



Channel Islands  
CALIFORNIA STATE UNIVERSITY

# **Master of Science in Nursing (MSN)**

Student Handbook

Fall 2020

## 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 program. This handbook is available on the

Nursing Program web page at <http://nursing.csuci.edu>. This handbook may be made available 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 program web page

## TABLE OF CONTENTS

<b>PURPOSE OF THE STUDENT HANDBOOK .....</b>	<b>2</b>
<b>SCHOOL OF NURSING APPROVAL/ACCREDITATION .....</b>	<b>5</b>
<b>MESSAGE FROM THE DEAN OF EXTENDED UNIVERSITY .....</b>	<b>6</b>
<b>MESSAGE FROM THE NURSING DEPARTMENT CHAIR.....</b>	<b>7</b>
<b>ABOUT CSUCI AND THE NURSING DEPARTMENT .....</b>	<b>8</b>
CSU CHANNEL ISLANDS MISSION STATEMENT .....	8
NURSING DEPARTMENT MISSION STATEMENT .....	8
NURSING DEPARTMENT PHILOSOPHY OF NURSING .....	8
NURSING DEPARTMENT'S PHILOSOPHY OF NURSING EDUCATION .....	9
GOALS OF THE MASTER'S PROGRAM .....	10
ORGANIZATIONAL FRAMEWORK CSU CHANNEL ISLANDS.....	17
<b>STUDENT INFORMATION .....</b>	<b>18</b>
GENERAL CATALOG .....	18
GENERAL ADMISSION INFORMATION.....	18
ADMISSIONS POLICY .....	18
FINANCIAL AID AND SCHOLARSHIPS OFFICE .....	19
MSN NURSING PROGRAM CURRICULUM .....	20
FAMILY NURSE PRACTITIONER PROGRESSION POLICY .....	23
ADVISEMENT FOR NURSING MAJORS.....	24
ADMISSION AND ENROLLMENT REQUIREMENTS .....	24
COURSE REGISTRATION .....	24
MYCI.....	25
CONTINUOUS REGISTRATION REQUIREMENT .....	25
ADDING/DROPPING COURSES.....	25
GRADING POLICIES .....	25
GRIEVANCES AND COMPLAINTS .....	28
LEAVE OF ABSENCE POLICY .....	32
EXITING THE PROGRAM.....	32
ACADEMIC HONESTY .....	32
ELIGIBILITY FOR A MASTER'S DEGREE .....	33
<b>SPECIFIC REQUIREMENTS FOR NURSING COURSES .....</b>	<b>35</b>
CSU CHANNEL ISLANDS NURSING WRITING GUIDE .....	35
PHYSICAL REQUIREMENTS FOR THE CLINICAL EXPERIENCE.....	35
HANDHELD MOBILE DEVICE/SOFTWARE REQUIREMENTS: .....	36
<b>GUIDELINES FOR PROFESSIONAL IMAGE IN THE CLINICAL SETTING .....</b>	<b>37</b>
ON CAMPUS INTENSIVE SESSIONS.....	38
NURSING SIMULATION LABORATORY .....	39
OTHER POLICIES.....	39
ATTENDANCE/PATIENT ABANDONMENT .....	41
CLINICAL REQUIREMENTS .....	41

<b>PROFESSIONAL STANDARDS OF PRACTICE .....</b>	<b>43</b>
ANA CODE OF ETHICS FOR NURSES.....	43
CA BOARD OF REGISTERED NURSING STANDARDS OF COMPETENT PERFORMANCE.....	44
<b>MSN ROADMAPS .....</b>	<b>48</b>
MASTER OF SCIENCE IN NURSING FAMILY NURSE PRACTITIONER FULL-TIME ENROLLMENT ADVISING ROADMAP.....	48
MASTER OF SCIENCE IN NURSING FAMILY NURSE PRACTITIONER PART-TIME ENROLLMENT ADVISING ROADMAP ....	48
MASTER OF SCIENCE IN NURSE EDUCATOR FULL-TIME ENROLLMENT ADVISING ROADMAP .....	48
MASTER OF SCIENCE IN NURSE EDUCATOR PART-TIME ENROLLMENT ADVISING ROADMAP.....	48
POST MASTER’S CERTIFICATE PROGRAM - FAMILY NURSE PRACTITIONER ADVISING ROADMAP .....	48
POST MASTER’S CERTIFICATE PROGRAM, NURSE EDUCATOR ADVISING ROADMAP .....	48
<b>CAMPUS RESOURCES.....</b>	<b>49</b>
INFORMATION TECHNOLOGY.....	49
<b>NURSING DEPARTMENT POLICIES .....</b>	<b>50</b>
PASS FAIL GRADING POLICY .....	50
POLICY ON PRECEPTOR-BASED CLINICAL LABS.....	50
POLICY ON CLINICAL EVALUATION TOOLS .....	52
SIMULATION LAB STUDENT RECORDINGS: SECUREMENT AND DISPOSITION.....	53
ONLINE AND/OR BLENDED TEACHING POLICY .....	56
POLICY ON HIPPA PRIVACY RULE TRAINING FOR STUDENTS.....	57
POLICY ON IMPAIRED STUDENT .....	63
CLINICAL ABSENCE POLICY .....	69
STUDENT CONTINUANCE IN THE PROGRAM, AND REPEATING A CLASS .....	70
SUBMISSION OF CLINICAL AND MEDICAL DOCUMENTS .....	72
PREGNANT STUDENT POLICY.....	73
POLICY ON SOCIAL MEDIA .....	74
POLICY ON INCIDENT REPORTING .....	77
POLICY ON STUDENT EMERGENCY CONTACT .....	79
<b>FORMS &amp; OTHER DOCUMENTS.....</b>	<b>80</b>
REQUEST FOR LETTER OF RECOMMENDATION .....	80
CLINICAL REQUIREMENTS (CASTLEBRANCH) .....	82

## SCHOOL OF NURSING APPROVAL/ACCREDITATION

The nursing program is approved by the WASC Senior College and University Commission.

Western Association of Schools and Colleges (WASC)  
985 Atlantic Ave. Suite 100  
Alameda, Ca 94501  
(510) 748-9001  
<https://www.wscuc.org/>

The program is pending national accreditation through the Commission on Collegiate Nursing Education (CCNE), the national accreditation agency of the American Association of Colleges of Nursing (AACN).

Commission on Collegiate Nursing Education (CCNE)  
655 K Street NW Suite 750  
Washington, DC 20001  
(202) 887- 6791  
<http://www.aacn.nche.edu>

## MESSAGE FROM THE DEAN OF EXTENDED UNIVERSITY



### Welcome to the Master of Science in Nursing Program!

Graduate education is central to the academic mission of the university, and our faculty is on the cutting-edge of knowledge. Graduate education plays a crucial role in the economic, intellectual, and cultural environment of our region, nation, and the world. At CSUCI, we focus on what you as an individual need to expand your knowledge and to be successful in your career trajectory. You are in one of the most trustworthy professions, where you focus on patient care and making a difference in the lives of families. Nurses top every Gallup poll (Americans' Ratings of Honesty and Ethical Standards in Professions) as the Most Respected Professionals in America. You are the future of healthcare, and you are in great hands with our faculty and staff here at CSUCI. CSUCI has an innovative curriculum and a nationally renowned faculty to support your career pursuits. I encourage you to put to use every resource the university has to offer. Take advantage of your time here. Work hard and enjoy yourself.

*Osman Özturğut*

## MESSAGE FROM THE NURSING DEPARTMENT CHAIR



Welcome to the CSUCI Master of Science in Nursing program.

We, the faculty and staff of the Department, are so excited that you have made the decision to join our program. We are looking forward to working with you over the next couple of years as you pursue your educational goals. We are dedicated to making sure your learning needs are met by providing you with the supports you will need to be successful. Please do not hesitate to contact any of your faculty to ask for assistance and please access any campus resources you need.

Though this is a fully online program we are committed to making you feel like a member of the CSUCI learning community. The program is designed to keep you engaged with your faculty, your classmates, and the university. There will be opportunities for you to engage with us and your peers outside the classroom. We hope that you are all able to feel connected to us even though our opportunities to meet face-to-face will be limited. Through the interactions with us and the broader CSUCI community, we hope that you will become a proud member of our community.

I look forward to getting to know each of you and I welcome you to our community.

Warmly,



## ABOUT CSUCI AND THE NURSING DEPARTMENT

### 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 STATEMENT

CI Nursing Program Faculty and Staff aim to prepare students for professional practice; to continuously grow and meet demands of the community and profession through educational and inclusive excellence.

### NURSING DEPARTMENT PHILOSOPHY OF NURSING

The Master of Science in Nursing, Family Nurse Practitioner (MSN-FNP) and Master of Science in Nursing, Nurse Educator (MSN-NE) builds on baccalaureate level of nursing practice. Upon completion of the MSN-FNP, students will be prepared to make clinical decisions at the advanced practice registered nurse (APRN) level and deliver holistic care that improves quality of life of diverse populations. The Post Master's Certificate, Family Nurse Practitioner program provides interested masters-prepared nurses with the opportunity to take FNP specialty courses needed to qualify for APRN licensure and sit for the credential exam. Graduates of the MSN-NE will be prepared to assume either faculty or agency-based nurse educator positions. The Board of Registered Nursing (BRN) requires faculty teaching in nursing programs to have a graduate degree with courses in nursing education while most agencies preferentially hire master's prepared nurse educators. Graduates of the program will also be prepared to sit for the Certified Nurse Educator credential. As with the Post Master's Certificate, Family Nurse Practitioner program, the Post Master's Certificate, Nurse Educator pathway provides master's prepared nurses with the course work needed to assume a position in nursing education.

The program fosters dynamic collaboration between faculty and students, surrounding the client at the center. The CSU Channel Islands mission is supported by Four Pillars: Integrative, Community Engagement, Multicultural, and International. The Four Pillars mean that students will learn within and across disciplines through an integrative approach, receive an education that emphasizes experiential and service learning, and will develop multicultural and international perspectives related to the meeting the healthcare needs of local communities. This program will extend the institution's mission through the integrative application of theory and research from all parts of the nursing spectrum and prepare students to apply evidenced-based knowledge in practice and translate it into patient-centered care.



---

## NURSING DEPARTMENT'S 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 program, as part of the university, resides in a community populated by people from multiple ethnic and cultural backgrounds. A goal of the nursing program 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.

---

## GOALS OF THE MASTER'S PROGRAM

The Master of Science in Nursing (MSN) 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 and/or 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.

## PROGRAMS OFFERED

---

- MSN, Family Nurse Practitioner
- MSN, Nurse Educator
- Post-Master's Certificates: Family Nurse Practitioner
- Post-Master's Certificate: Nurse Educator

Each of our programs have full-time and part-time options with MSN completion in 2-3 years and certificate options in 1-2 years. Program roadmaps can be found on the [MSN Program](#) webpage

## PROGRAM LEARNING OUTCOMES

---

The program outcomes criteria for the master's program have been developed to establish the parameters of measurable indicators of student success.

At the completion of the program the student will:

1. Graduates will utilize knowledge from sciences, humanities, and nursing to promote health, prevent disease, advocate and collaborate with interprofessional colleagues to provide health care to individuals, families, groups, and populations.
2. Graduates will use organizational and systems frameworks; ethical decision-making; and effective working relationships to identify and address current healthcare and educational issues.
3. Graduates will effectively integrate and communicate using written, oral, and electronic methods with clients, colleagues, and other stakeholders.
4. Graduates will utilize leadership models and ethical decision-making skills to improve the quality of care provided in a variety of settings.
5. Graduates will translate, integrate, apply evidence-based practice, and principles of quality improvement in a variety of care settings and educational settings.
6. Graduates will integrate doctrines of cultural congruence into nursing interventions when working with individuals, families, groups and/or populations.

## STUDENT LEARNING OUTCOMES

---

At the completion of the program the student will:

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.

### AACN MASTER'S EDUCATION ESSENTIALS

---

The following represent the core content for all master's programs in nursing and "provide curricular elements and framework, regardless of focus, major, or intended practice setting" (AACN, 2011, p.3). The reference and the link for these essentials are provided for you at the end of the document. These essentials "delineate the knowledge and skills that all nurses prepared in a master's nursing program acquire" (AACN, 2011, p.4), and you should see evidence of these essentials in each of the courses in the MSN-NP curriculum. Below are brief descriptions of each essential and can be found on pages 4 and 5 of the Essentials document. In the document, you will find a deeper discussion of each of them, as well as expected student outcomes and sample content.

#### **Essential I: Background for Practice from Sciences and Humanities**

Recognizes that the master's prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.

#### **Essential II: Organizational and Systems Leadership**

Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.

#### **Essential III: Quality Improvement and Safety**

Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.

#### **Essential IV: Translating and Integrating Scholarship into Practice**

Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates

results.

#### **Essential V: Informatics and Healthcare Technologies**

Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.

#### **Essential VI: Health Policy and Advocacy**

Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.

#### **Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes**

Recognizes that the master's prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.

#### **Essential VIII: Clinical Prevention and Population Health for Improving Health**

Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.

