Introduction

Purpose of the Student Handbook

The information in this handbook is a supplement to the University's General Catalog and is provided to facilitate students' progress through the Nursing Department. This handbook is available on the Nursing Department web page at http://nursing.csuci.edu. This handbook may be made available in electronic format or printed if desired. Every attempt is made to accurately reflect the policies of the program. Changes in policies will be posted on the Nursing Department web page.

School of Nursing Approval/Accreditation:

The Nursing Department is approved by the California Board of Registered Nursing (BRN). The program is nationally accredited through the Commission on Collegiate Nursing Education (CCNE), the national accreditation agency of the American Association of Colleges of Nursing (AACN).

The accreditation agency is: Commission on Collegiate Nursing Education
655 K Street NW Suite 750
Washington, DC  20001
(202) 887-6791
https://www.aacnnursing.org/ccne-accreditation

The state approving agency is:

Board of Registered Nursing 174 North Market Blvd Suite 150
Sacramento, CA 95834
(916) 322-3350
https://www.rn.ca.gov/
Nursing Departments Offered

The Nursing Department offers the following degree programs;

Baccalaureate of Science in Nursing (BSN)
- Bachelor of Science in Nursing - BSN for the generic student (Track I)
- ADN/RN to BSN (Track II)- BSN for the ADN student or RN nurse
- Licensed Vocational Nurse - LVN 30-unit option

Master of Science in Nursing (MSN)
- Family Nurse Practitioner Emphasis
- Nurse Educator Emphasis

Post Master’s Certificate
- Family Nurse Practitioner
- Nurse Educator

CSU Channel Islands Mission Statement

Placing students at the center of the educational experience, California State University Channel Islands provides undergraduate and graduate education that facilitates learning within and across disciplines through integrative approaches, emphasizes experiential and service learning, and graduates students with multicultural and international perspectives.

Nursing Department Mission, Vision, and Goals

Mission Statement
CI Nursing Department faculty and staff embrace justice, equity, diversity and inclusion in our aim to prepare students for nursing practice; to meet community and workforce needs through teaching professional values and care of diverse individuals and populations including Black, Indigenous, People of Color and those with intersectional differences and identities.¹ This will be accomplished by engaging in respectful and honest dialogue, valuing and respecting each member of our community, and examining ourselves for biases and assumptions to increase our awareness as we build programing and curriculum to educate the next generation of nurses.

Nursing Vision Statement
The Nursing Department aims to be an innovative, magnet center for excellence in higher nursing education through justice, equity, diversity and inclusivity.

Nursing Department Goals

1. To achieve student success.

¹ Differences and intersectional identities include abilities (physical and mental), age, citizenship status, culture, First Nations (federal, state, and tribal recognition), gender identity and expression, nationality, marital status, medical condition, neurological differences, race/ethnicity (color, ancestry, indigeneity), religious/spiritual identity, sexual identity, sexual orientation, veteran or military status, and diverse characteristics that make individuals in our community unique

*Subject to change
2. To provide service and quality care to individuals, families and communities locally nationally & globally.
3. To develop nurses who utilize evidence-based practice to provide quality care to individuals, families, communities, and populations locally, nationally, and globally.
4. To develop competent, professional, compassionate nurses who strive to be life-long learners with a commitment to excellence in nursing practice and who embody CSUCI values and mission pillars.
5. To model civil, collegial, and interprofessional collaboration in the delivery of a curriculum that addresses anti-racism, anti-Black racism, anti-Indigenous racism, anti-homophobia, anti-transphobia, anti-ableist and anti-sanist practices.

**Implicit Bias Statement**

The American Nurses Association (ANA) dictates that nurses are required to “create an ethical environment and culture of civility and kindness, treating colleagues, co-workers, employees, students, and others with dignity and respect” (ANA, 2015). Significant efforts have been placed in the education of nurses to improve equity and quality within academia, address inequities in healthcare, and increase civic engagement and preparedness opportunities. This has led to prioritizing the diversifying of nursing education admission pools and subsequently the workforce at all levels (AACN, 2017; ANA, 2021). These efforts will prove to be futile without awareness and the dismantling of the individual, ideological, and systematic structures that promote racism and inequity in the nursing profession (Iheduru-Anderson, 2020; Burnett et al., 2020).

In addition, AB 1407 states that all approved schools of nursing or approved Nursing Departments must include direct participation in one hour of implicit bias training, as specified, as a requirement for graduation.

Nurses focus a great deal of our education on social determinants of health, and the impact of these social determinants on all people’s health and well-being. We view race as a health disparity. We, as nurses (and humans) have a duty to continue to listen, learn and advocate for Black people, Indigenous people, people of color and all racialized populations.

The staff and faculty within the Nursing Department believe that it is our collective responsibility to reject anti-Blackness rhetoric and all forms of racism in our society, including structural and institutional racism. The Nursing faculty and staff are committed to eradicating racism. A [Black Lives Matter](https://www.blacklivesmatter.com/) statement has been developed to address existing injustices, inequities, and inequalities, and foster diversity and inclusion within our department and curricula.

Our intent is that all classes will include culturally responsive teaching approaches and that all faculty and students embrace cultural humility as part of the professional nursing role. We celebrate the diversity that students bring to each class and view these differences as a resource, strength, and benefit for all students. We aim to present materials and activities that are respectful of diversity including but not limited to: gender, sexual orientation, disability, age, socioeconomic status, ethnicity, race, culture, perspective, and other background characteristics.

Classroom discussions and interactions may not always be easy as we explore these challenging issues; we sometimes will make mistakes in our speaking and our listening; sometimes we will need patience or courage or imagination or any number of qualities in combination to engage our texts, our classmates, and our own ideas and experiences. The expectation in these conversations is that all students will listen and respect others with an openness to different perspectives. In an ideal world,
science would be objective. However, much of science is subjective and historically lacks equitable representation. In this class, we will try to integrate materials from a variety of perspectives, but limits still exist on this diversity. We acknowledge that both implicit and explicit biases exist in all materials due to the lens with which it was produced or developed. Integrating a diverse set of experiences is important to mitigate bias to gain a more comprehensive understanding of nursing science.

Adapted from the AACN, Dr. LaSonya Davis.

**Black Lives Matter Statement**

The CSU Channel Islands (CI) Nursing Department stands in solidarity with Black people and affirms that ALL BLACK LIVES MATTER. The Nursing Department staff and faculty believe that it is our collective responsibility to reject anti-Blackness rhetoric and all forms of racism in our society, including structural and institutional racism. The Nursing faculty and staff are committed to eradicating racism. A BLM taskforce has been formed and is addressing existing injustices, inequities and inequalities, and fostering diversity and inclusion within our department and curricula.

The BLM taskforce is working on the following action items:

1. Reviewing all of our department policies from a BLM and equity lens.
2. Reviewing the curricula and assessment measures to include Black voices and lives.
3. Analyzing our demographic data within the nursing department, across CSUCI and within nursing departments across the nation.
4. Analyzing data within the CSUCI 2020 Climate Survey
5. Identifying ways to gather more student data.
6. Creation of High Impact Learning opportunities for nursing students to address the health disparities and history of racism and equity in health care and the Black community.
7. Invite Black Leaders in Healthcare to share their area of expertise and experiences with the CI community.

One of nursing’s most important roles is advocacy. Nurses focus a great deal of our education on social determinants of health, and the impact of these social determinants on all people’s health and well-being. We, as nurses (and humans) have a duty to continue to listen, learn and advocate for Black people, Indigenous people, people of color and all racialized populations. If we don’t know exactly what actions to take, or what to say, we must listen to those who have stories to share and continue to spread these stories and stand together to advocate for change.

We encourage you to continue to educate yourself by reading the work of Karen Flynn, Darlene Clarke Hine, and Catharine Choy, on the history of racialized women and nurses throughout history (see references below). We also encourage you to continue to listen to your fellow students, friends and family members who have stories and knowledge that can educate us. We invite you to share your stories with us, so that we may continue to be educated.


CSU Channel Islands Nursing Department Civility Statement

Professional nursing organizations such as the Tri-Council for Nursing, which includes the American Association of Colleges of Nursing (AACN), American Nurses Association (ANA), American Organization of Nurse Executives (AONE) and the National League for Nursing (NLN); and the International Council of Nurses (ICN) have developed civility statements for nursing practice including academia. The resolution from the Tri-Council of Nursing (2017) calls on “all nurses to recognize nursing civility and take steps to systematically eliminate all acts of incivility in their professional practice, workplace environments, and in our communities” (https://tricouncilfornursing.org/).

1. The Nursing Department at CSU Channel Islands embraces the idea that all members of our community have a right to expect that the program climate is safe, mutually supportive, academically encouraging, and empathetic towards all its members.
2. Faculty, staff and students take collective responsibility to reject anti-Blackness rhetoric and all forms of racism in our society, including structural and institutional racism against all people of color. To maintain a safe climate, students, faculty and staff agree to abide by the following agreed upon statements:
3. Value and respect each member of the community.
4. Create an environment that supports positive interactions between members of the community.
5. Demonstrate professional and collegial behavior at all times.
6. Accept responsibility for one’s own actions and be accountable to the community.
7. Communicate clearly, both verbally and in writing, with community members by actively listening to others; being open to hearing the viewpoint of others; understanding that tone of voice matters as well as non-verbal forms of communication; and refraining from demeaning, disrespectful, insulting, dismissive or humiliating language or actions.
8. Understanding that conflict though inevitable is resolved by developing a trusting relationship that is fostered by mutual understanding among community members.
9. As a member of the community, be available to support and mentor others with kindness and commit to interpersonal growth that fosters an appreciation for our diversity.
10. Demonstrate a willingness to engage in the program by participation in shared- governance activities.
11. Commit to confronting acts of incivility and discrimination when they are observed in a positive, constructive manner.

*Subject to change
12. Rely on facts not assumptions by avoiding gossip and spreading of untruths that can undermine the credibility of community members.
13. Provide praise in public and share constructive criticism in private.
14. Treat community members equitably and with respect regardless of their title, and place the same expectations for civility on all community members, regardless of rank, position or authority.
15. Celebrate our differences.
16. Address violation of civility or acts of incivility privately and tactfully, using the Civility Statement.

Philosophy of Nursing

The Nursing Department Philosophy is based on the Nursing Metaparadigm.

The Nursing Paradigm is the foundation of a myriad of nursing theories and includes four theoretical concepts: Nurse, Person, Environment, and Health.

PERSON- (also referred to as Client or Human Beings) is the recipient of nursing care and may include individuals, patients, groups, families, and communities.

HEALTH- Health is defined as the degree of wellness or well-being that the client experiences. It may have different meanings for each patient, the clinical setting, and the health care provider.

NURSE- The nurse’s attributes, characteristics, and actions provide care on behalf of or in conjunction with the client. There are numerous definitions of nursing, though nursing scholars may have difficulty agreeing on its exact definition. The ultimate goal of nursing theories is to improve patient care.

ENVIRONMENT- Environment (or situation) is defined as the internal and external surroundings that affect the client. It includes all positive or negative conditions that affect the patient, the physical environment, such as families, friends, and significant others, and the setting for where they go for their healthcare.
Framework

Building on the Nursing Metaparadigm, the Nursing Department Faculty identified four concepts, community; social justice; quality and safety; and professional nursing practice that form the foundation of the Nursing Department framework and are used to guide development of curricular content.

Concept Definitions

**Community**
Community is a group of individuals with intersectional differences and identities who engage in joint action towards a common goal.

Community at CI includes a commitment to civic responsibility and partnerships within and across regional organizations to transform our educational system and reduce social inequities. As a part of the CI Nursing Philosophy, community refers to any scholarship, leadership, activism, and interprofessional collaboration that contributes to the health and wellbeing of society.

**Social Justice**
Within the CI Nursing Department, achieving social justice means that nurses understand the historical causes of health inequities including present day systemic racism and its impact on health. Nurses must acknowledge their own biases and endeavor for the equitable treatment for all. Nurses advocate for the respectful treatment of all individuals and act to reduce barriers to health care. By addressing the antecedents to the social determinants of health, nurses can influence health policy and advocate for all patients with the aim of decreasing inequities in the healthcare system and in society at large.

**Quality and Safety**
Within the CI Nursing Department, we believe that Quality and Safety must exist at all levels of health care delivery. Quality and Safety are enhanced by the strategies that nurses implement to protect patients within all environments of care. This core concept includes clinical judgment, knowledge, and evidence-based practice to deliver person-centered care. Quality and Safety are operationalized in
nursing care through continuous education and quality improvement, and the effective utilization of informatics and technology.

**Professional Nursing Practice**
At the CI Nursing Department, we support the American Nurses’ Association (ANA) definition of Professional Nursing Practice:

“Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, groups, communities, and populations” (ANA, 2021).

As a Program, we strive to prepare nurses with a commitment to civility, compassion, caring and strong ethical values; continuous development of self and others; accountability and responsibility for reflective practice; and demonstrating a spirit of collaboration and flexibility.

**Philosophy of Nursing Education**

The California State University Channel Islands mission is to place students at the center of the educational experience and provide undergraduate and graduate education that facilitates learning within and across disciplines through integrative approaches, emphasizing experiential and service learning and graduating students with multicultural perspectives.

The Nursing Department, as part of the university, resides in a community populated by people from multiple ethnic and cultural backgrounds. A goal of the Nursing Department is to recruit a student population which is representative of the ethnic and cultural diversity in the local community and to prepare its students to serve the nursing needs of this culturally diverse society. Students, endowed with the capacity for self-direction, are ultimately responsible for their own learning and self-development. It is anticipated that students will vary in aptitude, learning style, motivation, cultural orientation and other individual differences. Assessment of these factors provides the faculty member with a basis for the selection of the most appropriate teaching-learning strategies and for referral to the multiple campus resources and services available, should the student have academic or personal issues needing support and/or assistance.

The foundation for understanding the self and others is provided through a balanced program of arts and humanities, social and biological sciences, and professional courses. Critical thinking is developed through application of problem-solving methods in clinical practice, where analysis, including the weighing of alternatives in selecting a course of action, is applied. Essential to the preparation of the professional nurse is the development of communication skills, cultural competency, professional values, ethical principles, and the technical expertise in assessment and clinical intervention. Effective social interaction, therapeutic communication and mastery of the technical skills are among the fundamental aptitudes needed by the professional nurse. An essential component of comprehensive nursing care is a concentration on health promotion and disease prevention.

The role of service learning and service to the community will be emphasized with projects and learning experiences which concentrate on giving back to the community. Service learning is a teaching and learning approach that integrates community service with academic study to enrich learning, teach civic responsibility and strengthen communities while students engage in reflective activities concerning the benefits of the experience. Such service-learning activities will provide the
basis for the nurses’ professional commitment to volunteerism as a graduate.

The role of the faculty member is to serve as an instructor, role model, preceptor, resource person, motivator and facilitator. Faculty members will be expected to combine teaching with other professional activities, such as ongoing clinical practice, scholarly publications and presentations, and research. Establishment of partnerships with local health care agencies promotes the development of faculty practice opportunities, collaborative research projects and joint appointments.

**Program Learning Outcomes**

The MSN program is designed to prepare APRNs to provide primary and acute care services to diverse populations across the healthcare continuum and Nurse Educators to educate students in an academic or nurses in a clinical setting. The curriculum provides students with a strong foundation in quality improvement; safety; and evidence-based practice by focusing on health and the healthcare system using an organizational and systems framework. The MSN program recognizes the role of the master’s prepared nurse in health policy, advocacy, and inter-professional collaboration in the delivery of client-centered, culturally appropriate care with the aim of increasing the health of the population.

1. Working as a member of a collaborative team, organize and deliver nursing care to individuals, families, groups, or populations to promote health and prevent disease using knowledge from the sciences, humanities, and nursing.

2. Defend the use of a specific organizational or systems framework to address the complex economic, policy, environmental, and social forces affecting the healthcare or educational systems.

3. Apply effective communication strategies using written, oral, and electronic methods in a variety of settings with individuals, families, groups, and/or populations.

4. Design a clinical or educational intervention to improve outcomes using a leadership model and considering the tenets of ethical decision-making.

5. Utilize evidence-based practice and quality improvement principles in designing, managing, and evaluating nursing interventions and programs.

6. Operationalize cultural competency and advocacy knowledge, skills and attitudes when working with individuals from diverse backgrounds.
Student Information

General Catalog

Information about admissions requirements, registration, student activities and academic policies is available in the university catalog via the University website at http://www.csuci.edu. The general catalog contains official policies and regulations about admissions, fees, refund policies, student services, policies and procedures for graduation. The requirement for undergraduate programs and descriptions of all university courses with their pre- and co-requisites are included. Familiarity with university rules and regulations published in the catalog is the responsibility of the student. Student should refer to of the catalog located on the www.csuci.edu website under which they were admitted for future reference.

General Admission Information

The University functions on the semester system with two sixteen-week semesters (fall and spring) and one ten-week summer session.

Admissions Policy

The procedures for admission to the university can be found in the general catalog and/or on the university web site. For university admissions see the enrollment services website at http://www.csuci.edu. The student should also access the Nursing Department website at http://nursing.csuci.edu for detailed information concerning admission to the university and various nursing academic programs.

Special Nursing Admissions Information: Admissions as a nursing major is a two-step process:

- Admission to the university
- Admission to the Nursing Department

Admission to the University does not guarantee admission into any of the specific Nursing Departments available at CSU Channel Islands. There are separate supplemental admission processes required to enter each of the Track I Nursing Departments. Students are referred to the Nursing Department website for specific admission information for the Track I, LVN 30-Unit Option, ADN/RN to BSN, and MSN programs.

