy, activism, and stewardship. CNSA at CSUB is open to any currently enrolled nursing student at CSUB. As a student nurse you are preparing to be one of the future leaders of the nursing profession. CNSA offers the opportunity to take part in the challenging and exciting field of nursing. Through membership and participation, you can develop the skills necessary for leadership and decision making by having the experience of voting, running for office, and participating in activities, plans, and programs. For students entering the nursing field, CNSA will offer the opportunity to meet and exchange ideas with other student nurses and to work together to reach common goals. Offered on a credit/no-credit basis only. May be repeated up to a maximum of 6 units.

For more information on CNSA please visit their website at: https://www.cnsa.org/

NURS 4845: Service Learning and Nursing Leadership in the Community (Community Preventive Health Collaborative)

Community Preventive Health Collaborative (CPHC) is a program that allows nursing students to perform health teaching, health screening, follow-up, and referrals to underserved and underinsured people in Kern County. CPHC was developed in 2011 in response to the increasing prevalence of chronic diseases in Kern County like coronary heart disease, hypertension, diabetes, and obesity. CPHC is open to any currently enrolled nursing student at CSUB. CPHC is offered as a one-unit optional course. Course requirements include 25 service hours and some reflective assignments. Any CSUB student may also join CPHC Club. CPHC Club is a campus club chartered by the Office of Student Involvement. There is no service requirement for CPHC Club; members participate in fundraisers, social events and may also participate in the health screening clinics.

CPHC offers the opportunity for nursing students to practice their clinical skills outside the classroom and gain confidence interacting with patients as well as their peers. CPHC also offers nursing students the chance to gain leadership skills as well as practice working in a team-centered environment. Nursing students who have experienced what CPHC has to offer, have found their experiences gratifying and valuable. CPHC offers an enriching and supportive environment for students who want to give back to their community.

NURS 4846: Service Learning and Nursing Leadership in Global Communities

Community service provides a high impact learning experience through volunteering in collaboration with a variety of health organizations. This course is designed to complement the learning of students entering a health profession. Students apply what they are learning in

global settings and use self-reflection to evaluate their community service-learning experience. Student trips can vary from one to eleven days and take place out of the country. Students are eligible to travel once they have completed their first year of the nursing program. Each year the eligible trips are announced with dates/times/seats available. Trained faculty travel with students to facilitate their community outreach activities. Scholarship and grant assistance help to offset the travel costs for students. First-time travelers are given preference over those that have already participated the preceding year, however if space is available, students can participate in more than one trip over the course of the nursing program. This is an amazing opportunity for student nurses to apply their new knowledge, develop culturally sensitive skills, identify health disparities, and view other healthcare systems. Come travel with us for these life-changing experiences!

Section VI: Appendices

A. **Appendix A Canvas Forms**

Appendix A1 Honor Commitment Form

The California State University, Bakersfield

Nursing Student Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment.

The commitment reads as follows:

A unique aspect of higher education is its attempt to instill in the student a sense of honor and high principles that includes but extends beyond academics. An essential feature of the Department of Nursing at California State University, Bakersfield, is its commitment to an atmosphere of integrity and ethical conduct.

As a nursing student at CSUB, I accept as my personal responsibility the vigorous maintenance of high standards of honesty, truth, fairness, civility, and concern for others. My devotion to integrity establishes that I will not cheat in academic work and that I will adhere to the established and required community code of conduct.

According to the dictates of my own conscience, I will report behavior in the violation of such established standards. In addition, and beyond the requirements of any code or law, I confirm my own commitment to personal honor and integrity in all matters large and small.

Even though the idea of honor is an abstract one, by implementing this ideal, I join the men and women of the Department of Nursing at California State University Bakersfield, in making the concept of honor a reality.

(Adapted fom the Honor Commitment of Duke University.)

I have received, read, and will abide by the Nursing Honor Commitment.

