

# **SCHOOL OF NURSING**

---

*Graceland University*

*2016-2017*



## **BSN-RN STUDENT HANDBOOK**

**1401 W. Truman Road  
Independence, MO 64050  
1-816-833-0524**

**[www.graceland.edu](http://www.graceland.edu)**

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# WELCOME TO THE SCHOOL OF NURSING

Welcome to the School of Nursing. *Your future is here!* Many exciting learning experiences await you as you begin your journey toward becoming a registered nurse. You will have a vast array of opportunities as a nurse in the 21<sup>st</sup> century. The world is changing so quickly that we don't even know what nursing will look like during your entire career. The future of the nursing profession will unfold as you create it! We will give you the opportunity to prepare yourself to practice with great skill in the new world that is before you.

You're fortunate to be a student at Graceland University. The nursing program is a critical part of Graceland University and has a long history in Independence. The faculty and students who came before you have created an outstanding reputation in the metropolitan area as well as across the country. We will provide you with the guidance you need to carry on their legacy of honesty and integrity. As pre-professionals in the student role, we expect you to demonstrate integrity in all academic and clinical settings. We want you to always remember that every time you wear your uniform and interact with others you are representing Graceland University.

Graceland is a community, and like any community there are policies and regulations to follow to keep you on track. This handbook includes a number of policies you need to know to stay on the most direct route to success. Stay focused on your goal to become a registered nurse and your probability to succeed will be high.

As you progress through the nursing program at Graceland, you will begin to feel the "Graceland experience." That experience results from your connections with your fellow classmates and from the caring concern of our faculty and staff for you, our students. We are here to facilitate your success. You are here to be successful. You will work hard and we will coach and encourage you all the way!

Welcome to a new chapter in your life, and now...*let's get on with it!*

**Sharon Little-Stoetzel PhD, RN**

Associate Dean for Undergraduate Nursing Programs

*P.S. Thank you for choosing to be a Graceland nurse!*

## Important Phone Numbers

INDEPENDENCE & KANSAS CITY	
<b>FIRE &amp; POLICE</b>	911
<b>HIGHWAY PATROL</b>	816-622-0800
<b>POISON CONTROL CENTER</b>	800-366-8888

**INCLEMENT WEATHER NUMBER** 816-423-4750  
 Graceland Independence Campus Information/Delayed Starts only

For cancellations or delayed starts: Watch for postings on TV stations, KMBC channel 9, KCTV channel 5, and Fox (4). For Clinical Information contact the course coordinator.

### NEW DIRECTIONS - STUDENT ASSISTANCE PROGRAM:

913-982-8398 OR 800-624-5544 OR [www.ndbh.com](http://www.ndbh.com)

**CAMPUS TELEPHONE NUMBERS** 816-833-0524 FAX 816-833-2990

#### Financial Advisors:

Logan Glaser (Last name A-L)	816-423-4713
Stephanie Hunt (Last name M-Z)	816-423-4719
Campus Bookstore	ext. 4714
Student Lounge:	ext. 4429
Computer Assistance (Matt Curtis)	ext. 4700
Lamoni- Password resets	ext. 5167
Transcripts (Registrar's office)	ext. 5223

Associate Dean: Sharon Little-Stoetzel	816-423-4685
Undergrad Admin Asst: Cindy Leveridge-Gregory	816-423-4679
Admission Counselor: Laurie Hale	816-423-4675
Skills Lab Coordinator: Cindy Waits	816-423-4698
SON Dean: Claudia Horton	816-423-4670

### Full-Time BSN FACULTY 816-423-xxxx

Tera Gericke	x 4689
Lin Howell	x 4683
Michelle Julian	x 4684
Jeri Sindt	x 4690
Beverly South	x 4691
Diana Tilton	x 4685
Barbara Voshall	x 4697
Cindy Waits	x 4698

## ACCREDITATIONS & APPROVALS

The nursing programs have full approval status by:

**Iowa Board of Nursing**  
River Point Business Park  
400 SW 8<sup>th</sup> Street, Suite B  
Des Moines, IA 50309-4685  
515-281-3255

**Missouri State Board of Nursing**  
3605 Missouri BLVD  
PO Box 1335  
Jefferson City, MO 65109  
573-751-0293

The nursing degree programs are accredited by:

Graceland University is a member of the North Central Association  
and is accredited by the **Higher Learning Commission**

230 South LaSalle Street, Suite 7-500  
Chicago, Illinois 606044  
800-621-7440



**Commission on Collegiate Nursing Education (CCNE)**

One Dupont Circle, NW, Suite 530  
Washington D.C. 20036-1120  
(202) 887-6791

### ***AACN Essentials of Baccalaureate Education for Professional Nursing Practice*** (updated 2008)

The Essentials of Baccalaureate Education for Professional Nursing Practice provides an important framework for designing and assessing baccalaureate education programs for professional nursing practice. The AACN Essentials document describes the educational preparation for, and expectations of, initial practice as a baccalaureate-prepared nurse.

- I. Liberal Education for Baccalaureate Generalist Nursing Practice
- II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- III. Scholarship for Evidenced Based Practice
- IV. Information Management and Application of patient Care Technology
- V. Health Care Policy, Finance, and Regulatory Environments
- VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
- VII. Clinical Prevention and Population Health
- VIII. Professionalism and Professional Values
- IX. Baccalaureate Generalist Nursing Practice

## 2016-2017 Summer, Fall & Spring Academic Calendar

### June

27, Monday Summer Session Classes Begin

### August

19, Friday Summer Session Ends

29, Monday Fall Session Classes Begin

### September

5, Monday Labor Day Holiday

### October

20, Thursday Midterm Break

24, Monday Classes Resume at 8:00 am

### November

22, Tuesday Thanksgiving Recess Begins at 9:00 pm

28, Monday Classes Resume 8:00 am

### December

12-15, M-Th Finals Week

17, Saturday Nursing Recognition Ceremony & Graduation

### January

2, Monday Spring Session Classes Begin

### February

24, Friday Spring Break begins at 5:00 pm

### March

6, Monday Classes Resume at 8:00 am

### April

17, Monday Easter Break

18-21, Tu-Fri FINAL Examinations

Graceland University  
**Drop/Add Dates 2016-2017**

**SUMMER B 2016**

<b>Drop/Add Deadlines</b>	
<b>Last Day to Add</b>	<b>July 5th</b>
<b>Last Day to Withdraw</b>	<b>July 29th</b>

**FALL 2016 Semester**

<b>Drop/Add Deadlines*</b>			
	<b>1st Quarter Crs</b>	<b>Semester Crs</b>	<b>2nd Quarter Crs</b>
Last day to <b>Add</b>	Sept. 6	Sept. 12	Oct. 25
<b>Change to Pass/Fail</b> or back to <b>Graded</b> , and last day to <b>Drop</b>	Sept. 6	Sept. 12	Oct. 25
Last day to <b>Withdraw</b> or put on <b>Audit</b>	Sept. 26	Oct. 31.	Nov. 18

\*Refund calculation dates used by Financial Aid and Student Accounts may vary from the dates above.

**SPRING 2017 Semester**

<b>Drop/Add Deadlines*</b>			
	<b>1st Quarter Crs</b>	<b>Semester Crs</b>	<b>2nd Quarter Crs</b>
Last day to <b>Add</b>	Jan. 16	Jan. 23	Mar. 13
<b>Change to Pass/Fail</b> or back to <b>Graded</b> , and last day to <b>Drop</b>	Jan. 16	Jan. 23	Mar.13
Last day to <b>Withdraw</b> or change to <b>Audit</b>	Feb.6	Mar. 17	Apr. 6

\*Refund calculation dates used by Financial Aid and Student Accounts may vary from the dates above.



**SCHOOL OF NURSING  
FACULTY LIST  
2016-2017**

<b>Full Time Faculty</b>		
<b>Faculty</b>	<b>Credentials</b>	<b>Title</b>
Tera Gericke	MSN, APRN, FNP-C	Assistant Professor of Nursing
Lin Howell	EdD(c), MSN, RN, LNC	Associate Professor
Michelle Julian	PhD(c), RN	Assistant Professor, MOKAN Coordinator
Sharon Little-Stoetzel	PhD, RN	Associate Dean, Professor
Jeri Sindt	MSN, RN	Associate Professor, Simulation Lab Co-Coordinator
Beverly South	MSN, RN, CNE	Associate Clinical Professor
Diana Tilton	MSN, RN	Assistant Clinical Professor
Barbara Voshall	DNP, RN	Professor, Simulation Lab Co-Coordinator
Cindy Waits	MSN, RN, CLC	Assistant Clinical Professor, Skills Lab Coordinator

## **A little about Graceland University**

### **LAMONI CAMPUS**

Graceland University is a co-educational liberal arts institution located in Lamoni, Iowa, a rural community of fewer than 1500 people 120 miles north of Independence, MO. The campus covers 177 acres of land with 34 buildings. It is a beautiful pastoral setting and is frequently referred to as our "Hilltop Home."

### **INDEPENDENCE CAMPUS**

The Independence, Missouri location is home to the prestigious School of Nursing. Programs include; a campus BSN-RN program; programs in undergraduate and graduate education and, graduate degree programs in religion, and an undergraduate program in business. The "Center for Graduate and Continuing Studies" distance education program staff reside within the Independence campus. CGCS offers undergraduate and graduate degree programs in a variety of fields. In addition, the campus is the home for the award winning Dr. Charles F. Grabske, Sr. library, one of the best nursing resource libraries in the Midwest.

### **UNIVERSITY HISTORY & CHURCH AFFILIATION**

Graceland was established as a direct result of legislative action taken by the delegates of the 1890 General Conference of the Reorganized Church of Jesus Christ of Latter Day Saints, now known as The Community of Christ. September 17, 1895, Graceland University (formerly College) admitted its first students in the four-year liberal arts curriculum in Lamoni, Iowa. The first graduating class was a class of one, F. M. Smith, one of the church's prophets. The F.M. Smith Library was named after this graduate. The University was initially accredited by North Central Association in 1920, and accreditation has been continuous since. In 1969 the Division of Nursing became the sixth academic area of the University when the World Church and the University decided to move its educational base for the former diploma nursing program from the Independence Sanitarium and Hospital (most recently, Independence Regional Health) into its collegiate setting at Graceland. The Independence Campus (formerly Educational Center) became the home of the upper division BSN program of the nursing major in 1970. Margaret McKevit was the first Chairperson of the Division of Nursing, (now School of Nursing) and is credited, along with Professor Emerita Iola Tordoff, with establishing our tradition of excellence in nursing education.

Graceland is grateful to these nurse educators and to many others who have contributed to our rich heritage.

Graceland University  
**Vision, Mission and Values**

**Vision Statement** Graceland University will become a recognized educational leader, inspiring and empowering persons for transformational service and leadership.

**Mission Statement** Graceland creates learning communities where students develop their potential for meaningful and productive lives.

**Statement of Values** Graceland values learning, wholeness, and community. Graceland encourages the adoption of these values for the enrichment of lives and the betterment of the world.

***Learning*** We believe in the life long process of the open and free pursuit of truth.

***Wholeness*** We believe that the development of the intellectual, physical, social, and spiritual dimensions of all persons is necessary for healthy and fulfilling lives.

***Community*** We appreciate and welcome diversity and, as an institution sponsored by the Community of Christ, believe in the inherent worth of all persons expressed through relationships built on the foundation of unconditional love and acceptance.

## **Graceland University**

### **General Education Goals/Requierments**

Your liberal arts education prepares you to think broadly and gives you transferable skills required in many work situations. General Education goals are designed to provide you with this breadth of knowledge. All students are required to meet these goals. You will note that various choices are offered allowing each student to design his/her own package. The Fall Semester courses, from which you may choose to meet the goals, follow. Review these carefully prior to completing your registration. (Please note prerequisites listed in the Course Descriptions or Schedule of Classes for courses marked with \* by the number.) **Please review carefully.**

#### **Goal 1: To become knowledgeable in the natural sciences, history/political science, and the social/behavioral sciences. (12 s.h.)**

Can be satisfied through the completion of 12 s.h. in the following areas (with at least 3 s.h. from each area):

a. Natural Sciences (any Biology, Chemistry, Physics, or Science courses)

BIOL1260 Environmental Biology  
 BIOL1400 Fundamentals of Biological Science  
 CHEM1310 Introduction to Chemistry  
 CHEM1430 Principles of Chemistry I  
 CHEM1431 Principles of Chemistry I Lab  
 SCIE1250 Descriptive Astronomy

b. History/Political Science (any 2000 level History, excluding HIST2400, or 1000-2000 level Political Science courses) (Note: POLS2200 satisfies only goal 3e, as shown below.)

POLS1300 American Government

c. Social/Behavioral Sciences (any Economics, Psychology, or 1000-2000 level Sociology courses) (Note: ECON3280, SOCI1350, and PSYC3370 satisfy only goal 4, as shown below.)

ECON1300 Principles of Macroeconomics  
 PSYC1300 Introductory Psychology  
 SOCI1300 Introduction to Sociology

#### **Goal 2: To develop an appreciation of the arts and humanities. (6 s.h.)**

Can be satisfied through the completion of 6 s.h. in the following areas (with at least 3 s.h. from each area):

a. Art, Music, Theatre (Note: ARTS2300, ARTS2310, and MUSC2350 satisfy only goal 4, as shown below, THTR1240 satisfies only goal 3b, as shown below, and ARTS2400 satisfies only goal 3e, as shown below.)

ARTS1100 Design Principles  
 ARTS1200 Artists & Materials  
 ARTS1230 Drawing  
 ARTS1710 Introduction to Visual Communication  
 MUSC0100/0200/0300/0400/0600/0700 Ensemble Music  
 MUSC1200 Fundamentals of Music  
 MUSC1250 Survey of Music Literature  
 MUSC1410 Voice Class I  
 MUSC1510/1530 Applied Keyboard  
 MUSC1610/1630/1650/1670 Applied Instruments  
 MUSC1740 Piano Class  
 MUSC1750 Applied Voice  
 THTR1200 Introduction to Theatre  
 THTR1310 Introduction to Stagecraft

- b. Cinema, Literature, Philosophy, Religion, HUMN2220, HUMN2470, HUMN2550, HUMN2560, HUMN2570, HUMN2300, or HUMN2330 (Note: For Philosophy and Religion, only courses with the 2b designation satisfy this goal.)

RELG1200 Introduction to Religion  
 RELG1310 Introduction to Old Testament

**Goal 3: To develop foundational skills, including skills of quantitative analysis, oral and written communication, ethical consciousness and sound values, and healthful living. (21 s.h.)**

Can be satisfied through the completion of each of the following:

- a. 6 s.h. in Mathematics (includes any MATH courses) (Note: MATH3370 satisfies only goal 4, as shown below.)

MATH1280 College Algebra  
 MATH1310 Mathematical Concepts I  
 MATH1380 Introduction to Statistics  
 MATH1510 Calculus I

*NOTE: If your ACT Math score is less than 16 or your SAT Math score is less than 370, you must successfully complete (receive grade of C or better) both Beginning Algebra (DEVL0900) and Intermediate Algebra (DEVL1200), unless you have completed two years of high school math, one of which must have been algebra with a grade "C" or better in both high school math courses.*

- b. 3 s.h. in Speech Communication (includes COMM1200, COMM3310, COMM3320, COMM/PEAC/SOCI3210, COMM/RELG3470, and THTR1240)

COMM1200 Speech Communication: An Intro

- c. 3 s.h. in Modern Rhetoric or English Honors (ENGL1410 or 1440)  
*NOTE: If your ACT score is less than 15 or your SAT equivalent score is less than 320, you must successfully complete (receive grade of C or better), DEVL1250 - Basic of English, before you can enroll in Modern Rhetoric*

ENGL1410 Modern Rhetoric

ENGL1440 English Honors

*Please note that students are not allowed to enroll in Modern Rhetoric and Speech Communication Concurrently. Options for speech during the sophomore, junior, and senior year are available.*

- d. 3 s.h. in Advanced Composition (includes ENGL3200, 3210, 3220, 3250, 3270, and 3280)  
 e. 3 s.h. in Ethics/Values (includes Philosophy and Religion courses with the 3e designation, ARTS2400, BUAD3200, COMM3400, EDUC3100, POLS/PEAC2200, and SOCI3430)

PHIL1200 Environmental Ethics

- f. 3 s.h. in Health (includes PHED1000 or HLTH1200 and one physical education activity course)

HLTH1200 Principles of Healthful Living

PHED1000 Personal Fitness Management

PE Activities & Varsity Sports

**Goal 4: To be knowledgeable and appreciative of human diversity as expressed in cultures other than one's own. (3 s.h.)** (All international students whose first language is not English automatically meet this requirement.)

Can be satisfied through the completion of one of the following:

Any foreign language course, ARTS2300, ARTS2310, COMM/INTD3100, ECON/GEOG3280, HIST1310, HIST1320, INTD1200, INTD3300, MATH3370, MUSC2350, PSYC3370, SOCI1350, or goal 4 designated international experiences  
 HIST1310 World Civilizations I  
 INTD1200 Intro to International Studies  
 SPAN1410 Beginning Spanish I

## **School of Nursing**

### **Mission, Goals, Professional Standards, Philosophy, and Organizing Framework**

#### **Mission**

The mission of the School of Nursing is to create learning communities where professional nursing students develop their potential for meaningful and productive lives as baccalaureate generalist nurses, nurse practitioners, and nurse educators.

#### **Goals**

The School of Nursing strives to:

1. Promote the achievement of the mission of the University and the School of Nursing.
2. Provide curricula that prepare students in professional nursing standards, including The Essentials of Baccalaureate and Master's Nursing Education and Doctoral Nursing Education, and meets the needs of communities of interest.
3. Utilize teaching learning practices implemented by faculty who are academically and experientially qualified and who are effective teachers engaged in scholarship and service.
4. Provide a foundation for advanced study in nursing.
5. Prepare a graduate who has met the expected student outcomes of a program, including licensure/certification.
6. Prepare a graduate who is satisfied with the educational preparation provided within the learning community.
7. Prepare a graduate who elicits satisfaction from communities of interest, including employers of graduates.

#### **Professional Standards**

The School of Nursing adheres to Iowa and Missouri State Board of Nursing regulations regarding programs of professional nursing and other State Board of Nursing regulations as appropriate for our online nursing programs, and the professional standards outlined in the AACN BSN Essentials (2008), AACN MSN Essentials (2011), AACN Doctoral Essentials (2006) ANA Scope and Standards of Practice (2004), ANA Code of Ethics for Nurses (2001), Quality and Safety Education for Nurses Competencies (2007), and NONPF Domains and Core Competencies of Nurse Practitioner Practice (2008).

## Philosophy Statement

Faculty members of the SON believe that:

The School of Nursing is an integral part of Graceland University and that its mission, goals, and philosophy are congruent with the vision, mission, and values of the parent institution.

The goal of the School of Nursing is to enable students to become professional nurses who respect and care about the worth of all individuals, who are capable of thinking critically, and providing quality nursing care to individuals, families, communities, and societies within the global health community. As such, we enhance the achievement of University general education goals and educate students to become professional nurses who synthesize and apply concepts from the liberal arts, nursing curricula, and nursing practice.

Professional nurses, as reflective practitioners, apply the nursing process in a holistic and caring manner to promote optimal health. The roles of the professional nurse include Learner, Clinician, Leader and Educator. Development within each role occurs along a novice-to-expert level continuum.