#### **Essential IX: Master's-Level Nursing Practice**

Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences health outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components. American Association of Colleges of Nursing (AACN) (2011). [The Essentials of Master's Education in Nursing](#)

### **NATIONAL ORGANIZATION OF NURSE PRACTITIONER FACULTY (NONPF) NURSE PRACTITIONER CORE COMPETENCIES**

---

#### **Scientific Foundation Competencies**

1. Critically analyzes data and evidence for improving advanced nursing practice.
2. Integrates knowledge from the humanities and sciences within the context of nursing science.
3. Translates research and other forms of knowledge to improve practice processes and outcomes.
4. Develops new practice approaches based on the integration of research, theory, and practice knowledge.

#### **Leadership Competencies**

1. Assumes complex and advanced leadership roles to initiate and guide change.
2. Provides leadership to foster collaboration with multiple
3. stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care.
4. Demonstrates leadership that uses critical and reflective thinking.
5. Advocates for improved access, quality and cost effective health care.
6. Advances practice through the development and implementation of innovations incorporating principles of change.
7. Communicates practice knowledge effectively, both orally and in writing.
8. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus

### **Quality Competencies**

1. Uses best available evidence to continuously improve quality of clinical practice.
2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care.
3. Evaluates how organizational structure, care processes, financing, marketing, and policy decisions impact the quality of health care.
4. Applies skills in peer review to promote a culture of excellence.
5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality

### **Practice Inquiry Competencies**

1. Provides leadership in the translation of new knowledge into practice.
2. Generates knowledge from clinical practice to improve practice and patient outcomes.
3. Applies clinical investigative skills to improve health outcomes.
4. Leads practice inquiry, individually or in partnership with others.
5. Disseminates evidence from inquiry to diverse audiences using multiple modalities.
6. Analyzes clinical guidelines for individualized application into practice

### **Technology and Information Literacy Competencies**

1. Integrates appropriate technologies for knowledge management to improve health care.
2. Translates technical and scientific health information appropriate for various users' needs.
  - a. Assesses the patient's and caregiver's educational needs to provide effective, personalized health care.
  - b. Coaches the patient and caregiver for positive behavioral change.
3. Demonstrates information literacy skills in complex decision making.

4. Contributes to the design of clinical information systems that promote safe, quality and cost effective care.
5. Uses technology systems that capture data on variables for the evaluation of nursing care.

### **Policy Competencies**

1. Demonstrates an understanding of the interdependence of policy and practice.
2. Advocates for ethical policies that promote access, equity, quality, and cost.
3. Analyzes ethical, legal, and social factors influencing policy development.
4. Contributes in the development of health policy.
5. Analyzes the implications of health policy across disciplines.
6. Evaluates the impact of globalization on health care policy development.
7. Advocates for policies for safe and healthy practice environments.

### **Health Delivery Systems Competencies**

1. Applies knowledge of organizational practices and complex systems to improve health care delivery.
2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
3. Minimizes risk to patients and providers at the individual and systems level.
4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
6. Analyzes organizational structure, functions and resources to improve the delivery of care.
7. Collaborates in planning for transitions across the continuum of care.

### **Ethics Competencies**

1. Integrates ethical principles in decision making.
2. Evaluates the ethical consequences of decisions.
3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

### **Independent Practice Competencies**

1. Functions as a licensed independent practitioner.
2. Demonstrates the highest level of accountability for professional practice.
3. Practices independently managing previously diagnosed and undiagnosed patients.

- a. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care.
  - b. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
  - c. Employs screening and diagnostic strategies in the development of diagnoses.
  - d. Prescribes medications within scope of practice.
  - e. Manages the health/illness status of patients and families over time.
4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
    - a. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.
    - b. Creates a climate of patient- centered care to include confidentiality, Privacy, comfort, emotional support, mutual trust, and respect.
    - c. Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care.
    - d. Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.
    - e. Develops strategies to prevent one's own personal biases from interfering with delivery of quality care.
    - f. Addresses cultural, spiritual, and ethnic influences that potentially create conflict among individuals, families, staff and caregivers.
  5. Educates professional and lay caregivers to provide culturally and spiritually sensitive, appropriate care
  6. Collaborates with both professional and other caregivers to achieve optimal care outcomes.
  7. Coordinates transitional care services in and across care settings.
  8. Participates in the development, use, and evaluation of professional standards and evidence-based care.

## NLN NURSE EDUCATOR CORE COMPETENCIES

---

### **Competency I: Facilitate Learning**

Nurse educators are responsible for creating an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes.

### **Competency II: Facilitate Learner Development and Socialization**

Nurse educators recognize their responsibility for helping students develop as nurses and integrate the values and behaviors expected of those who fulfill that role.

### **Competency III: Use Assessment and Evaluation Strategies**

Nurse educators use a variety of strategies to assess and evaluate student learning in classroom, laboratory and clinical settings, as well as in all domains of learning.

**Competency IV: Participate in Curriculum Design and Evaluation of Program Outcomes**

Nurse educators are responsible for formulating program outcomes and designing curricula that reflect contemporary health care trends and prepare graduates to function effectively in the health care environment.

**Competency V: Function as a Change Agent and Leader**

Nurse educators function as change agents and leaders to create a preferred future for nursing education and nursing practice.

**Competency VI: Pursue Continuous Quality Improvements in the Nurse Educator Role**

Nurse educators recognize that their role is multidimensional and that an ongoing commitment to develop and maintain competence in the role is essential.

**Competency VII: Engage in Scholarship**

Nurse educators acknowledge that scholarship is an integral component of the faculty role, and that teaching itself is a scholarly activity.

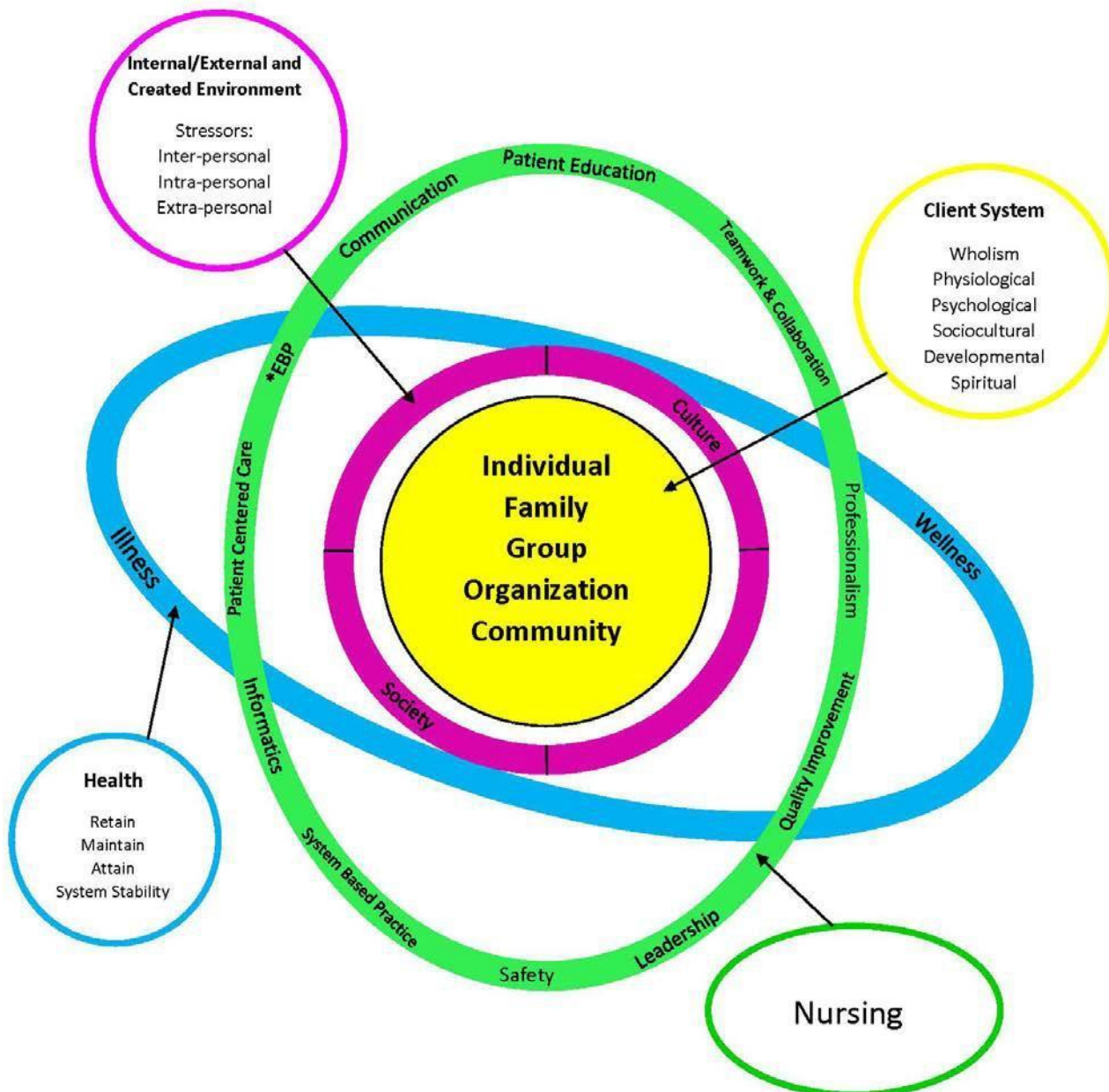
**Competency VIII: Function Within the Educational Environment**

Nurse educators are knowledgeable about the educational environment within which they practice and recognize how political, institutional, social, and economic forces impact their role.

(Reprinted from: Christensen, L.S and Simmons, L.E. (2020). *The Scope of Practice for Academic Nurse Educators and Academic Clinical Nurse Educators (3rd ed.)*. Washington, DC: National League for Nursing.)



## ORGANIZATIONAL FRAMEWORK CSU CHANNEL ISLANDS



**\*Evidence Based Practice**

## STUDENT INFORMATION

---

### GENERAL CATALOG

Information about admissions requirements, registration, student activities and academic policies is available in the [university catalog](#). 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](http://www.csuci.edu) website under which they were admitted for future reference.

---

### GENERAL ADMISSION INFORMATION

The University functions on the semester system with two fifteen week semesters (fall and spring) and two summer sessions (five week). The MSN and Post-Master's Certificate programs function on two 8-week sessions per academic semester and two eight-week summer sessions.

---

### ADMISSIONS POLICY

Contact the [University Admissions](#) office for information on university admissions. Program costs and other program information can be found at [Extended University](#). Specific information about admission to the MSN or Post-Master's Certificate Program is found on the [Nursing program](#) website.

---

### MSN ADMISSIONS PROCEDURE:

1. All MSN applicants must submit a completed application with supplemental documentation to the Nursing CAS admissions portal by the required deadline.
2. Applications for admission to the university must be submitted via CalStateApply by posted deadlines.
3. All completed applications will be reviewed and ranked.
4. The top qualified candidates will be invited for a face to face panel interview.
5. Final selection of applicants to the MSN program are based on initial ranking and ranking based on the face-to-face interview.

---

### MSN ADMISSION REQUIREMENTS

Minimum requirements for admission to the MSN program are outlined below:

1. Applicants must have graduated with a Bachelor of Science from a regionally accredited university with a nursing program that is accredited by either the Commission on Collegiate Nursing Education (CCNE) or the Commission for Nursing Education Accreditation (CNEA). Foreign nurses will be considered for admission pending official evaluation of their transcripts, • Minimum overall GPA of 2.5 or

- better and minimum GPA of 3.0 in the last sixty semester units completed,
2. Valid RN licensure,
  3. Minimum of one-year relevant full-time clinical experience within the last 3 years.
  4. For international students: an official TOEFL score report with a minimum score of 550 on the Paper-Based test, 213 on the Computer-Based test, and 80 on the Internet-Based test or an official IELTS score report with a minimum of 6.5.
  5. Applicants must submit official transcripts of prior academic work.
  6. Two letters of recommendation dated within one-year of application (one academic and one professional).
  7. Professional resume/curriculum vitae (CV).
  8. 500-word statement explain academic and professional goals.
  9. Virtual interviews are required.
  10. It is recommended that applicants have completed the following undergraduate courses within the last five years: biostatistics, physical assessment with a lab, pathophysiology, and research.

\*Students who have completed the Bachelor of Science in Nursing program at CSU Channel Islands who meet the above criteria will be conditionally admitted for a period of up to 3 years after the completion of their degree.

Please note that meeting all of the admission requirements does not guarantee acceptance. The number of students who can be admitted is limited.

---

#### 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 [www.fafsa.edu.gov](http://www.fafsa.edu.gov). 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 grants, loans and scholarships.

---

#### 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>

---

#### MSN NURSING PROGRAM CURRICULUM

The approved curriculum for each emphasis in the master's and post-master's program can be found by clicking on the program name below:

[MSN Family Nurse Practitioner](#)

[MSN Nurse Educator](#)

[Post Master's Certificate – Family Nurse Practitioner](#)

[Post Master's Certificate – Nurse Educator](#)

---

#### PLAN OF STUDY

The Master of Science in Nursing (MSN) is designed to prepare Advanced Practice Registered Nurses (APRNs) to provide primary and acute care services to diverse populations across the healthcare continuum and Nurse Educators to educate students in an academic and/or 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 interprofessional collaboration in the delivery of client-centered, culturally appropriate care with the aim of increasing the health of the population.

---

#### NURSING CORE - 24 UNITS

All students in the MSN program must complete the nursing core courses. These courses are taken concurrently with specialty courses in each emphasis.