Name (Please Print): _____

Signature: _____ Date: _____

Appendix A2 Essential Functions

California State University, Bakersfield:
Department of Nursing

Essential Functions

PHYSICAL AND MENTAL QUALIFICATIONS

A student with a disability has to have the disability verified by the Disability Services office at CSUB. It is to the student's advantage to do this as soon as possible in the quarter to assure that approved accommodations can be granted in a timely manner.

Essential Functions

There are essential functions or abilities necessary for admission and progression in the complex discipline of nursing at CSU Bakersfield. The candidate must be able to perform all of the essential functions each quarter. The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. These essential functions include, but are not limited to, the following:

Critical Thinking

A student must demonstrate critical thinking ability sufficient for clinical judgment.

1. Make effective clinical decisions.
2. Identify cause and effect relationships with clinical data.
3. Develop nursing care plans.
4. Perform math calculations requisite to safe dosage calculations and medication administration.
5. Read, synthesize, analyze, evaluate, and integrate material in the classroom and the clinical setting.

Professional-Ethical Conduct

A Student must possess the ability to reason morally and practice nursing in a professional and ethical manner.

1. Demonstrate integrity, honesty, responsibility and tolerance.
2. Abide by professional standards of practice.
3. Deliver compassionate care to all patient populations.

Interpersonal Skills

A student must demonstrate appropriate interpersonal abilities while interacting with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.

1. Communicate effectively and sensitively with other students, faculty, staff, patients, families, and other professionals.
2. Demonstrate willingness and ability to give and receive feedback.
3. Develop mature, sensitive and effective relationships with clients.
4. Establish trust and rapport with clients and colleagues.

Communication

A student must have the ability to clearly communicate in oral and written forms, and to effectively interpret communication with others.

1. Use appropriate grammar, vocabulary, and syntax.
2. Effectively communicate nursing actions.
3. Appropriately interpret client responses.
4. Initiate health teaching.
5. Demonstrate accurate nursing documentation.
6. Accurately report patient information to members of the health care team.

Mobility and Stamina

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective

nursing care in all health care settings.

1. Perform basic life support, including CPR.
2. Function in an emergency situation.
3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
4. Calibrate and use equipment.
5. Perform treatments and procedures.
6. Apply pressure to stop bleeding.
7. Manipulate diagnostic instruments to adequately perform all aspects of a physical assessment.
8. Sit, stand, and move about in patient environments for 12 hour periods.

Tactile

1. Perform palpation and other functions necessary for a physical exam.
2. Assess texture, shape, size and vibration.
3. Note temperature changes in skin and equipment.
4. Perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

Auditory

A student must have sufficient auditory ability to effectively monitor and assess health needs of patients.

1. Hear cries for help.
2. Hear alarms on equipment and overhead codes.
3. Hear ausculatory sounds using a stethoscope.
4. Hear and interpret verbal communication from patients.
5. Communicate over the telephone.

Visual

A student must possess visual ability for observation and assessment necessary in nursing care.

1. Observe patient responses (e.g., changes in skin color, grimaces).
2. See drainage on dressings and note characteristics of body fluids.
3. Note fluid levels in collection devices, syringes and infusion devices.
4. Read gauges that monitor patient progress (e.g., sphygmomanometer).
5. Discriminate colors for diagnostic purposes.
6. Assess movements of patients.
7. Observe patient behavior (e.g., in rehab or psychiatric facilities).

Behavioral-Emotional Health

A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.

I have read, understand, and comply with the Essential Functions list (A-I). I acknowledge the physical and mental requirements for the nursing program and I meet all of these requirements.

Print Name	**Signature**
Date	**Nursing Program Level (Sophomore/Junior/Senior)**

Appendix A3 Clinical Forms Checklist

BSN Student File
Clinical Forms
Checklist

Student Name: _____

CSUB ID: _____ **Date of Birth:** _____

Address:

_____

Phone #: _____ **CSUB Email:**

_____

Personal Email:

_____

Expected Graduation year: _____

Health Insurance: Yes/No/Decline to state

Provider: _____

Please initial below to verify that you have read and agreed to the terms outlined in each document.