Learning is life-long. Learners possess intellectual curiosity fostered by the incorporation of current research findings (evidence) in their nursing practice. Clinicians provide competent, holistic care across the lifespan. Nurse Leaders collaborate with other health disciplines to develop policies and institute changes in healthcare. Educators integrate evidence into their teaching and student assessments.

Professional Nursing Standards, the AACN Essentials for all levels of Nursing Education, and the missions, goals, and philosophies of the University and School of Nursing guide curricular development and delineation of expected student learning outcomes. Curricula are developed to instill professional nursing values and a commitment to evidence-based practice. Effective learning is best facilitated by employment of active learning and self-reflective strategies.

The development and achievement of student learning outcomes necessary for practice as baccalaureate generalist nurses, advanced practice nurses, and nurse educators are central to the mission, goals, and curricular design of Graceland University's School of Nursing programs. All graduates are expected to achieve student learning outcomes related to higher level thinking, communication, and nursing role performance.

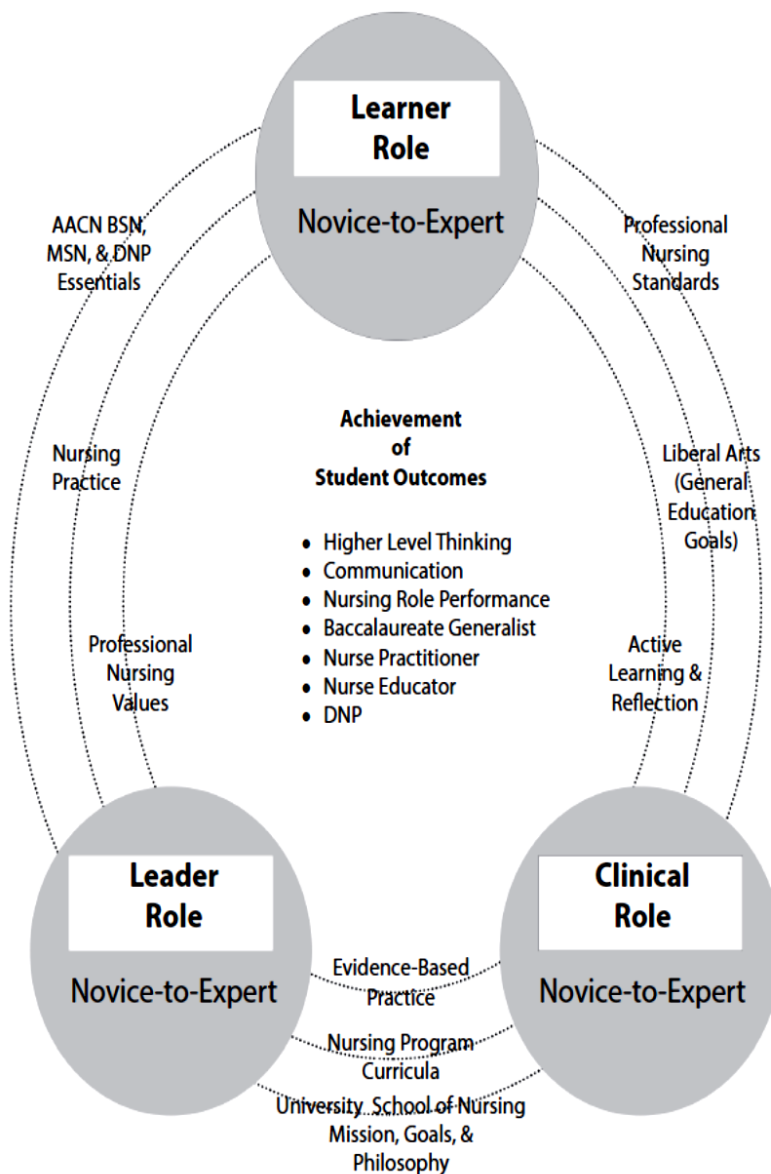
Entry into professional nursing begins with education at the baccalaureate level. At all levels the educational process is a shared endeavor between students and faculty. Opportunities for theoretical and experiential learning are provided in an atmosphere that stimulates each learner.

Each student has the right and responsibility to develop his/her highest personal and professional potential. To this end, the faculty support learning communities for traditional as well as nontraditional students.



## Graceland University School of Nursing

### Organizing Framework



## **The Nursing Recognition Ceremony: The Significance of the Nursing Cap and Pin**

It has been a long-standing tradition at Graceland University to celebrate the achievements of each group of graduating nursing students during an annual Nursing Recognition Ceremony. The School of Nursing is located in Independence, Missouri, and the ceremony is usually held in Independence, Missouri in December.

Graduating students from each major nursing discipline are recognized during the ceremony for their achievements and properly “Pinned”. The design for the pin was chosen by a student committee made up of the first Division of Nursing graduating class in 1971 and Miss Iola Tordoff, advisor.

### **The CAP**

In the past, graduates of the BSN-RN program wore the traditional white nursing cap as well as their school uniform during the ceremony. The student committee from the class of 1971 and Miss Iola Tordoff also designed the traditional white nursing cap, similar to the one worn by graduates from the Independence Sanitarium and Hospital. That program was the predecessor to the current School of Nursing at Graceland University. The all-white, stiffly starched cap is simple in design, and has a graduate band, placed length-wise across the folded front of the cap, and is composed of a blue and gold velvet ribbon.

### **The PIN**

The pin, unique to Graceland University, was chosen after a great deal of research and deliberation. The final design was created by Professor Iola Tordoff in consultation with the first Chairperson of the Division of Nursing, Miss Margaret McKevit.

The Graceland Tower is centered on the pin and has the appearance of reaching upward. This symbolizes the growth experienced by students in the nursing program. Laurel leaves, which form a half-circle beneath the tower, were first used by the ancient Greeks to crown the victor and later came to be associated with academic honors.

The colors of the pin are also symbolic. The pin itself is gold which symbolizes worthiness. A band of blue enamel surrounds the tower; the color stands for truth and loyalty and the unbroken circle for constancy. The two colors together complete the University colors of blue and gold. Underneath the blue band is simply inscribed, Graceland University Nursing.

## Graceland Traditions & Trivia

**Colors:** Old Gold and Navy Blue

**Newspaper:** The Tower

**Yearbook:** Acacia

**Motto:** Prudens futuri (Wisdom for the future)

**Athletic Team/Mascot:** Yellow Jackets, Sting

**Nursing "House":** McKevit Manor  
(named for Margaret L. McKevit)

**School Song:** Graceland Forever

Graceland Forever, dear Alma Mater  
Long may she ever firm keep her stand.  
Her sons and daughters carry to others  
Her fame throughout the land, Rah, rah, rah.  
Graceland College, we're all for you,  
Strong, united, loyal, and true.  
We'll carry on 'til victory is won,  
Oh, Graceland, we're all for you!  
Warren McElwain, 1925

### Alma Mater Hymn:

Come Graceland sons and daughters all,  
And join our happy throng.  
With loyal voices let us raise  
Our Alma Mater song.  
O hillcrest home of vision side,  
Where bonds of love holds sway,  
Where all may learn in life and lore  
'Tis thee we praise today.

Through memory a thread shall run  
Of golden richness made.  
Cementing there the treasure rare  
In thy foundation laid.  
O Alma Mater, guide us on,  
Thy standard e'er unfold  
And call us on with memories  
Of days 'neath the Blue and Gold.

Through years and decades long to come  
Thy battlemented tower  
Shall rise to call the youth of lands  
To answer to the hour.  
And while thy work shall carry on,  
Our benisons are told  
In lives of honor, truth and right,  
The seal of the Blue and Gold.

Roy A. Cheville 1942

**Graceland University**  
**School of Nursing**  
**Curriculum Plan 2016-2017**

**18-MONTH BSN – 1<sup>ST</sup> YEAR**

**Semester Hrs.**

**Summer Semester**

NURS2420	Introduction to Nursing	3	
NURS2460	Health Assessment	4	
NURS2470	Informatics	2	= <u>9 hrs.</u>

**Fall Semester**

NURS3440	Pathophysiology	3	
NURS3451	Pharmacology I	2	
NURS3120	Fundamentals	4	
NURS3270	Psychosocial Aspects of Client Care	4	= <u>13 hrs.</u>

**Spring Semester**

NURS3160	Evidence Based Practice	2	
NURS3250	Adult Health I ( <i>First ½ of semester</i> )	4	
NURS3260	Adult Health II ( <i>Second ½ of semester</i> )	4	
NURS3452	Pharmacology II	2	
NURS4340	Community Health Care	2.5	= <u>14.5 hrs.</u>

<b>Summer A Term</b>	International Experience (Optional)	3
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**18-MONTH BSN – 2<sup>ND</sup> YEAR**

**Summer Semester**

NURS4170	Manager of Patient Care	3	
NURS4220	Maternal and Newborn Care	4	
NURS4480	Trends and Issues	2	= <u>9 hrs.</u>

**Fall Semester**

NURS4260	Critical Care Nursing ( <i>1/2 semester</i> )	4	
NURS4240	Pediatric Nursing ( <i>1/2 semester</i> )	4	
NURS4390	Capstone Practicum	4	
NURS3290	Gerontology	2	= <u>14 hrs.</u>

## BSN Program Student Learning Outcomes (SLO's)

<b>Nursing Role Performance</b>	
<b><i>Level 1 (BSN-RN)</i></b>	
Applies the nursing process components to meet the priority health needs of clients.	
Utilizes scientific theory and a holistic assessment model in planning, prioritizing, implementing, and evaluating nursing care of clients.	
Promotes positive adaptation of clients on the wellness-illness continuum.	
<b><i>Level 2 (BSN-RN &amp; RN-BSN)</i></b>	
Utilizes multidimensional roles (e.g. advocate, educator, collaborator, etc.) of nursing in the provision of care to individuals, families, or communities.	
Collaborates with others to provide quality healthcare to individuals, families, or communities.	
Intervenes as an advocate in complex health situations for individuals, families and communities.	
<b><i>Graduate (Exit) Level (BSN-RN &amp; RN-BSN)</i></b>	
Plans, coordinates, implements, and evaluates holistic plans of care for clients with diverse health care needs that reflect application of the nursing process, promote client adaptation, and advocate for the health needs of individuals, families, and communities.	
<b>Higher Level Thinking</b>	
<b><i>Level 1 (BSN-RN)</i></b>	
Demonstrates higher level thinking skills in applying research to the professional nursing role.	
Critiques published research for relevance in nursing	
<b><i>Level 2 (BSN-RN &amp; RN-BSN)</i></b>	
Utilizes higher level thinking skills in the performance of professional nursing activities.	
Utilizes research (evidence-based practice) findings in the performance of professional nursing activities.	
<b><i>Graduate (Exit) Level (BSN-RN &amp; RN-BSN)</i></b>	
Utilizes higher level thinking skills and research evidence in the planning and delivery of nursing care.	
<b>Communication</b>	
<b><i>Level 1 (BSN-RN)</i></b>	
Demonstrates use of appropriate interpersonal skills to effectively collaborate with peer members of the health care team.	
Demonstrates client focused communication in a therapeutic relationship.	
Documents accurate and clear representation nursing care.	
<b><i>Level 2 (BSN-RN &amp; RN-BSN)</i></b>	
Applies principles of scholarly writing, including effective organization of thought, grammar usage, and APA formatting.	
Demonstrates use of safe, professional communication techniques in the clinical setting.	
<b><i>Graduate (Exit) Level (BSN-RN &amp; RN-BSN)</i></b>	
Communicates effectively orally and in writing; collaborates effectively with health care team members; and employs communication skills in the establishment of therapeutic relationships with individuals, families, and groups.	

**Program Student Learning Outcomes**  
**Level 1 Summative Assessment (BSN-RN Program)**

Level 1 Student Learning Outcome	Course	Assignment to be Assessed for SLO Achievement	Rubric Form to be Completed & Filed
Nursing Role Performance			
Applies the nursing process components to meet the priority health needs of clients.	NURS3260: Adult Health Care II	Nursing Care Plan	Level 1 Formative and Summative Assessment Rubrics
Utilizes scientific theory and a holistic assessment model in planning, prioritizing, implementing, and evaluating nursing care of clients.			
Promotes positive adaptation of clients on the wellness-illness continuum.			
Higher Level Thinking			
Demonstrates higher level thinking skills in applying research to the professional nursing role.	NURS3160: Evidence Based Practice	Research Article Critique	Level 1 Formative and Summative Assessment Rubrics
Critiques published research for relevance in nursing			
Communication			
Demonstrates use of appropriate interpersonal skills to effectively collaborate with peer members of the health care team.	NURS3270: Psychosocial Aspects of Client Care	Mental Health Communication Video & Process Recording	Level 1 Formative and Summative Assessment Rubrics
Demonstrates client focused communication in a therapeutic relationship.			
Documents accurate and clear representation of nursing care performed.	NURS3260: Adult Health Care II	Nursing Care Plan	Level 1 Formative and Summative Assessment Rubrics

**Program Student Learning Outcomes**  
**Level 2 Summative Assessments (BSN-RN Program)**

Level 2 Student Learning Outcome	Course	Assignment to Be Assessed for SLO Achievement	Rubric Form to be Completed & Filed
Nursing Role Performance			
Utilizes multidimensional roles (e.g. advocate, educator, collaborator, etc.) of nursing in the provision of care to individuals, families, or communities.	NURS4390: Capstone Practicum	Self-Evaluation of Student Objectives	Level 2 Formative and Summative Assessment Rubrics
Collaborates with others to provide quality healthcare to individuals, families, or communities.			
Intervenes as an advocate in complex health situations for individuals, families and communities.			
Higher Level Thinking			
Utilizes higher level thinking skills in the performance of professional nursing activities.	NURS4170: Manager of Patient Care	Sentinel Event Analysis	Level 2 Formative and Summative Assessment Rubrics
Utilizes research (evidence-based practice) findings in the performance of professional nursing activities.			
Communication			
Applies principles of scholarly writing, including effective organization of thought, grammar usage, and APA formatting.	NURS4170: Manager of Patient Care	Sentinel Event Analysis	Level 2 Formative and Summative Assessment Rubrics
Demonstrates use safe, professional communication techniques in the clinical setting.	NURS4390: Capstone Practicum	ISBARR Assignment	Level 2 Formative and Summative Assessment Rubrics

**Program Student Learning Outcomes**  
**Exit Level Summative Assessments (BSN-RN Program)**

<b>Exit Level Student Learning Outcome</b>	<b>Course</b>	<b>Assignment to Be Assessed for SLO Achievement</b>	<b>Rubric Form to be Completed &amp; Filed</b>
<b>Nursing Role Performance</b>			
Plans, coordinates, implements, and evaluates holistic plans of care for clients with diverse health care needs that reflect application of the nursing process, promote client adaptation, and advocate for the health needs of individuals, families, and communities.	NURS4390: Capstone Practicum	Nursing Role Performance Narrative	Level 2 Summative Assessment Rubric
<b>Higher Level Thinking</b>			
Utilizes higher level thinking skills and research evidence in the planning and delivery of nursing care.	NURS4390: Capstone Practicum	Higher Level Thinking Narrative	Level 2 Summative Assessment Rubric
<b>Communication</b>			
Communicates effectively orally and in writing; collaborates effectively with health care team members; and employs communication skills in the establishment of therapeutic relationships with individuals, families, and groups.	NURS4390: Capstone Practicum	Communication Narrative	Level 2 Summative Assessment Rubric



## Program Student Learning Outcomes Assessment of Achievement

### Portfolio Guidelines

#### Evidence from Level I Coursework

- Nursing Care Plan (NURS3260: Adult Health II)
- Research Article Critique (NURS3160: Evidence Based Practice)
- Mental Health Process Recording (NURS3270: Psychosocial Aspects of Client Care)

#### Evidence from Level II Coursework

- Self-Evaluation of Student Objectives (NURS4390: Capstone Practicum)
- Sentinel Event Analysis (NURS4170: Manager of Patient Care)
- I-SBAR-R Communication Assignment (NURS4390: Capstone Practicum)

#### Evidence of Self Reflection Skills

- Initial personal philosophy from (NURS2420: Introduction to Nursing)
- One self-reflection entry (NURS3260: Adult 2 *OR* NURS3270: Psychosocial)
- Self-Reflection paper on Josie King Story (NURS4480: Trends and Issues)
- Patterns of Knowing (NURS4480: Trends and Issues)

#### Professional Readiness Evidence

- Career Plan (NURS4480: Trends and Issues)
- Professional Resume and Cover Letter (NURS4480: Trends and Issues)
- Reference Letter
- Documentation of Continuing Education Units Earned (NURS4480: Trends and Issues)

#### Self-Assessment of BSN Student Learning Outcomes Achievement

- Narrative reflections rich with examples of the student's achievement of the graduate (exit) level Student Learning Outcomes: **Nursing Role Performance, Higher Level Thinking, and Communication.** (NURS 4390: Capstone Practicum)

## STUDENT LIFE AND SERVICES

*Dear Student,*

*As a member of the Graceland community, you play an important role in shaping the living and learning environment of this campus. Whether you hope to receive a stimulating academic challenge, prepare for a career, meet new friends, or enjoy the campus atmosphere, it is important that you identify your goals and expectations in order to receive full benefit of your Graceland experience. Please contemplate the list below as you create your personal learning plan for success. It is your life and your challenge: do what it takes to succeed!*

### **In general, you will learn more when you . . .**

- ✓ *Are actively engaged in your academic work*
- ✓ *Set and maintain high but realistic expectations and goals*
- ✓ *Provide, receive, and make use of regular, timely, specific feedback*
- ✓ *Become aware of your own ways of learning, so you can better monitor and direct energies and efforts*
- ✓ *Become explicitly aware of your values, beliefs, preconceptions, and prior learning – and be willing to expand and adjust when necessary*
- ✓ *Connect new information to prior knowledge*
- ✓ *Look for real-world applications*
- ✓ *Work regularly and productively with faculty*
- ✓ *Spend a minimum of 35 hours/semester/credit hour on course related activities*
- ✓ *Work regularly and productively with other students*
- ✓ *Read all assignments prior to class*
- ✓ *Invest as much time and high-quality effort as possible*

## COMMUNICATION

**Chat & Chew:** Periodically during the year, the Associate Dean will meet informally with groups of students. The purpose of these sessions is to increase communication between the Associate dean and students. Check the student activities calendar for scheduled dates each semester.

**Communication with students from faculty/university:** Students are provided with a mailbox for non-confidential communication between classmates or faculty. Items too large for student mailboxes or confidential items are collected and distributed by the Undergraduate Program Administrative Assistant or other collection method identified by a faculty member. Students are expected to check their mailbox regularly. The House Council maintains the student communication bulletin board in the student lounge area.

**Graceland University Electronic Mail:** Is required to communicate with professors/instructors and the University. Professors/Instructors may be sending important information or instructions via Graceland e-mail. Please check it often enough to effectively communicate in a timely manner. The student may access it anytime, anywhere, with a device connected to the Internet and with mobile devices (see options in MS Office 365). Benefits include; Cloud storage capacity of 50 GB; ability to access student email even after graduation; free download of Microsoft Office 365; and ability to set reminders of important events.

To access the student email account, use this link <https://my.graceland.edu/> then click the link to the cloud email and use the instructions provided.