MSN Program Course Progression

1. The MSN program consists of core MSN courses and FNP or NE specialty courses. The Board of Registered Nursing requires the FNP specialty theory and practicum courses be taken concurrently. When students register for a specialty theory course, the student must also register for the associated theory course. There is no concurrency requirement for the NE courses.
2. FNP students must complete 540 practicum hours. Each practicum course is 4 units, which equates to completing 180 hours of clinical work over the 15-week semester. Students should plan on completing an average of 12 hours of clinical work per week over the course of the semester. If the 180 hours is not completed in the regular semester, the student will be given an incomplete. Students have one full

*Subject to change
year to make an incomplete. If a student receives an incomplete grade, the student does not have to
register and pay of the units a second time.
3. FNP students must successfully pass the APEA 3Ps exam prior to enrolling and taking the FNP
specialty courses. Students are required to test above the national benchmark on the APEA 3Ps exam
to be considered passing. The APEA 3Ps exam is given upon completion of NRS 500 Advanced Health
Assessment, NRS 502 Advanced Pathophysiology, and NRS 504 Advanced Pharmacology.
4. Upon completion of the MSN program, students will take the APEA Cumulative Exam. The APEA
Cumulative Exam is given so that students can assess their readiness to take the national FNP
certifying exam.
5. All MSN will take NRS 540 Culminating Experience in their final semester of the program. FNP students
cannot take the culminating experience course until at least 90% of their practicum hours are complete.
NE students will take the culminating experience course after their final practicum course is complete. It
is recommended that all MSN students review the Culminating Experience Handbook at the start of the
program so that as they progress through the program, they can develop portions of the paper as part
of the MSN core coursework assignments. This will make writing the final paper easier and quicker.

Additional Requirements for all Nursing
Departments

1. Students in the Nursing Department must pass a physical health examination and demonstrate
a sufficient immunization record consistent with that required of clinical placement agencies
utilized by CSU Channel Islands.
2. Students will be required to verify a negative background check including statewide, county
and federal screening before placement in a healthcare agency for clinical assignments. A
positive background check, which includes outstanding warrants or unresolved criminal
activity, will result in admission to the Nursing Department being rescinded. Background
checks are also required for persons seeking a nursing license in the State of California.
Students who have reason to believe that a background check would reveal a prior
misdemeanor or felony conviction should seek to have these matters expunged from their
record if possible and/or seek another career path. In addition, students upon applying to the
BRN for licensure will be required to declare any criminal activity which may affect their ability
to be licensed. See the California BRN website for specifics on licensing information
http://www.rn.ca.gov/.
3. To be admitted to the nursing major, students will be expected to perform or within reasonable
accommodations, demonstrate proficiency in specific core performance standards in the
following five categories:
5. Interpersonal abilities sufficient to interact with individuals, families and groups.
6. Communication abilities sufficient for verbal and written interaction.
7. Physical ability to move from place to place and demonstrate manual dexterity and eye-hand
coordination.
8. Demonstrate auditory, visual, tactile and olfactory ability sufficient to assess and monitor
patients safely.*

* See a more detailed explanation starting on pg. 23.

The academic advisor for the Nursing Department working with the Office of Disability Resource Program in the Educational Access Center will assist students in determining what accommodations will be needed to enable students to meet these standards.

Criteria for Program Continuance Promotion and Re-entry
(See Policy SA0052016 in appendix on Student Promotion, Continuance in Program, and Repeating a Class)

Policy on academic leave
Students who take a two semester leave of absence from CSUCI are considered continuing students on informal leave and do not need to submit Request for Academic Leave form. https://nursing.csuci.edu/documents/request-for-academic-leave-form.pdf

Any student may apply for a formal leave of absence from the university for up to four consecutive semesters (excluding summer and winter). While a student may apply for multiple leaves, no student will be permitted more than six total semesters of leave from CSUCI. (SP18-04).

The Nursing Department is run in a cohort model and admission is once a year. Students requesting a leave of absence, must be in good academic standing, and will be required to wait until the required course is offered to be considered for readmission. Readmission after a leave of absence will be on a space available basis. All students requesting a leave of absence must request such in writing using the Nursing Department LOA form and schedule an exit interview with the Chair of the Nursing Department

Exiting the Program
Students who exit the program, for any reason, must schedule an exit interview with the Nursing Department Chair. Readmission, if applicable, is on a space available basis.

Nursing Department Curriculum

*Subject to change
Advisement for Nursing Majors

All newly admitted students are required to complete the Extended University Orientation Canvas course.

Once admitted into the MSN FNP or Post-Master’s FNP Certificate program, students are required to meet with FNP Program Coordinator. In collaboration, with the FNP Program Coordinator an academic plan will be developed. The plan should be reviewed and revised as necessary to assure completion of the program in a timely manner.

All MSN NE and Post-Master’s NE students are required to meet with the Department Chair at the beginning of their program to develop their academic plan. The plan should be reviewed and revised as necessary to assure completion of the program in a timely manner.

*Subject to change
Course Registration

Registration takes place on the web at myci.csuci.edu. Access to the system is secured by a unique user ID and password.

A How to Register for Classes guide is available online at: https://www.csuci.edu/registrar/registering-for-classes/registration-information.htm
The Schedule of Classes is published online prior to the start of each registration period.

The myci.csuci.edu system also allows you to maintain your address and phone number, view your grade at the end of the term and review the transcript of classes taken at CSU Channel Islands.

Adding/Dropping Courses

Prior to the start of classes and through the end of the third week of the semester, students may drop classes on the web at mycsuci.edu without any authorization of the instructor. Beginning with the fourth week of instruction and prior to the tenth week of instruction, withdrawal is permissible only for serious and compelling reasons. Documentation of this serious and compelling reason must be presented to the Program Chair. If dropping a class the approval signatures of the instructor and the Program Chair are required to withdraw from a class during this period. Dropping a course in the Nursing Department in which the grade is less than a C is considered a fail for readmission purposes; the record will be recorded as a W (Withdrawal) and the program considers it a W failing as opposed to a W passing.

Withdrawal during the final six weeks of instruction is not permitted except in cases where the circumstances causing the withdrawal are beyond the student’s control, and the assignment of an “I” (Incomplete grade) is not practical. Ordinarily, withdrawal in this category will involve complete withdrawal from the University. The approval signatures of the instructor and program Chair are required to withdraw from classes during this period. Documentation of the circumstances causing the student to request withdrawal will be required.

Failure to properly withdraw classes may result in receiving a failing grade (Withdrawal Unauthorized grade). Be aware that summer sessions have different add/drop periods and students must check dates posted on the university website prior to the start of the summer term.

For a student who fails a nursing course with a co-requisite course an administrative withdrawal will be completed for the corresponding course. Refer to the “Criteria for Program Continuance” policy.

Grading Practices
(See Policy CC0042017 in appendix on Grading and Point Distribution)

Student Promotion Policy
(See Policy SA0052016 in appendix on Student Promotion, Continuance in Program, and Repeating a
Policies and Procedures for Student Complaints/Grievances
(See policy in Appendix)

Probation and Readmission

If the student's academic performance results in an overall GPA of below 2.0, the student is placed on academic probation. University policy governing probation disqualification and readmission can be found in the California State University Channel Islands, General Catalog. The student who is on academic probation may not proceed in required nursing courses until the GPA deficiency is removed. The student is referred to the academic advisor who will provide the student information related to the Nursing Department policy and assist the student through the process for reinstatement. The policy requires that the student submit a petition that explains the relevant surrounding circumstances leading to disqualification. An explanation and academic plan to alleviate or mitigate the factors related to disqualification and a plan to improve academic performance should be included in the petition. The academic advisor offers assistance in the development of the petition and the plan and refers the student to relevant university resources. The petition is then submitted to a college level reinstatement committee who acts on the merit of the petition.

Academic Honesty

Each student shall maintain academic honesty in the conduct of his or her studies and other learning activities at CSU Channel Islands. The integrity of this academic institution, and the quality of the education provided in its degree programs, are based on the principle of academic honesty. Academic dishonesty is an especially serious offense. It diminishes the quality of scholarship and erodes those who depend upon the integrity of the campus program. Such dishonesty includes:

- Cheating – using attempts to use unauthorized materials, information, or study aids in any academic exercise.
- Fabrication – falsifying or invention of any information or citation in an academic exercise.
- Facilitating academic dishonesty – intentionally or knowingly helping or attempting to help another to commit an act of academic dishonesty.
- Plagiarism – intentionally or knowingly representing the words, ideas, or work of another as one's own in any academic exercise.

Turnitin/Safe Assign

To ensure the integrity of the academic process, CSU Channel Islands’ University Nursing Department endorses the importance of academic honesty as defined by the University Catalog and Nursing Student Handbook: http://catalog.csuci.edu/ and http://nursing.csuci.edu/currentstudents/index.htm. Therefore, in an effort to detect and prevent plagiarism, faculty members at CSU Channel Islands may use tools called Safe Assign or Turnitin to compare a student’s work with multiple sources. The tool itself does not determine whether a paper

*Subject to change
has been plagiarized. Instead, that judgment is determined by the individual faculty member. Of note, SafeAssign/Turnitin are based on a unique text matching algorithm that can detect matching between a paper and source material, even if it is not an exact match. Student submissions are compared against several databases. A matching percentage of below 15% would probably indicate no originality concern. However, if the 15% of matching text is one continuous block, this may indicate plagiarism. A high percentage matching is above 25%, warning that probable plagiarism has occurred. The goal for all written assignments in this course is to maintain the SafeAssign Originality Report at 20% matching or less.

Adopted from Turnitin syllabus statement from Texas Women’s University (2014)

Use of Artificial Intelligence

In theory/didactic courses:

Use of AI-based writing tools may be used with instructor permission for the following:
- Brainstorming and initial development of content
- Checking grammar and spelling
- Organizing ideas and outlines
- Obtaining appropriate citations

Use of AI-based writing tools is not permitted for the following:
- Composition of work presented as your own including any research projects, discussion topics and short answer responses,
- Completion of group work that has been assigned to you,
- Writing of complete sentences, paragraphs, or papers that will be attributed to you.

You are responsible to checking the validity of any information provided by AI such as citations, unethical content and intellectual property laws. Use of AI-based writing tools must be appropriately documented and cited to stay within the bounds of academic honesty/plagiarism.

In clinical/lab courses:

Use of AI-based writing tools, such as ChatGPT, is prohibited in this course. All work submitted must be your own and completed in accordance with CSUCI’s academic dishonesty policies. If you choose to engage use of AI-based writing tools ramifications may include being reported for academic dishonesty or further disciplinary actions.

Access to the writing center and assistance to students is encouraged.

CI Writing Guide Web Link: https://www.csuci.edu/writing-ci/guide/

Use of APA Guidelines

Formal papers in nursing classes should be written, unless otherwise instructed, following the guidelines in the most current edition of the Publication Manual of the American Psychological Association. The book should be purchased and kept for reference. Guidelines are also available at the website: https://owl.purdue.edu/index.html. Another recommended template for APA style papers is available through Reference Point Software at http://referencepointsoftware.com/

*Subject to change
University Writing & Multiliteracy Center

At the Math tutoring lab and the University Writing & Multiliteracy Center, the process is collaborative. Tutors work with students to encourage effective, independent learning and to further knowledge and understanding during their education at CSU Channel Islands. The location is in second floor, Broome Library. The student writing guide with discipline specific guidelines is located on the Library’s website home page.

http://www.csuci.edu/wmc/

HIPAA Privacy Rule Training for Students
(See Policy SA0022016 in appendix on Policy on HIPAA Privacy Rule Training for Students)

Social Media Policy
(See Policy SA0082016 on Social Media in appendix)

Physical Requirements for the Clinical Experience

The following list of physical requirements is to assist the health care provider in evaluating your ability to meet the physical requirements of CSU Channel Islands Nursing Department. If at any time throughout the Nursing Department you are unable to meet any of these requirements it is the student’s responsibility to be seen by their Healthcare Provider for re-evaluation. All changes in health status and ability to continue to meet the physical requirements program must be documented by the provider and submitted to the Nursing Department Director.

1. Standing/Walking – The student must be able to stand and walk on carpet, tile, linoleum, asphalt and cement while providing and managing client care, gathering client supplies and medications, obtaining and returning equipment. Approximate distance = 3-5 miles.
2. Sitting – The student must be able to sit while communicating with or teaching clients.
3. Lifting – The student must be able to lift floor to knee, knee to waist, and waist to shoulder level while handling supplies using trays (5-10 pounds) and assisting with positioning patients in bed/moving patients on and off gurneys and exam tables (average weight 200 lbs) and ability to transfer patients with a maximum of 80-100 pounds by self.
4. Carrying – The student must demonstrate the ability to carry items at waist level.
5. Pushing/Pulling – The student must be able to push/pull, using carts, utilizing crash carts, opening and closing doors, pushing/pulling beds, gurneys and wheelchairs and moving equipment and furniture.
6. Climbing/Balancing – The student must demonstrate the ability to climb stairs going to and from other departments, offices and homes.
7. Stooping/Kneeling – The student must demonstrate the ability to stoop and kneel while retrieving supplies from medication carts, bedside stands, bathrooms, storerooms etc.
8. Bending - the student must demonstrate the ability to bend at the waist while performing patient assessments and treatments, gathering supplies, assisting patients with positioning, adjusting patient beds and exam tables, bathing patients and emptying drainage apparatus.
9. Crouching/Crawling – The student must demonstrate the ability to crouch and crawl under

*Subject to change
beds, behind beds and bedside to retrieve dropped items.

10. Reaching/Stretching – The student must demonstrate the ability to reach/stretch administering and monitoring IV therapy, gathering supplies, operating computers, disposing of equipment and linens, assisting with patient positioning, connecting equipment and linens, connecting equipment, cleaning equipment.

11. Manipulating – The student must demonstrate the ability to have hand-wrist movement, hand-eye coordination, simple firm grasping, and fine and gross motor dexterity required to calibrate and use equipment and perform CPR.

12. Feeling – The student must demonstrate tactile feeling required to complete physical assessment including palpating and notation of skin temperature.

13. Twisting – The student must demonstrate the ability to twist at the waist while gathering supplies and equipment, administering care and operating equipment.

14. Communicating in verbal and written form – The student must have 95% ability to communicate nursing actions, interpret patient responses, initiate health teaching, document and understand health care activities, and interact with patients, staff, faculty and peers.

15. Hearing – The student must have the ability to hear and interpret many people and correctly interpret what is heard, auscultation, physician orders – whether verbal or by phone, patient reports and cries for help, fire and equipment alarms etc. Seeing – The student must have acute visual skills necessary to detect signs and symptoms, coloring and body language of patients, color of wounds and drainage, and possible infections anywhere. Interpret written words accurately, read characters and identify colors in the patient's records and on the computer screen.

16. Ability to drive self to/from clinical sites.

Other Clinical Course Requirements

Handheld Mobile Device/Software Requirements:

A handheld mobile device is required so that you have a reference source for medication administration, interpretation of diagnostic tests, a medical dictionary, and rationale for signs and symptoms. In addition to the handheld device you will be required to purchase/download software as recommended. The mobile software is intended for use on a handheld device, e.g., cell phone, tablet. Instructions for the Lippincott specific download may be found in the Appendix of this Handbook.

Name Pins

Official name pins are to be obtained from a pre-determined company (please contact the Nursing Department for details). In addition, the student needs an official CSU Channel Islands Picture ID attached to your nametag. Selected hospital name badges will be distributed prior to each clinical rotation per protocol of the individual hospital. It is recommended that the student obtain two name pins in case one is lost or damaged.

Nursing Simulation Laboratory

The Camarillo campus nursing simulation laboratory is located in Manzanita Hall 1230 and contains a 6 bed open lab with a 1 bed ICU/testing station. The sim lab has open hours each semester for

*Subject to change
students to practice and hone their skills. Students must wear uniform tops or a lab coat over their street clothes while practicing in the simulation lab. Hair must be off collar and dress-code adhered to. No flip-flops or shorts will be allowed in the lab open hours.

Guidelines for Professional Image

Student Dress Code

All MSN and Post-Master’s students must wear a white lab coat over business casual professional attire while doing their practicum lab or when attending on campus intensive courses. Sports and play clothes are not acceptable this includes jeans, visible midriffs, Bermuda shorts, short-shorts, sleeveless dresses or tops, sweat shirts, leg warmers and T-shirts. No low necklines or cleavage. No sagging pants will be permitted.

Identification: A student name tag, purchased from On Duty Uniforms (4572 Telephone Rd. #920 Ventura, CA 93003) with a CSU Channel Islands Picture ID or Facility ID attached should be worn at all times with lab coat.

SAMPLE:

<table>
<thead>
<tr>
<th>Jane Doe</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN Student</td>
</tr>
</tbody>
</table>

Hair: Hair must be clean and neatly combed. Any extreme look or color is not permitted. Hair at shoulder length or below should be combed away from the face so that it will not fall forward over the face while performing normal nursing duties. Long hair must be tied back. Plain barrettes, headbands, or combs are allowed. Males are permitted to have facial hair that is clean and groomed.

Make-up: Make-up should appear fresh and natural. Excessive make-up is not acceptable.

Nails: Nails should be kept clean and smooth. If polish is used, it should be colorless natural finish. Nail polish should be un-chipped and without adornment. Fingernail length should not exceed beyond the tip of the finger. Acrylic or other types of artificial nails or gel manicures are not permitted.

Perfume: Because of the close contact with staff, patients, and visitors, the use of perfume, scented lotion or spray, and after-shave lotion is not appropriate.