A. _____Photo Release Agreement Form
B. _____Undergraduate Handbook Acknowledgment (must review the Handbook)
C. _____Guidelines for Professional Appearance
D. _____Academic Integrity Policy

Please sign below to verify that you have completely read and agreed to the terms outlined in each document.

Name (Please Print): _____

Signature: _____ Date: _____

Appendix A4 Confidentiality Statement

Confidentiality Statement

In the normal course of business, any person connected with an organization has the potential to come into contact with confidential information. In some cases, exposure to such information is coincidental or incidental; in others it is an integral part of the job function. This information may be personal, clinical, financial, or other. It may be computerized (that is, in electronic form), or in hard copy, or even oral in nature.

Examples of such confidential information include, but are not limited to: medical records, employee records, financial records and reports, information distributed to committee members to inform deliberation and decision making, and information found accidentally. It also includes information gained through discussion in committees, from employees, from patients and their families or friends, from external agencies, the media, or the medical staff, and so on.

It is the policy of the California State University, Bakersfield Department of Nursing to maintain confidential information in strict confidence, both while at clinic and when off duty. Therefore, all students who have access to confidential information are prohibited from disclosing such information in any unauthorized manner. They must use this information only in ways that are consistent with this commitment to confidentiality. Consistent with the principle of “need to know”, it is also incumbent on all who are exposed to confidential information to see that they use only as much of such information as is needed to their job or perform their function.

It is policy of the California State University, Bakersfield Department of Nursing to maintain all aspects of confidentiality. Students are accountable for being aware of the legal implications in respecting the rights of others, especially the right to privacy. The following guidelines are strictly adhered to as per HIPAA:

- Confidentiality of client information must never be violated.
- Client personal, family or health related information may not be removed from the healthcare setting.
- Any written assignments must not have any client identifying information on them and are to be treated with confidentiality, i.e. **do not share any of the information or paperwork with others**.

It is also the responsibility of any who have contact with confidential information to preserve such records against loss, destruction, tampering and inappropriate access and use, including inappropriate disposal.

Any breach of confidentiality represents a failure to meet the legal, professional and ethical standards expected, and constitutes a violation of this policy. A breach need not take the form of a deliberate attempt to violate confidentially, but includes any unnecessary or unauthorized use or disclosure of confidential information-due to carelessness, curiosity or concern, or for personal gain or malice, including but not restricted to informal discussion. Such breaches may result in discipline and/or civil or criminal penalties.

Confidentiality Agreement

I understand the above statement of confidentially and agree to fulfill its expectations in my treatment of confidential information. Further, I understand that a violation or breach of this commitment to confidentially will be investigated and responded to in a manner to prevent a reoccurrence. I understand that I could also be subjected to disciplinary action that may include legal action.

_____	_____	_____
Name – please print	Signature	Date

Appendix A5 Annual Arrest/Conviction Attestation

ANNUAL ARREST/CONVICTION ATTESTATION

It is important that the California State Bakersfield Department of Nursing be informed of any civil or military arrests or convictions throughout the duration of your program of study. Infractions do not mandate disciplinary action, but may be necessary to adjust clinical placements, adequately advise students for post-graduation licensure, eligibility for post-graduation certification or post-graduation job placement. This annual arrest/conviction attestation is a reminder that this information must be shared with department administration. It is important that any infractions are reported immediately to the department administration; failure to promptly report new arrests or convictions may result in a forced withdrawal, suspension, and/or dismissal from the program.

Please mark the appropriate box, date, and sign the form and upload to Canvas.

☐ I have not had an arrest or conviction of a misdemeanor or felony within the last year.
☐ I have had an arrest or conviction of a misdemeanor or felony within the last year, and I have notified department administration.

Printed Name: _____

_____ _____
Signature Date

B. **Appendix B Physician's Letter**

The following statement can be printed for use by your physician to document your ability to return to clinical:

Dear Physician:

There are minimum entry level qualifications required for professional nursing practice for students in the nursing program at California State University, Bakersfield.