Forgot username or password? Call Info Central on the Lamoni campus at extension 5167 using one of the campus phones OR call 641-784-5167 or Toll Free 1-866-786-2790.

*Students are required to sign an agreement for acceptable use of Graceland E-mail. A copy of their signed form is kept in their Graceland student folder.*

**Student Address and Phone List:** An address list with the name, address, and telephone number of each nursing student is compiled by the Undergraduate Program Administrative Assistant and is available to students upon request. This list is kept current and will allow for ease of communication throughout the year. It will also help with planning shared transportation, socializing, etc. For change of name, address, or telephone number, please notify the Undergraduate Program Administrative Assistant immediately. The Undergraduate Program Administrative Assistant will provide updated information to faculty members. Students have the right to be omitted from the distribution list that is shared with fellow students, but the University must maintain up-to-date contact information.

**Faculty availability:** Faculty members are not required to respond to email or voice mail during the evenings, weekends, or official school breaks. Faculty may choose to do so in some situations. However, each professor/instructor will communicate how best to be reached and how quickly the student should expect a response. Faculty members want to be in touch with students to facilitate learning, however work hours must be reasonable. **Please be respectful of everyone's time.**

**Visits with faculty:** Faculty members want to develop strong professional relationships with students, and help them meet their academic goals. In the process faculty members are required to maintain an environment of responsibility and accountability. Whenever the student has a private conversation with a faculty member it is assumed to be confidential. If the student is unsure if the information discussed is public or not, clarify it with the professor/instructor before telling others.

We need to support confidentiality as much as possible. In order to respect the privacy of other students, standing outside the office door is not permitted. Consequently, in order to respect the privacy of other students **we cannot have students walking into faculty offices unannounced.**

Students on campus that wish to ask faculty members a question (and do not have an appointment), please call before going to the 3<sup>rd</sup> floor. Phone numbers are posted in this handbook and near campus phones. The faculty member may be able to answer question(s) over the phone or, if available, meet in person.

- a. If the student is “in line” for an appointment with a professor/instructor, please wait in the **Student lounge** until the scheduled time, unless instructed differently by the professor/instructor.
- b. Please refrain from entering the third floor work area to put papers in faculty offices. Papers may be submitted to the metal designated mailbox in the student lounge. The Undergraduate Program Administrative Assistant empties the mailbox daily and delivers contents to faculty mailboxes.

**Individual issues with faculty** – *To maintain professionalism and to decrease own anxiety, it is necessary to follow a chain of command by contacting the person involved directly as soon as an issue occurs. Please respect the chain of command.*

1. First, discuss issues concerning a professor/instructor privately.
2. Only if the issue is not resolved directly with the professor/instructor **then** contact the Course Coordinator.
3. Only if the issue is not resolved directly with the Course Coordinator **then** contact the Associate Dean.
4. If the Associate Dean is unable to resolve the issue, the student will be referred to the Dean of the School of Nursing.

## **ACADEMIC ADVISEMENT**

Academic Advising is the KEY to student success at Graceland University. Academic advisors will be assigned during summer semester. Faculty advisors may not have set office hours during summer term, however they will be available via email. All advisors are full time faculty members who are interested in helping students succeed. Some of the ways student advisors can help include:

- Address academic concerns and suggest material/study aids
- Review graduation requirements
- Make referrals for counseling and community resources (EAP: Employee Assistance Program)

An advisor can only help if the student is willing to be responsible for his/her own learning.

Advisee responsibilities include:

- Schedule appointments directly with assigned advisor
- Attend scheduled appointments, please be prompt
- To cancel or reschedule provide at least 24 hour notice
- Be prepared at each appointment with questions or concerns
- Complete all assignments and recommendations given by advisor
- ASK questions when unsure about university or school policies

## STUDENT AWARDS - GRACELAND UNIVERSITY

There are many students who have made outstanding contributions to campus life during their years with Graceland University. Each year an Awards Committee is selected and charged with the responsibility of identifying those outstanding individuals to be recognized. To identify students who deserve to receive the Student Life and Distinguished Leadership Awards, the committee solicits nominations from all members of the faculty, administration, student government, and from various other members of the campus community.

### STUDENT LIFE AWARD

The Student Life Award is one of the top honors given to students at Graceland University. It is awarded to individuals who have made a significant contribution to the life of the university community during their student experience at Graceland. The award suggests a contribution over a wide range of activities, some perhaps, in depth. (Examples might include academic, social, governance, religious life, etc.) It is recognition of qualities that include leadership acceptance and respect among students, faculty, and staff, and a creditable academic record. Students eligible for this award will be from the graduating senior class.

### DISTINGUISHED LEADERSHIP AWARD

This award is designed to recognize those students that have enriched the Graceland University community and have shown exemplary leadership through their superior skills, talents and dedication. Area leaders (division chairs, associate deans or administrators) rather than individual faculty and staff members may nominate students (one student for each division/school). Students eligible for this award will be from the graduating senior class.

## STUDENT AWARDS - SCHOOL OF NURSING

The following awards are presented during the annual Nursing Recognition Ceremony. The award recipient is chosen from nominated eligible undergraduate senior nursing students who meet the following criteria:

### Exemplary Peer Collaboration Award: Sponsored by North Kansas City Hospital

Graceland Nursing Professors choose a current senior nursing student from the top three seniors whom were nominated by their peers. The recipient of this award must meet the following criteria:

1. The student works and plays well with others, in groups, or with a team.
2. The student maintains a high level of standards recognized by their peers.
3. The student facilitates positive relationships.

### Superior Clinical Performance Award: Sponsored by North Kansas City Hospital

The BSN Faculty will nominate and vote for the individual to receive the Superior Clinical Performance Award based on clinical evaluations. The recipient of this award must meet the following criteria:

1. The student demonstrates many characteristics of caring and compassion.
2. The student arrives to clinical prepared and on time.
3. The student demonstrates exceptional critical thinking and decision-making skills.
4. The student demonstrates superior organizational skills and is able to effectively prioritize.

### Vida Butterworth Award (Scholarship): Sponsored by Centerpoint Medical Center

Vida Butterworth was one of the first nurses to earn a Master's Degree in the state of Missouri. She was involved in nursing education for most of her life. She valued outstanding academic performance and was recognized as a scholar in the nursing profession. Eligibility: Highest cumulative GPA

### Nelle Morgan Award (Leadership): Sponsored by Centerpoint Medical Center

Nelle Morgan was the Director of Nursing at the Independence Sanitarium and Hospital and the School of Nursing for many years. She exemplified the characteristics of leadership in nursing that continue to be valued in the nursing profession today.

Eligibility:

1. Current enrollment,
2. Official University status as a second semester senior
3. Minimal cumulative G.P.A of 2.75.

**Leadership Qualities:**

1. Establishes and maintains appropriate relationships,
2. Works constructively with persons and groups to promote the welfare of others,
3. Assists others in making social adjustments,
4. Displays personal qualities of leadership such as dependability, responsibility and sensitivity.

**Effie Case Carroll Award (Caring and Compassion): Sponsored by Graceland University**

One of Graceland's former faculty, Shirley Dauzvardis, established the Effie Case Carroll Award in memory of her grandmother who encouraged her to become a nurse. She epitomized, for Shirley, the kind of caring we as faculty hope to instill in our students at Graceland. The award is presented to a graduating senior who demonstrated outstanding caring and compassion in his/her personal and professional practice.

**Eligibility:**

1. Current enrollment.
2. Official University status as a graduating senior.
3. In good standing and showing academic progress.

**Qualities: Student who best demonstrates caring and compassion by:**

1. Respecting self and others as unique persons of fundamental worth and dignity.
2. Valuing caring as a moral ideal.
3. Recognizing caring as a healing modality.
4. Demonstrating caring and compassionate behavior with sincerity, tenderness, empathy and active listening.
5. Understanding the needs of others and providing comfort and assistance.
6. Advocating on behalf of patients/clients.
7. Being committed to the highest standards of holistic nursing care ministering to the physical, emotional, psychological, spiritual and intellectual needs of patients/clients.

**Iola Tordoff Award for Excellence Sponsored by Graceland University**

This award is presented in honor of Iola Tordoff, an exceptional nurse leader who in her 35 years of nursing was an educator and leader in nursing organizations. She was instrumental in establishing the Graceland nursing program by helping to develop the initial curriculum and obtaining accreditation. In addition, she designed the Graceland nursing pin and cap. Although she retired in 1982, she has continued to contribute to the university and to mentor nursing students. Her legacy at Graceland will live on forever. The recipient of this award must have achieved the highest grade point average in the graduating class and demonstrated initiative, quality care to clients, and leadership ability. The recipient of this award must meet the following criteria:

1. Enrollment in The RN-BSN program at Graceland University
2. Highest cumulative GPA in the graduating class.
3. Have completed 75 graded hours recorded at Graceland University.
4. Demonstrated initiative, quality care to clients, and leadership ability.

**Missouri League For Nursing -Outstanding Graduating Student Nurse Award: Sponsored by The MO League for Nursing**

The BSN Faculty will nominate and vote for the individual to receive the Missouri League for Nursing – Outstanding Graduating student Nurse Award. The recipient will be a graduating senior who meets the following criteria:

1. Leadership Potential – Students who were active in their student organization or organized activities for the class.
2. Interpersonal Skills – Students who worked cooperatively with faculty, other students, and agency staff.

3. Continuing Professional Growth-Students who show an interest in continuing learning beyond graduation.

**Evelyn Berryman Barritt Creativity Award: Sponsored by Evelyn Berryman Barritt**

The purpose of the award is to recognize nurses for their creative accomplishments in or outside of the nursing profession. The recipient of this award is chosen from among Graceland University Alumni, Students, or Faculty.

Examples of creative accomplishments may include but are not limited to the following:

1. Made a meaningful contribution to others/community
2. Revitalized an old theme in a creative manner
3. Achieved in the area of the arts such as literature, visual arts, music, and performing arts.
4. Achieved in creative entrepreneurial endeavors
5. Included an altruistic and/or aesthetic component in accomplishments

**Special Recognition Award: Sponsored by Pi Eta Chapter of Sigma Theta Tau International Honors Society of Nursing**

Chapter board members and faculty recognize a student who has made a special contribution to the School of Nursing and is a member of the Pi Eta Chapter.

**Cathy B. Hall Award: Sponsored by Graceland University (Funded by Dr. Jeana Wilcox)**

Dr. Jeana Wilcox established the Cathy B. Hall Award in memory of her aunt who encouraged her to become a nurse. Aunt Cathy epitomized, for her, the kind of persistence and diligence required to make one's dreams a reality. As an amputee, she persevered to obtain a college degree and spend her time helping those often marginalized by society.

This award is presented to a graduating senior who has demonstrated outstanding care of self while remaining diligent and persistent in maintaining high quality patient care and academic standards; often in the face of personal adversity or challenge. A committee of BSN Faculty members will choose the individual who will receive this award. The following criteria will be used in considering a recipient:

Eligibility:

1. Current enrollment
2. Official University status as a graduating senior

Qualities: Student who best demonstrates diligence and persistence by:

1. Respecting self and others as unique persons of fundamental worth and dignity
2. Valuing excellence in patient and self-care
3. Exhibiting determination to excel as a professional nurse



## STUDENT SERVICES

### Undergraduate Program Administrative Assistant

The Undergraduate Program Administrative Assistant provides many services to students in the School of Nursing. Services include assisting students with:

- House Council activities and reconciles activity fee budgets
- International Student Exchange Visitor Student paperwork
- Distribution and collection of CNE exam documentation and verifications
- Distribution of items students leave in 1<sup>st</sup> floor metal mail box in student lounge for delivery to faculty members
- State nursing license applications and scholarship application forms
- Verification letters for state/federal/government agencies, insurance companies, or employers

### Other student services Graceland provides are as follows...

#### COUNSELING SERVICE

Graceland offers free short-term confidential counseling services for our students through **New Directions** Employee Assistance Program. Professional counselors offer confidential assistance with stress, drug/alcohol dependency, marriage/family discord, finances/legal problems, or other personal concerns. Information and phone numbers for this service are listed in the front of this handbook. We encourage all students to take advantage of this valuable resource if needed.

#### STUDENT DISABILITY SERVICES

**STUDENTS WITH DISABILITIES:** Graceland University is committed to full compliance with the Rehabilitation Act (Section 504) and the Americans with Disabilities Act (ADA). Students requesting accommodations should contact Nicole Briell, Disabilities Coordinator, 641-784-5083, or by email [nbriell1@graceland.edu](mailto:nbriell1@graceland.edu) for accommodations. In order to provide appropriate accommodations in a timely manner, students are encouraged to contact Student Disability Services as early in the term as possible.

#### BOOKSTORE

Our Independence campus bookstore is on the second floor. Business hours are posted. Textbook and codes, the nursing pin and cap, a few school supplies, and Graceland items are available for sale.

***Graduation Cap and Gown orders are made online.*** Students will be notified of the proper time and website address for ordering. Students will be notified of cap and gown order arrivals, which can be picked-up at the Independence Campus Bookstore.

## THE WRITING CENTER

The Writing Center offers support to students in any academic program with any level of writing ability. Writing Center consultations can help students improve on a particular written assignment or improve on general writing skills. For help students may call (641-784-5077) or utilize services through this link: [https://my.graceland.edu/ICS/Resources/Writing\\_Center/](https://my.graceland.edu/ICS/Resources/Writing_Center/)  
*Students must be signed into my.graceland.edu to use the link*

## STUDENT LOUNGE

The student lounge is on the first floor behind the see-through fireplace. Refrigerator, Keurig coffee maker, microwaves, and vending machines are also available for student use. This is an area exclusively for student use and the cleanliness is greatly enhanced if students take an active role in keeping it clean. In the kitchen area, students are expected to cleanup their own spills. Please ensure whatever is brought to school, is also taken home. Personal items left in the refrigerator ***must be*** dated and labeled. Students are responsible for removing their personal spoiled or rotten food items weekly. Any non-labeled items left in cabinets or the refrigerator for extended periods will be discarded.

Students can also take advantage of using the couches and lounge areas located outside the library.

**Graceland University Independence Campus Library Services**  
**Dr. Charles F. Grabske, Sr. Library**

<http://www.graceland.edu/grabske>  
 (816) 423-4706

**Lee Williams, Library Director:** [lee.williams@graceland.edu](mailto:lee.williams@graceland.edu)

Contact for research assistance, journal and book requests

**Jill Schmidt, Assistant Librarian:** [jill.schmidt@graceland.edu](mailto:jill.schmidt@graceland.edu)

**Document Orders/Delivery:** [grabske@graceland.edu](mailto:grabske@graceland.edu)

The Library staff welcomes you to the Library. We look forward to serving students through our Library holdings and services. We offer:

- An automated online card catalog to help students gain access to the books, journals and audiovisual materials.
- Online databases with full-text articles and journals in print

### **LIBRARY HOURS**

Monday –Friday                      8:30 am – 5:30 pm  
 (Closed on weekends unless prior arrangements have been made)

### **CIRCULATION POLICY**

<b>Type of Material</b>	<b>Loan Period</b>	<b>Fine</b>
Books	3 weeks	10¢ per day

Journals cannot be checked out. They may be copied or scanned. The maximum fine due is an amount equal to the replacement value of the item.

If fines total more than \$20, check-out privileges will be blocked. Fines must be paid and materials returned by the end of each semester before registration can occur for the following semester. Any library charges will be added to the student's account.

### **RENEWALS**

Books may be renewed unless a "hold" request is in effect. Renewals may be made by telephone or via the student's account.

Limit is two renewals per book. Books can be renewed over the phone or via email.

### **HOLDS**

Materials in circulation may be obtained by placing a "hold" request. The student will be called when the book arrives. We will hold the book at the circulation desk for three days.

### **WHEN YOU NEED BOOKS OR ARTICLES**

We can usually supply you with all the books and articles that you need for your Graceland assignments.

If the library doesn't own the materials you need, you can order them from us. Please direct all requests to [grabske@graceland.edu](mailto:grabske@graceland.edu), for Interlibrary Loan requests for the Independence

Campus. If you find articles in PubMed that we don't own, you can use LOANSOME DOC to order them through us.

We can usually get books/articles for you at no charge from other libraries. If we cannot obtain the articles for free, we will notify you of the charges to see if you are still interested.

### **WHEN YOU NEED REFERENCE ASSISTANCE**

If you have problems finding information, please contact **Lee Williams or Jill Schmidt** for the Independence Campus. They can help you with literature searches and send you search results through e-mail.

#### **Databases:**

<http://www.graceland.edu/grabske>

- CINAHL with full text
- The Cochrane Library
- Health Source (Nursing Academic)
- Pub Med
- OVID Total Access
- Science Direct College Edition

**How to log on when prompted (at database sites):** Username and password are the same as your my.graceland log-in

#### **What to do if you can't log on:**

- *If this is your first attempt to log on:* call us so we can troubleshoot.
- *If you have been able to log on before:* if the system is down, keep trying – it may be a momentary lapse. If you've tried several times and can't connect, call or email us.

#### **How to find a full-text article:**

- Check our full text finder on the library's homepage by clicking on it and typing in the name of the journal. If it's available online, follow the links provided to get to the full text.
- On the "Help videos" page, look for the tutorial on requesting articles.

#### **How to order articles if the library does not have them and you can't find a full-text copy:**

- Articles can be ordered through links in PubMed, CINAHL and OVID. Articles can also be ordered using the link on the library's homepage.
- We send all articles to students in a PDF format.
- VERY IMPORTANT: Try to submit article requests to the library 4 days before you need them. Some journals are difficult to locate.

## MISCELLANEOUS

### CONSUMING FOOD IN THE BUILDING

*Please help to maintain the cleanliness of our environment.* Please keep food/drinks in the non-carpeted student lounge/atrium area areas as much as possible.

Absolutely no food or drink is allowed in **The Carmichael Auditorium, the science and computer labs, the skills lab, simulation lab, or Library.**

**Classrooms:** Food and drink is allowed in classrooms only with the professor's/instructor's permission, but drinks *must* be in covered containers.

### LOCKERS

Lockers, next to the vending machine area, are available for student use. Students must bring a pre-purchased keyed-lock to registration with a copy of the key for the Undergraduate Program Administrative Assistant. A list is posted in the locker area for keeping track of lockers used by students. If you change lockers, please remember to update the list by scratching out your name on the list next to the old locker and writing in your name next the locker number you are currently using. And please remember to empty out your locker prior to graduation. Any items remaining in lockers after graduation will be discarded.

### SCHOLARSHIP AND JOB INFORMATION

The Undergraduate Program Administrative Assistant periodically receives new scholarship and job posting information (including internships) from area business, hospitals, and clinics. Job postings are placed on the bulletin board in the Atrium and new scholarship applications and information is sent to Stephanie Hunt in the Finance office as well as kept in the office of the Administrative Assistant when they arrive. The Administrative Assistant periodically receives scholarship information via e-mail and forwards information to students.

### PARKING

Parking for students is made available in the **lower tiers** of the parking lot (middle tier preferred). The west side (back) first level has 10 spots that are available on a first-come-first served basis. The rest of the upper spaces facing toward and away from the building are to be used only for parking by employees of Graceland University. Annual registration is required to allow students to park in GU's parking lot. Registration information helps to identify student vehicles for safety and emergency purposes. Please display your parking tag and please leave the visitors' spots in the front of the building (Truman Road side) available for guests. Thank you for observing the parking rules.