- [NRS 500 - Advanced Health Assessment and Promotion](#) **Units: 3**
- [NRS 502 - Advanced Pathophysiology](#) **Units: 3**
- [NRS 504 - Advanced Pharmacology](#) **Units: 3**
- [NRS 506 - Theoretical Frameworks and Professional Roles](#) **Units: 3**
- [NRS 508 - Evidence-based Practice and Quality Improvement](#) **Units: 3**
- [NRS 510 - Healthcare Policy and Nursing Issues](#) **Units: 3**
- [NRS 512 - Informatics in Advanced Nursing Practice](#) **Units: 3**
- [NRS 540 - Culminating Experience](#) **Units: Variable 1-3**

Family Nurse Practitioner students must successfully pass the APEA 3Ps exam after completion of NRS 500, NRS 502, and NRS 504 to progress to courses in the FNP emphasis.

---

#### FAMILY NURSE PRACTITIONER EMPHASIS - 21 UNITS

The Master of Science, Nursing (MSN) is designed to prepare Advanced Practice Registered Nurses (APRNs) to provide primary and acute care services to diverse populations across the healthcare continuum and Nurse Educators to educate students in an academic and/or 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 interprofessional collaboration in the delivery of client-centered, culturally appropriate care with the aim of increasing the health of the population.

Completion of courses in the Family Nurse Practitioner (FNP) Emphasis will provide students with the necessary clinical hours, and requisite knowledge and skills, to sit for national certification as a FNP and for licensure in California.

- [NRS 520 - Advanced Concepts of Health Across the Lifespan I](#) **Units: 2**
- [NRS 522 - Advanced Concepts of Reproductive and Women's Health](#) **Units: 2**
- [NRS 524 - Advanced Concepts of Pediatric Primary Care](#) **Units: 2**
- [NRS 525 - Laboratory and Clinical Procedures for Advanced Practice](#) **Units: 1**
- [NRS 526 - Advanced Concepts of Health Across the Lifespan II](#) **Units: 2**
- [NRS 527 - Clinical Practicum: Advanced Concepts of Health Across the Lifespan](#) **Units: Variable 1-3**

#### **NURSE EDUCATOR EMPHASIS - 15 UNITS**

---

The Master of Science, Nursing (MSN) Nurse Educator Emphasis is designed to educate students in an academic and/or 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 interprofessional collaboration in the delivery of client-centered, culturally-appropriate care with the aim of increasing the health of the population.

- [NRS 532 - Concepts of Adult Learning](#) **Units: 3**
- [NRS 534 - Curriculum and Program Development and Evaluation for Nurse Educators](#) **Units: 3**
- [NRS 536 - Innovations in Teaching and Learning](#) **Units: 3**
- [NRS 537 - Nurse Educator Practicum I](#) **Units: Variable 1-**
- [NRS 539 - Nurse Educator Practicum II](#) **Units: Variable 1-3**

Roadmaps for full-time and part-time program plans are located in the appendix.

#### **POST MASTER'S CERTIFICATE, FAMILY NURSE PRACTITIONER 21-30 UNITS**

---

The Post Master's Certificate, FNP program provides interested master's-prepared nurses with the opportunity to take FNP specialty courses needed to qualify for APRN licensure and sit for the credential exam. Students in this program who did not take Advanced Health Assessment, Advanced Pathophysiology, and/or Advanced Pharmacology as part of their initial master's degree program will be required to take these courses before taking FNP specialty courses.

If NRS 500, NRS 502, and NRS 504 were not previously completed, these courses must be taken at CSU Channel Islands to earn the Family Nurse Practitioner Certificate. This could amount to an additional 3-9 units that will need to be completed.

Post-Master's Certificate, Family Nurse Practitioner students must successfully pass the APEA 3Ps exam before beginning coursework in the FNP emphasis.

---

#### POST MASTER'S CERTIFICATE, NURSE EDUCATOR 15 UNITS

---

Nurse Educator program provides master's-prepared nurses with the course work needed to assume a position in nursing education. Graduates have the course work and practica experience necessary to qualify to take the Certified Nurse Educator exam.

---

#### PRACTICA COURSE CREDIT HOURS

Each unit of work for practica courses equates to 45 hours of clinical work. FNP student need a total of 540 hours of clinical work to be eligible for licensure and national certification. Nurse Educator students need 270 qualify to graduate.

---

#### FNP PRACTICA HOUR REQUIREMENTS

---

Students will be placed in an appropriate clinical setting and precepted by a qualified healthcare provider. 540 total clinical hours are required for the graduation. 405 hours in a primary-care focused, general medicine setting that includes older adults\*. 92 hours with pediatric patients including infants through 21 years of age. 43 hours in Women's Health (8 of the 48 hours must be in OB clinical rotation). Students will have no more than 100 hours in a specialty practice.

---

#### NURSE EDUCATOR PRACTICA HOUR REQUIREMENTS

---

Nurse Educator students are required to complete 270 practica hours. The first practica course (135 hours) must be in a clinical setting working with an identified patient population. The second practica course (135 hours) must be working with a nurse educator either in a clinical or academic setting. Students will identify the locations for the clinical and academic practica and work with the Clinical Placement Coordinator and faculty for the course to identify preceptors for each practica. The faculty of record for the course will supervise the student. The Clinical Placement Coordinator will assure that MOUs and required documentation are completed.

---

#### GRADUATE WRITING ASSESSMENT REQUIREMENT

Prior to the awarding of the degree, writing proficiency is demonstrated by completion of NRS 508 with a grade of B or higher.

---

#### UNIVERSITY WRITING & MULTILITERACY CENTER

---

At the [Writing & Multiliteracy Center](#) (WMC), undergraduate and graduate students, faculty, and staff are provided with a range of free support services and programs that

help them think creatively, express ideas, and communicate information through written, oral, visual, and digital formats. The WMC location is on the second floor, Broome Library however virtual appointments are available. The student writing guide with discipline specific guidelines is located on the Library's website home page.

---

## CULMINATING EXPERIENCE

### Project-Final paper:

The written paper demonstrates integration of advanced nursing concepts in a written document such as an evidence-based practice project, clinical protocol, or analysis paper. The final paper demonstrates achievement of advanced practice nurse competencies. The final paper is a way for students to demonstrate application of research to practice and will consist of 20-25 pages (maximum of 30 pages). The paper must include an abstract summarizing the final project, an introduction, significance of the nursing issue or problem, a review and synthesis of current research, and offer a conclusion or recommendation(s). The paper will be evaluated on originality, demonstration of critical and independent thinking, and mastery of advanced practice nursing concepts.

Successful completion of the culminating experience includes:

1. A written paper of 20-25 pages (maximum of 30 pages);
2. Oral Presentation
3. Reflective statements in your ePortfolio about how you achieved the expected program learning outcomes.

The Culminating Experience project options have been designed as broadly as possible, so that the student has maximum flexibility in choosing a topic and format that works best for him or her.

Students may choose from:

1. An analysis paper: This paper requires you to take a strong position and defend it via use of the existing literature. Position papers may be used to support programmatic changes or to advocate for policy change.
2. Evidence-based practice project: This format will also include a literature review about the intervention that is being proposed, and a detailed methods section focused on implementation and evaluation of the intervention.
3. A clinical protocol: Assuring that quality, patient-centered care is provided is dependent on the development of evidence-based clinical protocols. This format requires you to complete a literature review and a detailed clinical protocol including assessment and evaluation criteria.
4. Development of an educational program: This type of paper will provide a literature review about the general topic, as well as a review of existing educational programs that address the topic. A rationale for why a new educational program is needed is required. The paper will also include details regarding implementation and evaluation of the educational program.



All Family Nurse Practitioner students are required to complete the three core foundational courses below before progressing to the FNP emphasis specialty courses:

- [NRS 500 - Advanced Health Assessment and Promotion](#) Units: 3
- [NRS 502 - Advanced Pathophysiology](#) Units: 3
- [NRS 504 - Advanced Pharmacology](#) Units: 3

Courses must be passed with a “C” or better\*. After completing the courses listed above, all FNP students (both MSN and Post Master’s Certificate) are required to successfully pass the FNP Track 3Ps Exam to progress into FNP emphasis specialty courses.

\* All graduate students must maintain GPA of 3.0 to continue in the program.

---

#### FNP EMPHASIS APEA 3PS QUALIFYING EXAM:

Students will be required to register for the 3Ps qualifying exam through Advanced Practice Education Associates (APEA). Students must complete the exam with a passing score of 67% or better. Students will have 2 attempts to pass this exam. Students who are unsuccessful in passing the qualifying exam on the second attempt will be given the opportunity to remediate/repeat the three foundational courses (remediation plan will be based on areas of weakness identified by individual 3P qualifying exam results). Information regarding the qualifying exam can be found on the following website: <https://www.apea.com/3p-exam-blueprint>

Students who are required to remediate/repeat individual core foundational courses will do so once the courses are offered again. These students may continue to take other core MSN courses outside of the FNP didactic and clinical courses or opt to transfer to the Nurse Educator Track.

---

#### ADVISEMENT FOR NURSING MAJORS

All newly-admitted MSN students are required to attend an MSN Orientation Session. Students will not be allowed to enroll until they have attended such a session. All MSN students are assigned an academic advisor after attending the MSN Orientation. FNP students will work with the FNP Program Director, Dr. Aaron McColpin [aaron.mcolpin@csuci.edu](mailto:aaron.mcolpin@csuci.edu)

---

#### ADMISSION AND ENROLLMENT REQUIREMENTS

The MSN program is offered through Extended University. Once you have been admitted to the program submit you will need to notify Extended University of your intent to enroll and pay the \$500 deposit. The \$500 deposit guarantees you a place in the program and is credited to your first semester tuition after you enroll in courses.

---

#### COURSE REGISTRATION

Registration takes place on the web at [myci.csuci.edu](http://myci.csuci.edu). This is the University’s student



information system. Students can register for classes once the registration period for the semester begins. You will register for all the courses you are planning on taking during the semester (i.e. both 8-week sessions) before the posted deadline to register. The Schedule of Classes is published online prior to the start of each registration period.

---

#### MYCI

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.

---

#### CONTINUOUS REGISTRATION REQUIREMENT

A student, who is not on an Academic Leave of Absence, must register every semester until graduating. If all other course requirements have been satisfied, a student should register in one unit of [NRS 540](#) to satisfy the requirement.

---

#### ADDING/DROPPING COURSES

Refer to the Extended University website for information regarding registration dates, drop dates, payment due dates, and information about refunds. The information can be found on the [website](#) in a document titled "Important Registration Information".

---

#### GRADING POLICIES

A minimum grade point average of 3.0 (B) is required across all letter-graded courses taken to satisfy requirements for the graduate degree. Programs may implement stricter grade requirements

---

#### GRADING POLICY

1. "ABCD" is the default grading system.
2. Although it is not required, individual faculty members may add a "+" or "-" to any grade except "F." By adding a "+" to a grade, the grade points earned increase by 0.3 (except an A+ shall still be 4.0 grade points). By adding a "-" to a grade, the grade points earned shall decrease by 0.3. Course syllabi are required to state clearly whether "+/-" grading is used.
3. A student may take a course "CR/NC" if the course is designated as allowing "CR/NC" grading in the course approval process.
4. The decision on how many units of courses may be taken "CR/NC" and which courses can be taken "CR/NC" is left up to each individual program.
5. Course syllabi shall include a discussion of the instructor's grading policy.
6. The level of student performance and course grades are determined by instructor of record.

---

#### GRADING SYMBOLS ASSIGNED

**RP (REPORT IN PROGRESS)** The “RP” symbol is used in connection with courses that extend beyond one academic term. It indicates that work is in progress, but that the assignment of a final grade must await completion of additional work. Work is to be completed within one year except for graduate degree theses.

**W (Withdrawal)** The “W” symbol indicates that the student was permitted to withdraw from the course after the third week of the semester with the approval of the instructor and appropriate campus officials. It carries no connotation of quality of student performance and is not used in calculating grade point average. See withdrawal procedures in the catalog.

**WU (Withdrawal Unauthorized)** The “WU” symbol indicates that an enrolled student did not formally withdraw from the course according to University policy and also failed to complete course requirements. It is used when, in the opinion of the instructor, completed assignments or course activities or both were insufficient to make normal evaluation of academic performance possible. For purposes of grade point average, this symbol is equivalent to an “F.”

### INCOMPLETE GRADE POLICY

---

An “Incomplete Authorized” (I) signifies that a portion of required course work has not been completed and evaluated in the prescribed time period due to unforeseen, but fully justified reasons and that there is still a possibility of earning credit. After the request of the student for the “I” grade, the faculty member makes the decision as to whether or not an “I” grade is issued. If an “I” grade is issued, the faculty member determines what conditions must be met for the “I” to be removed. However, to protect both students and faculty, it is necessary that there be a written record of the conditions. Thus, if there is a later disagreement, or if the instructor is no longer available, the “I” can still be handled by the program. The request for an incomplete form which is to be used for writing the conditions mentioned above is available in the program administrative support offices. This form shall include a statement of:

1. The work not completed and the percentage that each uncompleted assignment will count toward the final grade; and
2. The final grade the instructor will assign if the course requirements are not completed within one calendar year, or a shorter period as specified on the form, immediately following the term in which the “I” was assigned, without respect to continuous enrollment of the student during this period.