Sunglasses: Sunglasses are a block to interpersonal communication and should not be worn. Transition lenses or those with a transparent tint are acceptable.

Jewelry: Only one small ring, class ring, or wedding band/set is acceptable. A small ring is defined as the same size or smaller than a class ring. Necklaces and neck chains may be worn inside uniforms. Very large or long dangling earrings are not appropriate. One stud per ear is acceptable. Watches and nursing school identification pins may be worn.

Hygiene: Personal hygiene plays a major role in professional appearance. All students should pay particular attention to bathing regularly, ensuring absence of body and mouth odor and a neat and clean appearance. Gum chewing is not allowed.

*Subject to change
Body Piercing/Body Art: Students may have no more than one visible piercing in each ear and only one stud per ear which must conform to the clinical agency’s dress code. No jewelry/hardware may be evident other than one small, stud per ear. Body art and tattoos must be covered at all times.

Footwear: Shoes should be white, clean, closed toe, with non-skid soles of non-porous material. Shoelaces must be white. Clogs are not acceptable. Heels are to be no greater than 1 inch in height.

Medical Exception: Any request for exception(s) to the appearance code for medical reasons must be signed by your personal physician or appropriate specialist. It is then given to the Chair of the Nursing Department and must be updated annually.

Equipment: The following equipment is necessary for a clinical rotation: Watch with a second hand, writing pen, stethoscope, bandage scissors, pen light. Highly recommended is a clipboard and hemostat.

Other Policies

Electronics: Cell phones may be used with applications for investigating diseases, disorders, medications, procedures and lab tests. They may not be used for phone calls or texting during clinical hours except to contact clinical faculty while in the facility. No phone calls while in the patient rooms.

Emergency Contact on Electronic Devices: All students are required to have their emergency contact available on their cell phone’s emergency call screen in case of an emergency.

Use of Listening or Recording Devices: State Law in California prohibits the use by anyone in a classroom of any electronic listening or recording device without prior consent of the teacher and school administrator. Any student who has need to use electronic aids must secure the consent of the instructor.

Classroom, Lab & Clinical Visitors: Children and other uninvited guests are not permitted in the classrooms, laboratory, or clinical setting at any time.

Email Addresses: Students must use their university email for all email university communications. It is your responsibility to check regularly for email messages from the Nursing Department.

Policy for Substance Abuse: CSU Channel Islands is a drug-free and alcohol free campus (see CSUCI Catalog for University Policy). This extends to the clinical facilities used for clinical placements. Faculty may remove from the clinical area any student who appears to be functioning inappropriately because of suspected substance abuse. Dependent upon the degree and type of behavior, the faculty may refer the student to the University Student Health Center or the emergency department at the clinical setting. The faculty member may then notify the Dean of Student Life.

Impaired Nursing Student Policy
(See Policy SA0032016 in appendix for Policy on Impaired Student)

Attendance/Patient Abandonment

*Subject to change
Students are expected to attend ALL classes and clinicals on time as scheduled. The student will:

- Obtain faculty permission prior to leaving the clinical lab or classroom
- Attend clinical only as scheduled unless faculty approves in writing
- Students are not to go off clinical site while attending clinical coursework

Patient Abandonment – When the student accepts a patient assignment and establishes the “nurse”/student nurse patient relationship, leaving that assignment, without permission and no arrangement for the continuation of nursing care is considered “patient abandonment”. Patient abandonment jeopardizes the patient’s safety and is grounds for dismissal from the program. See BRN policy on Abandonment on the BRN website http://www.rn.ca.gov/

**Transportation:**
Students are responsible for their own transportation to and from classes and clinical sites. During the Community and Home Health clinical experiences students are responsible for their own transportation to the agency sites that are made throughout the clinical day. Clinical sites may be up to 80 miles from the campus so reliable transportation is mandatory.

**Policy on Clinical Lab Assignments**
(See Policy CC0082017 in appendix on Policy on Clinical Lab Assignments)

*Please Note: clinical placement, time, & location are subject to change.*

**University Services**

The University provides a wide array of services and activities for faculty and students to increase involvement in campus life. The Division of Student Affairs supports and enhances learning and the University community through quality activities, facilities, programs and services. They include: Educational Opportunity Program (EOP); Student Health Center, Student Health Insurance, Financial Aid and Scholarship and University Math and Writing Center.

**Educational Opportunity Program (EOP)**

Educational Opportunity Program (EOP) is designed to improve access and retention of low income and educationally disadvantaged students by providing active and targeted support aimed at increasing academic accomplishment and individual empowerment. The ultimate goal is to provide incoming students from disadvantaged backgrounds with the tools that will help them succeed in college and ultimately graduate from California State University Channel Islands. EOP provides educational access and academic, personal, social and economic support services for students whose educational and economic circumstances have been limited.

**Student Health Services**

CSU Channel Islands Student Health Services (SHS) is an outpatient medical clinic whose staff is dedicated to providing compassionate, accessible and professional health care to CI's diverse student population. Services are funded by student health fees paid each term by stateside students as part
of regular tuition, and include open access to Counseling & Psychological Services (CAPS). Additional fees may be implemented for medical services outside of the standard scope of care. Services offered are much like those of a family practitioner/general physician. General services include but are not limited to:

- CI affiliated Physical Exams
- Dermatology
- Gastrointestinal
- Ear/Nose/Throat
- Reproductive Health; STI Screening, Pregnancy Testing, Birth Control Management

SHS is affiliated with the Ventura County Health Care Agency (VCHCA), which gives students the same basic care/access to their facilities throughout Ventura County. The following facilities are most familiar with CI students (must present CI ID card at time of service), but for a complete list visit the SHS website at https://www.csuci.edu/studenthealth/.

When the Counseling and Student Health Center is closed or a student is unable to get to campus, basic health care services are available at no cost at any of the following seven Ventura County Medical Clinics listed below. Students must present their student identification card to the seen. (Preferred sites are noted with an *).

**Magnolia Family Medical Center** *
2240 E. Gonzales Road, Oxnard, CA 93036 Phone: (805)981-5151
Urgent Care (805)981-5181

**Las Islas Family Medical Group** *
2400 S. C Street, Oxnard, CA 93033 Phone: (805)240-7000
Urgent Care: (805) 483-0198

**West Ventura Medical Clinic** *
133 West Santa Clara Street, Ventura, CA 93001 Phone: (805) 641-5600
Urgent Care: (805) 641-5620

**Moorpark Family Care Center** *
35 West Los Angeles Ave., Moorpark, CA 93021 Phone: (805)529-4624

**Conejo Valley Family Care Center**
223 E. Thousand Oaks Blvd. #102, Thousand Oaks, CA 91360 Phone: (805)370-0600

**Santa Paula Medical Clinic**
1334 East Main Street, Santa Paula, Ca 93060 Phone: (805)933-1122

**Sierra Vista Family Care Center**
1227 E. Los Angeles Ave., Simi Valley, CA 93065 Phone: (805) 582-4000

**Fillmore Medical Clinic**
828 Ventura St., Fillmore, CA 93015
Phone: (805) 524-2000
Urgent Care (805) 524-8604

*Subject to change
Student Health Insurance
Nursing students must have health insurance that covers services beyond the scope of Student Health Services. Information regarding supplemental student health insurance may be obtained from the Counseling and Student Health Center, the office of Student Life, or the website https://www.calstate.edu/attend/student-services/Pages/student-health-services.aspx. Proof of insurance is required before placement at the clinical agency is allowed. (See form in Appendix)

Financial Aid and Scholarships Office
The Financial Aid office assists student in obtaining financial aid resources to meet their educational costs. Students interested in financial aid must complete a Free Application for Federal Student Aid (FAFSA), which can be obtained in the Enrollment Center, although the recommended method of application is through the online application at https://studentaid.gov/h/apply-for-aid/fafsa. A variety of financial aid resources are available to students including grants, loans, federal work study and scholarships. After students have completed and submitted the FAFSA they may be considered for the following:

Scholarships
The University in participation with the community has an endowment that provides scholarships, which are based on academic excellence, financial need and community service. This annual scholarship opportunity takes place each spring and applications are open to both new and continuing students. Students may complete a scholarship application, which is found on the Financial Aid website. Endowed Scholarships can be found in the CSU Channel Islands Catalog, some of the scholarships are particularly suited for nursing students.
http://www.csuci.edu/financialaid/scholarships.htm
CastleBranch

CastleBranch is one of the largest background screening and compliance management companies in the nation and works with more than 25,000 organizations and nearly two thirds of colleges and universities.

For nearly two decades, the company has exceeded industry growth rates and continues to provide new products and services that make a difference in people’s lives.

CastleBranch is accredited through the National Association of Professional Background Screeners (NAPBS) - a highly coveted distinction held by less than five percent of all background screening companies.

CastleBranch creates affordable and customizable solutions that serve all segments of the workforce including employees, extended workforce, volunteers, students, healthcare and tenants.

Our solutions are customizable for the workplace as well as the academic, healthcare and legal industries.

CastleBranch is located in Wilmington, North Carolina and has the regional brands of CourtSearch and CourtMail to assist members of the legal community and 123nc for North Carolina consumers who need instant online criminal record searches.

Our highly trained customer experience specialists are always available to help. They have more than one million conversations with clients and students annually.

CastleBranch Corporation conducts more than 1.5 million criminal record searches each year.
Here’s how:

1: Go to your portal URL and click:

https://portal.castlebranch.com/LN20/package-selection

2: Select the appropriate account or program needed. Then select the desired package.

3: This will bring you to our Acknowledgment Page which provides information about your selected package. Users will confirm that they have viewed the information given and then be forwarded to their Order Review Page.

...Done! It’s that easy.

Administrators follow the same steps in order to print the Instruction Form within your portal; simply access the portal, select the needed program and package, and then click the print icon located in the top right corner of the page.
California State University - Channel Islands - Nursing Portal

This user-friendly portal guides you through program and package selection to quickly place your order and create your secure account.

After you complete your order and create your account, you can log in to your account to monitor your order status, view your results, respond to alerts, and complete your requirements. You will return to your account by logging into castlebranch.com and entering your username (email used during order placement) and your secure password.

FAQ
How do I place my order?
Once you click Place Order from the home page or go to the Package Selection page, you will be prompted to enter your personal identifying information. Once you have entered all required information, you will then go through an intuitive step-by-step process to complete your background check. If you have any questions along the way, please contact us at 888-723-4263 or email servicedesk.cu@castlebranch.com.

Where can I view my Order Confirmation?
A copy of your Order Confirmation was sent to the email address you provided when you placed your order. You can also retrieve a copy of your Order Confirmation by logging into your account and clicking on the Document Center tab located at the top of the screen. Once in the Document Center, click on the Background Check folder located on the left side panel; then click on the document titled "Confirmation."

When should I expect my Background Check results to be complete?
Results are normally returned within 3-5 business days. Please note that turnaround time will vary based on the specific items in your order. If it has been more than 5 business days and you are approaching your school deadline, please email us at servicedesk.cu@castlebranch.com.
What does "In Process" status mean on my results summary page? "In Process" means that the item is not completed and is still being researched.

How do I dispute additional charges or criminal records? Once your results are returned, you will receive a message in your account inbox titled "Completed Order Results." In this message, links are provided to dispute additional charges or criminal records.

If I have further questions or need additional help, who do I contact? Please call Service Desk at 888-723-4263 or email servicedesk.cu@castlebranch.com.

Hours of Operation:
Monday-Thursday 8 a.m. - 8 p.m. Eastern Time
Friday 10:00 a.m. – 6:30 p.m. Eastern Time
Sunday 10:00 a.m. - 6:30 p.m. Eastern Time
Typhon

Students need to view a mandatory typhon orientation video. Prior to placement, students must email the clinical placement coordinator with the preceptor email to add them to the typhon logging system. [https://www3.typhongroup.net/np/videos/npst-datatutorial.asp](https://www3.typhongroup.net/np/videos/npst-datatutorial.asp).

APEA

You will be sent an email from APEA prior to starting the course or within the first week of class. Please do not purchase APEA separately on your own. Wait for the email from APEA. Once you have received the email, all students should review the Student APEA Instructions attached. Also, here are some frequently asked questions about how to navigate APEA:

**How to best use APEA**

- **Always use a fully updated Google Chrome browser** for all APEA websites when working on a computer. Using other browsers can cause various complications.
- **On mobile devices, only use the official APEA app** for practice questions, course video and audio, and CareOnPoint access. Mobile browsers are not recommended. Always take your exams on a computer.
- **Purchase exactly as listed in the purchasing instructions.** Bundle purchases cannot be split, and purchases with promo codes used for anything else than the resources listed in the instructions will be voided.
- **Purchases made incorrectly** or without the use of the promo code will be refunded and will need to be purchased again before access to the resources is set up.
- **Purchases made for your university course are always set up under the email address your university listed for you,** regardless of what email address you use to make your purchase. You don’t need to transfer a university purchase if you made it with a personal email address; we will make sure it’s activated correctly.
- **Once your APEA account and resources for university use are set up, you will receive a welcome email from APEA** at the email address your university provided for you. Make sure to set up your personal password before your first use of APEA resources with the instructions provided in the welcome email.
- **Purchases made for your university resources are verified before activation.** We set them up during business hours Mon – Fri 8 AM – 3:30 PM CT. Purchases made outside of business hours or on the weekends will not show up in your account until the next business day at the earliest and can take several days depending on when your university has set the resource(s) to activate.
How to get support fast

Always email support@apea.com for any questions or help with your university resources from the email address used for your APEA access. This will make for the fastest and easiest way to get support.

- If you can’t get into your account at the time of testing, call us at 800.899.4502 on Mon-Fri between 8 AM – 3:30 PM CT. Outside of business hours, send an email to support@apea.com.
- Exam passwords are always given to you by your university, faculty, or your proctor. We can’t give these directly to students.
- If you need resource access or activation times changed, email your faculty, and have them reach out to us for changes. Your university sets resource and exam date; these can only be adjusted with written approval from faculty.
- If your exam freezes while taking it, log out and log back in immediately to continue. If this doesn’t work, reach out to your faculty, and have them contact us to find a solution for you.
- We need written faculty approval to set up exam resets/retakes or course extensions. Please have them contact us to set this up for you.

Taking proctored exams

- If your exam is proctored through APEA via our built-in Proctorio service, log into your account via www.apea.com/login and select Online Testing Center – Click Here to Access. Only use a computer with an updated Google Chrome browser for this. Click on the exam you’re supposed to take and follow the instructions provided by Proctorio to install the browser extension and set up proctoring. If you run into any issues, Proctorio live chat will help you resolve it.
- Contact Proctorio directly to resolve technical issues. If the chat bubble isn’t available on your screen, open a separate tab and go to https://chat.proctorio.com/.
- If your exam is proctored by your university or an outside proctoring source, we can’t solve any proctoring issues that occur as we aren’t involved in that process. Please contact your faculty or proctor for support. This also applies if you don’t know or can’t find the exam password.
- Exam passwords are always given to you by your university, faculty, or your proctor. We can’t give these directly to students.
- Make sure to set your account password BEFORE logging into a proctored environment. Most proctoring environments won’t allow you to change an account password or ask for password reset emails once logged in. Use a regular Google Chrome browser session to (re)set your account password before attempting to take your exam.
Organization of the Nursing Department

The organizational structure of the Nursing Department is discussed below and is subject to approval of faculty. The Nursing Department’s standing committees meet once per month during the academic year and include Faculty/Fiscal Affairs, Curriculum & Instruction, and Student & External Affairs Committee and Faculty. Nursing Department committees function as fact-finding, advisory, and coordinating bodies consistent with university policies. The Chair appoints faculty members to the Committees.

Committees

Faculty Committee provides the structure for the governance of the Nursing Department. The faculty members review and revise school academic policies, develop and revise curriculum develop and approve policies relative to grading, reviews petition for readmission into the department and evaluation of student performance, and new faculty orientation. Students who attend these committee meetings are not voting members, but are valued for the ability to articulate the views of the student body and to enhance two-way communication between the faculty and students. One student representative from each class is invited to participate at the beginning of the meeting to provide feedback.

BSN Committee is responsible for curriculum/program review and the approval body for curricular and instructional functions for the BSN program, and fostering coordination of BSN student group functions and activities, coordination of volunteer activities, coordination of scholarships and awards. The committee serves as the clinical agency site review authority and evaluation body. The committee also serves as the mechanism for implementing the program evaluation and new program development. One student representative from the student body is invited to be a member of the committee.

MSN Committee is responsible for curriculum/program review and the approval body for curricular and instructional functions for the MSN program, and fostering coordination of BSN student group functions and activities, coordination of volunteer activities, coordination of scholarships and awards. The committee serves as the clinical agency site review authority and evaluation body. The committee also serves as the mechanism for implementing the program evaluation and new program development. One student representative from the student body is invited to be a member of the committee.

Recruitment and Retention Committee is responsible for policy development, advisement, maintaining channels of communication between faculty and students, coordination of student recruitment activities. One student representatives from the student body are invited to be members of the committee.

Advisory Committee

The Nursing Department Advisory Committee functions to advise the nursing faculty of changes.
nursing practice in the surrounding healthcare community and to provide assistance with strategic planning and directions for the program. The committee also assists with financial support to increase the visibility and knowledge of the activities of the nursing department and assists in communication of the Nursing Department projects and new programs to the surrounding community including friends, alumni and others interested in nursing in Ventura County. The committee provides opportunities for employment for CSU Channel Islands in the surrounding community. The committee collaborates to offer preceptor and work study experiences for CSU Channel Islands Nursing Students. The Nursing Advisory Committee meets bi-annually in the Spring and Fall.