_____ is a student in the CSUB Undergraduate Nursing program and should provide you with a copy of the Essential Functions for Nursing Practice. Please complete the following:

To the Chair of the Nursing Department:

_____ (student name) has been under my care for a Medical Condition on _____ (date) I have reviewed the Essential Functions for Nursing Practice and certify that:

2. They may return to clinical practice with no restrictions.

a. Yes/No (circle one)

b. Comments:

Physician's Name _____

Physician's Signature _____

Date _____

C. **Appendix C Nursing Lab Safety Agreement**

CSUB Department of Nursing Lab Safety Agreement

1. Food and drink are ***not*** allowed in the laboratory ***at any time***.
2. Children are not allowed in the laboratory.
3. Students must wear their CSUB identification badge, school uniform, or community uniform at all times while in skills laboratory or simulation center. Shoes must cover the entire foot with no skin showing. Long hair must be tied back.
4. Hazardous equipment and/or materials may be present in the laboratory at any time. Do not move or tamper with any equipment or materials without proper authorization (this includes tables and chairs).
5. All walkways (including between tables) must be kept clear of chairs, backpacks and other personal items to maintain a means of egress and eliminate tripping hazards.
6. Know the location of all emergency exits, phone, fire extinguishers, first aid kit and the emergency eye wash/shower.
7. Students are not allowed in the Simulation Center and Skills Laboratory without faculty supervision, unless given express consent by the Skills Lab Coordinator, Nursing Chair, or Simulation center/Skills Lab Director.
8. Immediately report any injury or accident (including blood spills or needle injury) that occurs in the laboratory to faculty or Simulation Center/ Skills Lab Coordinator.
9. Immediately report any broken glass to the faculty Simulation Center/ Skills Lab Coordinator. Broken glass must be disposed of in a separate broken glass receptacle, ***not*** the trash can
10. Students are encouraged to report any special medical conditions to the faculty or Simulation Center/ Skills Lab Coordinator (i.e. latex or peanut allergy, etc.) that may inhibit laboratory activities.
11. Proper handling of laboratory equipment and material is the responsibility of the student. Read all labels and correctly follow procedures. Use safety goggles and gloves when appropriate.
12. Some equipment may pose electrical shock hazards. Do not tamper with, repair, or perform maintenance on any laboratory equipment. Alert the Skills/Sim staff or faculty if equipment is not functioning properly.
13. Students are responsible for the clean-up of their workstations and patient rooms in the Simulation Center.
14. Replace chairs, bedside tables, mannequins, beds and privacy curtains to their proper location.
15. All equipment must be returned to the area designated by the Skills/Sim Laboratory Coordinator at the end of each laboratory session.
16. The Computerized Patient Simulators are to be handled by TRAINED faculty or simulation/skills staff.
17. Trash and used disposable equipment should be placed in the proper containers before you leave. Contaminated equipment should be disposed of following specific policies and instructions.
18. Syringes and needles can only be used in the skills lab/simulation center or lecture room when faculty is available to supervise. Syringes and needles cannot be signed out or taken out of the nursing building by students.
19. Used needles must be disposed in designated red sharp containers and ***not*** the trash can.

20. Simulation Center and Skills Laboratory equipment and supplies are for clinical lab course work only.
21. Wash your hands before leaving the laboratory.
22. Any activity that places any student, faculty, staff, or campus property in danger will not be tolerated. This includes unauthorized removal of equipment, materials, and supplies from laboratories or classrooms.
23. Safety Data Sheets (SDS), for all chemicals used in this lab are available for student reference and are located in the SDS binders located in each lab.
24. In case of emergency, dial 2111 for the CSUB University Police.

Failure to comply with these policies will result in expulsion from the laboratory and the course.

D. **Appendix D Policy for Students Practicing Procedures on Each Other**

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing

Policy for students practicing procedures on each other

In the course of the nursing program, when learning new skills, it is often useful for students to take the role of the patient. This enhances the learning experience in several ways:

1) for the practicing students in that a live "patient gives them a more realistic experience.