A copy of the agreement is to be given to the student and a copy is to be retained in the program office. The completed forms are filed in the program office. The awarding of an “I” requires prior consultation with the student. The student has the responsibility to confer with the faculty member to learn the requirements for removal of the “I”. At that time the student is given a copy of the form detailing the conditions to be met. An “I” must be made up within the time period set forth by the instructor with a maximum allowable time span of one calendar year immediately following the end of the term in which it was assigned. This limitation prevails whether or not the student maintains continuous enrollment. Failure to complete the assigned

work will result in an “I” being converted to an “IC” symbol, unless the faculty member assigns a specific letter grade at the time the Incomplete is assigned, which would replace the “I” in the student’s record at the end of the calendar year deadline. The “IC” is counted as a failing grade (equivalent to an “F”) for grade point average and progress point computation. Although the one-year maximum for incomplete grades will be the general university policy, Executive Order 171 specifies that exceptions can be made in special cases, such as military service and serious health problems. An extension of an “I” grade in any one course shall be allowed only one time, for a maximum total extension of one year. An “I” may not be changed to a passing grade as the result of re-enrolling in the course. In cases where repetition of the course is appropriate, the student will be assigned a withdrawal or failing grade rather than an “I” grade. A failing grade is not an acceptable reason to request or grant an incomplete grade.

If a student subsequently completes a course that is recorded as incomplete on a transcript from another institution, it is the student’s responsibility to submit a corrected official transcript and advise Records & Registration that he/she wishes to receive credit.

---

## PROBATION, DISQUALIFICATION, REINSTATEMENT

### Academic Probation

---

A graduate student in either conditionally classified or classified standing will be subject to academic probation if, after attempting 12 or more graded units, the cumulative graduate GPA at CI falls below 3.0. Probationary students will be advised of their status via letter or e-mail. The communication will include conditions for removal from probation and the circumstances that would lead to disqualification. All probationary students are required to seek academic advising no later than the second week of the following semester. Students shall be removed from academic probation once they have received such advising and cumulative graduate GPA at CI is at least 3.0 or higher.

### ACADEMIC DISQUALIFICATION

---

A graduate student on academic probation will be academically disqualified when the student’s GPA in all units attempted or in all units attempted at CI falls below 2.50. Students cannot be placed on probation for the first time at CI and be disqualified in the same semester; however, students who have previously been on probation at CI and fall below the 2.5 GPA listed above will be academically disqualified, even if the probation and disqualification semesters are nonconsecutive. A student may appeal disqualification no later than three weeks before the start of the semester following the disqualification. Appeals should be made to the office of the Provost or designee. Appeals will be decided by the Academic Appeals Board. Typical grounds for a successful appeal include significant improvement towards meeting the GPA

requirements and/or extraordinary circumstances beyond the student's control, as determined by the Academic Appeals Board. A successful petition of appeal for disqualification will result in the student remaining on academic probation. Students who appeal unsuccessfully will need to apply for reinstatement as specified in the Policy on Reinstatement if they wish to continue at CI.

---

### REINSTATEMENT

In order to be considered for reinstatement to CI, a disqualified student must demonstrate academic ability by completing additional coursework. All classes taken must be applicable for degree credit at CI. After eliminating the grade-point deficiency, the student may petition the Academic Appeals Board for reinstatement. The student must submit the petition for reinstatement no later than three weeks before the beginning of the semester that the student intends to return. The Academic Appeals Board will only consider the petition for reinstatement of a student who has remained outside of the university for at least one regular (Fall or Spring) semester after his or her dismissal. A student who is disqualified, reinstated, and becomes disqualified a second time will not be granted a second reinstatement.

---

### GRADUATE / POSTBACCALAUREATE STUDENT COURSE REPEAT

A graduate/post baccalaureate student may take a course a total of 2 times with no grade forgiveness. All grades will be calculated into the GPA. Unit credit for the courses will be granted only once unless courses are repeatable as specified in the catalog.

---

### GRADE APPEALS

Each student has the right to appeal the final course grade, but only the final course grade. Appeals are limited to situations in which the student believes the grade was "prejudicially", "capriciously", or "arbitrarily" assigned. The appeal must be initiated within the first seven weeks of the first regular semester after assignment of the grade. The complete policy is available at <http://senate.csuci.edu/policies/2011-2012/grade-appeals.pdf>. Additional information about appeals is available at <http://www.csuci.edu/academics/appeals/grade-appeal.htm>.

---

### GRIEVANCES AND COMPLAINTS

If a problem or complaint arises, students have the right to have the matter investigated as noted in the Student Judicial Process as described in the CSUCI Catalog. Most problems involve misunderstanding, human error or lack of information about established rules. To address such problems, it is often best to speak directly to the faculty or staff involved. If the matter is not clarified or resolved, it may be useful to talk next with the Chair of the Nursing Program. If not resolved at that level the Chair of the Program can direct students to the Student Judicial Process as stated in the CSUCI catalog. The next step involves a complaint to the Judicial Affairs (Officer of the Dean of Student Life), the Judicial Officer investigates the complaint or allegation. If

there is evidence to substantiate the charge, the Judicial Officer will initiate the student disciplinary process. (See complete policy below).

**Accountability**

The Vice President for Student Affairs and Judicial Affairs in the Office of Student Development

**Applicability**

All registered students at CSUCI

**Definition(s)**

Adjudicated –To hear, determine, and settle a case by judicial procedure.

Preponderance –Evidence presented which establishes a majority (51%) in favor of one side or the other.

Adverse-witness –A witness for the University testifying against the accused student.

Informal Disposition –Resolution without formal trial-type hearing usually by mutual agreement between the student and the Judicial Officer, including the sanctions to be imposed, if any.

Where possible, informal procedures are implemented, emphasizing the personal growth and development of the student. Where formal procedures are utilized, the system is designed to provide a prompt, fair, impartial hearing and resolution of the matter. When a complaint is received by Judicial Affairs (the Office of Student Development), the Judicial Officer investigates the complaint or allegation. If there is evidence to substantiate the charge, the Judicial Officer will initiate the student disciplinary process. Judicial Affairs notifies the student(s) in writing of the alleged misconduct and directs the student(s) to schedule a meeting with the Judicial Officer.

At the initial meeting, the student is advised of his/her rights and informed of the evidence supporting the charges. The student is provided with an opportunity to respond and to openly and honestly discuss the incident and possible resolutions of the case. Students involved in criminal violations are subject to remedies through the criminal justice system (e.g. University Police Department and the Ventura County District Attorney's office) as well as Student Disciplinary action. In the event that a resolution cannot be reached through the informal process the Judicial Officer shall proceed to a formal process.

The following rights shall be explained to the accused prior to the commencement of any formal judicial hearing:

- All parties shall be afforded reasonable written notice, at least five (5) working days prior to the hearing. A letter sent to the address listed in the registrar's records shall constitute full and adequate notice. Written notice shall include:
  1. A statement of the time, place and nature of the proceeding.
  2. A statement of the nature of the case and of the jurisdiction under which it is

to be adjudicated.

3. A brief statement of matters asserted. Thereafter, upon request by the accused, a more detailed and definitive statement will be furnished prior to the commencement of any formal hearing.

- An accused student may choose to have an advisor present at the hearings.
- All hearings will be conducted on the basis that the accused is not in violation until the preponderance of evidence proves otherwise.
- All hearings shall be private and closed only to persons directly involved in the matters being adjudicated. The accused may request that a hearing be open to others. The University shall consider such a request in light of the best interests of all persons involved and of the university.
- The accused may inspect any evidence presented in support of the charges. Evidence may be presented in defense of the accused.
- The accused may hear and question adverse witnesses.
- The accused shall not be forced to present self-incriminating evidence; however, the University is not required to postpone disciplinary proceedings pending the outcome of any criminal prosecution.
- The determination of "in violation" or "not in violation" as charged, shall be based solely on the evidence presented at the hearing.
- The determination from a formal hearing and any sanctions assigned and the Student's Appeal Rights shall be furnished in writing to the accused within five (5) working days following the hearing.
- The enrollment status of the accused shall remain unchanged pending the University's final decision in the matter except in cases where the President or President's designee determines that the safety, health, or general welfare of a student or the university is involved.

The Judicial Officer and/or the Hearing Officer may recommend any disciplinary action listed below with any appropriate modifications as well as any of the penalties listed under informal disposition.

#### Verbal Disciplinary Warning

A verbal disciplinary warning is an official warning that the student's behavior is in violation of the CSUCI Student Code of Conduct. The verbal warning is the least severe of all the sanctions. If the student is found to be in violation of a second charge, subsequent action may be more severe.

#### Written Disciplinary Warning

A written disciplinary warning is an official reprimand for violations of specified University policies or campus regulations. The written warning is placed in the student's file for a specified period of time. The warning is then removed if the student does not commit any further violations during the specified time. If the student is found to be in violation of a second charge, subsequent action may be more severe.

### Disciplinary Probation

Disciplinary probation status is designed for a specific length of time extending from a month to a number of semesters. Restrictive conditions may be imposed and vary according to the severity of the offense. Restrictive conditions include, but are not limited to, the following: loss of good standing, which may become a matter of record; the loss of eligibility to receive any university award, scholarship, loan, honorary recognition, or initiation into any local or national organizations; denial of the privilege to occupy a position of leadership or responsibility in a university student organization, publication, or activity, and loss of privilege to represent the university in a public capacity.

While under disciplinary probation, the student is given a chance to show the capability and willingness to live in accordance with the university rules. However, if the student is found to be in violation through another action while on disciplinary probation, more serious consideration will be given to suspension or expulsion from the university.

### Suspension\*

A student involved in an offense warranting consideration of action more serious than disciplinary probation, or one involved in repeated misconduct may face suspension. Suspension is the separation of the student from the university for a specified period of time, after which the student is eligible to return, provided that the student has complied with any conditions imposed as part of the suspension. The length of the suspension period shall be definite and may extend from days to a number of semesters. During suspension, a student may not attend class.

### Expulsion\*

Expulsion is the permanent separation of the student from student status from the university. When an offense is of such severity that the university will not allow the student to re-enroll, the student will be expelled. When a student has been expelled from the university for disciplinary reasons, a full report will be placed in the permanent record of the individual concerned.

\* These sanctions may be deferred, i.e., the student may be permitted to remain in school on condition that he/she waives the right to a formal hearing for a subsequent violation. Sanctions may be imposed separately or in combination with other disciplinary action.

### Restitution

Reimbursement, either monetary or by service(s) performed to, or misappropriation of University property, or property belonging to campus community members.

### Special Assignment

Assignment of costs, labor, duties or other responsibilities, (e.g., apology, research

paper, community services etc.), which are appropriate to the violations. Special assignments may be imposed at any level of sanctions.

---

#### LEAVE OF ABSENCE POLICY

Students who are in good academic standing may take a one semester leave of absence from CSU Channel Islands and will be considered continuing students and do not need to take any action in the Office of Administration and Records. If the student misses one semester they must register for the next semester to avoid missing two consecutive semesters unless they have applied for a leave of absence (LOA) by completing an Academic Leave Form available in the Office of Admissions and Records. If the student is absent for two consecutive semesters without a LOA, this will be considered a break in matriculation that would necessitate reapplying for admissions, paying another application fee, and lead to a new catalog date and, potentially further academic requirements.

The nursing program 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 program LOA form and schedule an exit interview with the Chair of the Nursing Program

---

#### EXITING THE PROGRAM

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

---

#### 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 STATEMENT



To ensure the integrity of the academic process, CSU Channel Islands University Nursing Program endorses the importance of academic honesty as defined by the University Catalog and Nursing Student Guidebook. Therefore, in an effort to detect and prevent plagiarism, faculty members may use a tool called Turnitin or Safe Assign to compare a student's work with multiple sources. The tool itself does not determine whether or not a paper has been plagiarized. Instead, that judgment must be made by the individual faculty member.\*

\* Adopted from Turnitin syllabus statement from Texas Women's University (2014)

---

## ELIGIBILITY FOR A MASTER'S DEGREE

To be eligible for the Master's Degree, the candidate shall have completed the following minimum requirements:

1. **Requirements for the Degree**
  - a. The completion of a specified course of study approved by the Curriculum Committee at CI and/or CCTC.
  - b. A minimum of 30 semester units of approved graduate work. (SP05-28)
  - c. Completion of graduate work in no more than 7 years. (SP05-23)
  - d. At least 21 semester units must be completed in residence as indicated in the University Catalog.
  - e. Seventy percent of the degree must be at 500 and 600 level. When undergraduate 400-level courses are taken, extra work must be completed. (SP05-24)
  - f. No more than 6 semester units shall be allowed for a thesis, project, or comprehensive exam preparation. (SP05-25)
2. **Advancement to Candidacy** - A candidate who has been granted classified standing will be advanced to candidacy after a request is filed for graduation by the student and an affirmative recommendation is made by the graduate advisor. An overall minimum grade point average is 3.0 (B) and a minimum grade point average of 3.0 for all study plan course work is required. A course in which no letter grade is assigned, shall not be used in computing the grade point average. Other scholastic requirements, professional standards, passing of examinations, and other qualifications may be required.
3. Satisfactory completion of a thesis, project, or comprehensive examination.