### SMOKING

Graceland University observes the Independence MO Clean Indoor Air Act of 2006. In addition our entire campus and grounds is considered a smoke free environment. Any use of tobacco products or use of electronic cigarettes is NOT allowed on Graceland property. **The odor of smoke in the classroom or clinical setting is unprofessional and unacceptable.** Students may be asked to leave for smelling of smoke.

### CLEAN AIR

Standards of the American Nurses Association have mandated that all nursing meetings/seminars/classes shall be fragrance free to support the respiratory health and safety of participants. Therefore, to promote the standards of the profession; cologne, perfume, scented lotions, or other fragrances will not be allowed in the classroom or clinical settings.

## STUDENT ORGANIZATIONS

**Missouri Nurses Student Association**  
(MONSA) [www.missourinurses.org](http://www.missourinurses.org)

**National Student Nurses Association**  
(NSNA) [www.nsna.org](http://www.nsna.org)

MONSA is the Missouri (MO) Nurses Student Association. Membership is automatic when students join the NSNA. Annual dues are approximately \$40.00. Membership in MONSA automatically makes the student a member of the National Student Nurses' Association (NSNA). After becoming a member the student will receive official publications from those organizations. Many scholarships are offered on the basis of membership in these organizations. Membership gives Graceland representation at the State Convention, which makes suggestions to the American Nurse's Association and influences nursing education at the state level. Graceland students have held almost every executive position at the state level at some time. Students may also attend state and national conventions. Visit their web site for further information.

**Pi Eta Chapter - Sigma Theta Tau (ΣΘΤ)**  
**International Honor Society of Nursing**  
<http://pieta.nursingsociety.org>

The Pi Eta Chapter of Sigma Theta Tau International was chartered in March, 2000. STTI has 494 chapters at 676 institutions of higher education as one of the largest nursing organizations in the world with over 135,000 active members residing in more than 85 countries. STTI provides many exciting opportunities for nurses globally. Students are invited into the honor society based on academic achievement and academic integrity. Students must rank in the top 35% of their class and have a minimum GPA of 3.0 to be invited to join. All students are invited to attend educational programs and activities sponsored by the honor society. Explore <http://www.nursingsociety.org> for more information.

### **McKevit Manor**

Part of Graceland's uniqueness is found in its social atmosphere. When admitted, all full-time students are assigned to a "House." The House is the basic unit of student life for students at Graceland. Various houses for male and female students exist in the residence halls of the main campus, in Lamoni, Iowa. This "housing unit" in Independence for the upper division nursing major is called "McKevit Manor." The student government is organized around this "housing" structure.

McKevit Manor received its name from the first Chairperson of the Division of Nursing, Margaret McKevit. Leadership for the House is provided by the House Council Officers, who are selected by the students in an election during the fall semester. These officers serve through cooperative efforts. The House organizes its own social, religious, and intra-mural programs.

### **Purpose of the McKeivit Manor:**

1. To promote a professional unity among all students in the nursing major.
2. To aid nursing students in their preparation for professional responsibility.
3. To uphold the belief that a contribution to society is important for personal and professional growth.
4. To encourage free inquiry and discussion with persons in areas of their competence in order to enhance intellectual growth.
5. To create an environment in which each student can expand his own capacity and discover the depths of his own potential.
6. To promote mental and physical well-being through social and recreational interactions.

### **OTHER STUDENT ACTIVITIES**

**NEW STUDENT ORIENTATION:** The McKeivit Manor House Council participates in combination with the School of Nursing to assist new students to become acquainted with the Independence Campus and the community. To welcome new students and their families to Graceland, an open house is held during orientation week.

**MENTOR/MENTEE PROGRAM:** A formal program initiated by the McKeivit Manor House Council provides a senior student mentor for new junior students. A get acquainted luncheon is provided by senior mentor leaders so new junior students become acquainted with their senior mentors.

**ADVISOR/ADVISEE LUNCHEON:** All nursing students are requested to attend this “get acquainted” luncheon to visit with their academic advisors, held twice per academic year. The spring event also includes recognition of student’s academic achievements, for students earning placement on the Dean’s, Honors’, or President’s lists.

**RELIGIOUS LIFE PROGRAM:** The McKeivit Manor House Chaplain promotes and coordinates the spiritual aspect of the religious life program on the Independence campus. The Chaplain often conducts group student prayer sessions before and after exams, as well as before and after other major events. The Lamoni Campus Chaplains may serve as resources and mentors for the student chaplain. Traditionally there are two worship services per year, with one prior to the season of Easter and the other one prior to Thanksgiving.

**STUDENT REPRESENTATION:** Students have many opportunities to be involved on committees at the house council, School of Nursing and University levels. This is a great way to advocate a student voice and be part of decision making in an educational setting.

**MATRICULATION CEREMONY:** Matriculation Ceremony is a **mandatory ceremony** held at the beginning of the fall semester to congratulate the ‘sophomore’ students as they officially move to junior status in the nursing program. The administration, faculty, staff and senior nursing students proudly welcome in the new juniors students wearing their **nursing uniforms** as they officially “matriculate.” Senior students also wear *professional* attire.

**NURSING RECOGNITION AND COMMENCEMENT:** The Nursing Recognition Ceremony and commencement ceremony is held each December in Independence, Missouri. The traditional event symbolizes the completion of the nursing major. Candidates for graduation are honored while parents and loved ones are in attendance.

### **OTHER WAYS TO GET INVOLVED:**

- Be active in student organizations
- Attend campus events
- Finals week Activities

## HOUSE COUNCIL REPRESENTATIVES Graduating Class of 2016

<b>President:</b>	Brooklyne Maize
<b>Vice President:</b>	Ellie Scott
<b>Secretary/Treasurer:</b>	Austin Reyes
<b>Chaplain:</b>	Angela Stanton
<b>Activities Coordinator:</b>	Jen Carollo
<b>MONSA Rep:</b>	Maddy Veuleman
<b>Hospitality Group:</b>	<i>Mentor/Mentee</i> - Heather Fasel <i>Pinning</i> - Jeanna Steffes <i>Birthdays/Holidays</i> - Deanna Pannell

<u>Committee Representatives:</u>	<u>Contact/Chair</u>
<u>Curriculum</u> Committee - Laura Myrick.....	Cindy Waits
<u>Evaluation</u> Committee - Immaculate Kume.....	Michelle Julian
<u>Technology &amp; Educational Resource</u> Rep - Laura Myrick.....	Thelma Sword
<u>Undergraduate Student Affairs</u> - Jennifer Emry.....	Diana Tilton/Lin Howell
<u>Excellence in Teaching</u> Rep - Jeanna Steffes.....	Pam Worlund (Lamoni)



## EMERGENCIES, SAFETY PRACTICES & KEEPING SAFE

Personal safety and caring for valuables:

Keep valuables on your person at all times. DO NOT leave wallets, purses, laptops, tablets, cell phones or other items of value unattended in classrooms, other campus locations, or clinical agencies. Even though we have a secured entry system, many students and other persons can and do come through our campus, so leaving valuables unattended is not advised.

Please help protect vehicles in the parking lot and clinical agencies' lots, by locking them at all times. Keep valuable items such as laptops, purses, tablets, cell phones and other valuables in the building. It is at the student's own risk if he/she chooses to leave something of value in the vehicle. Graceland does not assume any risk or responsibility students' vehicles or its contents while parked in the lots.

The items listed below were provided to help students protect themselves while on the Independence campus. These items have been extracted from the Graceland University Independence Campus Emergency Reference Guide. The list is not complete due to space limitations, but contain safety information for everyday common concerns.

### EMERGENCY CONTACTS

An emergency is any situation – actual or imminent – that endangers the safety and lives of Graceland employees/students, or the security of Graceland property. Students should become familiar with the emergency charts posted in hallways

Independence Campus Emergency Contact list:

Name	Campus
1. <u>Paul Binnicker</u>	816-423-4710
2. <u>Claudia Horton</u>	816-423-4670
3. <u>Sharon Little-Stoetzel</u>	816-423-4685

### EMERGENCY ACTIONS

In the event of an injury or other medical emergency: **Call 911 and get the AED**

AED is located on the 1<sup>st</sup> floor near the elevator on the east end of the building.

Personnel at Independence Campus who are trained and certified to administer First Aid/CPR

Name	Telephone	First Aid	CPR
1. <u>Sharon Little-Stoetzel</u>	<u>4685</u>	<u>___x___</u>	<u>___x___</u>
2. <u>Claudia Horton</u>	<u>4670</u>	<u>___x___</u>	<u>___x___</u>
3. <u>Cindy Leveridge-Gregory</u>	<u>4679</u>	can contact other nursing staff in the building	

## **GU ALERT**

GU Alert is an emergency notification system that will send a text message to a cell phone or an email to an email address when there is an emergency that needs to be quickly announced to a campus. Messages are sent only in the event of a crisis. Graceland encourages all employees, students and faculty to enter their cell phone number or email address to receive these notices.

To ensure students' cell phone numbers are current in the GU Alert System, please use the link below and login with your username and password.

[https://my.graceland.edu/ICS/Resources/Emergency\\_Information/GU\\_Alert\\_system.jnz](https://my.graceland.edu/ICS/Resources/Emergency_Information/GU_Alert_system.jnz)

## **MENACING PERSON/WEAPONS THREAT**

### *Emergency Reactions*

**If there is a potentially dangerous person in your area:**

- Remain calm, cooperate, and don't make sudden movements.
- If safe to do so, quietly evacuate and leave the area.
- **Call 911** when it is safe to do so; **be prepared to give details and description of suspect.**
- If you are in a position to explain your situation, give as much information as possible.  
Give your location – **1401 West Truman Road.**

**When emergencies take place the media often gets involved.**

**Please refer any media personnel seeking information to contact:**

Extension 4710 – Paul Binniker, Independence Campus

## **FIRE**

Know the location of the fire emergency resources in your area, including:

- Fire alarm pull stations
- Fire extinguishers
- Fire exits
- Evacuation route (*posted by each classroom exit door*)
- Assembly site

**EMERGENCY ACTIONS** - If a fire occurs or you detect smoke

- Pull the closest fire alarm pull station.
- Evacuate the building.
- DO NOT use the elevators.
- Call 911 from a safe location and report:
  - The location of the fire 1401 West Truman Road
  - The suspected cause and current status of the fire
  - Your name and phone number
- Return to assembly site.

Do not re-enter the building until the all clear is given by the fire department or authorized personnel.

## **SEVERE WEATHER/TORNADO**

**When the siren sounds, immediately move to designated shelter area.** The designated storm shelter area for this building is: First floor men's and women's restrooms and the West stairwell (Avoid standing in front of or under top stairwell windows)

- **City tornado alert sirens will be sounded for a one-minute blast to inform students of the warning.**
- **If you are in the classroom your professor/instructor will direct you**
  - Tornado Warning **means a tornado has been sighted in the area.** Immediately take cover in the first floor restrooms or west stairwell.

During an actual tornado, students should take shelter immediately in the lowest level in the stairwell on the west side, if closest to that side of the building. For those students closest to the east side of the building, they should take cover in the restrooms on the lowest level. Please remember to stay clear of areas where flying debris might inflict injury.

These are areas containing glass, (classrooms, and the library) internal and external glass doors and windows, (the atrium) and rooms with other glass objects such as computer monitors (computer lab). To avoid possible injury in the event of water or natural gas pipes disruption, during a tornado, please stay away from the equipment/boiler room and the room where the main water connections reside.

- **Remain in the shelter until an *all clear* is given. The *all-clear* is a twenty-second blast sounded on the city sirens.**
- **Someone will come to alert you when the emergency is past and to make sure everyone is safe.**

**TITLE: Policy for Exposure Control and Post-exposure Follow-up to Infectious Agents Including HIV, Hepatitis B and All Other Infectious Pathogens**

Approved: SON Faculty 2/27/2006  
 Effective Date: 2/27/2006  
 Reviewed: 4/18/16  
 Amended: 8/8/2003

**I. Policy:**

Standard precautions will be used to prevent the transmission of infectious agents through contact with blood or body fluids. Body fluids include semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva, and body fluid that is visibly contaminated with blood, urine, breast milk, tears, vomitus, stool, nasal secretions, all body fluids in situations where it is difficult or impossible to differentiate between body fluids, and any unfixed tissue or any organ other than intact skin from a human (living or dead).

**II. Procedure:**

- A. Students and professors/instructors will comply with current CDC and OSHA guidelines for infectious diseases.
- B. CDC and OSHA guidelines protecting health care workers from exposure to BLOOD BORNE pathogens will be followed in all school lab settings and in all clinical areas.
- C. Current guidelines will be available to students and professors/instructors at all times in the School of Nursing.
- D. All students will receive instructions on standard precautions annually. All students must pass the Kansas City Nurse Educators Group standardized Clinical Facility Examination each year before entering any clinical setting.

**III. Post-Exposure Management Policy**

- A. Immediate Treatment (Local wound care must be carried out immediately following any exposure.)
  - 1. Wound Care/First Aid
    - a. Thoroughly clean wound with soap and water.
    - b. Flush mucous membranes with copious amounts of water or saline.
    - c. Other wound care dictated by type and severity of injury.
    - d. The student is financially responsible for all costs incurred during treatment.
- B. Notification of Appropriate Parties
  - 1. The student is responsible for immediately reporting any exposure to his/her professor/instructor and/or preceptor. Reporting delay may jeopardize the accuracy of assessment of the exposure and could impair the ability to institute any available preventative measures.
  - 2. If the exposure occurs in a clinical facility, the professor/instructor and/or preceptor will notify the appropriate supervisor/manager in the facility and have the student follow the facility's protocol.

3. If the exposure occurs in a school laboratory setting or in a facility that will not treat students, the professor/instructor should complete the following:
  - a. Complete immediate treatment.
  - b. An original copy of instructions regarding follow-up treatment and the student's responsibility will be given to the student with a copy placed in the student's permanent file. This will be signed and dated by both the professor/instructor and the student.

C. Documentation of Exposures

1. Documentation of exposure should include the following:
  - a. Completions of the Student Incident Report Form A.
  - b. Signed Post-Exposure Treatment Instruction Form B.
2. Student Responsibilities for Follow-up Treatment
  - a. The student is responsible for completing all follow-up procedures.
  - b. The student is financially responsible for all costs incurred during follow-up procedures.

## **TITLE: Safe Practice Policy**

Approved: SON-FGA May 16, 2011

*Effective Date: 6/27/2011*

*Reviewed: 4/18/16*

*Amended: 5/12/2011; 2/27/2006; 8/8/2003*

### **I. Purpose:**

To reasonably assure that no physical or emotional harm is inflicted upon self and others.

### **II. Policy and Procedure:**

- A. Safe practice is defined in this policy as behavior that demonstrates the knowledge, skill, judgment and accountability necessary to reasonably insure that no physical or emotional harm is inflicted upon self or others: clients, families, co-workers, peers, and faculty.
- B. School of Nursing faculty members have the professional obligation to safeguard patient well-being and to protect student rights.

### **III. Procedure:**

- A. Faculty members are expected to:
  - 1. Specify expectations in measurable terms
  - 2. Assess significant behaviors
  - 3. Give frequent, constructive feedback
  - 4. Provide experiences appropriate to students' level of experiences
  - 5. Document student evaluations
  - 6. Identify all areas in which expectations are not being met
- B. Unsafe behavior:
  - 1. Any behavior that is deemed unsafe by the instructor will be sufficient reason for removal from the clinical setting until measures have been taken to insure safe practice.
  - 2. A student whose behavior indicates a pattern that is unsafe or is deemed likely to become unsafe will receive documentation on a Student Concern Form. An improvement plan may be outlined by the instructor, which may include laboratory review, clinical practice, and counseling. Students have the right to have input into this plan.
  - 3. Copies of the concern form will be given to the Undergraduate Student Affairs Committee (USAC) and the student's academic advisor. Copies will be made available to the Dean of the School of Nursing if necessary.
  - 4. Unsafe clinical practices will be reviewed by the USAC. Faculty, staff, and student documentation will be considered in any review. The Committee will make recommendations for further action.
  - 5. Unsafe practices at any time may be grounds for failure of the clinical course. Failure in clinical will result in an "F" in both the clinical and theory portion of the course.
- C. In order to insure safe practices, students are expected to:
  - 1. Assume responsibility for own actions
  - 2. Prepare in advance for clinical experience
  - 3. Report unsafe practices
  - 4. Apply safety measures to nursing interventions
  - 5. Function within the guidelines and policies of the institution in which they are practicing
  - 6. Maintain personal, physical, and emotional stability

7. Communicate appropriately, adequately, and truthfully, in both written and verbal communication
8. Recognize own limitations and the need for appropriate supervision
9. Provide appropriate care for all individuals regardless of age, sex, race or diagnosis
10. Judiciously protect information of a confidential matter

## **TITLE: Impaired Nursing Student Policy**

Approved by FGA: 6-14-10

Effective Date: 6-15-10

Reviewed: 4/18/16

Amended: (last five years)

### **I. Purpose:**

To provide safe, effective patient care, nursing students must be free of impairment. This includes, but is not limited to, impairment as a result of

- a. Illicit drug use
- b. Alcohol use
- c. Prescribed medication use
- d. Over-the-counter medication use
- e. Psychological or physical illness
- f. Stress
- g. Lack of sleep

This applies to **any** academic setting including class, lab, clinical or a school sponsored event.

### **II. Policy:**

The School of Nursing (SON) expects students to make every effort to take appropriate action regarding patient care. Students are expected to be knowledgeable about interactions among prescribed and over-the-counter (OTC) medications, alcohol and/or other medications/drugs.

### **III. Procedure:**

- A. If a student is taking prescription or OTC medication which may affect their behavior, it should be reported to every clinical faculty member.
- B. At the discretion of faculty, any student showing signs and/or symptoms of impairment may be referred for alcohol and/or drug testing. Signs and symptoms of impairment may include, but are not limited to:
  1. Smell of alcohol and/or breath mints
  2. Mood swings
  3. Patterns of irresponsible behavior
  4. Unexplained absences from the nursing unit, from class, or other
  5. Frequent tardiness and/ or absenteeism
  6. Disheveled appearance or poor hygiene
  7. Blatant impairment of judgment
  8. Bizarre or unusual behavior
  9. Unsteady gait, slurred speech, pupillary changes, red eyes
  10. Frequent errors
  11. Excessive sleepiness
  12. Threatening to harm oneself or others



C. If, in the judgment of the faculty member, a student demonstrates signs and/or symptoms of chemical impairment, the faculty member is to:

1. Remove the student from participation in the class, lab, clinical activity, or school sponsored event
2. Place the student in a secure, private area while arrangements for testing are being made.
3. Testing is to be done as soon as possible. The following guidelines apply to the testing procedure:
  - a. The student assumes the cost of the testing. If results are negative the SON will assume the cost.
  - b. Testing will include a fourteen-panel urine drug screen and a BAT (breath analyzer test).
  - c. If the student does not cooperate with the required testing, the test results will be deemed positive and the policy will be followed.
  - d. If the student is in the academic setting during the hours of 0800 to 2100 Monday through Friday or 0900 to 1300 Saturday, the student is to be escorted to the testing center.
  - e. If not in a local academic setting or if outside regular business hours, the testing facility used will be at the discretion of the School of Nursing.