2) for the student "patient" since it gives her/him an idea of what the procedure is like from the patient's perspective and should help her/him be a more sensitive care-giver.

In asking the individual student to take on the patient role, the student's right to privacy and right to refuse a given procedure should be protected. Faculty will make every effort to protect student's privacy by making sure other students follow the same guidelines they would use in the hospital to avoid exposure of the patient. In the case of some procedures, such as baths, students will be given the opportunity to bring bathing suits or other appropriate clothing which provides more exposure, but not too much.

If a student chooses not to be a "patient" for a particular skill, such as an injection or bath, the instructor will arrange a simulated experience for that student's practice, unless another student is willing to take his/her turn as patient. Students will demonstrate IV insertion in N2131 skills lab.

Certain procedures may be deemed by the faculty to be unsuitable or potentially dangerous for students to practice on each other. Each faculty team or the total faculty will make this decision when the occasion arises.

Students may not practice any invasive procedure on another student unless there is faculty supervision and it is in the skills laboratory. At no time is an invasive procedure to be performed on any person or client outside of the nursing classes or clinical area unless supervised by a faculty member.

Please sign and return one copy to your clinical faculty.

I have read and understand the above policy.

Name: _____

Signature: _____

Date: _____

E. Appendix E Notification of Violation of Academic Policies in Written Assignments

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Notification of Violation of Academic Policies in Written Assignments

Student Name: _____ Date: _____

Course: _____ Semester/Year:

Minor Violation: The paper you submitted for this course has the following minor problem(s). A copy of your paper will be placed in your student file. If a minor violation occurs in subsequent assignments and/or courses, then you will receive a major violation warning and referred to the Office of Student Rights and Responsibilities (OSRR):

_____ Direct quote without one or two of the following:
_____ author
_____ year
_____ page numbers
_____ quotation marks
_____ Paraphrasing without citation (minor)
_____ Excessive use of reference material and little or no original student writing.

The following action has been taken:

_____ Deducted points for the assignment (see grading rubric or grading criteria)
_____ Assigned a grade of zero for the assignment

Major Violation: The paper you submitted for this course has the following major problem(s). A copy of your paper will be placed in your student file. In addition to this warning, an Academic Integrity Violation Report Form will be completed and forwarded to the OSRR for further action:

_____ Direct quote without three or four of the following:
_____ author
_____ year
_____ page numbers
_____ quotation marks
_____ Use of a paper (or essentially the same paper) you submitted in another course
_____ Use of another student's paper or a purchased paper
_____ Paraphrasing without citation (major)
_____ Previous minor violation documented

The following action has been taken:

_____ Deducted points for the assignment (see grading rubric or grading criteria)
_____ Assigned a grade of zero for the assignment
_____ Assigned a grade of F for the course
_____ Student Violation letter given/Academic Integrity Violation Report Form submitted to OSRR

This warning will be placed in your Department of Nursing student file and will represent notification of your violation of academic integrity policies. Please refer to the University's Academic Integrity Policy found in the current online CSUB Catalog under Section XI Academic Information.

_____ _____ _____ _____
Faculty Signature Date: Student Signature Date

F. **Appendix F Clinical Remediation Form**

California State University Bakersfield
Department of Nursing

Clinical Remediation Form

Date: _____ Course Number/Section: _____

Student Name: _____

Clinical Faculty: _____

Part A: Need for clinical remediation
To be completed with Clinical Warning, which must be attached to this form

Required remediation (check as applicable):

☐ Review didactic information (i.e., reading assignments, videos, etc.)

☐ Skills lab practice

Hours practice required (to be documented by skills lab staff): _____

Skills to be practiced:

_____

_____

_____

Evaluation (check as applicable):

☐ Complete remediation requirements as outlined above

☐ Return demonstration of skill (to be documented by student assistant)

_____
Student Assistant Signature

Part B: Documentation of completion
To be done when student has completed his/her remediation

☐ Clinical remediation plan was satisfactorily completed as outlined above

_____ _____
Date Faculty Signature

Copy to: Student, Student file, Team Leader, Learning Resources Director