---

## APPLICATION FOR GRADUATION

The Application for Degree and Diploma and filing fee entitles students to an official graduation evaluation of progress toward meeting graduate degree requirements. Students qualifying for graduation by the designated graduation date may participate in the annual commencement ceremony. Commencement participation does not constitute proof of the successful completion of degree requirements. The application for degree is available on the Records & Registration webpage, and at the Enrollment

Center in Sage Hall. Application deadlines are published in the Schedule of Classes and on the CI Web site. Failure to meet the deadline for the term in which you wish to graduate will delay your graduation.

### KEY STEPS TO GRADUATION

1. Submit the completed Application for Degree and Diploma, and any approved course substitutions, and program work up sheet to the Enrollment Center Cashier (Sage Hall) and pay the appropriate fees for graduation application by the published deadline for the term in which you wish to graduate. The graduation fee covers the cost of the graduation check, the diploma, and participation in the annual commencement ceremony. (The fee does not include cap and gown purchase, which is handled separately by The Cove Bookstore). The Cashier's Office sends the Application for Degree and Diploma and certification of payment to Graduation Evaluations in the Records and Registration office.
2. The graduation evaluation confirms remaining requirements for graduation. The actual date of graduation will be the end of the semester in which all requirements have been met.
3. Participate in the commencement ceremony held at the end of the spring semester if eligible (see policy on Commencement Participation.) Participation is optional.
4. Students not completing the requirements by the expected date of graduation must submit a change of graduation term form to the Enrollment Center, Sage Hall, and will be charged a \$15 graduation re-file fee.
5. After all degree requirements have been completed and Graduation Evaluators can verify their completion, a diploma is normally available within four months of final clearance. Proof of graduation is available by requesting official transcripts from Records & Registration.
6. Students may visit the Records & Registration website for more information regarding graduation at: <http://www.csuci.edu/records-registration/GradFAQ.htm>.
7. For some programs, the program academic advisor will coordinate the graduation evaluation process.

### PARTICIPATING IN COMMENCEMENT CEREMONIES

Students who have completed degree or credential requirements the previous summer or fall terms are eligible to participate in the ceremony along with those who plan to complete their work in the spring or subsequent summer term (that ends by August 30th) and have filed an Application for Degree and Diploma. Names of graduates and degree candidates who have applied for graduation by the published deadline will be published in the Commencement Program unless a student has requested otherwise by filing a Withhold Directory Information (FERPA) form with Records & Registration.

## SPECIFIC REQUIREMENTS FOR NURSING COURSES

### CSU CHANNEL ISLANDS NURSING WRITING GUIDE

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

CI Writing Guide Web Link:

<http://library.csuci.edu/research/cicampuswritingguide2.pdf>

### 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:

<http://owl.english.purdue.edu/owl/resource/560/01/>.

Another recommended template for APA style papers is available through Reference Point Software at <http://referencepointsoftware.com/>

### 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 Program. If at any time throughout the nursing program 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 Chair.

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 pounds) 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. Stopping/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 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

---

#### HANDHELD MOBILE DEVICE/SOFTWARE REQUIREMENTS:

A handheld mobile device is required so that you have a reference source for medication prescribing, ordering/interpretation of diagnostic tests, and nurse practitioner standardized procedures and medical management. 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 purchase, subscription, and download of required and recommended software will be provided within the individual courses.

---

## GUIDELINES FOR PROFESSIONAL IMAGE IN THE CLINICAL SETTING

---

### STUDENT DRESS CODE

MSN students are not required to wear uniforms during their clinical rotations. Students are required to wear professional business attire with the approved white lab coat over the clothing. Name badges should be visible on lab coats. 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. Comfortable closed toed shoes must be worn in the clinical setting. Please adhere to your clinical setting policy for hair and other dress requirements.

Please see the following webpage for examples of professional business versus business casual attire: <https://purduecco.files.wordpress.com/2014/04/business-casual-vs-professional-dress-blog.png>

### LAB COAT WITH PROGRAM PATCH AND STUDENT NAME TAG:

---

MSN students are required to wear an Official program lab coat with the Official program patch and the official program name pin from a pre-determined company (the nursing program will contact you prior to your clinical rotation for order instructions). It is recommended that the student obtain two name pins in case one is lost or damaged. Both lab coat and name tag are to be purchased from On Duty Uniforms (4572 Telephone Rd. #920 Ventura, CA 93003). Your name tag will appear as follows:

Jane Doe

Student Nurse Practitioner

Jane Doe

Student Nurse Educator

---

### RECOMMENDED FNP EQUIPMENT

MSN FNP track students are required to have a stethoscope of their choice. It is also recommended that they consider purchasing their own ophthalmoscope and otoscope however this is not a requirement.

---

## ON CAMPUS INTENSIVE SESSIONS

All MSN students are required to attend a one-week intensive before the start of the first semester of the program. The one-week intensive is comprised of the NRS 500 Advanced Health Assessment course. Here is a sample schedule of the week:

During your first On-Campus Intensive (OCI), you will spend five days at the State University California Channel Islands (CSUCI) campus. The course is divided over your 1<sup>st</sup> week long on campus intensive. You will attend four hours of lecture and 3 hours of clinical lab for the first 5 days. In addition, you will have open lab time to practice the skills acquired in class and participate the final clinical head to toe assessment on the last OCI day. The schedule for the OCI week is as follows:

### Monday: Day One

- o 7:30-8:50 am      Student Check-in
- o 9-11:50 am      NRS 500 Lecture
- o 12-1 pm      Lunch Break
- o 1-2:50 pm      NRS 500 Lecture
- o 3:30-5:20 pm      Clinical Lab #1
- o 5:30-7:30 pm      Clinical Lab #2

### Tuesday: Day Two

- o 8-8:50am      Guest Lecturer
- o 9-11:50 am      NRS 500 Lecture
- o 12-1 pm      Lunch Break
- o 1-2:50 pm      NRS 500 Lecture
- o 3:30-5:20 pm      Clinical Lab #2
- o 5:30-7:30 pm      Clinical Lab #1

### Wednesday: Day Three

- o 8-8:50am      Guest Lecturer
- o 9-11:50 am      NRS 500 Lecture
- o 12-1 pm      Lunch Break
- o 1-2:50 pm      NRS 500 Lecture
- o 3:30-5:20 pm      Clinical Lab #1
- o 5:30-7:30 pm      Clinical Lab #2

### Thursday: Day Four

- o 8-8:50am      Guest Lecturer
- o 9-11:50 am      NRS 500 Lecture
- o 12-1 pm      Lunch Break
- o 1-2:50 pm      NRS 500 Lecture

- o 3:30-5:20 pm            Clinical Lab #1
  - o 5:30-7:30 pm            Clinical Lab #2
- Friday: Day Five
- o 8-8:50am                Guest Lecturer
  - o 9-11:50 am              NRS 500 Lecture
  - o 12:30-5:30 pm          Open Lab (Must sign up in advance for lab time)
  - o 7- 8 pm                  White Coat Ceremony
- Saturday: Day Six
- o Final Head to Toe Physical Assessment (Times and location TBA)

All FNP students will attend a 2<sup>nd</sup> one-week intensive during the summer after they have completed the first semester of the FNP specialty courses. The schedule for the 2<sup>nd</sup> intensive will be similar to that of the previous intensive but will end on Friday instead of Saturday. The 2<sup>nd</sup> one-week intensive will focus on FNP skills such as suturing, conducting a pelvic exam, and other clinical procedures.

---

#### NURSING SIMULATION LABORATORY

The Camarillo campus nursing simulation laboratory is located in Manzanita Hall 1230. Simulation laboratory sessions will be assigned during the two campus intensive sessions to practice physical assessment and common office procedure skills for the nurse practitioner. Students must wear business casual attire and a lab coat over while practicing in the simulation lab. Comfortable closed toed shoes must be worn in the simulation laboratory (no tennis shoes, flip flops, etc.).

---

#### OTHER POLICIES

Electronics: Cell phones may be used with applications for investigating diseases, disorders, medications, procedures and lab tests.

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 program.

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.



---

## ATTENDANCE/PATIENT ABANDONMENT

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

- Create an agreed upon clinical schedule with their assigned preceptor and submitted to the clinical faculty prior to the first clinical day.
- Clinical absences and changes to the agreed upon schedule must be communicated to the clinical faculty in writing via email within 48 hours of the clinical absence.
- Excessive absences or abandonment of the assigned clinical rotation are grounds for dismissal from the program.

---

## CLINICAL REQUIREMENTS

---

### 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. The Nursing Department uses Castlebranch to manage student and faculty clinical requirements such as background checks, drug screens, immunization records, and CPR certification.



### 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](https://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](mailto: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](mailto: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](mailto:servicedesk.cu@castlebranch.com).

**Hours of Operation:**

Monday-Friday 8 a.m. - 8 p.m. Eastern Time Sunday 10:00 a.m. - 6:30 p.m. Eastern Time

---

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, through individual and collective effort establishes, maintains and improves the ethical environment of the work setting and conditions of employment that are conducive to safe quality 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.

---

### **CA BOARD OF REGISTERED NURSING STANDARDS OF COMPETENT PERFORMANCE**

#### **1443.5. Standards of Competent Performance**

A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process, as follows:

- 1) Formulates a nursing diagnosis through observation of the client's physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.
- 2) Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.
- 3) Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client's health needs.
- 4) Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.
- 5) Evaluates the effectiveness of the care plan through observation of the client's physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and health team members, and modifies the plan as needed.
- 6) Acts as the client's advocate, as circumstances require, by initiating action to improve health care or to change decisions or activities which are against the interests or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided.

Authority cited: Section 2715, Business and Professions Code. Reference: Sections 2725 and

2761, (effective 7/17/85).

**2725. Legislative intent; Practice of nursing defined**

- 1) In amending this section at the 1973–74 session, the Legislature recognizes that nursing is a dynamic field, the practice of which is continually evolving to include more sophisticated patient care activities. It is the intent of the Legislature in amending this section at the 1973–74 session to provide clear legal authority for functions and procedures that have common acceptance and usage. It is the legislative intent also to recognize the existence of overlapping functions between physicians and registered nurses and to permit additional sharing of functions within organized health care systems that provide for collaboration between physicians and registered nurses. These organized health care systems include, but are not limited to, health facilities licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code, clinics, home health agencies, physicians' offices, and public or community health services.
- 2) The practice of nursing within the meaning of this chapter means those functions, including basic health care, that help people cope with difficulties in daily living that are associated with their actual or potential health or illness problems or the treatment thereof, and that require a substantial amount of scientific knowledge or technical skill, including all of the following:
  - a. Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patients; and the performance of disease prevention and restorative measures.
  - b. Direct and indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety Code.
  - c. The performance of skin tests, immunization techniques, and the withdrawal of human blood from veins and arteries.
  - d. Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and (A) determination of whether the signs, symptoms, reactions, behavior, or general appearance exhibit abnormal characteristics, and (B) implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedures, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.
- 3) "Standardized procedures," as used in this section, means either of the following:
  - a. Policies and protocols developed by a health facility licensed pursuant to

Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code through collaboration among administrators and health professionals including physicians and nurses.

- b. Policies and protocols developed through collaboration among administrators and health professionals, including physicians and nurses, by an organized health care system which is not a health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code.
  - c. The policies and protocols shall be subject to any guidelines for standardized procedures that the Division of Licensing of the Medical Board of California and the Board of Registered Nursing may jointly promulgate. If promulgated, the guidelines shall be administered by the Board of Registered Nursing.
  - d. Nothing in this section shall be construed to require approval of standardized procedures by the Division of Licensing of the Medical Board of California, or by the Board of Registered Nursing.
- 4) No state agency other than the board may define or interpret the practice of nursing for those licensed pursuant to the provisions of this chapter, or develop standardized procedures or protocols pursuant to this chapter, unless so authorized by this chapter, or specifically required under state or federal statute. "State agency" includes every state office, officer, department, division, bureau, board, authority, and commission.

(Added Stats 1939 ch 807 § 2. Amended Stats 1968 ch 348 § 1; Stats 1974 ch 355 § 1, ch 913 § 1; Stats 1978 ch 1161 § 172; Stats 1980 ch 406 § 1; Stats 1989 ch 886 § 52; Stats 1995 ch 279 § 15 (AB 1471); Stats 1996 ch 124 § 2 (AB 3470). Amended Stats 2003 ch 640 § 5 (SB 358).)

#### **2725.1. Dispensation of drugs or devices by registered nurse**

Notwithstanding any other provision of law, a registered nurse may dispense drugs or devices upon an order by a licensed physician and surgeon if the nurse is functioning within a licensed clinic as defined in paragraphs (1) and (2) of subdivision (a) of Section 1204 of, or within a clinic as defined in subdivision (b) or (c) of Section 1206, of the Health and Safety Code.

No clinic shall employ a registered nurse to perform dispensing duties exclusively. No registered nurse shall dispense drugs in a pharmacy, keep a pharmacy, open shop, or drugstore for the retailing of drugs or poisons. No registered nurse shall compound drugs. Dispensing of drugs by a registered nurse, except a certified nurse-midwife who functions

pursuant to a standardized procedure or protocol described in Section 2746.51 or a nurse practitioner who functions pursuant to a standardized procedure described in Section 2836.1, or protocol, shall not include substances included in the California Uniform Controlled Substances Act (Division 10 (commencing with Section 11000) of the Health and Safety Code). Nothing in this section shall exempt a clinic from the provisions of Article 13 (commencing with Section 4180) of Chapter 9.