**Sigma Theta Tau International, Gamma Tau At-Large Chapter**

The CSU Channel Islands Nursing Department is a member of Sigma Theta Tau International, Gamma Tau At-Large Chapter.

Students in each of the classes (Generic, Cottage, ADN/RN-BSN, MSN) are eligible to become member of Sigma Theta Tau International Honor Society of Nursing. The society awards membership based on academic standing and leadership ability. The top academic achieving thirty-five percent (35%) of each class (Track I (Camarillo), Track I (Goleta), ADN/RN to BSN, and MSN) who have at least a 3.0 total GPA will be considered for induction into the honor society. Students are inducted in their last semester of the Nursing Department. Nurse leaders may also be nominated for induction into the society. [https://thecircle.sigmanursing.org/syndicatedcontent/howtojoin](https://thecircle.sigmanursing.org/syndicatedcontent/howtojoin)
Appendices
ANA Code of Ethics for Nurses

The American Nurses Association House of Delegates approved nine provisions for the Code of Ethics for Nurses in 2015. The following are the nine provisions:

Provision 1
The nurse practices compassion and respect for the inherent dignity with and unique attributes of every person.

Provision 2
The nurses' primary commitment is to the patient, whether an individual, family, group, community or population.

Provision 3
The nurse promotes, advocates for, and protects the rights, health and safety of the patient.

Provision 4
The nurse has authority, accountability, responsibility for nursing practice; makes decisions and takes action consistent with the obligations to promote health and provide optimal care.

Provision 5
The nurse owes the same duties to self and to others. Including the responsibilities to promote health and safety preserve wholeness of character and integrity, maintain competence and continue personal and professional growth.

Provision 6
The nurse, though individual and collective effort establishes, maintains and improves the ethical environment of the work setting and conditions of employment that are conducive to safe quality healthcare.

Provision 7
The nurse in all roles and settings, advances the profession through research and scholarly inquiry, professional standard development and the generation of both nursing and health policy.

Provision 8
The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy and reduce health disparities.

Provision 9
The profession of nursing, collectively through its professional organization must articulate values, maintain the integrity of the profession, and integrate principals of social justice into nursing and health policy.

Reprinted with permission from American Nurses Association Code of Ethics; @2015 American Nurses Publishing.

California Nurse Practitioners: Laws and Regulations

Division 2 Healing Arts; Chapter 6. Nursing; Article 8. Nurse Practitioners

General Information: Nurse Practitioner Practice
University Policies

Policy on Student Participation in Commencement Exercises

Policy on Course Grade Appeals

*Subject to change
Nursing Department Policies
Policy and Procedure for Nursing Program Application and Admissions Processing

POLICY:
Accountability. Management accountability for policy compliance, implement and monitoring (committee or personnel).
The compliance of this policy lies with nursing faculty and University Admissions.

PURPOSE: Goals and objectives of the policy.

It is the policy of the Nursing Department to follow and implement the University Policy on Nursing Department Admissions to administer and process the admissions to the programs offered by the Department.

BACKGROUND:
California State University Office of the Chancellor’s Coded Memo: AA-2015-21
Executive Order No. 563

Applicability. Specific individuals or groups to which this applies

All students applying for admissions into the Nursing Departments offered by the Department.

DEFINITION (S):

Impaction – defined as when significantly more CSU eligible applicants and currently enrolled students seeking to change major are likely to request access during the filing period than can be accommodated.

Undergraduate-Any student who has yet to obtain a Bachelor’s Degree

Post-baccalaureate – any student who possesses a Bachelor's Degree and is seeking a Second Bachelor’s Degree.

Pre-Nursing- indicated major that is a prerequisite to the official major designation of nursing.
Policy Text:

Process:
The Supplemental Admission Criteria for the BSN program (both campuses) and statistics on previous year admissions to all Nursing Departments is annually reviewed and approved by the Nursing Department and the CSU Chancellor’s Office.

Admission to all the Nursing Departments is determined by the Nursing Department.

Procedure for BSN (Track I) Program Applications

1. Applicants to the BSN Program must submit an application to CSU Channel Islands as well as the Nursing Department.
2. Non-matriculated nursing applicants applying for the main campus may only apply to CSU Channel Islands October 1st – November 30th in the year prior to fall entrance. Non-matriculated applicants submit an application to CSU Channel Islands via CAL State Apply (https://www2.calstate.edu/apply)
3. Undergraduate applicants declare nursing as their major and select an alternate major. If an undergraduate applicant is not admitted to the Nursing Department, the applicant will be given the option of enrolling at CSU Channel Islands with the alternate major. Post-baccalaureate applicants will select "BSN-Nursing (2nd Bachelor) as their major. If a post-baccalaureate is not admitted to the Nursing Department they will not be enrolled at CSU Channel Islands.
4. Applicants for the Goleta campus apply for admission to the University July 15- August 15 via CAL State Apply (https://www2.calstate.edu/apply) and select the BS at Cottage Health System Nursing Department major.
5. All applicants who wish to apply to the Nursing Department must complete the online nursing application via NursingCAS (https://nursingcas.org/).
6. Nursing Department applications are accepted October 1st – November 30th for entry into the Track I Camarillo campus program in fall of the following year. Nursing Department applications and University applications are accepted July 15 – August 15 in the year prior to a spring entrance for the Track I Goleta campus program.
   a. Applications are accepted to the Camarillo campus only for the fall term.
   b. Applicants are accepted to the Goleta campus only for the spring term.
   c. Application to the University and Nursing Department are only good for the term to which an applicant is applying.
7. All applicants must submit, during the application period, documentation for consideration of items from the Supplemental Criteria (such as language proficiency work or volunteer hours) the applicant wishes to have considered in admissions decisions.
8. Application documents for the BSN program are submitted online to NursingCAS. All documents must be received by NursingCAS (https://nursingcas.org/) prior to the application deadline for each specific program.

Procedure for Notification of Admission:

1. The Admissions Department will provide the Nursing Department with a list of applicants who are eligible for admission to the Nursing Department and university.
2. The Admission Department will provide the Nursing Department with the list of applicants, who are eligible for university admission, by the end of January for the Camarillo campus and September 15 for the Goleta campus.
3. Nursing department will utilize the list of applicants who are eligible for admission to the university prior to determining which applicants will be invited to campus for the admission interview.
4. The Nursing Department will review and evaluate Nursing Department applications no later than the second week in February for the Camarillo campus and first week of October for the Goleta campus.
   a. Based on review of applicant materials, applicants are ranked using supplemental criteria. The top 70 applicants for the Camarillo campus program and the top 48 applicants for the Goleta campus program will be invited to participate in on campus panel interviews.
      i. Following the panel interviews, the top 48 applicants and 15 alternates will be selected for admission to the Camarillo campus. The top 22 applicants and 5 alternates will be selected for admission to the Goleta campus.

5. Applicants who have courses in progress during the fall term are given a conditional admission letter.
   a. The condition of program admission is successful completion of the in-progress courses with a grade of B or better.
   b. Final official transcripts with official grades posted are due in early February for Camarillo campus and early January for Goleta campus.
   c. A full admission letter from the Nursing Department chair is sent via email to the conditionally admitted student after verification of official transcripts.

6. Students who receive notification of nursing offers are given two- three weeks to accept a seat in the program.

7. Students who are admitted can either accept or decline the offer.

8. Students, who are offered an admission as an alternate candidate, can accept or decline the offer as an alternate.

9. Students are selected from the alternates in order of rank received as soon as a denial of acceptance is received.

10. Denial to the Nursing Department may not be appealed.

**Resources posted on the Nursing Website:**
The approved Supplemental Criteria (Exhibit A) are posted on the nursing website at https://nursing.csuci.edu/.

**Procedure for ADN to BSN and RN to BSN Program Applications**

1. Applicants to the ADN-BSN and RN to BSN Programs must submit an application to CSU Channel Islands as well as the Nursing Department.
   a. Non-matriculated applicants apply for admission to CSU Channel Islands from February 1 to March 31. Non-matriculated applicants submit an application to CSU Channel Islands via CAL State Apply (https://www2.calstate.edu/apply)

2. All ADN-RN to BSN-RN applicants who wish to apply to the Nursing Department must complete the online nursing application via NursingCAS (https://nursingcas.org/) between February 1 to March 31 each year.
   a. Information on the materials that must be submitted to NursingCAS as part of application to the program can be found on the Nursing Department website (https://nursing.csuci.edu/programs/adn-to-bsn-ready-to-apply.htm). All materials must be submitted to NursingCAS by March 31.

3. Application to the University and Nursing Department are only good for the term to which an applicant is applying.

**Procedure for Notification of Admission:**

*Subject to change*
1. Extended University will provide the Nursing Department with a list of applicants who are eligible for admission to the Nursing Department and university.
   a. Nursing department will utilize the list of applicants who are eligible for admission to the university prior to making admission decisions.

2. The Nursing Department will review and evaluate Nursing Department applications no later than the end of April.
   a. Applicants who have courses in progress are given a conditional admission letter. The condition of program admission is successful completion of the in-progress courses.

3. Once outstanding courses are completed the applicant must submit a copy of official transcripts to University Records.
   a. A full admission letter from the Nursing Department chair is sent via email to the conditionally admitted student after verification of official transcripts.

4. Students who receive notification of nursing offers are given two-three weeks to accept a seat in the program. Students who are admitted can either accept or decline the offer.

5. Denial to the ADN-RN and RN-BSN program may not be appealed.

Record Storage
1. Record of students admitted and accepted, denied and students moved from the alternate list will be kept for 3 years.
2. Application information for admitted students is a part of the student file and kept for three years.

Procedure for MSN and Post-Master’s Certificate Program Applications
1. Applicants to the MSN and Post-Master’s Certificate Programs must submit an application to CSU Channel Islands as well as the Nursing Department.
   a. All applicants apply for admission to CSU Channel Islands from March 1 to April 30 via CAL State Apply (https://www2.calstate.edu/apply)

2. All MSN and Post-Master’s Certificate program applicants who wish to apply to the Nursing Department must complete the online nursing application via NursingCAS (https://nursingcas.org/) between March 1 to April 30 each year.
   a. Information on the materials that must be submitted to NursingCAS as part of application to the program can be found on the Nursing Department website (https://nursing.csuci.edu/msn#application-msn). All materials must be submitted to NursingCAS by April 30.

3. Application to the University and Nursing Department are only good for the term to which an applicant is applying.

Procedure for Notification of Admission:
1. Extended University will provide the Nursing Department with a list of applicants who are eligible for admission to the Nursing Department and university.
2. The Nursing Department will utilize the list of applicants who are eligible for admission to the university prior to making admission decisions.
3. The Nursing Department will review and evaluate Nursing Department applications no later than the end of May.
4. Based on review of applicant materials, applicants are ranked using supplemental criteria. The top 60 MSN applicants will be invited to participate in on campus panel interviews. Post-
Master’s Certificate applicants will not be interviewed.

5. Following the panel interviews, the top 40 MSN be selected for admission to the program. Selection of applicants into specific MSN tracks will be based on space available, which is dependent on preceptor availability.

6. A determination will be made for all Post-Master’s FNP Certificate students regarding whether not the advanced health assessment, advanced pathophysiology and advanced pharmacology (3Ps) requirement was met in their previous degree program. Those applicants who have not taken any or all of the 3 Ps courses will be required to successfully complete these courses prior to enrolling in the Post-Master’s FNP Certificate program.

7. Students who receive notification of nursing offers are given two- three weeks to accept a seat in the program and submit their deposit. Students who are admitted can either accept or decline the offer.

8. Denial to the MSN and Post-Master’s Certificate programs may not be appealed.

Exhibits
Exhibit A: Approved Supplemental Criteria
PURPOSE: Goals and objectives of the policy. The CSU Channel Islands Nursing Department faculty members follow the guidelines established by the California Board of Registered Nursing related to Impaired Nursing Students.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor’s Office, Accreditation

The Board of Registered Nursing Statement regarding Impaired Nursing Students Guidelines for Schools of Nursing in Dealing with the Matter of Nursing Students Impaired by Alcoholism, Drug Abuse, and Emotional Illness is as follows:

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

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

Therefore, the Board of Registered Nursing expects schools of nursing with students impaired by these diseases to offer appropriate assistance, either directly or by referral.

Furthermore, the Board expects that schools of nursing will ensure that instructors have the responsibility and authority to take immediate corrective action with regard to the student's conduct and performance in the clinical setting.
It is outside of the Board's scope of function to endorse or recommend a particular course of therapy; however, it does wish to inform nursing students of the importance of seeking voluntary aid for conditions that could, if left unattended, lead to disciplinary action and may prevent them from being licensed [or losing their license] to practice nursing in the State of California.

As a preventive measure, schools of nursing are asked to provide factual material to incoming students regarding school policy on drug or alcohol abuse and mental illness among nursing students.

Source: Board of Registered Nursing State of California, 2007 (EDP-P-03)

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring The Student Affairs committee and the Chair of the Department is responsible for policy compliance, implementation and monitoring.

Applicability: This policy applies to all students enrolled in CSU Channel Islands Nursing Department.

Definition(s) Define unfamiliar terms as needed

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy

GENERAL INFORMATION

Philosophy of Faculty at CSU Channel Islands Nursing Department related to Impaired Students: The nursing faculty is committed to facilitating the success of the nursing student and will make every effort to assist in maintaining optimal health to safely achieve academic and clinical performance objectives. Impaired health status, which includes physical problems, mental/emotional problems, and drug and alcohol use/abuse, affects academic and clinical performance. Substances which may impair student performance include legal drugs (prescription and over-the-counter), illegal drugs, alcohol, marijuana (including prescribed), and other chemicals. The impaired nursing student is a danger to self and to others in his/her care. The nursing faculty, out of concern for the impaired student, has developed the following policy which is consistent with the California Board of Registered Nursing Guidelines of 11/84. Confidentiality will be strictly maintained at all times.

POLICY

The Nursing Department adheres to the following clear prohibitions regarding drugs and alcohol:

1. Students may not possess or be under the influence of alcohol and/or marijuana while in clinical or nursing classroom settings.
2. Students may not possess, or be under the influence of drugs i.e. controlled substances, or prescriptions drugs, when there is a possibility that such use may impair the student’s ability to safely perform nursing care or impair the learning in a classroom setting.
3. Students may not be involved in the illegal possession, distribution, sale, diversion or purchase of a controlled substance.

ASSESSMENT

The student shall be immediately removed from the classroom or clinical setting when the student’s behaviors and performance pose a danger to the safety and well-being of self or others. These behaviors may include but are not limited to:
• Observed/reported possession or use of a prohibited substance
• Apparent drug or alcohol intoxication
• Observed abnormal or erratic behavior
• Observed deterioration of classroom or clinical performance
• Medication diversion
• Unusual behaviors such as verbal abuse, physical abuse, extreme agitation or aggression, withdrawal, depression, mood changes, unresponsiveness, inappropriate responses to questions or instructions, other erratic and/or inappropriate behavior such as hallucinations, disorientation, excessive euphoria, or confusion.

Physical signs of symptoms:
• Possessing, dispensing or using controlled substances
• Slurred or incoherent speech
• Unsteady gait or other loss of physical control; poor coordination
• Bloodshot or watery eyes
• Dilated or constricted pupils or unusual eye movements
• Extreme fatigue, drowsiness, sleeping
• Excessive sweating or clamminess of the skin
• Flushed or very pale face
• Highly excited or nervous
• Nausea or vomiting
• Odor of alcohol on breath, body, and/or clothing
• Odor of marijuana
• Dry mouth
• Dizziness or fainting
• Shaking of hands or body tremor/twitching
• Irregular or difficult breathing
• Runny sores or sores round nostrils
• Inappropriate wearing of sun glasses
• Puncture marks or “tracks”
• Disheveled appearance

Behavioral Pattern:
• Repeated absences
• Frequent absences from work area
• Frequently coming in late or leaving early
• Alternate periods of high and low productivity
• Complaints from patients, families, staff or other students
• Making poor decisions or using poor judgment
• An increase in errors, forgetfulness and difficulty following instructions
• Accidents related to apparent lack of concentration

PROCEDURE

STUDENTS

Students will be required to sign a release of relevant information as it relates to potential impairment for purposes of implementing the procedure. The information should include but not be limited to Emergency Contact Information and list of controlled substances prescribed for the student.
FACULTY

Faculty who suspects alcohol or drug use/dependency will comply with these policies. If reasonable suspicion of alcohol and/or drug use by a student occurs in the classroom or clinical setting, the student will be immediately removed from the setting. The faculty member will discuss the concerns with the student. If reasonable suspicion still exists the Chair of the Nursing Department will be informed and determine what actions need to be taken. Screening for drugs or alcohol will be required. The student must give consent for such testing, and authorization for results to be made available to the Nursing Department.

- If use of alcohol is suspected, the student will be transported to a testing site or the university police will be required to administer a breath test. If the student is
- in a clinical setting distant from the campus, a blood alcohol may be drawn at an available health care agency laboratory.
  - If drugs are suspected the student will be required to provide a witnessed urine or blood sample. Such testing may occur at the Student Health Center during regular hours, though Corporate Screening.com or at a healthcare agency such a hospital emergency department or urgent care center contingent on testing site availability.
  - All costs will be borne by the student. The student shall be excluded from the classroom and/or clinical agency until test results are available, have been reviewed and a decision made about the severity of the impairment.

The instructor shall call the student's emergency contact person for transport from the campus or setting if, in the instructor's judgment, the student is incapable of driving safely.