D. Procedure related to results of screening:

1. If the screening test results are negative, the student will resume school activities without penalty
2. If the screening test results, either drug or alcohol, are positive the student will be required to participate in an evaluation conducted by a licensed healthcare provider and complete an approved treatment program.
  - a. The student's continued participation in class, clinical and other School of Nursing activities is contingent on evidence that the student 1) completes a treatment program approved by the Dean of the SON and, 2) remains drug and alcohol free.
  - b. If the student does not provide evidence of completion of an approved program, he/she will be dismissed from the School of Nursing.
  - c. Evidence of participation in a treatment program will require the student's signed release of records so that the treatment personnel may communicate with a School of Nursing official. The extent of the release may be limited to compliance with and satisfactory progress in the treatment program.
  - d. The School of Nursing will make every reasonable effort to help the student make up any class or clinical experience missed due to absence because of action taken to enforce this policy. However, the regular course absence procedures are applicable.
  - e. The School of Nursing will require random drug and alcohol testing for the remainder of the student's enrollment in the School of Nursing after successful completion of an approved treatment program. Testing is at the expense of the student. A second occurrence of positive drug or alcohol testing will result in the student's immediate dismissal from the School of Nursing.

- f. The student will complete an additional criminal background check at the request of the School of Nursing. The School will have the right to deny re-admission based on the results of the background check.
  - g. An administrative officer of the School of Nursing appointed by the Associate Dean of the Undergraduate Program will monitor the student's compliance with the rehabilitation program requirements.
  - h. Student confidentiality of test results and participation in the treatment program will be maintained by the Dean or Associate Dean of the School of Nursing.
  - i. The cost of the treatment program is the responsibility of the student. Students must select an approved program, which meets the commonly accepted standards of the profession of alcohol and drug rehabilitation treatment. Students must submit their request to attend a particular treatment program to the Dean for approval.
  - j. The type and standards of drug and alcohol testing used by the School of Nursing are determined by the testing organization.
- E. If, in the judgment of the faculty member, a student demonstrates signs and/or symptoms of impairment, due to a condition other than alcohol and/or drug abuse, the faculty member is to adhere to the following guidelines:
- 1. Remove the student from participation in the class, lab, clinical activity, or school sponsored event.
  - 2. If the student is in the clinical setting, faculty will adhere to clinical agency policy when immediate referral and treatment are necessary.
  - 3. In the event the student is not in the clinical setting, depending on the student's condition, the faculty may send the student home or may send the student to a healthcare facility for further evaluation.
  - 4. The student's emergency contact will be notified of the situation and where the student is being sent.
  - 5. The student will be accompanied by a responsible adult. Further evaluation may include a physical and/or psychological examination and/or other evaluations as deemed appropriate by the student's healthcare provider.
  - 6. Written documentation of the student's behavior observed by the faculty must be provided to the Associate Dean of the School of Nursing or his/her designee.
    - a. Review of the faculty documentation and assessment by the Dean or Associate Dean of the School of Nursing will determine whether further assessment, monitoring, and a treatment plan are necessary.
    - b. Potential for dismissal of the student from the nursing program if repeated behaviors indicate continued impairment.
    - c. Responsibility for all expenses incurred as a result of assessment, treatment and transportation will be assumed by the student.

### Clinical Documentation Requirements:

**Be sure to locate all original immunization documents.** You may also be asked to provide a copy of certain immunization records to *Clinical sites upon request*. Under the rules formulated by the Collegiate Nurse Educator group, schools using clinical agencies for student nurse hands-on clinical experiences agree to maintain student documentation (based primarily on current CDC recommendations) including:

Tuberculosis Screening	TB Screening Process	Unique Situations (Exceptions)
<p>At the start of the program (or upon hire for faculty<sup>1</sup>), individuals must provide proof of the absence of active Tuberculosis (TB) disease.</p> <p>TB screening must be done within 60 days of the start of clinical education, and annually thereafter (students and faculty<sup>1</sup>).</p>	<p><b><u>An initial TB skin test (TST) or IGRA* (blood test for TB) will be required within 60 days prior to start of clinical education.</u></b> If documented TST in the past 12 months, see below**. If you have never been skin tested for TB, you will need to do a <b><u>2-step screening</u></b> as follows:</p> <ol style="list-style-type: none"> <li>1. If first TB Skin test (TST) is <b><i>positive</i></b> (+)—individual is considered infected (see guideline for + TST in next column).</li> <li>2. If first TST is <b><i>negative</i></b> (—)—do the second TST 1-3 weeks later.</li> <li>3. If second TST is <b><i>positive</i></b> (+)—individual is considered infected (see guideline for + TST in next column).</li> <li>4. If second TST is <b><i>negative</i></b> (—)—considered a negative (—) baseline.</li> </ol> <p>**If you have <b><i>documentation</i></b> of a TST done within the past 12 months, you will need to have <b><u>one additional TST within 60 days of the start of clinical education.</u></b></p> <p><b><u>*If contraindication to TB skin testing</u></b> (examples include: History of (+) TST or History of BCG vaccination against TB), or if personal preference dictates, the individual will provide documentation of a negative (—) <b><u>Interferon-Gamma-Release-Assays (IGRA) within 60 days of the start of the clinical education.</u></b></p> <p style="text-align: center;"><b>If IGRA is negative (—), individual will provide documentation <u>annually</u> of a negative (—) IGRA.</b></p>	<ol style="list-style-type: none"> <li>1. Newly discovered positives for latent TB must have a chest X-ray and signs/symptoms review to rule out active TB. The positive TB test must be reported to the health department in the county where they reside except for Kansas City, (Jackson County) Missouri, which is reported to the KCMO Health Department. They would provide documentation of the new positive TB test(s), chest X-ray report and signs/symptoms review. Treatment is determined between the person testing positive, the health department and the person's personal physician. Treatment is not required unless mandated by the health department.</li> <li>2. <b><u>Repeated chest X-rays</u></b> of persons with latent tuberculosis infection, as evidenced by a positive TST or positive IGRA, <b><u>are not indicated</u></b> unless symptoms are present, exposure has occurred, or the signs/symptoms questionnaire is positive.</li> <li>3. <b><u>If IGRA Or TST is positive (+):</u></b> <ol style="list-style-type: none"> <li>a. Individual will provide documentation of a negative (—) chest X-ray (two views—PA and Lateral).</li> <li>b. Provide a TB signs/symptoms questionnaire<sup>2</sup> (see Appendix E).</li> <li>c. Provide documentation from their health care provider that they are non-infectious for TB and safe to care for patients.</li> <li>d. Then annually, if IGRA is (+), the individual will do steps b &amp; c, but an <b><u>annual X-ray is not indicated.</u></b></li> </ol> </li> </ol>

	<p><b>NOTES:</b></p> <ol style="list-style-type: none"> <li>1. <i>Be aware if receiving a live virus immunization (such as varicella, MMR or Flu), you will need to have your TST done either at the same time, <u>or wait 4 weeks.</u></i></li> <li>2. <i>TB Screening compliance must remain current throughout the clinical rotation.</i></li> <li>3. <i>Chest X-ray is not permitted in lieu of TB Screening.</i></li> </ol>	
<b>Rubella, Rubeola (Measles), Mumps-MMR</b>	Provide documentation of 2 (two) MMR vaccinations at least 28 days apart, <b>OR</b> serological proof of immunity (+) positive IgG titers for rubella, rubeola and mumps.	
<b>Varicella (Chicken Pox)</b>	Provide documentation of 2 (two) varicella (chicken pox vaccine) immunizations at least 28 days apart, <b>OR</b> serological proof of immunity (+) positive IgG for varicella.	
<b>Hepatitis B</b>	<p>Receive a series of three (3) vaccines over a six month period followed by a post-series surface antibody titer 4-8 weeks after the last vaccine is given.</p> <p>Though not recommended, this vaccine can be waived (See Hepatitis B Fact Sheet &amp; Waiver Form—Appendix F).</p>	<p>If Hepatitis B titer is <b>negative</b> after initial series of three vaccines:</p> <ol style="list-style-type: none"> <li>1. Receive <u>one</u> additional vaccine (first of a possible second series)</li> <li>2. Do a surface antibody titer within 4-8 weeks. <ol style="list-style-type: none"> <li>A. If titer is positive, no further action needed.</li> <li>B. If titer is still negative, receive the 2<sup>nd</sup> and 3<sup>rd</sup> vaccines in the second series <b>and</b> receive a Hepatitis B surface antigen test to determine if infection is present.</li> </ol> </li> <li>3. After 3<sup>rd</sup> dose of second series, re-titer within 4-8 weeks, and if still negative, <b>individual is considered a “non-responder.”</b></li> </ol>
<b>Tetanus-Diphtheria-Acellular Pertussis (Tdap)</b>	<p>Show evidence of one dose of Tdap.</p> <p>A Td booster is required every 10 years or, if wound injury occurs after 5 years since last dose.</p>	
<b>Influenza</b>  <b>(Flu season October 1-March 31)</b>	Show documentation of seasonal flu vaccine per annual CDC announced date (usually available sometime in September).	<ul style="list-style-type: none"> <li>• In the rare occurrence a student has a medical contraindication or request for religious exemption, an appropriate accommodation form must be completed, approved by a designated hospital representative, and on file. [Clinical partners may not honor an accommodation—please allow 3-4 weeks for this process to take place.]</li> </ul>

		<ul style="list-style-type: none"> <li>• Some clinical partners <b>will not accept</b> accommodation requests.</li> <li>• There is an alternative vaccine for those with egg allergies.</li> <li>• Wearing a mask at the clinical site may or may not be an option for non-immunized; check at specific facilities for policy on non-immunized persons.</li> </ul>
<b>Health Insurance</b>	Must provide documentation of personal health insurance coverage. Though not recommended, some schools may allow a waiver to be signed.	
<b>CPR</b>	Basic Life Support (BLS)—must be through <b>American Heart Association</b> and be <b>Healthcare Provider</b> course. This must be updated every two years. Individuals must remain in compliance throughout the nursing program.	
<b>Color Blindness</b>	Color blindness screen must be performed once at the beginning of the program and results documented. <b>Screening must be done using a test which is approved by an ophthalmologist (i.e., Ishihara's Test).</b>	

#### Accident and Hospitalization Insurance

- A. Graceland students are required to provide proof of hospitalization insurance. The plan may be one that is provided by parents, spouse, or self.
- B. Verification of hospitalization insurance must be provided by August 1.

#### Emergency Care – Procedure:

- A. Students are encouraged to use health promotion measures to maximize their own health.
- B. In the event of illness or accident while in the clinical setting, students report first to their current clinical instructor.
- C. Students are personally responsible for any financial charges incurred.
- D. Students are financially responsible for all prescriptions, laboratory fees and X-ray costs.
- E. In case of an emergency, the student should arrange for immediate care and contact the instructor as soon as possible.
- F. Costs incurred by visits to a hospital emergency room are the student's responsibility.
- G. Graceland faculty and staff will NOT transport students for any reason.

## UNIVERSITY POLICIES

### Technology Ethics and Use Policy (Acceptable Use Policy)

**PURPOSE:** To communicate expectations for the appropriate use of Graceland-owned technology.

Users of Graceland's technological tools will respect the human dignity, privacy, and sensitivity of each other and the general public while using the tools made available by Graceland. Graceland reserves the right to routinely monitor technology resources. While the privilege of privacy of personal files or messages on Graceland-owned computers and voice mail systems will be respected to the extent possible and subject to the right of Graceland to access any files to officially investigate or to accomplish necessary system maintenance, users of Graceland-owned computers have no legal expectations of privacy with respect to personal files or messages stored on the computer hard drive or stored in or transmitted through Graceland's system/servers. Additionally, users of non-Graceland-owned computers have no legal expectations of privacy with respect to personal files or messages stored in or transmitted through Graceland's system/servers.

All technology provided by Graceland is covered by this policy, including computers, networks, Internet services, telephones, voice mail, fax machines, photocopiers, cable TV and all associated software and data. Such technology is provided to accomplish Graceland's educational mission in accordance with Internal Revenue Code Section 501(c)(3), under which Graceland receives its tax-exempt status.

Graceland's network enables access to external facilities, systems, and other networks over which Graceland has no control, including related capabilities which are incidental to providing such access. Certain of these resources may not support Graceland's goals and objectives.

Although Graceland does not exercise editorial or censorship control of such external resources, Graceland expects that the technology will not be used for purposes which are illegal, immoral, or inconsistent with Graceland's mission.

Academic and professional work pertaining to Graceland's goals and objectives take precedence over the use of resources for entertainment.

Graceland may establish additional standards of conduct with designated technology or in specific areas (e.g. Microlabs, classrooms, etc.) Inappropriate uses of technology include, but are not limited to those specifically prohibited by local, state or federal law. Without limitation, examples of inappropriate uses of technology include:

- Harassment - sending of harassing, threatening or obscene material to minors and/or non-consenting adults or any attempts to confuse or frustrate another user in achieving their objectives.
- Random or unauthorized bulk sending or mailing of messages; inappropriate use of access, any disregard for the security mechanisms that are in place or other attempts to gain

unauthorized access to Graceland's technical resources. This includes possession of or attempts to acquire another user's password or allowing others access to technology resources that are not allocated for their use.

- Failure to comply with software license restrictions - All licenses for software that are licensed by Graceland will be filed by ITS.
- Disruption of service - damaging any resource in such a way that it creates a disruption of the normally expected service from that resource, including generating excessive network traffic and/or interfering with the normal functioning of the network.
- Cheating - use of technology resources to achieve academic credit by dishonest or deceitful means.
- Copyright infringement; forgery; malicious transmission of a computer virus.
- Malicious alteration of system files or configuration.
- Abuse of established storage space limitations.
- Use of any resource to inure benefit for private or political gain in violation of Graceland's tax-exempt status under IRC Section 501(c)(3).

Content shared by “peer-to-peer” (p2p) applications may be violation of the Digital Millennium Copyright Act (DMCA), and violates GracelandUniversity policy by generating excessive network traffic and interfering with the normal functioning of the network. These applications are prohibited on the GracelandUniversity network. This means that:

- Peer-to-peer file sharing applications including, but not limited to, Napster, Gnutella, Kazaa, AudioGalaxy, iMesh, and others, may not be installed or used on computers owned or managed by GracelandUniversity.
- Peer-to-peer file sharing applications including, but not limited to, Napster, Gnutella, Kazaa, AudioGalaxy, iMesh, and others, may not be installed or used on computers attached to the GracelandUniversity network, regardless of their ownership.
- The Graceland University Information Technology staff may, in order to ensure compliance with Graceland policies and Federal or State Law, inspect and remove any of the prohibited software from any equipment currently or previously attached to the GracelandUniversity network.

**CONSEQUENCES:** Graceland reserves the right to take corrective/disciplinary action in the event of inappropriate use of technology, which may include but not be limited to the following:

Cases involving suspicion of inappropriate use of technology by students will be investigated by the Information Technology Services Department. If violations are confirmed, a referral for disciplinary action will be made to the Dean of Students. A determination of serious misuse may result in suspension from the university. In cases involving misuse of resources allocated for a particular course, the course instructor may assign a failing grade.

Cases involving inappropriate use of technology by employees, including student workers, will be handled in accordance with existing personnel policies. Serious misuse may result in termination of university employment. Cases involving violation of local, state or federal laws will be referred to external authorities as directed by the Vice President of Business Services of Graceland University.

Cases involving non-students or non-employees will be referred to the area supervisor who will take action appropriate to the incident. This may include contact with Graceland security and/or referral to other external authorities for action. Serious misuse may result in expulsion from all Graceland facilities for an indefinite period of time.

### **School of Nursing Addendum to the Technology Ethics and Use Policy**

Approved: SON-FGA May 16, 2011

Effective date: June 27, 2011

Reviewed: 4/18/16

Amended: 5/7/2014

Students will be at various locations during their program and will have access to many different systems. The following guidelines must be followed:

- Students are not allowed to change any computer settings, including background or screen savers, at clinical sites or on Graceland computers in the lab, library or technology classroom.
- Students may not download or save any material on a computer at a clinical site.
- Students may not visit any unauthorized outside internet sites (i.e., social networking sites, eCollege, personal or Graceland email, etc.) on computers, iPads, or cell phones while in the clinical setting.
- No unauthorized photographs may be taken at any clinical setting or site.
- No unauthorized printing or photocopying at the clinical site.
- No patient information may be taken from the clinical setting.
- No information related to the student nurse role (including but not limited to: patient information, clinical site information, faculty/instructor information, exam content, etc.) may be shared on any social media site.

Any violation of the above guidelines will result in faculty completing a Professional Behavior Concern Form to be submitted to USAC. The committee will decide if the violation will result in an Unsatisfactory Professional Conduct (UPC).



## **Code of Conduct**

As a Christian institution, Graceland University seeks to foster relationships that reflect mutual concern, dignity and individual worth. Consistent with its religious heritage and commitment to a healthful lifestyle, Graceland values and promotes:

- an alcohol-free environment,
- a tobacco free environment,
- an environment free of substance abuse,
- an environment free of harassment and exploitation in sexual relationships, and premarital abstinence.

Our Code of Conduct reflects these values. All members of the Graceland community are expected to abide by all federal, state, local laws as well as rules and regulations of the University. The Code of Conduct is administrated by the Vice President for Student Life/Dean of Students.

### **EXPECTATIONS AND VIOLATIONS**

The following types of behavior have been identified as inappropriate, and a violation may result in disciplinary action. Although specific violations have been identified, it is recognized that other types of inappropriate behavior, which are detrimental to the best interests of the University or members of its faculty, staff, or student body, may be referred for disciplinary review.

*(Sections of the policy relating to the Lamoni campus housing units have been omitted.) The entire policy may be reviewed in the online catalog.*

#### **Class C Violations (Anywhere, Anytime)**

1. Any disruptive and/or abusive behavior which disrupts a class, an official University function or the living/learning environment of the institution. Please note: Alcohol impairment may be deemed disruptive behavior.
2. Any form of theft or stealing.
3. Consumption/possession of alcoholic beverages or their containers on campus (excluding University housing) or at University sponsored activities. Please note: Possession also means being in the presence of alcohol or their containers.
4. Destroying, damaging, endangering or vandalizing private, public, or University property.
5. Destroying, tampering with or altering fire alarms or other safety equipment.
6. Discrimination, including but not limited to, verbal abuse, racial slurs, sexual innuendos, or the threat of physical abuse, expressed verbally or in written or electronic communications.
7. Endangering the health or safety of self, another person or University faculty/staff or threats of endangerment.
8. Failure to comply with the directions of a University official or failure to identify self to, falsely identifying self to, providing false information to a University official.
9. Hazing.
10. Intentional misuse/abuse of the University computer system, or repeated unintentional misuse/abuse. (See Computer Ethics and Use Policy contained in the Student Handbook)
11. Lying to University officials or to a disciplinary council.