(Added Stats 1986 ch 493 § 1. Amended Stats 1999 ch 83 § 3 (SB 966) (ch 914 prevails), ch 914 § 1 (AB 1545); Stats 2001 ch 289 § 2 (SB 298).)

### **2725.3. Functions performed by unlicensed personnel**

- 1) A health facility licensed pursuant to subdivision (a), (b), or (f), of Section 1250 of the Health and Safety Code shall not assign unlicensed personnel to perform nursing functions in lieu of a registered nurse and may not allow unlicensed personnel to perform functions under the direct clinical supervision of a registered nurse that require a substantial amount of scientific knowledge and technical skills, including, but not limited to, any of the following:
  - a. Administration of medication.
  - b. Venipuncture or intravenous therapy.
  - c. Parenteral or tube feedings.
  - d. Invasive procedures including inserting nasogastric tubes, inserting catheters, or tracheal suctioning.
  - e. Assessment of patient condition.
  - f. Educating patients and their families concerning the patient's health care problems, including post discharge care.
  - g. Moderate complexity laboratory tests.
- 2) This section shall not preclude any person from performing any act or function that he or she is authorized to perform pursuant to Division 2 (commencing with Section 500) or pursuant to existing statute or regulation as of July 1, 1999.

(Added Stats 1999 ch 945 § 2) (AB 394)

## MSN ROADMAPS

MASTER OF SCIENCE IN NURSING FAMILY NURSE PRACTITIONER FULL-TIME  
ENROLLMENT ADVISING ROADMAP

[MSN FNP Full-time Roadmap](#)

MASTER OF SCIENCE IN NURSING FAMILY NURSE PRACTITIONER PART-TIME  
ENROLLMENT ADVISING ROADMAP

[MSN FNP Part-time Roadmap](#)

MASTER OF SCIENCE IN NURSE EDUCATOR FULL-TIME ENROLLMENT ADVISING  
ROADMAP

[MSN Nurse Educator Full-time Roadmap](#)

MASTER OF SCIENCE IN NURSE EDUCATOR PART-TIME ENROLLMENT ADVISING  
ROADMAP

[MSN Nurse Educator Part-time Roadmap](#)

POST MASTER'S CERTIFICATE PROGRAM - FAMILY NURSE PRACTITIONER ADVISING  
ROADMAP

[Post-Master's FNP Certificate Roadmap](#)

POST MASTER'S CERTIFICATE PROGRAM, NURSE EDUCATOR ADVISING ROADMAP

[Post Master's Nurse Educator Certificate Roadmap](#)



## CAMPUS RESOURCES

### INFORMATION TECHNOLOGY

**Technology Assistance** <https://www.csuci.edu/ti/>

Please click on a link below to visit the University site for the following topics:

[General Services](#)

[CI Learn](#)

[Wireless](#)

[Wireless Access at CI](#)

[Printing](#)

[Mobile Printing](#)

[CI Alert](#)

## NURSING DEPARTMENT POLICIES

### PASS FAIL GRADING 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:**

This policy is pending approval of the MSN curriculum affairs committee.

**POLICY:**

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

*Applicability: Specific individuals or groups to which this applies*

*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*

Students in Pass Fail clinical courses will have course assignments graded in % with 80%, the adopted program pass rate.

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 80%.

*Exhibits: Optional forms, illustrations, references*

### POLICY ON PRECEPTOR-BASED CLINICAL LABS

**PURPOSE:** To coordinate the placements and ensuring the standards for clinical placements for MSN preceptor- based clinical laboratories.

**BACKGROUND:** These courses are required for the MSN major and requirements vary depending on major emphasis (NE or FNP track).

**POLICY:** It is the policy of CSU Channel Islands Nursing Program is pending committee approval.

**Program 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, program faculty must ensure that the student acquires the content and competencies, which include those delineated in the [AACN MSN Essentials](#). Program 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. 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 MSN Clinical Coursework required for the major.

**Definition(s):**

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:**

Faculty will consult CSUCI Nursing Program Administrative Support 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.

**Criteria for placement of students:**

MSN Clinical Faculty will meet at the beginning and near the end of the planning of student clinical placements to coordinate the student and other clinical placement details. Once the clinical site commits to the clinical placement, instructors will facilitate the logistics in order to preserve the placement and ensure the student success. To the degree possible, student placements are also made considering the student's home city location. 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. Clinical Evaluation (CE) will be completed by the student and faculty as described in the respective course outlines.
2. Preceptor evaluations will serve to augment the CE and will not be used solely to render the pass-fail grade for a student
3. Students will complete the clinical site evaluation form which are reviewed by faculty regarding future placements as well as the clinical sites as appropriate
4. Preceptor CV/resume and the Student Information and Agreement form will be kept together in the Preceptor Handbook in the nursing office

(See Faculty to Student Ratio Policy)

Exhibits: *Optional forms, illustrations, references*

- 1.) Preceptor, Student and Faculty Roles
- 2.) Student Preceptor Information and Agreement

---

**POLICY ON CLINICAL EVALUATION TOOLS**

**PURPOSE:** The goals and objectives of the clinical evaluation policy is to define guidelines for tools used for evaluation of students enrolled in a clinical course in the Nursing Program.

**BACKGROUND:** This policy is currently being updated and will be made available prior to the Spring 2020 semester.

**POLICY:** The Curriculum Committee and Nursing Program provide oversight of the policy; the clinical faculty are responsible for implementation of the policy.

**Applicability:**

**Policy Text:**

Clinical Faculty are obligated to evaluate performance and provide feedback to each

student based on course learning outcomes; in addition, adopted tools identify behaviors descriptive of course learning outcomes.

---

#### **SIMULATION LAB STUDENT RECORDINGS: SECUREMENT AND DISPOSITION**

**PURPOSE:** This policy will determine how long video recordings of students will be held by the nursing department, how and where they will be stored, and who will have access to the video recordings.

**BACKGROUND:** The nursing simulation lab creates simulation recordings of students enrolled in the nursing program. MSN students) are recorded during simulated practice at the discretion of the instructor.

**POLICY:** Accountability for the policy will be the Nursing Program Director Custodian:  
Simulation Lab Instructor

#### **Purpose**

This executive order provides for the implementation of the California State University (CSU) System-wide Records/Information Retention Schedules. It is issued under the authority of Section II of the Standing Orders of the Board of Trustees, related policies adopted by the Board of Trustees, and Education Code section 89043. The objective of this executive order is to ensure compliance with legal and regulatory requirements while implementing appropriate operational best practices.

Based on Executive Order No. 1031 (February 27, 2008)

“Each campus must ensure that appropriate campus department(s) implements the records/information retention and disposition schedules for that area, including designating official campus custodian(s) for each type of record. Records/information custodians are responsible for controlling the administration of records/information in all media forms and for valuing such records/information in accordance with retention authority requirements. The retention and disposition of records/information are to conform to standards set forth within retention and disposition schedules issued in conjunction with this executive order.”

#### **Applicability:**

Nursing faculty assigned to teach lab courses that have a simulation component, which necessitates the recording of students. The simulation laboratory instructor will assist to record the students, as needed. Recording of student performance during simulation may occur in the in the main simulation room (EMS Mobile Recording Unit) or in the Simulation Control room (SimiQ) all-in-one computer and is securely attached to the wall. Recording of student performance in the lab may also occur using mobile devices and campus/program approved cloud-based services. Photographs or video may be taken when augmented reality simulations are conducted.

Definition(s) *Define unfamiliar terms as needed*

**Custodian:** The title of the campus-designated department head who maintains the official/original copy of the record/information. Retention schedules should specifically identify the campus-designated custodian responsible for identified records/information.

**Disposition:** A range of processes associated with implementing records/information retention, destruction, or transfer decisions that are documented in the records/information retention and disposition schedule or other authority.

**Media:** A general term referring to the material onto which business information has been recorded and may subsequently be used for business purposes.

**Record/Information:** Every means of recording upon any tangible thing in any form of communication or representation, including letters, words, pictures, sounds, or symbols, any combination of these or other means to engage in business, regardless of media.

This includes, but is not limited to:

- Electronic communication such as e-mail content and attachments, voicemail, instant messages, and data on a contactless integrated circuit;
- Content on web sites, PDAs, mobile devices, desktops, and servers;
- Information/data captured in various databases;
- Physical paper in files, such as memos, contracts, reports, photographs and architectural drawings;
- Licenses, certificates, registration, identification cards, or other means;
- Handwriting, typewriting, printing, photostatting, photographing, photocopying, transmitting by electronic mail or facsimile;
- Any record thereby created, regardless of the manner or media in which the record has been stored and/or created; and
- Backups of electronic information.

**Retention Authority:** The statute, code or good business practice that governs the length of time a particular record/information shall/should be kept.

**Retention Period:** The period of time that a record/information shall/should be kept. This period may be divided into:

- Active Retention Period – This is the length of time the records or information are to

remain available for immediate retrieval to meet operational needs.

- Inactive Retention Period – This is the length of time the records or information are to be retained to meet the long-term needs of the campus/CSU.

**Schedule:** A document identifying a series of unique records/information associated with a university process or function. For each record/information listed, the schedule will include a unique number/identifier, title, custodian, value, retention authority, and retention period.

The basic schedules are to be modified by each campus as needed, e.g., to specify custodians, update record/information value according to campus needs, and incorporate additional records.

#### Policy Text:

1. Video recordings taken of students while performing simulated care of patients in the simulation lab will be saved on the server, portable memory storage device, or an AV computer system designed to download all video recordings automatically, which will be securely locked. Cloud-based recordings or recordings on mobile devices will be stored on the cloud-based service or mobile device with access limited to nursing program faculty and/or staff. Recordings will not be stored on mobile devices in the lab, and will only be used temporarily to record the lab activity, and uploaded to the cloud-based service if needed. Video recordings may be transferred to a portable memory storage device to allow videos to be viewed by the nursing students and or nursing faculty inside the classroom for discussion and self-reflection. Both the students and the faculty accessing the videos must adhere to the Family Educational Rights and Privacy Act (FERPA) and videos can ONLY be viewed by those student/group of students that participated in the video. The AV recording system that stores the video recordings in Goleta campus is located inside the simulation room. The recordings are secured in a locked room.
2. Custodian: The simulation lab instructor or designee will be responsible for assuring the key to access the simulation recordings is kept securely locked. The mobile devices are secured in a locked cabinet, maintained by the simulation lab instructor or designee.
3. Retention Authority: The video recordings, cloud-recordings, a will be securely locked, and/or and maintained by the simulation lab instructor for a three-year retention period. Cloud-based recordings will be retained for three-years or less, depending upon the contract agreement and access to the cloud-based service, unless consent to retain longer has been attained such as for the purpose of accreditation or research.

4. Disposition: Once the students have graduated, the videos can be erased and destroyed from the server or portable memory storage device, or in the cloud-based service, unless consent to retain longer has been attained such as for the purpose of accreditation or research.

#### References:

- CSU Channel Islands. (October 23, 2017). What is FERPA? Family Educational Rights and Privacy Act, Retrieved from: <https://www.csuci.edu/records-registration/ferpa.htm#ferpa>
- Reed, C.B. (2008). Executive Order 1031: Systemwide Records/ Information Retention and Disposition Schedules Implementation, Letter from the CSU Chancellor, pp. 1-4. (+Attachment A)

---

### ONLINE AND/OR BLENDED TEACHING POLICY

**PURPOSE:** To provide guidelines for and best practices related to faculty teaching assignments for online and/or blended courses in the nursing program.

#### BACKGROUND:

**Rationale:** The CSU Channel Islands Current Senate Policy ([SP.14.01.14](#)) for On-line Teaching and Learning was created to clarify policies related to blended and online teaching and learning at CI. This policy was developed among a special committee and approved by senate June, 2015. This policy seeks to provide guidance for faculty development for teaching online and blended courses and following the Senate Policy expectations. Per the [On-line Teaching and Learning policy](#) “Any decision by the Chair on modes of instruction shall address the following: Chairs will ensure faculty members are qualified to teach (prior experience, training, etc.) in the proposed course modality” (Curricular Control: Section: line 6). Faculty development for current CI faculty, directly related to blended and online teaching and learning best practices, is available through Teaching and Learning Innovations ([Online Teaching Preparation Practice](#) [OTPP], and [Blended Learning and Preparation Program](#) [BLPP]).

#### POLICY:

The administration of the policy is the responsibility of the Chair of the Nursing Program or his/her delegate to administer. The course faculty are responsible for carrying out their role outlined in the policy.



**Applicability:**

All faculty seeking to be scheduled and/or assigned to teach blended or online courses in the nursing program.