Faculty who suspect a student of alcohol or drug use/dependency (based on behaviors consistent with impairment or reported by individuals who directly observed such behaviors) will document the specific behaviors or evidence of such impairment on the Clinical Evaluation Tool CET or as an addendum to the specific behaviors or evidence of such impairment. These concerns will be reported immediately to the Chair or Assistant Chair in the Chair’s absence, who will determine the action to be taken. If the Chair and the involved faculty feel further investigation or action are warranted, any of the following may occur (actions are not limited to this list):

- A warning, with continued observation, confidential consultation with all other nursing faculty who have contact with the student will occur, to involve them in continued observation.
- Immediate request for body fluid screen for alcohol and/or drugs. All costs of testing will be borne by the student. Refusal to comply with testing will result in immediate dismissal from the Nursing Department.
- Referral to a Primary Care Provider or Student Health Services on campus for assessment of drug and/or alcohol problems. Resources will be suggested to the student, choice of provider will be made by the student. All costs will be the responsibility of the student. The student will be asked to release provider recommendations to the Nursing Department.
- Immediate administrative probation, resulting in removal of the student from all clinical courses.
- Referral to Student Judicial Affairs for disciplinary action as appropriate

DISMISSAL FROM THE PROGRAM AS AN IMPAIRED STUDENT

If the student is believed to be impaired, and therefore a danger to self or others, and refuses to submit to further professional assessment, the student will be dismissed from the Nursing Department. The student may also be subject to suspension or expulsion from other university programs in accordance with the university rules and regulations. If the student submits to further professional assessment and is found to be impaired, and therefore a danger to self or others, the

*Subject to change
student will be dismissed from the Nursing Department and will be required to provide proof of having received professional treatment prior to re-entry.

STATUS IN THE NURSING DEPARTMENT AFTER DISMISSAL FOR IMPAIRMENT

After a minimum period of one year with consistently negative random body fluid screens, the student may petition for readmission to the Nursing Department. The requirements for readmission are:

• The student shall submit a petition to the Chair of the Nursing Department.
• The student shall provide proof of active participation in a recognized treatment program on a regular basis and evidence of rehabilitation and/or recovery at the time of petition for re-entry.
• The student may be required to participate in on-going rehabilitation treatment as a condition of readmission.
• If admitted to the Nursing Department and required to participate in on-going rehabilitation treatment, the student shall provide evidence of such continued rehabilitation treatment on a schedule as determined by the Chair of the Nursing.
• Students readmitted will be subject to randomized drug testing during the time they are enrolled in the Nursing Department.
• A student with known prior chemical impairment to controlled substances will be restricted from access to controlled substances in the clinical setting. The student must be directly supervised for medication administration by faculty in clinical facility during their entire duration in the program. Depending on the nature of the prior chemical impairment, the student may be restricted from participating in those clinical courses where supervision is less available, where the student might have access to prescription drugs in client homes, or might be exposed to illicit drugs in client homes.
• Faculty with the student in the clinical setting is made aware of the medication restriction of the student.
• Failure to submit evidence of on-going rehabilitation treatment will result in permanent dismissal from the Nursing Department.
• Readmission is on a space-available basis.
• A second documented incident of impaired behavior will result in permanent dismissal from the Nursing Department.

Source: Adopted from CSU Fullerton Impaired Student Policy and CSU Chico Impaired Student Policy

Date 5.14.15

Exhibits: Optional forms, illustrations, references
Release of Relevant Information form
Release of Relevant Information Form

Student's Name: ____________________________

Date: ___________________________________________________________________________

Time: ___________________________________________________________________________

Emergency Contact Number: _________________________________________________________

Controlled Substances Prescribed for the Student:

__________________________________________________________________________

__________________________________________________________________________

*Subject to change
PURPOSE: Goals and objectives of the policy.
To define the criteria to which the student must adhere in order to progress in the Nursing Department and the criteria to which they can continue in the program or repeat a class.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor’s Office, Accreditation
California BRN regulation state didactic and clinical requirements must be completed simultaneously.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring
Admissions and Retention Committee

Applicability: Specific individuals or groups to which this applies
Applicable to all nursing students.

Definition(s) Define unfamiliar terms as needed

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy

Minimum Passing Grades in Courses
BSN students must earn a minimum of a “C or Pass” (2.0) grade in all required nursing, natural science and social science courses. Calculation of GPA for courses that are repeated will follow university policy. If grade forgiveness is given then the grade that is posted on the transcripts will be used. If the transfer institution does not have a grade forgiveness policy, an average grade for the repeated courses will be calculated.
Students may not enroll in 400-level required nursing course until they have completed all lower division nursing and 300-level nursing classes with a "C or Pass" grade or better.

MSN students must maintain a “B” average (3.0 GPA) in their nursing courses (SP05-22). If after completing 12 units or more, a student's GPA falls below 3.0, the students will be placed on academic probation by the University. Students who are placed on probation will receive a letter from the University that includes what conditions must be met to be removed from probationary status and will explain what circumstances will lead to disqualification from the graduate program. To be removed from academic probation, the student must meet the conditions outlined in the letter and increase their cumulative GPA to 3.0 or higher.

Criteria for Program Continuance and Repeating a Nursing Course (BSN Program)
The criteria for program continuance are as follows:

1. Students in the nursing major must attain grades of C / Pass or better in all required nursing courses.
2. Students in the nursing major must maintain good academic standing. Students on academic probation are not permitted to enroll in a nursing course until the probation has been removed.
3. Nursing courses for which the student earns less than a grade of C or fail may be repeated once on a space available basis. To repeat a nursing course the student will be required to:
4. Consult with the course faculty to determine what academic/personal factors led to an satisfactory grade.
5. After meeting with the course faculty, the student must schedule a meeting with the nursing advisor.
6. If a student is failing in a clinical course at any time in the semester with a grade less than Pass or with demonstrated unsafe patient care behaviors as outlined in the Clinical Evaluation Tool, the student can be failed and removed from the clinical setting at any time in the semester.
7. According to BRN regulations students must be enrolled in didactic and clinical courses simultaneously.
8. If a student has passed a clinical course but failed the didactic or if the student has passed didactic and failed clinical, the student will receive an Academic Withdrawal from the co-requisite course (either clinical or didactic).
9. Students may repeat both co-requisite courses in which they have earned less than a C/ or Fail or been academically withdrawn on a space available basis.
10. Failure of one or both co-requisite clinical/didactic courses will be considered failure of one course.
11. Students with failure in two required nursing courses will be withdrawn from the Nursing Department.
12. Failure in two required nursing courses is defined as a grade of less than C or Pass in two separate nursing courses or in two attempts in one nursing course.
13. Students who fail two nursing courses must meet with nursing advisor to discuss program withdrawal and student options.
14. Students who are withdrawn from the Nursing Department may complete the semester in free-standing nursing courses in which they are currently enrolled.

Criteria for Program Continuance and Repeating a Nursing Course (MSN Program)
The criteria for program continuance are as follows:

1. Students in the MSN program must attain grades of C / Pass or better in all graduate nursing courses but must maintain an overall GPA of 3.0 or higher.
2. A failed course may be repeated once. If the second attempt to pass the course is not successful, the student will be dismissed from the graduate Nursing Department.
3. The calculation of overall GPA after the make-up of a course failure will follow the University Forgiveness policy.
4. Students who do not complete a Family Nurse Practitioner or Nurse Educator specialty course will not progress in the FNP or Nurse Educator program until the incomplete is satisfied.
5. Family Nurse Practitioner students (both MSN and Post-Master's Certificate students) must successfully pass the APEA 3 Ps Exam to progress into NP specialty courses. Students will have 3 attempts to pass the exam. Failure to pass the 3 Ps exam on the third attempt will result in dismissal from the Family Nurse Practitioner or Post-Master’s Family Nurse Practitioner program.
6. Students dismissed from the NP program will have the option of changing major to the Nurse Educator program.
7. Graduate students may apply to take a leave of absence. Per university policy, the leave of absence can be no longer than 4 consecutive semesters or 6 semesters total (SP09-09).
8. All graduate students (except Post-Master’s Certificate students) will need to complete the degree culminating experience to be eligible for graduation from the MSN program.

*Subject to change*
PURPOSE: This policy reflects the recognition of the changes in health needs and potential restrictions on activities during pregnancy to prevent potential harm to the student or their unborn child and thus provides academic guidance for the pregnant nursing student.

BACKGROUND: This policy adheres to the Title 16 California Code of Regulations: Division 14 Board of Registered Nursing, Article 3 Pre-licensure Program- 1426 Required Curriculum; Title IX and University policy prohibiting discrimination, harassment, or retaliation related pregnancy.

POLICY: The Nursing Department Chair and Admissions and Retention Committee are accountable for policy development, implementation and monitoring; faculty and students are accountable for policy compliance.

Applicability: Students enrolled into the Nursing Major with didactic and clinical courses.

Definition(s): Define unfamiliar terms as needed
Not applicable

Policy Text:
1. Pregnancy is deemed a natural and temporary medical condition that may or may not interfere with course requirements. Adjustment to course requirements is at the discretion of faculty in assuring student safety and meeting course learning outcomes; faculty and/or students should discuss unclear issues with the Nursing Department Chair. A letter addressed to the Nursing Department Chair may be required from a licensed healthcare professional in order to clarify student needs related to course adjustments (refer to physical requirements for clinical experience in the Student Handbook and course syllabi requirements).
2. As outlined in the Nursing Clinical Absence Policy, the student may only be absent for 10% of the total course clinical hours without jeopardizing their ability to meet the clinical objectives of the course (refer to the Clinical Absence Policy).
3. If the student becomes unable to perform the expected duties, requirements, or functions of the course(s), the student may be given an incomplete (I) or withdrawal (W) according to CSU Channel Islands’ nursing and university policy in consultation with the faculty and Program Chair.

4. If any agency has restrictions, the clinical faculty and student will follow the guidelines of the agency.
PURPOSE: Goals and objectives of the policy.

The CSU Channel Islands Nursing Department supports the use of social media to reach audiences important to the University such as students, prospective students, faculty and staff. The University presence or participation on social media sites is guided by university policy. This policy applies to nursing students who engage in internet conversations for school related purposes or school-related activities such as interactions in or about clinical and didactic course activities. Distribution of sensitive and confidential information is protected under HIPAA and FERPA whether discussed through traditional communication channels or through social media.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor’s Office, Accreditation

While this policy may need to be modified as new technologies and social networking tools emerge, the spirit of the policy will remain the protection of sensitive and confidential information. Social media often spans traditional boundaries between professional and personal relationships and thus takes additional vigilance to make sure that one is protecting personal, professional, and University reputations.

Students will represent the University and the Department in a fair, accurate and professional while protecting the brand and reputation of the institution.

When publishing information on social media sites remain cognizant that information may be public for anyone to see and can be traced back to any student as an individual. Since social media typically enables two-way communications with any audience, students have less control about how materials are posted or used by others. As one person remarked, “If you wouldn’t put it on a flier, carve it into cement in the quad or want it published on the front of the Wall Street Journal, don’t broadcast it via social media channels.”

Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
The Admissions and Retention Committee is responsible for policy compliance in the area of social media.

Applicability: Specific individuals or groups to which this applies
This policy applies to the track one and track two nursing students enrolled in CSU Channel Islands Nursing Department.

Definition(s) Define unfamiliar terms as needed

HIPAA Health Insurance Portability & Accountability Act of 1966 Public Law 104-191
FERPA Family Education Rights and Privacy Act 20USC1232gCFRPart99

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy

POLICY:
The policy on use on protection of confidentiality includes:

- Protect confidential, sensitive, and proprietary information: Do not post confidential or proprietary information about the university, staff, students, clinical facilities, patients/clients, or others with whom one has contact in the role of a CSU Channel Islands nursing student.
- Respect copyright and fair use. When posting, students must be mindful of the copyright and intellectual property rights of others and of the university. For guidance, visit the University’s library site or seek consultation with a Librarian.
- Do not use CSU Channel Islands Nursing Department logos and graphics, on personal social media sites. Do not use CSU Channel Islands name to promote a product, cause, or political party or candidate.
- Use of the University marks (logos and graphics) for School sanctioned events must be approved (posters, fliers, postings) by administration.
- During clinical courses the use of cell phones is determined by the faculty of the course and in accordance with the agency's policy regarding use of cell phones. If using a cell phone or electronic device, it is expected that the device is silenced and used only for course related activity.
- No personal phone conversations or texting are allowed at any time while in patient/client areas or in the classroom. If the student needs to respond to an emergency text or phone call during class, the student is asked to leave the classroom or clinical area and respond as deemed necessary. If the student leaves the clinical area to respond to a phone call, then it is expected that he/she notify the instructor before leaving the nursing unit.
- Use of computers (phones, Notebooks, etc.) during class shall be restricted to note taking and classroom activities. Use otherwise is distracting for not only the student involved in the activity but those in the immediate area/vicinity.
- No student shall videotape or record professors or fellow students for personal or social media use without the express permission of the faculty or fellow student. At NO time shall patients/clients be videotaped or photographed without written permission of the patient/client and of the facility.
- Be aware of any association with CSU Channel Islands in online social networks. If a person is identified as a student at CSU Channel Islands, ensure any profile and related content reflects how the student is represented to colleagues, clients and potential employers. Any viewpoints written in social media should be identified solely as the viewpoints of the student and shall not represent, claim or imply any representation on behalf of CSU Channel Islands, unless specifically authorized, in writing, to do so.
- Health Insurance Portability and Accountability Act (HIPAA) guidelines must be followed at all times. Identifiable information concerning clients/clinical rotations must not be posted in any online forum or webpage.
- Ultimately, students have sole responsibility for what is posted. This is inclusive of awareness of open-source web-based websites, social media websites, and copyright regulations.
Students are encouraged to be familiar with the privacy policies for any social media websites they are utilizing. Students need to be professional in representing themselves while protecting the privacy and confidentiality of sensitive health and/or CSU Channel Islands information.

- Nursing students should be aware of the potential risks of sharing information and communicating via social media. Students should understand that social media posts that could be considered unbecoming of the nursing profession could have ramifications for future employment. The majority of hiring organizations look at social media before hiring new nurses. The risks to the new graduate nurse and the working professional nurse include misconduct investigations, loss of potential employment, and could result in loss of licensure.

- Students should review A Nurses Guide to Social Media made available through the National Council of State Boards of Nursing’s (NCSBN) and the ANA’s Principles for Social Networking and the Nurse for additional guidance.

CSU Channel Islands Nursing Department Social Media Policy is adapted from Social Media Policy, Student Handbook Purdue University School of Nursing.

Exhibits:
A Nurses Guide to the Use of Social Media from the National Council of State Boards of Nursing (NCSBN) https://www.ncsbn.org/3739.htm
Licensed Vocation Nurses 30 Semester/45 quarter Unit Option

PURPOSE: Goals and objectives of the policy.
The objective of the policy is to meet the BRN regulation for 30 Unit option Licensed Vocational Nurses to apply for RN licensure.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor's Office, Accreditation
According to BRN Criteria Section 1429 (a) An applicant who is licensed in California as a Vocational Nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the prescribed courses and meets all other requirements set forth in section 2736 of the code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of course in physiology and microbiology comparable to such courses required for licensure as a registered nurse.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring
The BSN Committee monitors the policy for compliance, implementation and monitoring. Implementation of policy is facilitated by staff and Department Chair with oversight the responsibility of the chair. All students considering this option must meet with the chair or designee for advisement.

Applicability: Specific individuals or groups to which this applies
This policy applies to individuals who are licensed as Licensed Vocational Nurses in the State of California.

Definition(s) Define unfamiliar terms as needed
N/A

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy

The prerequisites for the 30-unit option are BIO 210 Anatomy and Physiology I (4 units); and BIOL 217 Medical Microbiology (4 units); for a total of eight units. Including these prerequisites, the students take a total of 25.5 units, with the following required courses:

NRS 240 & NRS 241 Psychiatric & Mental Health Nursing with lab 4 units (2/2)
NRS 420 & NRS 421 Nursing Care of the Complex Client with lab 6 units (3/3)
NRS 460 & NRS 461 Nursing Leadership and Professional Nursing Practice with lab 5.5 units (3/2.5)
NRS 391 Transition to Professional Practice Lab 2 units (2)
Total 25.5 Units

Eligible students are admitted as undeclared majors, on a space available basis, and must make an individual appointment with the Chair of the Nursing Department or his/her delegate to sign the 30 Unit Option Waiver Acknowledgement form.

Exhibits: Optional forms, illustrations, references
EDP-P-06 BRN Required Curriculum: Content for Licensure
30 Unit Option Waiver Acknowledgement form
PURPOSE: Goals and objectives of the policy.
The purpose of this document is to summarize relevant Channel Islands policies regarding protection of patient’s health information.

BACKGROUND: Context for the policy provisions i.e., BRN regulations, Chancellor’s Office, Accreditation
As a student nurse in an education program at CSU Channel Islands you are required to learn about the health information privacy requirements (“Privacy Rule”) of a federal law called HIPAA (Health Insurance Portability and Accountability Act of 1996 Public Law 104-191).

POLICY:
Accountability: Management accountability for policy compliance, implement and monitoring
The designated nursing department HIPAA compliance officer (nursing department chair or designee) is accountable for implementing and monitoring policy compliance.

Applicability: Specific individuals or groups to which this applies
All students and faculty in a Board approved program of nursing and delivering care in a health care or community setting are subject to this policy.