12. Second offense and beyond of consumption/possession of alcoholic beverages or their containers in the residence halls.
13. Sexual behavior, which is offensive or fails to respect other's rights.
14. Sexual contact or sexual touching of another person without consent.
15. Striking another person without consent.
16. Use or evidence of use of tobacco in any form on campus or at University sponsored activities.
17. Use, possession or distribution of any controlled substance, including, but not limited to, narcotic drugs, marijuana, stimulants, barbiturates and/or hallucinogenic drugs, unless prescribed by a licensed physician. Please note: Possession also means being in the presence of controlled substance.
18. Use or possession of firearms, ammunition, fireworks (including smoke bombs), explosives, incendiary devices, weapons, dangerous substances, drug paraphernalia and/or materials prohibited by law while on campus or in attendance at University sponsored activities. Please note: Possession also means being in the presence of any of the aforementioned items.
19. Viewing or displaying pornography in a public access area or computer lab.
20. Violation of University policies, city ordinances and/or state and federal laws.
21. Violation of Conduct Probation or Strict Campus Conduct Probationary status.

Lack of mention in the Code of Conduct with regard to objectionable actions does not imply approval, and may result in disciplinary action. We believe that violation of the Code of Conduct impinges directly on the rights of others. CLASS C cases will be referred to the Dean or the Associate Dean of Students or referred to the Council on Student Welfare.

PLEASE NOTE: The Vice President may opt to handle any alleged violation at any time. Local authorities may also be called to handle potentially dangerous situations. Actions taken by local authorities will be in addition to disciplinary action by the University.

## **DISCIPLINARY HEARINGS AND COUNCILS**

The following disciplinary hearings and councils have been formed to hear cases based upon where the violation took place, the severity of the violation, and which council, in the opinion of the Dean of Students or designated Residential Life Professional is best equipped to handle the hearing of a particular violation.

Students who admit they are "in violation" may ask for an administrative hearing with the VP for Student Life/Associate Dean Students (Class C violations). The administrator has the right to not hear a case. If the case is not heard by the administrator, the case will be referred to the appropriate disciplinary council.

The Council on Student Welfare (CSW) is a council composed of three faculty members, one administrator and four students as outlined in the GSG Constitution. The Dean or Associate Dean of Students will serve as advisory members to the CSW. The Council on Student Welfare may hear Class C violations and any case in which dismissal from the University is a possible sanction.

## **SANCTIONS**

The listed disciplinary actions are courses of action which may be taken when a student is found to have committed a violation as defined in the Code of Conduct. The sanction(s) taken depend(s) upon the severity of the violation, previous offenses, degree of involvement, and the individual circumstances as determined and is at the sole discretion of the administrator/Council hearing the case. These sanctions and their descriptions shall serve as guidelines for the University and may be modified and used in any combination to meet the needs of the University and the individual student involved.

A record of the disciplinary action will go to the student. A copy of the action will be kept in the Dean of Student's Office. Disciplinary actions are not recorded on a student's permanent file unless a student is dismissed from the University.

## **AQUITTAL**

Student is found not to be in violation of the charge against him/her and the matter is dismissed.

## **RESTITUTION**

Payment for repair or replacement costs of property damaged or lost. Full payment is due in the Student Life Office within 21 calendar days (three weeks) from the date the sanction is issued.

## **COMMUNITY SERVICE**

A community service sanction depends upon the severity of the violation, degree of involvement and the circumstances surrounding the incident. The work, not less than five hours and not more than ten hours per violation, may be assigned.

Community service may be administered as a sanction in place of or in addition to a fine. It is most appropriate when it is believed that the student will learn the consequences of his or her actions as a result of the service. It is also appropriate when the action which brought the student to disciplinary review involved a lack of concern for the community. Community service must be completed within 21 calendar days (three weeks) from the date the sanction is issued. If hours are not completed within this time frame, a fine (amount to be determined by the administrator/council) will be applied to the student's account.

## **FINES**

Fines will depend upon the severity of the violation, previous offenses, degree of involvement, and the circumstances. Fines may be levied as a sanction according to the following guidelines:

- Class A violations: Fines may be assessed up to \$50 per violation.(Lamoni)
- Class B violations: Fines may not exceed \$100 per violation. (Lamoni)
- Class C violations and other cases heard: The fine will not exceed \$250 per violation. Full payment is due in the Student Life Office within 21 calendar days (three weeks) from the date the sanction is issued.
- The student may be ordered to make restitution to the University for vandalism or to another injured party, in addition to the any fine that may be given.

## **ALCOHOL EDUCATION**

First time offenders of the alcohol policy will be required to complete the Alcohol Response-Ability Course. The cost for the Alcohol Response-Ability Course is \$35. Students issued this sanction will be required to make an appointment with the counselor in the CAP center. The course must be completed within two weeks from the date a student is given instructions on starting the course. Failure to complete the course will result a \$50 fine sent to the student's account and the student's parents will be notified.

### **DRUG RESPONSE PROGRAM - Class C Only**

First time offenders will be required to notify his/her parents or guardians. Within 24 hours of the meeting with the student, the parent/guardian must inform the Dean of Students that they have been notified.

The student will be required to undergo a substance abuse assessment. The student will be required to complete all recommendations made by the substance abuse counselor. The expense of the assessment and required sessions will be the responsibility of the student.

### **ANGER MANAGEMENT COUNSELING**

A student issued this sanction will be required to meet with a counselor until released by the counselor. The first session must be scheduled by the student within one week from the date the sanction is issued.

### **COMPUTER USAGE RESTRICTIONS**

A student may be restricted from certain privileges for a given time.

### **PARENTAL NOTIFICATION**

A decision to notify parents depends upon the severity of the violation, degree of involvement and the circumstances surrounding the incident and for any drug-related violation. Students issued this sanction will be required to notify his/her parents or guardians. Within 24 hours of the meeting with the student, the parent/guardian must inform the Dean of Students that they have been notified.

### **PROGRAM DIRECTOR NOTIFICATION**

Program directors including coaches will be notified if a student is in violation of a Class C Violation. The program director may impose further sanctions at their discretion.

### **CONDUCT PROBATION - Class C Only**

This is a formal probationary status for a period of time determined by CSW or the Dean or Associate Dean of Students. Restrictions and provisions of this probation are individualized to allow for the particular need of the student, the University and/or the situation. The student will be prohibited from holding office in extracurricular clubs and/or house councils. Any further violations while on probationary status means that the student is subject to further disciplinary action.

### **STRICT CONDUCT PROBATION - Class C Only**

This term describes a set of conditions making it possible for a student to remain a student in the University in spite of a serious violation. This action is a formal probationary status during which the student is removed from good standing at the University. This status is very near dismissal from the University and indicates the extreme seriousness of the probation.

The student will have the following conditions imposed when removed from good standing. These conditions will remain in effect until the student is returned to good standing at the University.

- Student will be ineligible to graduate until the student is returned to good standing.
- Student will be restricted from representing the University in any public performance or exhibit, sporting event, intramural event, committee assignment or in running for and/or holding any governmental office or any office in a recognized student organization.
- Student will be ineligible to receive scholarships and/or or grants from the University with the exception of need-based aid.
- Any further violation of University standards while on probationary status means that a

student is subject to suspension from the University.

### **DISMISSAL FROM THE UNIVERSITY - Class C Only**

A student may be dismissed immediately from the University for a period of time to be designated by the CSW or the Dean of Students.

### **APPEAL PROCEDURES**

Any student found in violation of the Code of Conduct has the right to appeal his/her case. In cases heard by the Residence Life Council, the Hall Director or the Associate Dean of Students appeals will be heard by the Dean of Students. In cases heard by the Council on Student Welfare or the Dean of Students, appeals will be heard by the Vice President Council. The Vice President Council is composed of the Vice President for Academic Affairs (chair) and one other Vice President (other than the VP for Student Life).

If a student wishes to appeal a decision he/she must submit a written appeal within three days (72 hours) after the student has been notified of the decision. Appeals will be heard based on the following:

- Insufficient evidence
- Lack of due process
- Prejudice on part of person/council hearing the case
- Improper notification of the hearing

### **Photo and Videotape Policy\*\*\***

Graceland University takes photographs and videotapes of students throughout the year. These images often include students in classrooms, residence halls, micro labs, athletic events and other university activities. Graceland University reserves the right to use these photographs and videotapes in the promotion of the university. Students who enroll at Graceland University do so with the understanding that photographs may be taken which would include them and these photos may be used in university publications, newspapers and other media for promotional purposes only. Names of students may also be released to the press regarding student involvement in academic and extracurricular activities.

### **\*\*\*School of Nursing Addendum to the Photo and Videotape Policy**

Approved: SON-FGA November 13, 2012

Effective date: November 13, 2012

Reviewed: 4/18/16

Amended:

### **Students are prohibited from photographing or video recording faculty at any time.**

Students may only audio record faculty in the classroom during lecture. Students must request and receive permission in advance, via email, to audio record the faculty. Any audio recording of class lecture is for that student's personal use only, and may not be copied, transmitted, posted, or shared in any format with any other person or entity.

## Academic Integrity Policy

### **From the Nursing faculty:**

*“The nursing faculty recognizes there are times in college that you may feel pressured to cheat on a test or violate the Academic Integrity policy. It is important for you to recognize the warning signs and resist the temptation to violate your personal and academic integrity. We encourage you to talk with your instructor, your advisor, or one of the New Directions counselors. We are willing to listen and help you through these times of difficulty. Please remember that there are appropriate alternatives to cheating. We are always available to help facilitate your learning and academic success.”*

Academic integrity is a highly valued principle that undergirds all facets of academic life at Graceland University. We believe adherence to principles of honesty is a requisite for preparing students as competent responsible persons. Students admitted to the university are expected to uphold standards of academic integrity, i.e. the avoidance of cheating and plagiarism in any form. An instructor may assign a grade of “F” for the course in cases of cheating and/or plagiarism. The faculty member will report all cases of fraud, plagiarism and/or cheating to the respective dean or division chair, and the dean of faculty. Violation of the academic integrity policy may have additional consequences including sanctions or dismissal from a program or from Graceland University.

**Cheating:** The following list describes ways to avoid the most common forms of cheating.

1. Do not give assistance to, or receive assistance from, another person, or use unauthorized notes, books, etc., when an examination or assignment is supposed to be individual work.
2. Do not falsify research results or violate codes for the treatment of human or animal subjects.
3. Do not violate the policies of proctors, preceptors or supervisors.
4. Do not use an electronic copy of another person’s work as the starting point for individual assignments, without the instructor’s permission.
5. On collaborative works, include the names of all participants on any copies that are submitted for evaluation.

**Fraud:** The following list describes ways to avoid the most common forms of fraud

1. Do not alter or falsify or misrepresent an academic document.
2. Do not help someone alter or falsify an academic document
3. Do not communicate false information whether oral, written, electronic or nonverbal
4. Do not forge signatures

**Plagiarism:** Plagiarism is representing someone else’s work as your own. The following list describes ways to avoid the most common forms of plagiarism.

1. Set off all direct quotations within quotation marks or within the text in a block quote form. To fail to indicate direct quotations by one of these two methods is to commit plagiarism even if the failure is accidental and even if the student gives the source of the quotation. In a speech, the student must also indicate the beginning, ending and

source of all direct quotations to the audience.

2. If the student derives an idea from another source, cite the source unless the idea is common knowledge, that is, unless people are familiar with the subject that is being discussed and are aware of the idea.
3. Cite the source of paraphrased material and avoid excessive paraphrasing. Too much paraphrasing minimizes the student's contribution.
4. Papers should be submitted that consist substantially of the student's own work. Do not buy, borrow or use complete, or nearly complete, papers from any source, electronic or otherwise.

An instructor may assign a grade of "F" for the course in cases of plagiarism and/or cheating. The faculty member will report all cases of plagiarism and cheating to the Dean of the School of Nursing and the respective associate dean (complete policy can be found in the university catalog). \*\*Students in the nursing program may be dismissed for plagiarism and/or cheating.

*Nurses are bound by a code of ethics. Our first tenant is to protect patient safety. Cheating or helping someone else to cheat ultimately puts patients at risk. Students in the nursing program may be dismissed for violating the academic integrity policy.*

*Students in the School of Nursing are required to sign a form containing the Honor Code at the beginning of summer classes and at the beginning of their senior year for BSN-RN students.*

### **Turnitin Plagiarism Detection Service - Submission Statement**

Graceland University's School of Nursing highly values academic integrity and is committed to the fundamental value and obligation of preserving academic honesty among our faculty, students and graduates.

Students agree that by taking this course all required papers may be subject to submission, at the discretion of the faculty member, for text comparison by Turnitin, a plagiarism detection service, and other means of detecting plagiarism. All papers submitted to Turnitin will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of future papers.

Use of the Turnitin.com service is subject to the Terms and Conditions of Use posted on [www.Turnitin.com](http://www.Turnitin.com)

### **Exception to Academic Policy**

The School of Nursing follows the University Exceptions to Academic Policy as outlined in University Catalog. Requests for exceptions to undergraduate academic policies regarding major, minor and program requirements are reviewed and acted upon by the School of Nursing. Requests for all other academic policies are reviewed and acted upon by the Curricular Adjustment Committee. Appeals may be made to the appropriate Academic Council. The full policy may be reviewed in the online University Catalog.

## **Drug-Free School and Campus**

Graceland has published information compiled in accordance with the Drug-Free Workplace Act. This information is available in the Student Life Office to all current students and employees, and to any applicant for enrollment or employment, upon request.

## **Discrimination Policy**

Graceland University does not discriminate against any student or prospective student on the basis of race, color, religion, age, sex, national origin, sexual orientation or disability. Any discrimination concerns should be directed to Graceland University's designated Title IX compliance officer and Section 504 coordinator: Executive Director of Human Resources, Graceland University, 1 University Place, Lamoni, IA 50140, 641.784.5447.

## **Harassment Policy**

Harassment of students is not tolerated at Graceland University. Harassment undermines the mission of the university through its insidious and detrimental impact on individual students, faculty, staff and on the university community as a whole. Harassment stifles the realization of the victim's full potential as a student, faculty or staff member. Harassment is especially serious when it threatens relations between faculty and student or supervisor and subordinate by unfairly exploiting the power differential between the parties in the relationship. Likewise, Graceland University does not tolerate harassment between people of equal university status. Additional information is available in the Dean of Students Office to all current students, and to any applicant for enrollment. Additional information on the Sexual Abuse and/or Sexual Harassment Policy is available in the Dean of Students Office and the Graceland University website.

## **Grievance Procedure**

Graceland University will generally handle complaints or concerns of students through the grievance procedure. Any member of the Graceland student body, who has a complaint or concern, may initiate informal or formal actions for complaint resolution in the Dean of Students Office. This procedure is designed to handle situations expediently. Graceland will handle complaints or concerns with sensitivity, confidentiality, and with respect to the Graceland community. A copy of the grievance procedures is available in the Dean of Students office and the Graceland University website.



# SCHOOL OF NURSING EXPECTATIONS

## STUDENT EDUCATIONAL RESPONSIBILITY

### Academic and Behavioral Expectations:

Active participation, academic integrity, and professional behavior in all settings are expected. Along with learning theoretical concepts, development of professional behaviors is a key component of the nursing curriculum.

- Students will treat peers, colleagues, clinical agency staff, Graceland University staff and faculty with respect at all times.
- Upper division college level course work is challenging. Expect to spend a minimum of 35 hours of studying for every semester hour of credit. Nursing coursework is especially challenging and study time may exceed the above stated minimum.
- Because the practice of professional nursing involves critical life and death decisions, it is the policy of the School of Nursing that students **must achieve at the level of C or above in both theoretical and clinical components of each course.**
- Learning activities are planned for each class period. To be successful, students' attendance in class is essential. Students who read the assigned materials before class and actively participate in each learning opportunity (classroom and clinical), maximize their chances of successfully completing the program.
- Attend scheduled classes, be punctual, and complete all assignments even if class is missed. Students will inform the course instructor if they will be late or not attending class via Graceland University email.
- Keep side discussions to a minimum in class to avoid distracting others.
- Silence all cellular phones, tablets, or other electronic devices during class time, to avoid disrupting class. A computer may be used for taking notes, but please stay on task and avoid viewing emails, Facebook, etc. which distracts you and your peers from the lecture and classroom activity.

### Incomplete Grades:

An incomplete grade request may be made due to extenuating circumstance and must be initiated by the student (meaning the student must start the process). The student must make an appointment with their instructor to fill out an Incomplete Grade Contract (link below). An instructor may assign a grade of "I" (Incomplete) when minimum course requirements are unfinished. The instructor, at the completion of the course work, will assign a grade. Please see the policy located at the Graceland University website. Taking an incomplete may inhibit a student's progression in the program. Please see the policy for more information.

[https://my.graceland.edu/ICS/icsfs/Incomplete\\_Contract.pdf](https://my.graceland.edu/ICS/icsfs/Incomplete_Contract.pdf)

**Withdrawal:**

If the student chooses to **withdraw** from a course the student must first consider the consequences. Call or see a financial aid representative to discuss financial concerns. Each course is a prerequisite for the next sequenced course. Usually courses are not offered again until the next academic year. Do not run the risk of failure or being dismissed from the program. The student should contact their faculty advisor to discuss all options before making a hasty decision. Withdrawing from a course or from the entire nursing program requires following the necessary steps. See the Undergraduate Program Administrative Assistant for further details about the procedure.

**Visitors in the Classroom:**

To maintain academic integrity and safety in the classroom, skills lab, and clinical agencies, **children** and other persons not enrolled at Graceland University are prohibited from those areas.

**Online Catalog & Academic Calendar:**

It is the student's responsibility to know school policies (online catalog & student handbook) and be aware of pertinent information such as add/drop/withdraw dates. The Online Catalog and Academic Calendar are available at the Graceland University website.

**International Students:**

International students must comply with specific Federal regulations in order to maintain their required status. Changes must be documented and/or reported in a timely fashion in order to remain compliant. Situations requiring documentation include but are not limited to:

- Changes of address, major, finances, credit hours, suspension, withdrawal/termination, school transfer, completion of studies, and any type of employment.
- Questions or further information, call the Graceland International Programs Office on extension 5412 in Lamoni. On the Independence Campus, contact Cindy Leveridge-Gregory- extension 4679.

**Library Facilities:**

Students are reminded that they are guests in the library. Please no food or drink in the library! Students are expected to observe all rules and expectations, as well as rules of common sense and courtesy. Failure to comply with the rules may result in loss of library privileges. Students with library fines outstanding or overdue books may not be allowed to register for courses until deficiencies have been satisfied. Diplomas and transcripts may be withheld from graduating seniors for library or other financial obligations.

**Clinical Practice and Attendance:**

Student performance in clinical will be evaluated through a variety of methods. Final evaluation is pass/fail. Passing performance is obtained by meeting minimum standards derived from the course objectives. A failing grade in the clinical portion of the course will automatically result in failure of the entire course regardless of the theory grade obtained by the student.

Student cell phones are PROHIBITED in the clinical setting. Please provide family and significant others with instructor's contact information for emergencies. The nursing Undergraduate Program Administrative Assistant will also have access to clinical faculty in case of an emergency.

Clinical attendance is **critical** to the determination of a student's satisfactory performance. Students must be prepared and present every clinical day.

- Tardiness to the clinical area is unacceptable and will result in a Student Concern Form (see policy).
- Students must call their instructor if late or absent prior to the start of clinical!
- Absences due to illness or emergencies must be discussed with the course coordinator.
- Specific assignments for clinical makeup will be at the discretion of course coordinator.
- The USAC makes the final determination if the student will receive an Unsatisfactory Professional Conduct (UPC) related to the absence.