**Definition(s) *Define unfamiliar terms as needed***

Based upon Current Senate Policy ([SP 12-08](#)) Policy for listing on-line courses the following definitions are listed to define the mode of instruction for course offerings:

- *Online course offering: a course offering in which more than 70% of the course sessions occur online. Course sessions may be synchronous (meet online at the same time) or asynchronous (meet online different times)*
- *Blended course offering: a course offering that combines face-to-face class sessions with online sessions. To be considered blended a course will meet online for 30% to 70% of class sessions. Online class sessions may be synchronous or asynchronous.*
- *Standard course offering: a course offering in which no more than 30% of the course sessions occur online.*

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

For faculty seeking to be scheduled and/or assigned for online and/or blended courses:

1. The chair will assess the qualifications, taking into consideration prior experience and training related to online and/or blended teaching;
2. The chair will discuss the faculty qualifications with the faculty prior to finalizing course assignments; and,
3. The chair will encourage faculty who wish to teach online and/or blended courses without experience or training to seek participation in and successfully complete the OTPP or BLPP faculty development, or comparable faculty development courses.

---

**POLICY ON HIPPA PRIVACY RULE TRAINING FOR STUDENTS**

**PURPOSE:** The purpose of this document is to summarize relevant Channel Islands policies regarding protection of patient's health information.

**BACKGROUND:**

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 program HIPAA compliance officer (nursing program 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.**

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

**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. Materials 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:

- a. Name
- b. Geographic subdivisions smaller than a state (i.e. county, town, or city, street address and zip code)
- c. All elements of dates (except year) for dates directly related to an individual (including birth date, admission date, discharge date, date of death, all ages over 89 and dates indicative of age over 89)
- d. Phone numbers
- e. FAX numbers
- f. E-mail addresses
- g. Social Security numbers
- h. Medical record number
- i. Health plan beneficiary number
- j. Account number
- k. Certificate/license number
- l. Vehicle identifiers and serial numbers
- m. Device identifiers and serial numbers
- n. URL's
- o. Internet protocol addresses
- p. Biometric identifiers (e.g., fingerprints)
- q. Full face photographic and any comparable images
- r. Any other unique identifying number, characteristic or code
- s. Any other information that could be used alone or in combination with other information to identify the individual, such as a picture of a face.

## 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.
- When you talk about patients as a part of your education, try to prevent others from overhearing the conversation such as hallways, cafeteria, elevators 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 medical records are not in use, store them in offices, shelves or filing cabinets

- Remove patient documents from faxes and copies as soon as you can.
- Make sure you throw away 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.
- 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 hand written 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.
- 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)

#### 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.

#### 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.

### **Violations, Process, Actions and Notifications**

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

**Examples of Violation I:**

- 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 a 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.

Type of Violation	Process	Corrective Action	Notification
<b>II.</b> Failure to follow existing policies/procedures governing patient confidentiality.	Discussion between instructor and student.	Re-education and/or process improvement.	A written warning will be given to the student and a copy placed in his/her student file.

**Examples of Violation II:**

- 1. Leaving copy of PHI in a non-secure area.
- 2. Dictating or discussing PHI in a non-secure area (lobby, hallway, cafeteria, elevator, etc.).
- 3. Failure to obtain appropriate consent to release information
- 4. Failure to fulfill training requirements
- 5. Requesting another individual to inappropriately access patient information.
- 6. Inappropriate sharing of ID/password with another coworker or encouraging coworker to share.
- 7. Failure to secure data on mobile devices through encryption/password.

Type of Violation	Process	Corrective Action	Notification
<b>III. Repeat Offense of Type I or II Violation.</b>	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: <ul style="list-style-type: none"> <li>ï Reprimand;</li> <li>ï Removal from clinical site; or</li> <li>ï Probation or other disciplinary action including dismissal from the nursing program</li> </ul>	Written communication between instructor and student will be included in student record and sent to the Chair of the Nursing Program.

Type of Violation	Process	Corrective Action	Notification
<b>IV. Inappropriately accessing a patient's record without a need to know.</b>	May range from discussion between instructor and student to Chair convening a committee to address action.	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
<b>Examples of Violation IV:</b> <ul style="list-style-type: none"> <li>ï Releasing or using aggregate patient data without facility approval for research, studies, publications, etc.</li> <li>ï Accessing or allowing access to PHI without having a legitimate reason.</li> <li>ï Giving an individual access to your electronic signature.</li> <li>ï Accessing patient information due to curiosity or concern, such as a family</li> </ul>			

member, friend, neighbor, coworker, famous or “public” person, etc. i Posting PHI to social media (refer to SA0082016 Policy on Social Media in the Student Handbook). i Removing documents from a nursing unit or clinical site that contain PHI.			
Type of Violation	Process	Corrective Action	Notification
V. Accessing and using patient information for personal use or gain or to harm another individual.	Notification to Chair or designee. Chair convenes committee to address action.	May range from removal from course; to disciplinary sanctions, such as dismissal from the major.	Written report to: Student Record  Dean of the College of Arts and Sciences
<b>Examples of Violation V:</b> <hr/> a) Releasing or using data for personal gain. b) Compiling a mailing list to be sold for personal gain or for some personal use. c) Disclosure or abusive use of PHI d) Tampering with or unauthorized destruction of information.			

Policy modified from University of Wisconsin Policy and Procedures

## POLICY ON IMPAIRED STUDENT

**PURPOSE:** The CSU Channel Islands Nursing program faculty members follow the guidelines established by the California Board of Registered Nursing related to Impaired Nursing Students.

**BACKGROUND:** 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: The Student Affairs committee and the Chair of the program is responsible for policy compliance, implementation and monitoring.

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

Policy Text:

## **GENERAL INFORMATION**

### **Philosophy of Faculty at CSU Channel Islands Nursing Program 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 Program 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:

- Behaviors;
  - 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;

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

Behavioral Pattern:

1. Repeated absences
2. Frequent absences from work area
3. Frequently coming in late or leaving early
4. Alternate periods of high and low productivity
5. Complaints from patients, families, staff or other students
6. Making poor decisions or using poor judgment
7. An increase in errors, forgetfulness and difficulty following instructions
8. 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 Program 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 program

- 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, through 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 has 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 program.
- 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 program.

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

#### STATUS IN THE NURSING PROGRAM 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 Program. The requirements for readmission are:

- The student shall submit a petition to the Chair of the Nursing Program.
- 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 program and required to participate in on-going rehabilitation treatment, the student shall provide evidence of such continued rehabilitation treatment on a schedule as determined the Chair of the Nursing.
- Students readmitted will be subject to randomized drug testing during the time they are enrolled in the nursing program.
- 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 Program.
- Readmission is on a space-available basis.
- A second documented incident of impaired behavior will result in permanent dismissal from the Nursing Program.

Source: Adopted from CSU Fullerton Impaired Student Policy and CSU Chico Impaired Student Policy  
Date 5.14.15

### Release of Relevant Information Form

Student's Name \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Emergency Contact Number \_\_\_\_\_

Controlled Substances Prescribed for the Student:

---

#### CLINICAL ABSENCE POLICY

**PURPOSE:** *This policy provides guidance for the management of nursing student clinical absences.*

**BACKGROUND:** *This policy is pending approval from the curriculum committee.*

**POLICY:** *The nursing program chair, faculty, and curriculum committee are accountable for policy compliance, implementation, and monitoring.*

**Applicability:** *Students actively enrolled into the NSN Nursing Major.*

Definition(s) *Define unfamiliar terms as needed*

Policy Text:

1. The student must complete all clinical hours designated by their MSN program emphasis to receive credit towards their degree requirements.
2. In order to be excused, notification must be given to the primary Clinical Instructor 2 hours prior to the start of the clinical day. Clinical absences due to illness **may** be subject to documentation to medically clear students enrolled in “high risk” clinical areas such as pediatrics and obstetrical or oncology clinical settings. Infectious illnesses (both viral and bacterial) may preclude clinical rotations to these high risk areas and are to be discussed with the clinical instructor or cleared medically with documentation from a physician.
3. Unexcused absences may result in failure of the course.
4. Absences from clinical practicum must be for serious and compelling reasons such as:
  - Illness of self or immediate family
  - Death of an immediate family member
  - Court Subpoena
  - Recognized religious observation
  - Educational absence: an absence in which written permission from the faculty responsible for the class or clinical is given
  - Military Deployment: day of deployment and return from deployment of an immediate family member
  - Faculty approved attendance at a nursing research convention or other educational opportunities
5. If requested, documentation is required for the second and subsequent absences of either clinical practicum or simulation lab. Documentation must be submitted to the clinical instructor within 7 days of the absence.
6. Emergencies as listed above which prevent the student from attending assigned clinical practicum and meeting the educational objectives must be made up following these guidelines:
  - a. Students may make up the clinical practicum under the direction of the clinical preceptor and clinical faculty when appropriate.
  - b. Missed clinical labs during the two on-campus intensives will require repeating of the entire course the next time it is offered (which may once a year).

---

STUDENT CONTINUANCE IN THE PROGRAM, AND REPEATING A CLASS

**PURPOSE:** To define the criteria to which the student must adhere in order to progress in the nursing program and the criteria to which they can continue in the program or repeat a class.

**BACKGROUND:** This policy is pending approval from the student affairs committee.

**POLICY:**

**Accountability:** Student Affairs Committee

**Applicability:** Applicable to all nursing students Track I and II.

**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**

Students must earn a minimum of a “B or Pass” (3.0) grade in all required MSN 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.

### **Criteria for Program Continuance and Repeating a Nursing Course**

The criteria for program continuance are as follows:

1. Students in the MSN major must attain grades of B / 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 B or fail may be repeated once on a space available basis. To repeat a nursing course the student will be required to:
  - a. Consult with the course faculty to determine what academic/personal factors led to an satisfactory grade.

- b. After meeting with the course faculty, the student must schedule a meeting with the nursing advisor.
- 4. 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.
- 5. Students with failure in two required MSN courses will be withdrawn from the MSN Program.
  - a. Failure in two required nursing courses is defined as a grade of less than B or Pass in two separate nursing courses or in two attempts in one nursing course.
  - b. Students who fail two nursing courses must meet with nursing advisor to discuss program withdrawal and student options.
  - c. Students who are withdrawn from the nursing program may complete the semester in free-standing nursing courses in which they are currently enrolled.

---

#### SUBMISSION OF CLINICAL AND MEDICAL DOCUMENTS

**PURPOSE:** 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 Program Student Affairs Committee.

**BACKGROUND:** This policy is pending approval from the student affairs committee to ensure timely submission of clinical and student health documents to clinical sites.

**POLICY:**

**Accountability:** The Student Affairs 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 MSN clinical courses:



## Policy Text:

### Timeline for submission of clinical and medical documents

1. **Eight weeks** 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. The student will be given **two** weeks to complete and return the completed paperwork to the Clinical Coordinator or Goleta Support Coordinator and submit any updated health record information (i.e. Influenza Vaccine Verification, CPR, QuantiFERON Tuberculosis Test, etc.) to CastleBranch\*. Health information that is set to expire mid-semester must be renewed prior to the start of the semester it will expire with the exception of the Influenza Vaccine which must be renewed from September – November each year.
2. **Six weeks** prior to the start of the clinical rotation, the Clinical Coordinator or Goleta Support Coordinator will email the students who have not returned their paperwork or who have outstanding health information informing them that they have **one** week to submit these documents.
3. Students who do not submit their paperwork **five weeks** prior to the start of the clinical rotation will be at risk of not getting clearance to begin their clinical rotation on time and as a result may be dropped from the course. Clinical Faculty will be notified at this time which students are not in compliance.
4. 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.
5. Students enrolled in a Summer Session, NRS 453 or NRS 461 will still be required to submit health documentation **five weeks** prior to the start of the clinical rotation. Once clinical placements have been identified, students will have a modified submission timeline for any required clinical documents. This timeline will be emailed to the students by the Clinical Coordinator or Goleta Support Coordinator when the clinical paperwork is sent out.

---

## PREGNANT STUDENT POLICY

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; Title IX and University policy prohibiting discrimination, harassment, or retaliation related pregnancy.*

**POLICY:** The Nursing Program Chair and Student & External Affairs 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.*

**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 Program Chair. A letter addressed to the Nursing Program Chair may be required from the obstetrician or nurse midwife 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 guideline of the agency.

**PURPOSE:** The CSU Channel Islands Nursing Program 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 Program 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:** The Student Affairs committee is responsible for policy compliance in the area of social media.

**Applicability:** This policy applies to the track one and track two nursing students enrolled in CSU Channel Islands Nursing Program.

**Definition(s)** *Define unfamiliar terms as needed*

HIPAA Health Insurance Portability & Accountability Act of 1996 Public Law 104-191

FERPA Family Education Rights and Privacy Act 20USC1232gCFRPart99

Policy Text:

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 Program 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.

CSU Channel Islands Nursing Program 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>

---

## POLICY ON INCIDENT REPORTING

### POLICY:

Accountability: 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: This policy is pending revision and will be made available prior to the Spring 2021 semester.

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 pending revision.

---

## POLICY ON STUDENT EMERGENCY CONTACT

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

**BACKGROUND:** Emergency Contact information is needed to facilitate care and/or notification to appropriate parties in the event of an emergency.

### POLICY:

**Accountability:** The Student Affairs 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>. It is highly encouraged students update this information whenever there is a change in the EC.