Definition(s): Define unfamiliar terms as needed

HIPAA Health Insurance Portability and Accountability Act

PHI “Protected Health Information” PHI includes such material as written, spoken and electronic information. PHI is defined as any information that identifies a patient, including demographic, financial, and medical, that is created by a health care provider or health plan that relates to past, present or future condition, treatment or payment of the individual. The Privacy Rule broadly defines “identifiers” to include not only patient name, address, and social security number, but also, for example, fax numbers, email addresses, vehicle identifiers, URLs, photographs and voices or images on tape or electronic media. When in doubt, you should assume any individual health information is protected under HIPAA.
Guidelines for protecting PHI while in clinical settings

1. **Using and disclosing PHI for educational purposes only**
   
   As a student in a clinical education program, you are permitted to access, use and disclose PHI only as minimally necessary to meet your clinical education needs. You are not permitted to disclose PHI to anyone outside the staff at the clinical facility in which you are assigned or your clinical instructor, without first obtaining written patient authorization or de-identifying the PHI. **This means that you may not discuss or present identifiable patient information with or to anyone, including classmates or faculty, who are not part of your educational program, unless you first obtain written authorization from the patient.** It is mandated that whenever possible you de-identify PHI before presenting any patient information outside the hospital. If you are unable to de-identify such information, you must discuss your need for identifiable information with the faculty member supervising your clinical education and/or the nursing chair, to determine appropriate procedures for obtaining patient authorization for your use and disclosure of PHI.

2. **Material to be De-identified**

   In order for PHI to be considered de-identified, all of the following identifiers of the patient or of relatives, employers, or household members of the patient, **must be removed:**

   - Name (including a part of it, e.g. actual name initials)
   - Geographic subdivisions smaller than a state (i.e. county, town, or city, street address and zip code)
   - All elements of dates (except year) for dates directly related to an individual (including birth date, admission date, discharge date, date of death, and exact age if over 89 years old)
   - Phone numbers
   - FAX numbers
   - E-mail addresses
   - Social Security numbers
   - Medical record number
   - Health plan beneficiary number
   - Account number
   - Certificate/license number
   - Vehicle identifiers and serial numbers
   - Device identifiers and serial numbers
   - URL’s
   - Internet protocol addresses
   - Biometric identifiers (e.g., fingerprints or voice print)
   - Full face photographic and any comparable images not limited to images of the face
   - Any other unique identifying number or characteristic that could uniquely identify the individual
3. **Safeguarding PHI**  
   Recommended steps to protect PHI:
   - If you see a medical record in public view where patients or others can see it, cover the file, turn it over, or find another way of protecting it. This includes following the information technology precautions in place when utilizing electronic medical records.
   - When you talk about patients as a part of your education, try to prevent others from overhearing the conversation such as hallways, cafeteria, elevators, break rooms, or other areas where unauthorized people or those that do not need to know may overhear. Wherever possible, hold conversations about patients in private areas.
   - When physical medical records are not in use, store them in offices, shelves or filing cabinets as per the healthcare facility policies or guidelines. Electronic medical records access should follow the guidelines of the facility in which access to records are not left unattended.
   - Remove patient documents from faxes and copies as soon as you can.
   - Make sure you dispose of documents containing PHI in hospital confidential bins for shredding.
   - Never remove the patient’s official medical record from the clinical site. Unauthorized removal of any part of an original medical record is prohibited. **Student and faculty may not release or display copies of PHI.** Case presentation material will be used in accordance with healthcare facility policies.
   - Log out of electronic systems containing PHI when you are done using them, or during any circumstance where you leave the computer/screen.
   - Do not remove copies of the PHI from the clinical site even with the information de-identified.
   - **All information for care planning purposes is to be handwritten on a worksheet containing only the information necessary to develop the plan.**
   - Students and faculty shall not access data on patients for whom they have no responsibilities or a “need–to-know” the content of PHI concerning those patients.
   - A computer ID and password are assigned to individual students and faculty. Students and faculty are responsible and accountable for all work done under the associated access, in compliance with the healthcare facility policy.
   - Breach of confidentiality by disregarding the policies governing PHI is grounds for dismissal from the hospital or sanctions from the university with range.
   - from verbal or written notification, remediation or failure of the course for failure to meet essential course behaviors (see CET for essential behaviors)

All students must sign the acknowledgment that they have read and understand the HIPAA policy. The acknowledgement must be submitted via Canvas to the clinical faculty at the start of each semester. Faculty will submit all documentation to the Clinical Coordinator at the end of the semester.
4. Disclosure of PHI to family members or friends involved in the care of the patient
Care must be taken when discussing PHI in front of or with a family member or friend who is involved in the care of the patient. Generally, you can assume that the patient does not object to talking about them with such a person, however, if you have any reason to believe that the patient would object in all cases when discussing a sensitive diagnosis or procedure and etc., then you should ask the person to step out of the room or ask the patient if it is okay to talk to that person. Phone call inquiries should follow the practices and policy of the facility to protect patient information.

5. Email
Because of potential security risks, you are not permitted to email PHI to anyone

6. Requests for Access to or copies of medical records
HIPAA grants patients the right to access and to obtain copies of their medical records. However, please refer all requests to the patient’s primary care provider (e.g. nurse) to ensure that all proper procedures are followed.

7. Requests for PHI by law enforcement
Request for PHI by law enforcement officers (e.g., police, sheriff) must be referred to the patient’s primary caregiver (e.g. nurse) to ensure that proper procedures are followed.

Procedure to Ensure Compliance (Generic BSN Program Only):
At the beginning of each semester within the first three weeks of the clinical rotation:
Students complete the ATI HIPAA Skills module acknowledgment; completing portions of the ATI Skills Module 3.0: HIPAA as outlined below:

<table>
<thead>
<tr>
<th>Course</th>
<th>Skills Module 3.0 HIPAA</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRS 201</td>
<td>Complete the HIPAA Learning Module (2 hours)</td>
</tr>
<tr>
<td>Fall Year 1</td>
<td>Complete the HIPAA Learning Module:</td>
</tr>
<tr>
<td></td>
<td>a. Complete the HIPAA Learning Module Pretest.</td>
</tr>
<tr>
<td></td>
<td>b. Listen to and view all screens in the Learning Module.</td>
</tr>
<tr>
<td></td>
<td>c. Review the animations, videos, and images in the Learning Module.</td>
</tr>
<tr>
<td></td>
<td>d. Review glossary items as needed including proper pronunciation of key terms.</td>
</tr>
<tr>
<td></td>
<td>e. Review documentation overview and client chart.</td>
</tr>
<tr>
<td></td>
<td>f. Complete the HIPAA Learning Module Posttest.</td>
</tr>
<tr>
<td>NRS 221</td>
<td>Review the HIPAA Learning Module</td>
</tr>
<tr>
<td>Spring Year 1</td>
<td>Complete the Virtual Scenario Activity HIPAA</td>
</tr>
<tr>
<td>NRS 231/233</td>
<td>Review the HIPAA Learning Module and Virtual Scenario</td>
</tr>
<tr>
<td>Fall Year 2</td>
<td>Complete and Submit Clinical Orientation Discussion</td>
</tr>
<tr>
<td></td>
<td>Students engage in classroom discussion activity responding to a series of questions to</td>
</tr>
<tr>
<td></td>
<td>guide deeper learning. Students provide an evidence-based rationale for their response.</td>
</tr>
</tbody>
</table>
• How is HIPAA regulated in the United States?
• What impact does social media have on HIPAA?
• How does HIPAA affect clinical research?
• As the nurse, who would you report a HIPAA violation to?

NRS 391/ Fall Year 3

<table>
<thead>
<tr>
<th>Review the HIPAA Learning Module and Virtual Scenario</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engage in small group discussion activity as part of NRS 391 orientation:</td>
</tr>
<tr>
<td>1) Describe 3 examples of HIPAA violations and how nurses are responsible for protecting patient rights of privacy and confidentiality. Compare and contrast your examples with those developed by other members in your group through the discussion.</td>
</tr>
<tr>
<td>2) Following group comparisons, edit and submit your group’s final example of HIPAA violations and problem responses as a group assignment to summarize on the first clinical day in post conference discussion.</td>
</tr>
<tr>
<td>Post-conference example questions for group discussion or online discussion board:</td>
</tr>
<tr>
<td>• What actions did you identify as HIPAA violations?</td>
</tr>
<tr>
<td>• What would you document in the EHR?</td>
</tr>
</tbody>
</table>

Complete the general reflection questions in-class or online for further student discussion. Questions can be assigned for students to complete independently, with small or large groups. Summary of this discussion should be provided in a course announcement by faculty if it occurs in-person to demonstrate HIPAA related discussions continue throughout the student curriculum.

1. What did you learn from this scenario?
2. Did you discover a HIPAA violation that you were unaware was a violation?
3. How did this scenario prepare you for these conversations in the clinical setting?
4. What helped you recognize that there were HIPAA violations?
5. What factors during the scenario influenced the questions you asked the healthcare team?
6. What factors during the scenario influenced the actions you took related to the HIPAA violation?
7. Are there additional questions you would ask if this type of scenario happens again?
8. Are there additional actions you would take if this type of scenario happens again?

Consequences of Violation of the HIPAA Policy:

Depending on the nature of the breach of confidentiality, violations at any level may result in...
more severe action or dismissal from the major. Levels I-III violations are considered to be without malicious intent. Level IV and V connote malicious intent. A Level IV or V violation may subject the student to civil or criminal liability under HIPAA for actions in violation of the law. For any offense, a preliminary investigation will precede assignment of level of violation.

Violations, Process, Actions and Notifications

<table>
<thead>
<tr>
<th>Type of Violation</th>
<th>Process</th>
<th>Corrective Action</th>
<th>Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Accidental breaches of confidentiality that may or may not result in the actual disclosure of patient information.</td>
<td>Discussion between Instructor and student.</td>
<td>Re-education and/or process improvement.</td>
<td>A written warning will be given to the student and a copy placed in his/her student file.</td>
</tr>
</tbody>
</table>

**Examples of Violation I:**

a) Age over 89, use of actual patient initials of their name, or admission date disclosure on assignment or care plan  

b) Misdirected faxes, e-mails & mail.  
c) Failing to log-off or close or secure a computer with protected PHI displayed.  
d) Leaving copy of PHI in a non-secure area.  
e) Dictating or discussing PHI in non-secure area (lobby, hallway, cafeteria, elevator, etc.).  
f) Failing to redact or de-identify patient information for operational/business uses.  
g) Transmission of PHI using an unsecured method.  
h) Leaving detailed PHI on an answering machine.  
i) Improper disposal of PHI

<table>
<thead>
<tr>
<th>Type of Violation</th>
<th>Process</th>
<th>Corrective Action</th>
<th>Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>II. Failure to follow Existing policies/procedures governing patient confidentiality.</td>
<td>Discussion between instructor and student.</td>
<td>Re-education and/or process improvement.</td>
<td>A written warning will be given to the student and a copy placed in his/her student file.</td>
</tr>
</tbody>
</table>
### Examples of Violation II:
- a. Leaving copy of PHI in a non-secure area.
- b. Dictating or discussing PHI in a non-secure area (lobby, hallway, cafeteria, elevator, etc.).
- c. Failure to obtain appropriate consent to release information
- d. Failure to fulfill training requirements
- e. Requesting another individual to inappropriately access patient information.
- f. Inappropriate sharing of ID/password with another coworker or encouraging coworker to share.
- g. Failure to secure data on mobile devices through encryption/password.

<table>
<thead>
<tr>
<th>Type of Violation</th>
<th>Process</th>
<th>Corrective Action</th>
<th>Notification</th>
</tr>
</thead>
</table>
| **III. Repeat Offense of Type I or II Violation.** | May range from discussion of instructor and student to Chair convening a committee to address action | May range from re-education and process improvement; to disciplinary sanctions, such as:  
- Reprimand;  
- Removal from clinical site; or  
- Probation or other disciplinary action including dismissal from the Nursing Department. | Written communication between instructor and student will be included in student record and sent to the Chair of the Nursing Department. |
| **IV. Inappropriately accessing a patient's record without a need to know.** | May range from discussion between instructor and student to Chair convening a committee to address | May range from removal from course; to disciplinary sanctions, such as dismissal from the program. | Written report to:  
Student Record  
Dean of the College of Arts and Sciences |
Examples of Violation IV:
- Releasing or using aggregate patient data without facility approval for research, studies, publications, etc.
- Accessing or allowing access to PHI without having a legitimate reason. Giving an individual access to your electronic signature.
- Accessing patient information due to curiosity or concern, such as a family member, friend, neighbor, coworker, famous or “public” person, etc.
- Posting PHI to social media (refer to SA0082016 Policy on Social Media in the Student Handbook).
- Removing documents from a nursing unit or clinical site that contain PHI.

<table>
<thead>
<tr>
<th>Type of Violation</th>
<th>Process</th>
<th>Corrective Action</th>
<th>Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>V. Accessing and using patient information for personal use or gain or to harm another individual.</td>
<td>Notification to Chair or designee. Chair convenes committee to address action.</td>
<td>May range from removal from course; to disciplinary sanctions, such as dismissal from the major.</td>
<td>Written report to: Student Record Dean of the College of Arts and Sciences</td>
</tr>
</tbody>
</table>

Examples of Violation V:
- Releasing or using data for personal gain.
- Compiling a mailing list to be sold for personal gain or for some personal use.
- Disclosure or abusive use of PHI.
- Tampering with or unauthorized destruction of information.

Policy modified from University of Wisconsin Policy and Procedures

Exhibits:
Exhibit A: HIPPA Compliance Acknowledgment form
Exhibit B: Skills Module 3.0 HIPAA Goals and Objectives
PURPOSE: Goals and objectives of the policy.
The objective of this policy is to standardize grading across nursing courses.

BACKGROUND: The grading policy is consistent with University Policy SP.12.007, the Policy on Grades and provides for consistent grading within the Nursing Program. This policy also serves to integrate the “Point Distribution in Didactic Courses” policy adopted by Faculty on 12.16.13, hereby rendering it archived.

POLICY:
Accountability: All nursing faculty
Applicability: All nursing students

Definition(s)

1. Critical Behaviors are defined as those student behaviors (cognitive, attitudinal and psychomotor skills) that must be demonstrated in order to allow successful course completion.

2. Higher-order behaviors are those behaviors that demonstrate the presence of critical behaviors but go beyond this level of performance by reflecting more complex cognitive, attitudinal and psychomotor skills. In comparison to a behavior indicative only of knowledge input, the student manifesting higher-order behavior demonstrates the integration of various elements of content within the course or level.
   - Knowledge – Learning the information
   - Comprehension – Understanding the information.
   - Application – Using previously learned information in a new situation to solve problems that have single or best answers.
   - Analysis – Examining specific parts of information to develop divergent conclusions by
identifying motives or causes, making inferences, and/or finding evidence to support generalizations.

- Synthesis – Creatively or divergently applying prior knowledge and skill to produce something new or original.

3. **Student learning outcomes** or SLOs are statements that specify what students will know, be able to do or be able to demonstrate when they have completed or participated in a program/activity/course/project. **Outcomes** are usually expressed as knowledge, skills, attitudes or values.

Policy Text:

**1. Evaluation of Nursing Theory Courses**

   a. In nursing theory courses students are evaluated for comprehension of knowledge acquired, i.e. critical knowledge and higher-order cognitive skills
      
      i. The grading of theoretical comprehension may be accomplished by using percentage/letter grade system to arrive at a final grade and will be based on the grade earned on assessment of core competencies, which can include course examinations, individual/group presentations/projects, case studies and other specific written assignments
      
      ii. Credit by examination for theory courses will, when feasible, utilize the same system(s) as those used for students taking the course.

   b. Item analysis is done on all examinations. The results of the item analysis and examinations are available for student review upon individual or group request.

   c. The nursing program at CSU Channel Islands has the student nurse’s complete success as its top priority. To that end, a comprehensive program of quality assessment called ATI Assessment Technologies, Inc. is utilized. Modules and exams have been proven to increase student success in both program content and NCLEX pass rates. See the ATI Remediation Policy in the Appendix for details.

   d. Learning activities in courses are aligned to meet the course student learning outcomes.

**2. Evaluation of the Nursing Clinical Laboratory Courses**

   a. There are two areas in which the student is evaluated in nursing laboratory courses:
      
      i. Clinical application and theoretical-clinical synthesis
         
         1. Clinical Application:
            
            a. Clinical application involves only the evaluation of critical behaviors and core competencies. This evaluation verifies that the student has displayed all critical behaviors and competencies identified in the course. A grade of pass/fail is given.
            
            b. Critical behaviors and core competencies (those behaviors having emphasis on safety, professional growth and improvement that are specific to content in each course and which align with the course learning outcomes) are passing if the student is able to accomplish
them proficiently. Evaluation is based upon observation of student performance, i.e., return demonstration in clinical or comparable setting. Students may feel free to contact the instructor for clinical evaluation of critical behaviors or competencies whenever they feel proficient enough to carry out these new skills. Evaluation may take place in simulated clinical surroundings, when appropriate, as well as the clinical laboratory itself. Critical behaviors and core competencies are evaluated by specific evaluation criteria that are made available to students at the beginning of the experience.

i. Students are held accountable for all critical behaviors and competencies required in nursing courses prerequisite to a succeeding course. Students should be made aware of specific critical behaviors and competencies learned in previous nursing courses that are applicable to the present course. Failure to perform a critical behavior or core competency from a prior course that is necessary for a more advanced skill should be deemed unsatisfactory in that skill at that time. e.g., a student who fails to observe sterile technique (lower division level) while performing deep naso- tracheal suctioning (upper division level) is performing unsatisfactorily.

2. Theoretical-Clinical Synthesis
   a. The Theoretical-clinical synthesis involves synthesizing and utilizing theory in both the assessment of patients and families and in planning and implementing of nursing care. Various methodologies can be used for evaluation of this ability, e.g., assessment tools, teaching plans, independent projects, nursing care plans, case studies, simulation, tape recordings, tutorials, videotapes, case narratives, recording on agency records, role playing and examinations. Pass/Fail are assigned to this evaluation component.