**Personal Information:**

Be aware that personal information such as name/address/phone number/social security number may be required by some of the clinical agencies used for clinical rotations. In addition, all agencies require the School of Nursing to have paperwork documentation for immunizations before the student will be allowed to attend clinical. Students must keep their own records of all clinically required documentation. The school will not provide copies of this information.

**HIPAA Reminder**

Compromising confidentiality is a serious issue. Each student is expected to sign a patient/agency confidentiality form and abide by its content. DO NOT remove documents or protected health information from any agency. If a student violates the Health Insurance Portability and Accountability Act (HIPAA), he/she will receive a Student Concern Form and an automatic UPC. The student may be dismissed from the program. Any questions regarding HIPAA should be directed to the instructor and SON HIPAA Policy should be consulted.

## ANA Code for Nurses\*

### The Nonnegotiable Nature of the ANA Code for Nurses with Interpretive Statements.

**Summary:** The American Nurses Association (ANA) *Code for Nurses with Interpretive Statements* (*Code for Nurses*) explicates the goals, values and ethical precepts that direct the profession of nursing. The ANA believes the *Code for Nurses* is nonnegotiable and that each nurse has an obligation to uphold and adhere to the code of ethics.

**Background:** Health care ethics is concerned with the rights, responsibilities, and obligations of health care professionals, institutions of care, and clients. Upon entering the profession of nursing, nurses accept the responsibilities and trust that have accrued to nursing over the years and also the obligation to adhere to the profession's code for ethics. The *Code for Nurses*, published by the American Nurses Association, is the standard by which ethical conduct is guided and evaluated by the profession. It provides a framework within which nurses can make ethical decisions and discharge their professional responsibilities to the public, to other members of the health team, and to the profession.

The *Code for Nurses* is not open to negotiation in employment settings, nor is it permissible for individuals, groups of nurses, or interested parties to adapt or change the language of this code. The *Code for Nurses* encompasses all nursing activities and may supersede specific policies of institutions, of employers, or of practices. Therefore, the content of the *Code for Nurses with Interpretive Statements* is nonnegotiable.

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

**\* From American Nurses Association (2001). *Code for Nurses*. Washington DC, ANA Publishing. (Unchanged 2016)** National Student Nurses' Association, Inc.

## **Code of Academic & Clinical Conduct**

### **PREAMBLE**

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

### **A CODE FOR NURSING STUDENTS**

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we;

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

*Adopted by the NSNA House of Delegates, Nashville, TN, on April 6, 2001. (Unchanged 2016)*

**Title: Statement of Ethical Practice**

Approved: SON Faculty 5/23/2007

Effective Date: 5/23/2007

Reviewed: 4/18/16

Amended: 2/27/2006

**I. Purpose:**

To delineate ethical beliefs as relative to educational practice.

**II. Policy:**

Graceland University and the School of Nursing believe that each student is unique. Each person brings their own beliefs, goals, strengths, potentialities, motivations and life experiences to the university community. We believe that the university and the division programs promote the professional and personal actualization of each student toward greater expression of each one's unique creativity.

**A. The student has the right:**

1. and responsibility to develop to the highest potential, physically, emotionally, intellectually, and spiritually.
2. to objective, clear, accurate, up to date information, verbal and written about the university and the nursing major. This includes information about the philosophy, goals, objectives, academic programs, cost, requirements and admission policies to the university and the major.
3. to be notified as soon as possible about acceptance.
4. to information regarding written policies for admission, progression in the major, graduation from the university, or dismissal from the major.
5. to information regarding students' own academic standing.
6. to be notified of any changes before the changes occur.

## **Title: HIPAA Regulations Policy**

Approved by: SON-FGA 4.19.10, 8/18/2008

Effective date: 8/18/2008

Reviewed: 4/18/16

Amended: 4/19/10

### **I. Policy:**

Graceland University School of Nursing faculty and students will comply with the HIPAA Privacy and Security Regulations, the Health Information Technology for Economic and Clinical Health Act (HITECH) and corresponding regulations in clinical, research, and institutional areas by implementing, maintaining and using appropriate administrative, technical and physical safeguards to prevent the improper use or disclosure of all PHI, including Electronic Health Information (EHI).

### **II. Procedure**

- A. Students and instructors will comply with current HIPAA and corresponding HITECH Regulations to ensure the confidentiality of health or health-related information.
- B. HIPAA and corresponding HITECH regulations will be followed in all areas that involve PHI and EHI.
- C. All students will be familiar with HIPAA Privacy Rule and Security Regulations, and HITECH policies and procedures in each of their clinical settings.
- D. Current guidelines will be available to students and instructors at all times in the School of Nursing.

### **III. Reporting of Unauthorized Disclosures or Misuse of PHI**

- A. The student is responsible for immediately reporting to his/her preceptor, and instructor any violation of HIPAA and HITECH regulations.
- B. The instructor shall report to the Facility any use or disclosure of PHI or EHI other than what is provided for by the facility agreement on the first day or no later than 3 business days. The School of Nursing will document such disclosures and will take prompt action to correct any un-authorized disclosures as required by applicable federal and state laws and regulations.

**\*See list of 18 personal health identifiers below**

## **HIPAA: 18 indicators for Personal Health Identifiers**

1. Names (including initials)
2. All geographic subdivisions smaller than a state, including: street address, city, county, precinct, ZIP Code, and their equivalent geographical codes, except for the initial 3 digits of a ZIP Code if, according to the current publicly available data from the Bureau of the Census:
3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older.
4. Telephone Number
5. Fax Number
6. E-mail Address
7. Social Security number
8. Medical Record number
9. Health Plan Beneficiary number
10. Account numbers
11. Certificate/License number
12. Vehicle Identifiers and Serial numbers (including license plates)
13. Device identifiers and Serial numbers
14. URL Address
15. IP Address
16. Biometric identifiers, like fingerprints and voiceprints
17. Full-face Photos and Any Comparable Images
18. Any other unique identifying number, characteristic or code



## **Title: Course Examination Requirements Policy**

Approved by: SON-FGA 05/23/07

Effective date: 8/18/2008

Reviewed: 4/18/16

Amended: 5/23/2007; 02/27/2006; 06/10/04; 08/08/2003

### **I. Policy:**

- A. At the junior level, a minimum of seventy percent (70%) of the grade for specified courses will be derived from tests. At the senior level, a minimum of sixty percent (60%) of the grade for specified courses will be derived from tests.

#### **Courses:**

1. NURS 2460 - Health Assessment
2. NURS 3120 - Fundamentals of Health Care
3. NURS 3250 - Adult Health Care I
4. NURS 3260 - Adult Health Care II
5. NURS 3270 - Psychosocial Aspects of Client Care
6. NURS 3290 – Gerontology
7. NURS 3440 - Pathophysiology
8. NURS 3451 - Pharmacology I
9. NURS 3452 - Pharmacology II
10. NURS 4170 - Manager of Care
11. NURS 4220 - Maternal and Newborn Care
12. NURS 4240 - Pediatric Nursing
13. NURS 4260 - Critical Care Nursing
14. NURS 4340 - Community Health Care

- B. In addition to unit outcomes, test specification tables will reflect appropriate NCLEX content areas, and the nursing process.

## **Title: Grading Policy**

Approved by: SON-FGA 8/30/2010

Effective date: 2/27/06

Reviewed: 4/18/16

Amended: 02/27/06; 08/08/03; 8/30/2010

### **I. Policy:**

A. All courses required for the nursing major must be completed on a graded basis.

### **II. Procedure:**

A. Each faculty member will determine at what point a grade will be rounded and that criteria will be indicated in each course syllabus.

### **B. Grading Scale**

1. The grading scale for undergraduate nursing courses is:

90-100	A
82-89	B
73-81	C
63-72	D
Below 63	F

2. The grading scale for graduate nursing courses is:

90-100	A
80-89	B
70-79	C
60-69	D
Below 59	F

## **Title: Academic Appeal Policy & Procedure**

Approved by date: FGA 9/15/08

Effective date: January 1, 2009

Reviewed: 4/18/16

Amended: 5/18/2010

### **I. Policy**

Graceland University School of Nursing (SON) has three codes of conduct: academic conduct, clinical conduct and professional conduct. A student may be disciplined or dismissed from the nursing program for misconduct in any of the three areas.

The standards of academic conduct addresses meeting established academic criteria and behavioral integrity in performing the academic work of the SON. The standards of clinical and professional conduct relate to matters outside the context of academic courses.

Honesty and integrity are prerequisites to academic life and more specifically, to the practice of nursing. Honesty is defined as being truthful, free of deceit and having integrity (Webster, 1976). Integrity is defined as utter honesty and adherence to a code of values (Webster, 1976). Integrity also encompasses "being truthful, avoiding acts of cheating, fraud or outright lying, and refusing to engage in deception or false representation in practice" (Hoyer, Booth, Spelman & Richardson, 1991, p. 171). Clinical and Professional integrity in nursing is reflected in the American Nurses Association (ANA) Code of Ethics for Nurses (2001), National Student Nurses Association (NSNA) Code of Academic and Clinical Conduct (2001), ANA Standards of Professional Nursing Practice and Performance (1991) and the Scope and Standards of Advanced Practice for Registered Nursing (1996). Nursing practice is further guided by state legislation and institutional standards. Nursing students must adhere to both institutional and professional standards in the classroom, clinical sites, and the community to meet the School's standards of conduct.

#### **A. Sanctions imposed by faculty for academic misconduct include but are not limited to:**

1. Written notification of the student's act of academic misconduct and potential consequences placed in the student's file.
2. Assigning a zero (no points) for a test, assignment or paper.
3. Assigning a failing course grade.
4. Placing the student on probation.
5. Recommending dismissal from the program.

#### **B. Guidelines for Students**

Students often become aware or suspicious of academic misconduct first. In order for the School to maintain an environment that is supportive of academic integrity, students are encouraged to maintain the standards for academic conduct. In situations where students are in doubt as to the integrity of one's own or one's peer's actions, it is advisable to consult one of the following: course faculty, course coordinator, specialty track/program coordinator, or faculty advisor. As noted in a previous section, students must adhere to both institutional and professional standards in the classroom, clinical sites, and the community.

#### **C. Suspension**

A student may be suspended from any classroom, lab or clinical session for inappropriate or unsafe behavior or failure to adhere to any GU School of Nursing Academic or Ethics Policies. Suspension may last from several hours to one calendar year. Students are automatically placed on suspension during the appeal process pursuant to dismissal.

1. Faculty imposed: Faculty are solely responsible for making the immediate decision to suspend a student from classroom, clinical, or lab sessions in progress for inappropriate or unsafe behaviors. At the time of a suspension by the faculty, conditions for reinstatement are explained. Failure to meet the conditions of reinstatement may result in course failure.

2. School imposed: The Associate Dean is solely responsible for imposing suspension for failure to adhere to Graceland University School of Nursing Academic Progression Policy. At the time of a suspension by the Associate Dean, the conditions of reinstatement are explained. Failure to meet the conditions of reinstatement may result in course failure or dismissal from the nursing program. The student may not attend classroom, lab or clinical sessions during the suspension.

#### D. Academic Appeal

A student may appeal any of the following:

1. Failing final course grade (C or below for graduate; D or below for undergraduate).
2. Dismissal.

Students are responsible for meeting the standards of academic performance established for each course in which they are enrolled. The establishment of the criteria for grades and the evaluation of student academic performance are responsibilities of the course faculty. Grade appeal is available only for the review of allegedly capricious grading and not for review of the faculty's evaluation of the student's academic performance. Capricious grading, as the term is used here, consists only of any of the following:

1. The assignment of a grade to a particular student on some basis other than the performance in the course.
2. The assignment of a grade to a particular student by resorting to more exacting or demanding standards than were applied to other students in the course.
3. The assignment of a grade by a substantial departure from the instructor's previously announced standards.

## II. Procedure

A. An appeal is initiated by submitting a typed statement to the Chair of the Undergraduate or Graduate Student Affairs Committee (USAC/GSAC), no later than seven (7) working days after documentation of the failing final course grade or recommendation for dismissal. The typed appeal statement submitted by the student must include the following:

1. A statement of the issue;
2. Specific steps that have already been taken to resolve the issue with the course faculty, course coordinator and/or Specialty Track/Program Coordinator.
3. Evidence supporting why the student believes the decision made was inconsistent with existing GU School of Nursing or course policy, was arbitrary, or lacked sufficient evidence.

B. In preparing the appeal, it is the student's responsibility and burden to prove that the action taken by the faculty was inconsistent with existing policy, arbitrary, or lacked sufficient evidence.

The student may seek assistance from a GU School of Nursing faculty member as an adviser in preparing the statement for an appeal. The role of the adviser is to assist the student in understanding the policy and procedure. The adviser's role does not include gathering information or presenting evidence.

C. The student will submit the letter of appeal with supporting documents to the Chair of the appropriate (undergraduate or graduate) Student Affairs Committee (SAC).

- D. The Chair will forward appeal documents to faculty involved in the subject matter of the appeal or its resolution.
- E. Faculty will submit to the Chair of the SAC within ten (10) working days their response to the appeal document including their supporting documentation.
- F. The Chair of the SAC will forward the faculty's response to the student.
- G. The Chair of the SAC will appoint the appropriate/additional members to the SAC for the hearing.
- H. The SAC will meet within ten (10) working days of receiving all the written appeal documents to hear the appeal. The student may request one continuance, not to exceed one week, for good cause.
- I. The student and faculty will be notified 72 hours before the hearing of the time, date and location of the hearing. The initial appeal documents will be reviewed by members of the appropriate SON Undergraduate Student Affairs Committee. The involved student and/or faculty may be asked to participate in the hearing (in person or via teleconference) to answer questions or provide clarification of the written appeal documents.
1. The committee shall be charged to weigh evidence, deliberate, and find for or against the appeal.
  2. The meeting is confidential and restricted to those persons listed. If an incident involves more than one student, each student will be heard individually.
  3. An USAC member, who has been directly involved in the awarding of a failing course grade or recommending dismissal will be replaced by a faculty member appointed by the Associate Dean.
  4. The USAC will make a decision within five (5) working days after the hearing.
- J. In an appeal of a failing course grade, the USAC can either:
1. Uphold the assigned grade, or
  2. Return the grade to the faculty for reconsideration.
- K. If the faculty is asked to reconsider a grade by the USAC, the faculty may uphold the assigned grade or change the grade. The faculty member will notify the SAC of his/her decision within 72 hours. The USAC will notify the Associate Dean and the student of the outcome of the appeal. The student may receive and sign for the USAC's written decision in person, receive email notification, and/or by certified mail.
- L. If the student wishes to appeal the USAC decision, the student must send a typed statement and supporting documentation to the Dean of the School of Nursing, no later than seven (7) working days after notification of the USAC's decision.
1. The Dean will forward appeal documents submitted by the student to faculty involved in the subject matter of the appeal or its resolution.
  2. Faculty will submit to the Dean within ten (10) working days their response to the appeal document including their supporting documentation.
  3. The Dean will forward the faculty's response to the student.
  4. The Student will notify the Dean within seven (7) working days to formally appeal the USAC decision.
  5. The Dean will initiate the Graceland University academic appeals procedure at the request of the student.

## **Title: Upper Division Progression, Retention and Dismissal**

Approved: FGA 5/16/2012

Effective date: 5/16/12

Reviewed: 4/18/16

Amended (last five years): 10/21/15; 5/12/2011; 5/18/10, 5/20/2008

I. Policy: Students must fulfill the requirements for theoretical and clinical components of the major; demonstrate academic integrity and display professional behavior, which contributes to their meeting course objectives.

### **II. Exemplary Performance:**

Students that demonstrate exemplary performance in the course, clinical setting or professional activity may receive an Exemplary Performance Form (see attachment) commending their achievement. A copy of the form will be placed in the student's permanent file.

### **III. Student Concern Form:**

The Student Concern Form (see attachment) is an official document used to communicate with students when there are issues with Academic, Clinical, or Professional behaviors, which effect progression in the program.

- Course or clinical instructors may initiate the form.
- A copy of the form is sent to the Undergraduate Student Affairs Committee (USAC) and the student's advisor.
- A copy of the form is placed in the student's permanent record.
- The student will have 48 hours to respond in writing to the contents of the Student Concern Form.
- Students are required to sign and date the form with or without a written statement and return to the course instructor, advisor and the chair of the USAC.
- The USAC will review behavior(s) outlined in the Student Concern Form and determine if further action is required.

### **IV. Academic Progression:**

A. Students may progress successfully by completing the courses in sequence with a minimum grade of C in all nursing and required support courses. When circumstances necessitate changes in the delivery of the School of Nursing curriculum, every effort will be made not to disadvantage students who started in the previous curriculum sequence.

B. Student must earn an average total exam score of 73% on objective examinations in the designated courses\*. Standardized exams may be administered during any course. The average total exam score will be based on raw test scores. The total number of points earned on all exams will be divided by the total number of points possible on all exams.

If a student's earned average total score on exams taken in the course is less than 73% the actual average grade earned on the exams (D or F) will be assigned as the final course grade.

1. NURS 2460 - Health Assessment
2. NURS 3120 - Fundamentals of Health Care
3. NURS 3250 - Adult Health Care I
4. NURS 3260 - Adult Health Care II
5. NURS 3270 - Psychosocial Aspects of Client Care
6. NURS 3440 - Pathophysiology
7. NURS 3451 - Pharmacology I
8. NURS 3452 - Pharmacology II
9. NURS 4220 - Maternal and Newborn Care
10. NURS 4240 - Pediatric Nursing
11. NURS 4260 - Critical Care Nursing
12. NURS 4340 - Community Health Care

C. Demonstration of competence in dosage calculation skills is required in the following clinical courses:

- Fundamentals (PO medications only)
- Adult Health Care I (PO and injectable medications)
- Adult Health Care II (PO, injectable medications, and IV drips)
- Critical Care Nursing (all previously listed for the critically ill client)
- Pediatrics (all previously listed in pediatric dosing)
- Capstone Practicum (all above)

D. During NURS4390 – Capstone Practicum, the student will be required to meet the program benchmark on a designated standardized comprehensive exam to qualify to sit early for NCLEX. If the student does not meet the program benchmark on the first attempt of the comprehensive predictor exam, the student will:

- NOT be allowed to test early
- Meet with his/her academic advisor and develop a remediation plan in preparation for NCLEX.
- Retake the comprehensive predictor exam on a designated date.
- If the student does not meet the program benchmark on the second attempt, it is recommended the student attend an additional NCLEX review course.

E. Academic Progression Procedure for Students at Risk

1. Students who fail to meet the program benchmark are at risk.
2. Students will receive a Student Concern Form from the academic instructor for failing course exams, drug calculation exams, ATI exams under Level 1, or failing to submit assignments deemed critical to passing the course. The completed form with or without the student response will be sent to Undergraduate Student Affairs Committee (USAC) for review.
3. If, at any time, the USAC determines a student is at academic risk, the student may be:
  - Placed on probation
  - Required to engage in a remediation plan
  - Required to create a student plan for success
  - Required to meet with the course instructor and/or advisor on a regular basis
4. Any student whose cumulative grade point average is below 2.00 at the end of any semester will be placed on academic probation and subject to review by USAC. If the student is permitted to continue in the program, a grade point of 2.00 must be attained by the end of the following semester or the student will be dismissed for poor academic performance.