1. Update Emergency Contacts at CSUCI <https://www.csuci.edu/housing/apply/update-emergency-contacts.htm>
2. Update Emergency Contacts at Nursing Department <https://www.castlebranch.com/sign-in>

EC information for each student includes:

1. Primary and secondary emergency contacts
2. First and last name of each emergency contact
3. Relationship of each contact to the student
4. The phone number and address of each emergency contact
5. If more than one EC provided add order of contact- primary contact will be notified first. If the department is not able to contact primary EC nursing faculty or staff will contact the secondary EC.
6. Information will be stored in a secure yet easily accessible by nursing staff and faculty
7. Clinical faculty will have access to the information in Dropbox

## FORMS & OTHER DOCUMENTS

### REQUEST FOR LETTER OF RECOMMENDATION

Date of Request: \_\_\_\_\_

Instructor: \_\_\_\_\_

Student Name: \_\_\_\_\_

Email: \_\_\_\_\_

Student Address:

Date Letter Needed: \_\_\_\_\_



\_\_\_ Letter to be mailed to student at home (Must include stamped, self-addressed envelope)

\_\_\_ Letter to be picked up in Nursing Program

\_\_\_ Letter to be picked up in faculty member's mailbox (outside door)

Please list the semester, year and course in which you completed the class of the above instructor:

Didactic: \_\_\_\_\_

Clinical: \_\_\_\_\_

Please provide the following information concerning the letter and the person to whom the letter is to be addressed:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Facility Name and Address:

Purpose of the letter (employment, scholarship, internship etc.)

Specific information you would like included in the letter: (Include volunteer activities and hours, student nurses association, committee work, tutoring etc.)

Please allow at least 2 weeks minimum for processing. Please personally contact the

instructor prior to the submission of this form.

#### CLINICAL REQUIREMENTS (CASTLEBRANCH)

Students must provide the following Health Documents to the Nursing Program by published deadlines.

VACCINATIONS		
Vaccines	To do action	Comments
<b>Influenza</b> (Seasonal Flu)	Submit an official form/letter from a healthcare provider, pharmacy, or clinic, which states that you received a Flu vaccine during the current Flu season (September-March).	Renewal date will be set for October 1 <sup>st</sup> of each year.
<b>Varicella (Chicken Pox)</b> (Series of two vaccines, usually given to children 12 months through 12 years of age.)	Submit one of the following: <ul style="list-style-type: none"> <li>- 2 vaccines, <u>OR</u></li> <li>- <u>Positive</u> antibody titer lab report</li> </ul> If titer is <u>Negative</u> or <u>Equivocal</u> , you will have to receive one booster shot and a follow up titer after 3 months.	If series is in progress, submit where you are and follow up when series is completed.
<b>Measles, Mumps &amp; Rubella (MMR)</b> (Series of two vaccines, usually given to children 12 months through 6 years of age.)	Submit one of the following: <ul style="list-style-type: none"> <li>- 2 vaccines, <u>OR</u></li> <li>- <u>Positive</u> antibody titer lab report for <u>all 3</u> components</li> </ul> If any titer is <u>Negative</u> or <u>Equivocal</u> , you will have to receive one booster shot and a follow up titer after 3 months.	If series is in progress, submit where you are and follow up when series is completed.
<b>Hepatitis B</b> (Hep B or HBV, series of three vaccines, usually given over a period of six	Submit one of the following: <ul style="list-style-type: none"> <li>- 3 vaccines, <u>OR</u></li> </ul>	If series is in progress, submit where you are and follow up when series is completed.

months)	<ul style="list-style-type: none"> <li>- <u>Positive</u> antibody titer lab report</li> </ul> <p>If titer is <u>Negative</u> or <u>Equivocal</u>, you will have to receive one booster shot and a follow up titer after 3 months.</p>	
<b>Tuberculosis (TB)</b> (QuantiFERON – TB Test)	<p>Submit one of the following:</p> <ul style="list-style-type: none"> <li>- <u>Negative</u> blood test lab report administered within the past 12 months, <u>OR</u></li> <li>- If blood test result is <u>Positive</u> or <u>Equivocal</u>, you will have to submit a clear Chest X-Ray lab report administered within the past 12 months.</li> </ul>	Renewal date will be set for 1 year for blood test and 2 years for Chest X-Ray.
<b>Tetanus, Diphtheria, &amp; Pertussis (Tdap)</b> (It is routinely given at age 11 or 12)	Submit a Tdap vaccine administered within the past 10 years.	Renewal date will be set 10 years from the administered date.

Students must provide the following Health Documents to the Nursing Program by uploading to CastleBranch.

Health Documents		
Documents	To do action	Comments
<b>Handbook Acknowledgement</b>	Download, print, and complete the Handbook Acknowledgement form available for download from this requirement. Then upload to CastleBranch.  This form states that you read, and understood the policies, procedures and requirements in the CSUCI Nursing Program Handbook.	Renewal date will be set for September 1 <sup>st</sup> of each year.
<b>Acknowledgement of Responsibility</b>	Download, print, and complete the Acknowledgement of Responsibility form available for download from this requirement. Then upload to	Renewal date will be set for September 1 <sup>st</sup> of each year.

	CastleBranch. This form states that you are fully responsible for maintaining <b>Health Insurance</b> throughout the Nursing Program in order to have coverage in the case of any injury or accident.	
<b>Physical Examination</b>	Submit documentation of your completed physical examination. The exam must be completed and signed by a medical professional and be dated within the past 6 month.	Renewal date will be set for September 1 <sup>st</sup> of each year.
<b>Social Media Policy</b>	Download, print, and complete the Social Media form available for download from this requirement. Then upload to CastleBranch. This form states that you received, and understood the Social Media policy and potential consequences.	
<b>Visual/Audio Image Release Form</b>	Download, print, and complete the Visual/Audio Image Release form available for download from this requirement. Then upload to CastleBranch. This form states that California State University system has permission to utilize visual/audio images that may pertain to you or your materials.	
<b>CPR Certification</b>	Submit a copy of your current CPR Certification (both sides if necessary). The CPR must be one of the following: <ul style="list-style-type: none"> <li>- American Heart Association Healthcare Provider course, or</li> <li>- Certification issued in accordance with the AHA Healthcare Provider course.</li> </ul>	Renewal date will be set per the expiration date on card.
<b>Fire Safety Card</b>	Submit a copy of your current Fire Safety Card. <b><u>ONLY for Track I Camarillo</u></b> - This card will prove that you attended a	Renewal date will be set per the expiration date on card.

	mandatory Fire Class.	
<b>Emergency Contact Information</b>	Download and complete the Emergency Contact Information form available for download from this requirement. Then upload to CastleBranch. This information will be extremely important in the event of an accident or medical emergency.	Renewal date will be set for January 1st, May 1st , and August 1st of each year.
<b>California RN License</b>	Submit a current California RN license or verification of licensure through the state website. <b><u>ONLY for Track II</u></b> (ADN/RN-BSN) (optional for Bridge Student)	Renewal date will be set per the expiration date of licensure.

**Important contacts:**

- **CastleBranch User Experience Services (UES):** 888-723-4263 (toll free)
- **Nursing Clinical Coordinator:** Liege Ayub - [liege.ayub@csuci.edu](mailto:liege.ayub@csuci.edu)

**Note:** The Nursing Program also requires a Background Check and Drug Test, which must be done through CastleBranch.

## PHYSICAL EXAMINATION

This page must be completed by applicant

<b>Last Name:</b>	<b>First Name:</b>	<b>Middle:</b>
<b>DOB:</b>	<b>Sex:</b>	<b>Student ID#:</b>

### Medical History

Abdominal Pain	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Hernia	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Allergies	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Kidney Disease	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, list:			High Blood Pressure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Anemia	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Liver Disease/Hepatitis	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Anxiety	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Surgery	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Asthma	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, date & type:		
Back Pain/Injury	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Thyroid Disease	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Depression	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Ulcers/Gastritis/GERD	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Diabetes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Vision Problems	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Eating Disorder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Smoke	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Epilepsy/Seizure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Packs per week:		
Headaches/Migraines	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Alcohol Use	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Head Injury/concussion	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Drinks per week:	Drinks per month:	
Hearing Problems	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Drug Use	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Heart Disease/Murmur	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Type/Frequency:		
Other:					

Current medications/herbs/supplements: ☐ Yes ☐ No

If yes, list:

---



---

Who is your primary care physician? \_\_\_\_\_

Have you ever been hospitalized? ☐ Yes ☐ No

If yes, give the date and reason for

hospitalization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever failed a physical examination? ☐ Yes ☐ No

If yes, please explain reason(s):

\_\_\_\_\_

\_\_\_\_\_

**This information may be shared with the department requesting Physical Examination and/or with the medical facility.**

**The above information is true and correct to the best of my knowledge.**

**Print Name:**

**Signature:**

**This page must be completed by licensed healthcare provider**

<b>Last Name:</b>	<b>First Name:</b>	<b>Middle:</b>
<b>DOB:</b>	<b>Sex:</b>	

Height:	Weight:	B/P:	Pulse:	Resp:	LMP:
Vision Screening:	Right: 20/	Left: 20/	Both: 20/		
With Glasses:	Right: 20/	Left: 20/	Both: 20/		
Hearing Screening:	Right:		Left:		

## EXAMINATION

<b>Basic Exam</b>		<b>Yes</b>	<b>No</b>	<b>Comments</b>
-------------------	--	------------	-----------	-----------------

General:	Alert, well appearing, no apparent distress.	<input type="checkbox"/>	<input type="checkbox"/>	
Ears:	Canal without tenderness or exudate. TMs good landmarks/light reflex, no erythema.	<input type="checkbox"/>	<input type="checkbox"/>	
Sinus:	Patent nares; no sinus tenderness to palpitation.	<input type="checkbox"/>	<input type="checkbox"/>	
Pharynx:	No erythema, exudate; no tonsillar enlargement.	<input type="checkbox"/>	<input type="checkbox"/>	
Neck:	Supple, no adenopathy; no thyromegaly.	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs:	Equal breath sounds; no respiratory distress; no wheezes, rhonchi or rales.	<input type="checkbox"/>	<input type="checkbox"/>	
Heart:	Regular rhythm, no murmurs, gallops or rubs.	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen:	Active BS; soft; no tenderness, guarding, masses or organomegaly; no CVA tenderness.	<input type="checkbox"/>	<input type="checkbox"/>	
Skin:	No rashes, petechiae or other lesions.	<input type="checkbox"/>	<input type="checkbox"/>	
Neuro:	DTRs + 2 bilaterally; strength 5 +/5+; Romberg negative.	<input type="checkbox"/>	<input type="checkbox"/>	
Back:	Straight, full ROM; non-tender to palpitation.	<input type="checkbox"/>	<input type="checkbox"/>	
Other:				

<b>Physician/Examiner Print Name &amp; Credentials:</b>		
<b>Physician/Examiner Signature:</b>		<b>Date:</b>
<b>Facility Name:</b>		
<b>Facility Address/Phone:</b>		



---

## TUBERCULOSIS QUANTIFERON TB TEST

### Facts:

**QuantiFERON®-TB Test** is an alternative to the tuberculin skin test. It is a blood test used to diagnose Mycobacterium Tuberculosis infection. The advantage according to the Centers for Diseases Control and Prevention is “The greater specificity of the QuantiFERON test and the requirement for only one visit are compelling advantages”. In addition, the test is not subject to reader bias.

### Why and How:

The Nursing program as of 05/25/2016 therefore is requiring the QuantiFERON®-TB Test as the annual TB test for all students. A medical provider must order the blood test and the lab report result must be submitted into CastleBranch on annual basis.

As for faculty, if the TB test is required by the organization or clinical agency, the faculty teaching the course will need to submit the lab report result into CastleBranch.

---

## SOCIAL MEDIA POLICY ACKNOWLEDGEMENT

I, \_\_\_\_\_ have received a copy of the Social Media Policy and understand the policy and potential consequences.

Student Name (print): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

---

## HIPAA COMPLIANCE ACKNOWLEDGEMENT FORM

Print Name \_\_\_\_\_ Course \_\_\_\_\_

Semester \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of the student (Acknowledges reading and understanding of policy)

Date \_\_\_\_\_

---

## ACKNOWLEDGEMENT OF RESPONSIBILITY

In signing this document, I am verifying my full knowledge and understanding of my responsibility within the CSU CI Nursing Program as it pertains to required obligations, illness & injury, and accidents while performing any service as a CSU CI student.

I know that I am responsible for maintaining health insurance throughout the program in order to have coverage in the case of an injury or accident, as it is stated in the Student Handbook. If I am involved in an incident, I am solely responsible for covering the cost of my care, any follow up related to said incident, and agree to assume all risks related to gathering experience.

I also understand that if an incident occurs while at a clinical location, I am held to the policies and procedures of the facility and that my first responsibility is to notify my instructor of any occurrence in a timely manner. If I am found in violation of any CSU CI Nursing policy or procedure, while the incident took place, I may face disciplinary action.

Health Insurance Provider/Company

Student Name (print)

Student Signature

Date

---

## HANDBOOK ACKNOWLEDGEMENT OF POLICIES, PROCEDURES AND GUIDELINES

I have read and understood the policies, procedures and requirements in the CSU Channel Islands Nursing Program Student Handbook, and I understand that my eligibility to participate in this program may be terminated if I cannot meet these expectations.

I also understand the faculty/curriculum committee may alter policies, procedures and guidelines. I am aware that there is student representation in the faculty/curriculum committee. Any changes in policies, procedures and guidelines will be made available to students via the Nursing Program website under Current Students.

Student Name (print): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_