3. Grading Scales
   The evaluation process for all courses will be specified in a course syllabi and involve active participation of students. To standardize grading across courses, nursing faculty will adhere to the following grading practices:

Evaluation of Nursing Theory (Didactic) Courses Policy
Evaluation methods for two (2) and three (3) unit didactic or theory courses (courses with a NRS prefix for course identification) will be balanced by competency assessments including examinations, quizzes, written course assignments and individual/group presentations/projects. The following point distribution guidelines will be used:

- For two (2) unit nursing didactic course, the points earned shall range from 200-400 course points.
- For three (3) unit nursing didactic course, the points earned shall range from
500-800 course points

• For lower division courses (NRS 200’s), course points earned by exams and quizzes should be 40-50% of the grade.
• For upper division courses (NRS 300-400’s except NRS 306, NRS 303 and NRS 304), course points earned by exams and quizzes should be 0-30% of the grade.
• The accumulated points earned will be used to establish the course percentage and the student’s final letter grade for the course using the Approved Grading Scale as indicated below.

Approved Grading Scale

Letter Grades for the course are assigned as follows:

<table>
<thead>
<tr>
<th>Quality Points</th>
<th>Letter Grade</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.0</td>
<td>A</td>
<td>95-100%</td>
</tr>
<tr>
<td>3.7</td>
<td>A-</td>
<td>90-94.9%</td>
</tr>
<tr>
<td>3.0</td>
<td>B</td>
<td>85-89.9%</td>
</tr>
<tr>
<td>2.7</td>
<td>B-</td>
<td>80-84.9%</td>
</tr>
<tr>
<td>2.0</td>
<td>C</td>
<td>76-79.9%</td>
</tr>
<tr>
<td>1.0</td>
<td>D</td>
<td>65-75.9%</td>
</tr>
<tr>
<td>0</td>
<td>F</td>
<td>64.9% and below</td>
</tr>
</tbody>
</table>

On a +/- grading scale C- is not considered passing. Therefore, the bottom of the scale is set at C 76 with no C- grades.

Point Considerations

• No rounding up of decimal points will be allowed in grading practices.
• No extra credit points will be allowed in any nursing class
• Students will have the opportunity to review examinations and written course assignments during regularly scheduled office hours of their course faculty.
• Students will be expected to follow through on faculty’s instructions and guidance, as necessary, to enhance the learning experience and improve student’s performance and course points (including the use of the Loma Linda Exam Tool) as indicated.
• It is the student’s responsibility to contact the faculty if the student believes there is an error in their point calculation. Faculty will review the accumulated course points for accuracy.
• When point balance is accurate and student is informed, the student will accept the points earned at the end of the semester. Emails, text messages, voice mail messages from students requesting additional points, rounding up to the next letter grade, revising an assignment for more points or requesting extra credit for more points will not be accepted.
Evaluation of Nursing Clinical Courses
Clinical laboratory courses will receive Pass/Fail however; there are two areas in which the student is evaluated in nursing laboratory courses. Those areas are theoretical-clinical synthesis and clinical application.

Theoretical-Clinical Synthesis
The theoretical-clinical synthesis involves synthesizing and utilizing theory in both the assessment of patients and families and in the planning and implementing of nursing care. These grades will be based on required course work for the clinical laboratory courses such as daily patient care preparation plans, patient care studies, class presentations, assessment tools, teaching plans, and other written assignments. Additionally, various other clinical assignments such as examples of patient/client interactions on tape recordings, tutorials, videotapes, and case studies, student recording on agency records, role playing and clinical examinations. Clinical examinations will not be given during the clinical laboratory hours.

Clinical Application
Clinical application involves only the evaluation of critical behaviors, core competencies and clinical skills. A grade of pass/fail is given. Critical behaviors and core competencies (those behaviors having emphasis on safety, professional growth and improvement that are specific to content in each course) are passing if the student is able to accomplish them safely and proficiently. Performance of clinical skills will be judged as pass safe and proficient or fail (unsafe and less than proficient). Evaluation is based upon observation of student performance, i.e., return demonstration in a clinical or comparable setting. Students may feel free to contact the instructor for clinical evaluation of critical behaviors and competencies whenever they feel proficient enough to carry out these new skills. Evaluation may take place in simulated clinical surroundings, when appropriate as well as the clinical laboratory itself.

Grading of clinical work will be based on 60% on the categories in the Clinical Evaluation Tool (CET) which is pass/fail and 40% other activities. In preceptor-based upper division clinical, the semester-long assignments will make up the points in establishing the clinical grade for passing. There must be a passing grade on the CET as well as a minimum letter grade of C in the clinical assignments to pass the 76% passing percentage in the clinical course. For many of the clinical nursing courses, particularly the lower division courses, students may conduct a midterm and final self-assessment of their clinical performance as described in their CET or a midterm and final self-assessment of their clinical performance as defined by the course instructor. Remediation Plans may be indicated as directed by faculty.

In preceptor-based clinical, if a student’s behavior is such that they are not performing student learning outcomes at a satisfactory level, the student may be removed from their assigned preceptored clinical. Placement will not be made to another clinical setting. Thus, the student would not be able to accomplish the course objectives, earn points for their grade or pass the course.
Policy on Submission of Clinical and Medical Documents

PURPOSE: Goals and objectives of the policy.
The objective of this policy is to provide a defined timeline to ensure the proper submission of clinical and medical documents to the clinical sites. This process, however, in extreme circumstances, may be adjusted by the Nursing Department Student Affairs Committee.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor’s Office, Accreditation
To ensure timely submission of clinical and student health documents to clinical sites.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
The BSN Committee is responsible for implementing and monitoring adherence to the procedure.

Applicability: Specific individuals or groups to which this applies
This policy is specific to all students and applies to all clinical courses.

Definition(s) Define unfamiliar terms as needed

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy
Timeline for submission of clinical and medical documents

1. Prior to the start of the student’s clinical rotation, the Clinical Coordinator or Goleta Support Coordinator will email the students the clinical paperwork that the student is required to complete.
2. Clinical documents and student health information will be sent to the facilities **four weeks**
prior to the start of the clinical rotation with the exception of students placed at Cottage
who need to submit a new background check and drug screening **30 days** prior to the
start of their rotation. **At this time, if students don’t have all their Health Documents, up to date on CastleBranch, they will be at risk of being dropped from the course.**

Exhibits: *Optional forms, illustrations, references*
POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
The compliance of this policy lies with nursing faculty and University Admissions. PURPOSE: Goals and objectives of the policy.

Following, the Just Culture model of event reporting (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3776518/) used in most acute care settings this policy aims to provide guidance to faculty and students when there is an adverse event occurrence or error in the clinical setting.

BACKGROUND:
An adverse event is defined as “harm from medical care rather than underlying disease.” (https://psnet.ahrq.gov/primers/primer/34/Adverse-Events-Near-Misses-and-Errors). The majority of adverse events are preventable and result from error; failure to follow established policies and procedures; or negligence. It is important the faculty are made aware of any adverse event occurrence so that the cause(s) for the occurrence can be identified and ameliorated if possible.

DEFINITION (S):
Adverse event: preventable error that results in harm.

Error: act of omission or commission that exposes a patient to potential harm.

Near miss: preventable error that does not result in harm.

Sentinel event: event that reaches the patient and results in death, permanent harm, or severe temporary harm and intervention to sustain life.

POLICY
1. Students are expected to report any error, near miss, or adverse event in which they are involved immediately to their clinical faculty. Failure to report an error or event immediately may result in clinical course failure.
2. Clinical faculty must report the occurrence to the course lead and the department chair within 12 hours of occurrence by text or phone call.
3. In addition to reporting the incident as described in this policy, the agency’s incident reporting policy must be followed at all times.
4. The student involved in the incident will be counseled by the clinical faculty. Counseling should include referral to Campus Counseling and Psychological Services (CAPS) or the Campus Assessment, Response and Evaluation (CARE) team if the incident resulted in significant patient harm.
5. The clinical faculty will be responsible for submission of the Student Nurse Adverse Event Reporting Form to the course lead and department chair that describes the event and any contributing factors. The completed form must be submitted within 24 hours of event occurrence.
6. Upon receipt of the form, the department chair will notify the BSN Committee chair to call an ad hoc meeting of the committee with the exception of near misses unless deemed necessary for consideration by the committee or department chair.
7. The BSN Committee will review the form and as appropriate, interview the student and/or faculty involved.
8. Based on review of the form and, when conducted, interviews, the BSN Committee will recommend that the student receive clinical coaching or fail the course.
9. If clinical coaching is recommended, the chair of the BSN Committee, the course lead, and the clinical faculty will collaboratively develop the coaching plan. Once the clinical coaching plan is developed the Clinical Coaching Policy will be followed.
10. If course failure is recommended, the chair of the BSN Committee will notify the department chair, course lead, and clinical faculty. The clinical faculty will inform the student about the course failure.
11. If this is the student’s first course failure, the student must schedule a meeting within 48 hours with the department chair to discuss continued progression in the nursing program.
12. If this is the student’s second course failure, the student will be dismissed from the program.
13. The completed form will become part of the permanent student file.

Exhibits
Exhibit A: Student Nurse Adverse Event Reporting Form.
Student Nurse Adverse Event Reporting Form

This form is to be completed by the clinical instructor and nursing student for all adverse events or near misses. The original completed form is to be submitted to the Nursing Department Chair.

Be sure to never include the name of the patient or the facility where the incident occurred. Always use a generic term as listed below. Please note: This form does not take the place of the clinical agency reporting process. All adverse events or near misses must be reported via the usual reporting mechanism of the clinical agency.

Date of Incident: ________________

Student Name: ____________________________

Type of Incident: ☐ Adverse Event ☐ Near Miss

<table>
<thead>
<tr>
<th>Medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of med:</td>
</tr>
<tr>
<td>Documentation</td>
</tr>
<tr>
<td>Safety</td>
</tr>
<tr>
<td>Asepsis</td>
</tr>
<tr>
<td>Other (please clarify)</td>
</tr>
</tbody>
</table>

Type of Facility (hospital, public health agency, etc.): ____________________________

Nursing Unit (if applicable) ____________________________

Semester in which student is enrolled: ____________________________

Faculty completing form: ____________________________

Brief Description of Incident: ____________________________

Patient Male Female Age ____

Contributing Factors: 

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________
System Contributing Factors:


Patient Condition Post Incident:


How event was managed:


Recommendations:


Nursing Department Discussion and Follow-up Type of Error:
Human Behavior - console At
Risk Behavior - coach
Reckless Behavior – discipline Follow-up

Recommendations:

Student Signature Date

Faculty Signature Date

BSN or MSN Committee Chair
Pass Fail Grading Scale Policy

PURPOSE: Goals and objectives of the policy.
The goal is to state the percentage for passing a class when the class is listed as a pass-fail grade.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor's Office, Accreditation

The policy was initiated in 2012 when the program went from letter grade to pass fail for clinical courses.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel).

The BSN Committee is responsible for implementing and monitoring the policy implementation.

Applicability: Specific individuals or groups to which this applies

The pass fail grading scale refers to the following BSN courses: NRS 201 NRS 221, NRS 223, NRS 231, NRS 233, NRS 241, NRS 391, NRS 421, NRS 453, and NRS 461.

The pass fail grading scale refers to the following MSN courses: NRS 521, NRS 523, NRS 527, NRS 537, and NRS 539

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy

Students in Pass Fail clinical courses will have course assignments graded in % with 76%, the adopted program pass rate.

Areas of each category of assignments such as BSN Clinical Evaluation Tool (CET) or other clinical assessment tools such as Care Planning and simulations must be met with a 76% criterion (refer to the Clinical Evaluation Tools Policy)

- The CET shall comprise 60% of the course and all other assignments will total 40%.
The student must have an overall rating equivalent to or greater than 76% and pass all critical criteria as identified on the CET to pass the course.

Grades for the BSN clinical course are assigned as follows:
Credit: CET (60% of course grade) evaluated as Credit/No Credit and all remaining evaluated portions (40%) combined with CET resulting in a total course score of 76% or greater. Syllabus must include points and percentage of course grade for each assignment.

Grades for the MSN clinical course are assigned as follows:
Credit: Preceptor and Faculty Evaluation of Student Practicum Performance (60% of course grade) evaluated as Credit/No Credit and all remaining evaluated portions (40%) combined with Preceptor and Faculty Evaluation of Student Practicum Performance resulting in a total course score of 76% or greater. Syllabus must include points and percentage of course grade for each assignment.

No Credit: Fail (No Credit) on CET and/or total course scores less than 76%. If a student is failing in a clinical course at any time in the semester with a grade less than Pass/Credit or with demonstrated unsafe patient care behaviors as outlined in the Clinical Evaluation Tool, the student can be failed and removed from the clinical setting at any time in the semester.

Exhibits: Optional forms, illustrations, references
Preceptor-based Clinical Laboratories for the BSN Lab Courses that Utilize Preceptors and MSN Practicums

PURPOSE: Goals and objectives of the policy.
To coordinate the placements and ensuring the standards for clinical placements for preceptor-based clinical laboratories for BSN lab courses that utilize preceptors and all MSN practicum courses

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor’s Office, Accreditation
The nursing program utilizes preceptors in the undergraduate program when placing students on Dedicated Education Units (DEUs), in the senior Transition to Practice course, community health and leadership. All MSN practicum courses utilize preceptors. These courses are self-directed where students are under the direct supervision of their qualified preceptor.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
It is the policy of CSU Channel Islands Nursing Department to ensure compliance with established accreditation standards when selecting preceptors and when placing students in preceptor-based clinicals.

Department Faculty – hold the primary responsibility of meeting the intended program outcomes pursuant to the institutions accreditation standards. Further, faculty are responsible for the evaluation of student outcomes that include the faculty, student, and preceptor, as well as the experience and setting of the clinical rotation. In addition, department faculty must ensure that the student acquires the content and competencies, which include those delineated in the AACN Essentials of Baccalaureate Education for Professional Nursing Practice (2008) and the AACN Essentials of Master’s Education in Nursing (2011). Department faculty will need to clearly communicate to the Clinical Preceptor the level, the intended clinical progression, and outcome objectives for the clinical rotation of the student during each clinical rotation experience thus affording the student meaningful clinical experiences that will develop the students’ comfort in practice and clinical competency. Furthermore, the responsibility of the faculty includes the oversight of the design, implementation, and evaluation of clinical practice experiences that are aligned to student and program outcomes. Regular communication with the Clinical Preceptor is pivotal to ensure the curriculum is being effectively delivered and student outcomes are met.
Clinical Preceptor – is a vital component of the clinical education process in creating a safe setting for the student to gain experience and develop clinical competency to effectively manage the population consistent with the role for which they are being educated. While not an all-inclusive example the clinical preceptor serves as a role model by incorporating evidence-based education best practices to ensure safe and effective patient outcomes.

Applicability: Specific individuals or groups to which this applies
All Clinical Community Health Nursing and Nursing Leadership and Professional Issues (NRS 461), Transitions in Nursing (NRS 391), & Advanced Concepts of Health Across the Lifespan (NRS 525).

Definition(s): Define unfamiliar terms as needed
A clinical preceptor is a health care provider qualified by education, licensure and clinical competence in a nurse practitioner category and who provides direct supervision of the clinical practice experiences for a nurse practitioner student. http://www.rn.ca.gov/pdfs/regulations/proplang1480-1486.pdf

Policy Text: Statement of the policy including an outline of the requirements and responsibilities to accomplish the purpose of the policy
Faculty will consult CSUCI Nursing Department Clinical Placement Coordinator as to the current contractual status of a facility. The criteria will proceed when there is a current/valid agreement between the facility and CSUCI. If there is not a valid contract with the facility, students will not be placed in that setting until a valid agreement is in place.

Undergraduate Programs:
Criteria for Selection of Preceptors for NRS 453 Community Health:
- BSN level or higher working in a community health setting, such as public health, school health, home health, hospice, occupational health, epidemiological settings, correctional health, multispecialty community health clinics, etc
- Preceptors must be willing to devote time to the students and provide opportunities to enrich community health nurse’s experiences
- Preceptor must have a minimum of one year in a community health nursing setting

Criteria for Selection of Preceptors for NRS 461 Leadership:
- BSN level of education or higher plus a leadership position, such as, Clinical Nurse; Educator, Nursing Manager, Nursing Director, Nurse Supervisor, Nursing faculty, Program Coordinator (i.e. infection control, wound care, quality, palliative care, etc);
- Preceptors must be willing to devote time to the students and have a leadership project that the student can complete during the semester;
- Preceptor must have a minimum of two years as a nurse leader.

Criteria for Selection of Preceptors for NRS 391 Transition to Practice:
- BSN level of education or higher preferred;
- Preceptors must be willing to devote time to the students during the semester;
- Preceptor must have a minimum of one year as a nurse in their specialty.

Criteria for Selection of Preceptors on Dedicated Educational Units (DEUs):
- BSN level of education or higher preferred;
• Preceptors must be willing to devote time to the students during the semester;
• Preceptor must have a minimum of one year as a nurse in their specialty;
  • Must have completed agency required preceptor training for nurses working with students on a DEU.

Criteria for Orientation of Undergraduate Preceptors
• Instructors meet with new preceptors before or during the first week of the semester to:
  ✓ Discuss the roles and responsibilities for the preceptors, students and faculty (see documentation forms)
  ✓ Establish whether the preceptor training has been completed or needs to be completed
  ✓ Obtain a signed Student Preceptor Information and Agreement Form
  ✓ To discuss course objectives, course assignments and to answer questions
  ✓ To plan in the event the assigned preceptor may be absent then to designate either an equivalent preceptor for the day or to assign provisions of the assignment
• Existing preceptors will receive summary of the course outline or the complete course outline describing the learning objectives, assignments and other essential components
• Preceptor will provide the following required information on the Student-Preceptor Information and Agreement Record
  ✓ Active clear RN license number and expiration date issued by the BRN
  ✓ Special Certifications
  ✓ Years of experience in this setting or specialty
  ✓ Current CV/resume optional
  ✓ Contact information
  ✓ Verification of completion of a preceptor training program

Criteria for placement of students:
Faculty will meet at the beginning and near the end of the planning of student clinical placements to coordinate the student, day of the week and other clinical placement details. Once the clinical site commits to the student placement, instructors will facilitate the logistics in order to preserve the placement and ensure the student success. Once arranged with an agency, placements will not be changed. To the degree possible, student placements are also made considering the student’s home city location and in the case of NRS 461, their place of employment if in a setting of their potential employer. Student’s area of interest will not be guaranteed in any of the preceptor-based clinicals.

Contact with Faculty:
1. Faculty will provide telephone and email contact information to preceptor and student
2. Faculty will be available by phone on any scheduled clinical day
3. Should faculty not be available, provisions for backup shall be made
4. Students will be instructed to notify faculty within 24 hours, if possible, should a change of clinical day be necessary so faculty coverage can be maintained
5. Preceptors can contact the faculty at any time outside their scheduled clinical days
6. Faculty will meet with the student within the first month of the beginning of the semester and as needed during scheduled office hours.

Records and Evaluation:
1. Midterm and Final Clinical Evaluation Tools (CET) will be completed by the student and faculty as described in the respective course outlines.
2. Preceptor evaluations will serve to augment the CET and will not be used solely to render the pass-fail grade for a student
3. Students will complete the clinical site and preceptor evaluation surveys, which are reviewed annually by the Student and Faculty Affairs Committee to assure that preceptors and clinical site provide appropriate supervision and learning opportunities for students.

4. Student Preceptor Information and Agreement form will be kept on file by the Clinical Placement Coordinator.

**Graduate Programs:**

**Criteria for Selection of FNP Preceptors:**
- All preceptors working with FNP students must have a Master’s degree and be certified in the appropriate patient population focus, i.e. family, adult, women's health, kids;
- Preceptors must be willing to devote time to the students during the semester;
- Preceptor must have a minimum of one year as a nurse in their advanced practice specialty.

1. Preceptors must have a current, unencumbered state license and national certification, as appropriate, in the population focused or specialty practice area. Students may precept with a nurse practitioner (must have Masters) or physician (e.g., MD, DO).

2. The preceptor must have at least one year of experience in the area of advanced practice relevant to the student’s clinical focus.

3. Students may spend no more than two semesters with an individual preceptor without faculty approval.

4. Students should have no more than two preceptors during a single clinical course without faculty approval.

5. A nurse practitioner preceptor is highly suggested for at least one semester during the program.

**Criteria for Selection of NE Preceptors:**
- All preceptors working with NE students in NRS 537 must have a Master’s degree in nursing and a specialization in a specific patient population, i.e., gerontology, critical care, etc.
- All preceptors working with NE students in NRS 539 must have a Master’s degree or higher and have completed courses work in nursing education or been a nurse educator for more than 1 year.
- Preceptors must be willing to devote time to the students during the semester;
- Preceptor must have a minimum of one year as a nurse in their patient population specialty and/or nursing education whether academic or clinical.

**Criteria for Orientation of Graduate Student Preceptors**

- Clinical faculty will meet with new preceptors before or during the first week of the semester to:
  - Discuss the roles and responsibilities for the preceptors, students and faculty (see documentation forms)
  - Set up and review common programs used in the program such as Typhon, email, etc.
  - Establish whether the preceptor training has been completed or needs to be completed
  - Ensure that an Affiliation Agreement or MOU has been completed
  - Obtain a signed Student Preceptor Information and Agreement Form
  - To discuss course objectives, course assignments and to answer questions
  - To plan in the event the assigned preceptor may be absent then to designate either an equivalent preceptor for the day or to assign provisions of the assignment

- Existing preceptors will receive summary of the course outline or the complete course outline describing the learning objectives, assignments and other essential components

- Preceptor will provide the following required information on the Student-Preceptor Information and Agreement Record
  - Active clear RN, APRN, Furnishing License (if needed) number and expiration date issued by the BRN
  - and DEA license number and expiration date issued by the BRN
  - Special Certifications
  - Years of experience in this setting or specialty
  - Current CV/resume optional
Criteria for Placement of Graduate Nurse Practitioner Students
1. Once a preceptor and facility have agreed to precept a student, the faculty and student must ensure that an Affiliation Agreement is in place with the University, facility, and preceptor.
2. a. If an Affiliation Agreement needs to be developed, the faculty and student will work with the Department Clinical Coordinator to initiate the Agreement.
3. b. Once the Affiliation Agreement has been fully executed, the student is responsible for completing any required documents or modules for the facility or practice site by the designated time frame.

Exhibits: *Optional forms, illustrations, references*
1) Preceptor, Student and Faculty Roles
2) Student Preceptor Information and Agreement (revised 4/2021)
Policy on Student Emergency Contact Information

PURPOSE: Emergency Contact (EC) information is needed to facilitate and/or notify appropriate parties in the event of an emergency.

BACKGROUND: Context for the policy provisions i.e. BRN regulations, Chancellor's Office, Accreditation
Emergency Contact information is needed to facilitate care and/or notification to appropriate parties in the event of an emergency.

POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
The MSN Committee is responsible for implementing and monitoring adherence to the procedure.

The Clinical Coordinator will ensure that all students have completed the emergency contact information prior to the start of each semester.

Applicability: All nursing students on the Camarillo and Goleta campuses

Definition: Emergency Contact (EC): To contact someone of your choice in case of an emergency on your behalf. This could be used if you had a medical emergency and someone needed to be notified.

Policy Text:
Students are required to update or validate a designated emergency contact in Castle Branch January 1, May 1, and August 1. This designated contact person will be the individual of the student’s choice to notify in case of an emergency on their behalf. The information will only be used if a medical emergency occurred, and someone needed to be notified.

The EC information provided to the nursing department is confidential and will only be used by nursing department to provide notification in the event of a personal or campus emergency.

The emergency contact information will be accessible on Dropbox to faculty at the beginning of every term an Emergency Contact Policy.
Information provided through the CSUCI emergency contact site will adhere to University policy and can be found on [https://www.csuci.edu/housing/apply/update-emergency-contacts.htm](https://www.csuci.edu/housing/apply/update-emergency-contacts.htm). It is highly encouraged students update this information whenever there is a change in the EC.

1. Update Emergency Contacts at CSUCI  
   a. [https://www.csuci.edu/housing/apply/update-emergency-contacts.htm](https://www.csuci.edu/housing/apply/update-emergency-contacts.htm)
2. Update Emergency Contacts at Nursing Department  
   a. [https://www.castlebranch.com/sign-in](https://www.castlebranch.com/sign-in)
3. EC information for each student includes:  
   a. Primary and secondary contacts  
   b. First and last name of each emergency contact  
   c. Relationship of each contact to student  
   d. The phone number and address of each emergency contact  
   e. If more than one EC provided add order of contact – primary contact will be notified first. If the department is not able to contact the primary EC nursing faculty or staff will contact the secondary ED.  
   f. Information will be stored on a secure site that is easily accessible by nursing faculty and staff.  
   g. Clinical faculty will have access to the information on Dropbox.
This information will be extremely important in the event of an accident or medical emergency. Please be sure to complete all information, sign and date this form.

STUDENT
Last Name: ___________________________ First Name: _______________ MI: ____________
Personal E-mail: ____________________________________________
Home Phone: ________________________ Cell Phone: ________________________
Address (Street, City, State, Zip Code): ____________________________

PRIMARY EMERGENCY CONTACT
Last Name: ___________________________ First Name: _______________ MI: ____________
Relationship: __________________________________________
Personal E-mail: ____________________________________________
Home Phone: ________________________ Cell Phone: ________________________ Work Phone: ______________
Address (Street, City, State, Zip Code): ____________________________

SECONDARY EMERGENCY CONTACT
Last Name: ___________________________ First Name: _______________ MI: ____________
Relationship: __________________________________________
Personal E-mail: ____________________________________________
Home Phone: ________________________ Cell Phone: ________________________ Work Phone: ______________
Address (Street, City, State, Zip Code): ____________________________

Preferred Local Hospital: ____________________________
Health Insurance Provider Name: ____________________________

Comments - include any special medical or personal information you would want to emergency care provider to know, or special contact information:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Student Signature: ___________________________ Date: ____________________

Nursing Department – Rev. 02/02/2022
POLICY:
Accountability Management accountability for policy compliance, implement and monitoring (committee or personnel)
The compliance of this policy lies with nursing faculty and University Admissions.

PURPOSE: Goals and objectives of the policy.
Following, the Just Culture model of event reporting (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6716556/ used in most acute care settings this policy aims to provide guidance to faculty and students when there is an adverse event occurrence or error in the clinical setting.

BACKGROUND:
An adverse event is defined as “harm from medical care rather than underlying disease.” (https://psnet.ahrq.gov/primers/primer/34/Adverse-Events-Near-Misses-and-Errors). The majority of adverse events are preventable and result from error; failure to follow established policies and procedures; or negligence. It is important the faculty are made aware of any adverse event occurrence so that the cause(s) for the occurrence can be identified and ameliorated if possible.

DEFINITION (S):
Adverse event: preventable error that results in harm.

Error: act of omission or commission that exposes a patient to potential harm. Near miss: preventable error that does not result in harm.

Sentinel event: event that reaches the patient and results in death, permanent harm, or severe temporary harm and intervention to sustain life.

POLICY:
1. Students are expected to report any error, near miss, or adverse event in which they are involved immediately to their preceptor and clinical faculty. Failure to report an error or event immediately may result in clinical course failure.
2. Clinical faculty must report the occurrence to the course lead, MSN director, and the program chair within 12 hours of occurrence by text or phone call.
3. In addition to reporting the incident as described in this policy, the agency’s incident
reporting policy must be followed at all times.
a. MSN Family Nurse Practitioner (FNP) students are required to maintain registered nurse
malpractice insurance therefore must comply with related incident reporting as required.
4. The student involved in the incident will be counseled by the clinical faculty. Mental Health
Counseling should include referral to Campus Counseling and Psychological Services
(CAPS) or the Campus Assessment, Response and Evaluation (CARE) team if the incident
resulted in significant patient harm.
5. The clinical faculty will be responsible for submission of the Student Nurse Adverse Event
Reporting Form to the course lead, MSN director, and program chair that describes the
event and any contributing factors. The completed form must be submitted within 24 hours of
event occurrence.
6. Upon receipt of the form, the program chair will notify the MSN Committee chair to call an
ad hoc meeting of the committee.
7. The MSN Committee will review the form and as appropriate, interview the student and/or
faculty involved.
8. Based on review of the form and, when conducted, interviews, the MSN Committee will
recommend appropriate action regarding the students’ status in the program.
9. If course failure is recommended, the chair of the MSN Affairs Committee will notify the
program chair, MSN director/FNP Coordinator, clinical faculty. The FNP Coordinator will
inform the student about related any committee decisions.
10. If this is the student’s first course failure, the student must schedule a meeting with the
MSN program director and the Nursing Department chair to discuss continued progression in
the MSN Nursing Department.
11. If this is the student’s second course failure, the student will be dismissed from the
program.
12. The completed form will become part of the permanent student file.

Exhibits
Exhibit A: MSN Student Adverse Event Reporting Form.
MSN Student Adverse Event Reporting Form

This form is to be completed by the clinical instructor and MSN student for all adverse events or near misses. The original completed form is to be submitted to the Nursing Department Chair. Be sure to never include the name of the patient or the facility where the incident occurred. Always use a generic term as listed below. Please note: This form does not take the place of the clinical agency reporting process. All adverse events or near misses must be reported via the usual reporting mechanism of the clinical agency.

Date of Incident: __________________________

Student Name: __________________________

Type of Incident:

<table>
<thead>
<tr>
<th>Medication</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of med:</td>
<td></td>
</tr>
</tbody>
</table>

| Documentation |                         |

| Safety |                         |

| Asepsis |                         |

| Other (please clarify) |                         |

Type of Facility (hospital, public health agency, etc.): __________________________

Course Name and Number: __________________________

Semester in which student is enrolled: __________________________

Faculty completing form: __________________________

Patient Age

Male ___ Female___ Non-Binary___

Brief Description of Incident:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Contributing Factors:

________________________________________________________________________
________________________________________________________________________
System Contributing Factors:


Patient Condition Post Incident:


How event was managed:


Recommendations:


Nursing Department Discussion and Follow-up Type of Error:

Human Behavior - console
At Risk Behavior - coach
Reckless Behavior – discipline

Follow-up Recommendations:


MS Committee Chair:_______________________ Date____
Policy on MSN Professional Liability Insurance Requirement

PURPOSE: The objective of this policy is to provide MSN Family Nurse Practitioner (FNP) and Post-Master’s FNP students with information regarding professional liability insurance requirements needed while enrolled in nurse practitioner practicum courses.

BACKGROUND: Many organizations and practitioner that work with FNP students require that students provide their own professional liability insurance.

POLICY:
Accountability: The MSN Committee is responsible for implementing and monitoring adherence to the policy.

Policy Text:
All students enrolled in FNP specialty courses are required to purchase an individual professional liability policy through Nurses Service Organization (NSO).

Procedure:
1. Apply online at www.NSO.com
2. The cost is approximately $105/year for Licensed Registered Nurses in the student role. These costs are subject to change.
3. Coverage applies if you are participating in an activity in another state
4. Coverage includes "Good Samaritan" coverage which applies to volunteer activities performed within the student’s scope of practice.
5. Upload your copy of your insurance card to Castlebranch. You may be asked to provide a copy of your insurance card to your preceptor or the clinical facility.
6. You will need to renew your malpractice insurance yearly.
Purpose: This policy provides guidance for the management of Family Practice MSN students CCS Examination.

Background:

Policy: The Nursing Department chair, MSN Director, faculty, and BSN Committee are accountable for policy compliance, implementation, and monitoring.

Applicability: Students actively enrolled into the MSN Nurse Practitioner Track Program.

Definition(s) Define unfamiliar terms as needed

Policy Text:

1. Detailed Description of CSE
   The Comprehensive Clinical Simulated Exam (CCSE) is based on a standardized client and simulates a clinical encounter with a client. There are three major parts to the exam.

   A. Part I. Ability to gather subjective and objective data from client.
      a. A standardized client (faculty or trained actor) who presents to the provider (the student) with a complaint. The provider may receive one of a variety of chief complaints however all standardized clients with the same complaint will use the same script. The student will be observed and graded by a second FNP faculty. The whole experience will simulate a clinical and will be video/audiotaped.

      b. The student will work-up the “client” as they would in the clinical setting, proceeding to do a pertinent history and physical, and making a preliminary assessment/diagnosis and plan.

   B. Part II. Ability to provide a logical assessment and plan for a client.
      a. The student, using only the appropriate reference material(s), will provide a write-up of the visit using the standard SOAP format, including a problem list, a health maintenance list, and a medication list.
b. The write-up may have an assessment/diagnosis and plan that may differ from the original oral preliminary assessment and plan, made in the exam room, because the student consulted with their reference books and materials.

C. Part III. Ability to apply theoretical principles to client care
The student must address, in a succinct, scholarly discussion and using APA format with necessary referencing the following:
   a. Discussion of a theoretical perspective that is logically applied in the care of the particular client seen in the encounter. Consideration must be given for the client’s ethnicity, culture, socioeconomic status and pertinent demographic characteristics in detailing how the theoretical perspective is an appropriate choice.
   b. Discussion of the ethical/policy and economic principles to consider in the care of the particular client seen in the encounter.

2. Grading Procedure: Students must pass each section to successfully complete the entire culminating exam. Grading for Parts I and II will be based on a percentage that will be translated into a “pass/fail” grade. One faculty member will evaluate it. The second evaluation is final. This is an individual exam, the use of published references is acceptable and encouraged, but students must not consult other persons in the preparation of parts II and III.

   Part I. At the end of the oral part of the exam (Part I) the faculty observer will review with the student his/her ability to have gathered the pertinent subjective and objective information based on a standardized scoring system. If a student does not pass part I, he/she will be offered the opportunity to retake the exam at another time, by seeing another “patient”.

   Parts II and III. The three documents: SOAP note, and two scholarly papers will be uploaded into LMS within the timeframe established by the FNP Director. Parts II & III will be graded according to the standardized criteria established by the FNP faculty.

3. Format:

   Part II. Please include a title page with your name. Must be presents in a succinct, scholarly manner using correct clinical terms and descriptions. Must document references/resourced using APA format and be limited to three (3) pages, excluding references.

   Part III. Must be presented in a succinct, scholarly manner utilizing APA format with the appropriate documentation of references used.

4. Reporting of Results:

   In the event of a failing grade (SOAP), a second faculty will read unmarked copies of parts II (SOAP) and/or III. Failures in part II will only be read by FNP faculty but failures in part III may be read by other graduate faculty. Papers are graded Pass/Fail. The second evaluation is final. The results of the exam will be e-mailed
to individual students. If a student fails part II and/or III they may, after consultation with faculty, rewrite parts II and/or III within one week of the consultation.