IV. Clinical Practice Progression Procedure:

A. Clinical Evaluation

1. Clinical courses will utilize Clinical Evaluation Tools (Formative and Summative -see attachments) that reflect the program curriculum objectives. Each tool will be identified according to the student's program level (junior or senior).
2. Students must achieve a passing score as indicated on the evaluation tool to pass the clinical portion of the course.
3. The clinical instructor will complete the Formative Evaluation Form weekly and a copy will be provided to the student.
  - If a pattern of unsatisfactory or unsafe behavior is revealed, the clinical instructor will notify and send the Formative Evaluation Form to the course coordinator.
  - The course coordinator or clinical instructor will complete a Student Concern Form and send to the student to notify them of the issue(s).
  - The course coordinator will schedule a conference with the student to discuss the clinical behaviors.
  - The USA-C will review the Student Concern Form and determine if further action is required.

- Students that score below the passing level on the Formative Evaluation Form at the mid-point throughout the rotation will meet with the course coordinator and the clinical instructor to sign a clinical contract for success.
  - Students unable to successfully meet the objectives of the contract by the end of clinical will fail the course.
4. A Summative Evaluation Form will be completed at the end of the clinical rotation summarizing the student's clinical performance. The student will be required to complete a self-evaluation on the Summative Evaluation Form and submit it to their clinical instructor for their input.

#### B. Clinical Behavior Violations:

1. Clinical behaviors violations are actions by the student that reflect poorly on professional conduct or endanger patients, the student, or others.
2. These behaviors include but are not limited to the following:
  - Absence from clinical without permission\*
  - Tardiness
  - Breach of Confidentiality and/or HIPAA violations\*
  - Dress code violations
  - Lack of preparation for clinical\*
  - Late or missing assignments
  - Medication errors\*
  - Safety issues\*
  - Violation of facility policies\*
3. Students will receive a Student Concern Form for any of the above violations. Violations that result in immediate Unsatisfactory Professional Conduct (UPC) are designated by a (\*).
4. The student will have 48 hours to respond to the contents of the Student Concern Form. The course coordinator will schedule a conference with the student to discuss the clinical behaviors.
5. The USA-C will review the Student Concern Form and determine if further action is required.

#### V. Professional Behavior Violations Procedure:

A. Students will receive a Student Concern Form from an instructor for Behaviors Violation that include but are not limited to:

1. Code of Conduct violation\*
2. Disrespect
3. Dishonesty, Cheating, Plagiarism (i.e. integrity issues)\*
4. Impairment (see policy)\*
5. Inappropriate language
6. Irresponsibility
7. Poor attitude
8. Misconduct
9. Technology Ethics Violation\*

**NOTE\***Violations that result in immediate Unsatisfactory Professional Conduct (UPC) are designated by a (\*). The student will have 48 hours to respond to the contents of the Student Concern Form. The course coordinator will schedule a conference with the student to discuss the behaviors. The USA-C will review the Student Concern Form and determine if further action is required.

#### B. Unsatisfactory Professional Conduct (UPC)

1. Unsatisfactory Professional Conduct (UPC) is a designation of a single incident or a pattern of unsafe or unprofessional behavior.
2. The instructor will complete a Student Concern Form and make a recommendation to USAC if the behavior is to be designated as an Unsatisfactory Professional Conduct (UPC).
3. Upon receipt of the Student Concern Form, the student will have an opportunity to respond to the concern form in writing within 48 business hours. The form must be signed and dated by the student and returned to the instructor. The form with the student response will be sent to USAC for review.



4. USAC will determine if the student behavior requires an Unsatisfactory Professional Conduct (UPC) designation. If the USAC determines the student is to receive a UPC, the student will be notified with a letter from the committee and meet with either lead course instructor or the advisor to discuss a success plan if required by the USA committee.
5. A success plan for the student may include:
  - Required meeting(s) with course instructor
  - Required/recommended meeting(s) with advisor
  - Required completion of a remediation plan
  - Complete incident follow-up based on the UPC offenses.
  - Program Probation
6. Documentation of **five (5) cumulative** “Unsatisfactory Professional Conduct” (UPC) may result in **dismissal** from the program.

#### VI. Program Probation Procedure

- A. The USAC will determine the dates of the probationary period. The student and the student’s advisor will be notified of the probationary status by a letter from the USAC.
- B. The purpose of the probationary status is to support the student’s progression through the nursing program and make arrangements for academic, clinical, and professionalism support to meet this end.
- C. The designated advisors will provide meeting notes to student academic folder concerning progress on the USA-C stipulations.
- D. The USAC will notify the student and the specified advisor when the probationary status has been discontinued.

#### VII. Dismissal Procedure

1. Academic Dismissal from the program:
  - a. After failing one nursing course, students who earn a D or F in a second nursing course will be dismissed from the program.
  - b. After failing one nursing course, students who withdraw while failing (from the course being repeated or a different nursing course) will be dismissed from the program.
  - c. The USAC will issue a letter of dismissal to the student. The student will be advised to have an exit meeting with the Associate Dean.
2. Nonacademic Dismissal:
  - a. The USAC, on behalf of the nursing faculty, reserves the right to dismiss any student from the program whose personal, professional or clinical conduct/performance demonstrates an inability to continue preparation for a career in nursing. This may include violation of the academic integrity policy, breach of confidentiality, substance abuse/ impairment or other infractions.
3. Clinical Practice Dismissal:
  - i. The USAC, on behalf of the nursing faculty, reserves the right to dismiss any student who is unsafe in the clinical setting. Upon dismissal, the student will fail BOTH the theory and clinical portion of the clinical concepts course.

**GRACELAND UNIVERSITY STUDENT CONCERN FORM**

Student Name:

Date:

Faculty:

Course:

**CLINICAL BEHAVIOR VIOLATIONS:**

	Absence /Tardy
	Breach of Confidentiality/HIPAA
	Dress Code Violation
	Lack of preparation
	Late/missing assignment
	Medication Error
	Safety Issue
	Other:

**PROFESSIONAL BEHAVIOR VIOLATIONS:**

	Code of conduct violation
	Disrespect
	Dishonesty/ Cheating /Plagiarism
	Impaired Student
	Irresponsibility
	Inappropriate language
	Misconduct
	Technological Ethics Violation
	Other:

**ACADEMIC PROGRESSION**

Drug Calculation Scores	First	Second	Third		

Exam scores	Exam I	Exam II	Exam III	Final	Average

**Faculty Detailed Account of the Behavior/s:**

--	--	--	--	--	--

Instructor recommends UPC?	Yes		No		Faculty Signature:
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**PLAN**

Course Instructor meeting	Advisor meeting
Remediation (ATI, PrepU, etc.)	Student Plan for Success
Unsatisfactory Professional Conduct (UPC) (5 UPCs may result in program dismissal)	Program Probation
	Academic Jeopardy

**Student Response:** *(Must be submitted to USA-C chair within 48 hours – dtilton1@graceland.edu)*

--

Date:

Student

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

## Junior Clinical Performance Evaluation

Student:

Evaluator:

Clinical Rotation:

Fill each box with a number to indicate the score for each section. Please add comments for a score of 0, 1 or 3.

NA Not applicable

<b>0 Unsafe:</b> Unable to perform or unsafe when performed	<b>2 Safe/satisfactory:</b> Able to perform safely without guidance or prompting
<b>1 Needs Improvement:</b> Able to perform safely with guidance or prompting	<b>3 Superior:</b> Seeks out opportunities and goes above routine expectations

### 1. Applies the nursing process components to meet the priority health needs of clients

### 2. Utilizes scientific theory and a holistic assessment model in planning, prioritizing, and implementing nursing care of clients.

Week	1	2	3	4	5	6	7
Reviews medical record prior to providing care							
Baseline assessment and focused assessment prn							
Knowledge of medications and nursing implications							
Identifies priority problems or needs							
Develops/revises plan of care based on evaluation of goal attainment							
Correct nursing interventions lead to goal attainment							
Ability to apply prioritization among assigned patients							

### 3. Promotes positive adaptation of clients, self, and families on the wellness-illness continuum

Provides safe care for patient							
Effectively manages time in providing patient care							
Flexible with changes							
Demonstrates positive attitude							
Accepts responsibility for actions							
Arrives to clinical on-time, prepared and dressed appropriately							

### 4. Demonstrates use of appropriate interpersonal skills to effectively collaborate with peer members of the health care team

Able to receive and give accurate nursing report							
Communicates in a clear and timely manner with team members							
Supervises delegated care and follows up appropriately							
Patient/family teaching is provided appropriately							
Collaborates with interdisciplinary team members							
Uses ISBAR-R when appropriate							

### 5. Demonstrates client focused communication in a therapeutic relationship

Communicates effectively and correctly with patients and family							
Uses active listening							
Establishes trust							
Maintains confidentiality							
Elicits feedback in checking for understanding of teaching							
Uses touch appropriately and maintains boundaries							

### 6. Demonstrates higher level thinking skills in applying research to the professional nursing role

Adequate knowledge base to care for patient							
Anticipates & follows up on patient/family needs							
Seeks assistance and/or uses resources when appropriate							
Able to link theoretical concepts to practice							

### 7. Critiques published research for relevance in nursing

Rationales for clinical care are grounded in research							
---	--	--	--	--	--	--	--

### 8. Documents accurate and clear representation of nursing care

Documentation accurate and complete							
Documents according to agency policy/instructor direction							
Accurately documents patient teaching							
Documents in a timely manner							
Written work is neat, legible, correctly spelled and uses approved abbreviations							

Student: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Clinical Rotation: \_\_\_\_\_

[illegible]

### Senior Clinical Performance Evaluation

Student: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Clinical Rotation: \_\_\_\_\_

**Fill each box with a number to indicate the score for each section. Please add comments for a score of 0, 1 or 3.**

**0** Unsafe: Unable to perform or unsafe when performed    **1** Needs Improvement: Able to perform safely with guidance or prompting

**2** Safe/satisfactory: Able to perform safely without guidance or prompting    **3** Superior: Seeks out opportunities and goes above routine expectations

**1a. Utilizes multidimensional roles (e.g. advocate, educator, collaborator, etc.) of nursing in the provision of care to individuals, families, or communities:**

Week	1	2	3	4	5	6	7
Reviews medical record prior to providing care							
Baseline assessment and focused assessment prn							
Knowledge of medications and nursing implications							
Identifies priority problems or needs in individual patients							
Develops/revises plan of care based on evaluation of goal attainment							
Correct nursing interventions lead to goal attainment							
Ability to apply prioritization among assigned patients							
Supervises delegated care and follows up appropriately							

**1b. Collaborates with others in providing quality healthcare to individuals, families, or communities.**

Provides safe care for patient							
Effectively manages time in providing patient care							
Flexible with changes							
Demonstrates positive attitude							
Accepts responsibility for actions							
Arrives to clinical on-time, prepared and dressed appropriately							
Able to receive and give accurate nursing report							
Collaborates and communicate effectively with interdisciplinary team members							

**1c. Intervenes as an advocate in complex health situations for individuals, families, or communities.**

Displays ability to locate resources for patients/families							
Demonstrates knowledge of HIPAA regulations							
Patient/family teaching is provided appropriately							
Promotes patients' rights							
Promotes patient safety							

**2a. Demonstrates higher level thinking in applying research to the professional nursing role.**

Adequate knowledge base to care for patient							
Anticipates and follows up on patient/family needs							
Seeks assistance and/or uses resources when appropriate							
Able to link theoretical concepts to practice							

**2b. Critiques published research for relevance in nursing**

Rationales for clinical care are grounded in research							
---	--	--	--	--	--	--	--

**3a. Demonstrates client focused communication in a therapeutic relationship**

Communicates effectively with patients and family							
Uses active listening							
Establishes trust							
Maintains confidentiality							
Elicits feedback in checking for understanding of teaching							
Uses touch appropriately and maintains boundaries							

**3b. Demonstrates use of safe, professional communication techniques in the clinical setting**

Documentation accurate and complete							
Documents according to agency policy/instructor direction							
Accurately documents patient teaching							
Documents in a timely manner							
Written work is neat, legible, correctly spelled and uses approved abbreviations							

Student: \_\_\_\_\_ Evaluator: \_\_\_\_\_ Clinical Rotation: \_\_\_\_\_

[illegible]

# GRACELAND UNIVERSITY

## School of Nursing Exemplary Performance Form



### Certificate of Recognition

*This certifies that*

*Student Nurse*

*Is recognized for*

***EXEMPLARY PERFORMANCE***

---

*On*

***THIS*** \_\_\_\_\_ ***DAY OF*** \_\_\_\_\_, \_\_\_\_\_

---

*Faculty Signature*

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*USA-C Chairman*

**TITLE: Procedure for the Administration of Examinations in the Classroom**

Approved: SON Faculty: 5/30/2014

Effective: 5/30/2014

Reviewed: 04/18/2016

Amended:

- I. Purpose: To support academic integrity during examinations in the classroom. To prepare students for the strict requirements of the NCLEX testing procedure.
- II. Policy and Procedure:
  - A. Students requiring testing accommodations will be evaluated according to the Graceland University American Disabilities Act (ADA) policy.
  - B. If students with testing accommodations choose to forfeit the accommodation, he/she MUST notify the course coordinator via email 48 business hours PRIOR to the examination time.
  - C. Paper and Pencil Examinations
    1. Will include an attached cover sheet that students must sign prior to each exam.
    2. This sheet may also be utilized for scrap paper during the exam.
  - D. Computerized Examinations
    1. An exam contract will be displayed in the Introductory Text. By entering the online exam, the student is agreeing to abide by the contract.
  - E. Procedure
    1. More than one version of the exam may be administered.
    2. Cell phones, tablets, computers, and other electronic devices will be turned off and placed with personal belongings in a designated area.
    3. Food, hats and/or hoodie sweatshirts and book bags will be placed in the back of the room or where indicated by instructor. Beverages with a lid may be allowed at the discretion of the instructor.
    4. Devices such as smart watches, Google glasses, video/audio recording equipment, etc., may NOT be kept with students during the exam.
    5. Calculators will be provided when necessary.
    6. Students will not be allowed to leave the room until they are finished with the exam.
    7. Proctors will walk throughout the room to closely observe students during the examination.
    8. As circumstances arise, the instructor will handle situations individually.
    9. Only answers on the scan sheet will be accepted for grading, unless otherwise directed by the instructor.
  - F. Time Allocation
    1. Students will be allowed one minute per question plus 15 minutes, unless indicated by the instructor.
    2. If the examination has dosage calculation questions, additional time will be allotted per the instructor discretion.



## **TITLE: Upper Division Graduation Requirements and Licensure**

Approved: SON-FGA 11/17/08

Effective date: 1/5/2009

Reviewed: 04/18/2016

Amended: 5/20/08; 5/23/2007, 2/27/2006, 9/19/2005

I. Policy: To delineate the requirement for graduation and the procedures for licensure application for the BSN-RN program.

### **A. Graduation Requirements**

1. Complete sufficient credit to total 120 semester hours.
2. Successfully complete all upper division (junior and senior level) semester hours.
3. Meet the University's general education requirements.
4. Earn a cumulative GPA of at least 2.0 on all work and at least a 2.0 GPA in major.
5. Fulfill all financial obligations to Graceland University.
6. File an application for graduation with the office of the Registrar at least six months prior to anticipate graduation date.

### **B. Graduation Deficiencies**

1. Students failing to meet graduation requirements may petition the Associate Dean to participate in the Nursing Recognition Ceremony.
2. Commencement Ceremony
  - a. Students who have graduation deficiencies, but present documented evidence for a plan (including evidence that they have registered for all courses required for graduation) to complete those deficiencies by the end of the calendar year, have a 2.5 overall GPA, may participate in commencement exercises.
  - b. Such students will be listed on the program as candidates for graduation and will be recognized as such in the commencement program.
  - c. Those students who participate in Commencement will receive diplomas when all graduation requirements have been completed.

### **C. Procedure for Licensure Application**

In the semester before graduation:

1. The designee of the School of Nursing will:
  - a. Schedule an NCLEX informational meeting
  - b. Distribute application for licensure
  - c. Arrange for notary public to be present at meeting
  - d. Review and sign application once completed by student
  - e. Submit transcript request to registrar after all graduation requirements have been met
2. The student will be responsible for:
  - a. Submitting all fees and required documents to the appropriate state boards of nursing.
  - b. Complete transcript request per instructions by the designee.

## Attire for Students in the Clinical Setting

Approved by SON-FGA: 5/16/2014

Effective Date: 06/27/2011

Reviewed: 04/18/2016

Amended: 5/16/2014; 5/16/2011; 5/28/2010; 11/17/08; 05/23/07

### I. Purpose

- a. To promote safety, professionalism, and a sense of trust in the patients and others served.
- b. To project a professional image for the Graceland nursing student and the university.
- c. To instill in students an awareness of professional dress standard and agency policies
- d. To facilitate infection control
- e. To protect students and patients

### II. Policy:

Students must respect the ethics that dictate professional standards and therefore, students will follow uniform guidelines of the Graceland University School of Nursing during clinical practice at the hospital, community, simulation, or lab competency.

### III. Procedure:

- a. Uniforms are to be professional, clean, with a pressed appearance, and in good repair. Attire should cover cleavage, the midriff, and underwear during patient care activities.
  - i. Students will wear the designated navy scrubs purchased from the designated uniform vendor. Each student will receive 2 sets of scrubs (top and pants) during the first summer session of the junior year. Scrub pants should not drag on the ground.
  - ii. The scrub top will have the Graceland University logo embroidered on the left upper chest.
  - iii. Only black or white plain crew neck t-shirts may be worn under the scrub top. Shirts must be tucked into scrub pants.
- b. Shoes: Safety, comfort, appearance, and quietness are the main considerations for acceptable footwear. Therefore, soft-soled, low-heeled, close toed, close heeled (e.g. no clogs, no sandals, and no flip-flops) shoes should be worn. Shoes are to be clean, polished and in good repair. Shoes should be predominately white, black or navy nurse or athletic shoes with laces that are the same color as the shoes. White, black or navy socks should be above the ankle. Please consider consulting the course coordinator before making any purchases.
- c. Jewelry: One ring per hand (without protruding sets during patient contact) and no bracelets. Earrings: Only up to two pair of small earrings (only in the earlobe; no cartilage) may be worn, no dangling earrings or hoops (which could be grasped by the patient, thus tearing the earlobe). No facial or tongue jewelry is allowed.
- d. Watch: Must be waterproof (no leather, no fabric, and no embellishments), may be white, black, navy, silver metal, or gold metal. A continuous second timer display or sweeping second hand must be visible.

- e. Make-up: Moderate and conservative. Nails: Artificial nails and shellac are not allowed. Nails should be clean, well groomed, and less than ¼ inches in length. When polish is worn, it must be unchipped and neutral in color (clear, light pink, or nude only) to facilitate infection control and patient care. Hair: Must be natural in color (brown, blonde, black, or reddish/auburn) and controlled (tied back, off the face, no loose hair falling in the face) so as not to interfere with nursing care. Any hair accessory (i.e. headbands, hair ties, or clips) worn must be white, black, navy, or brown with no embellishments. Men must be clean shaven or facial hair must be well groomed.
- f. Smells associated with perfumes, colognes, body odor, and/or tobacco smoke MUST not be detectable while in the clinical area.
- g. Students who have tattoos must follow clinical institutional policies. Full sleeve or offensive tattoos must be covered. The student should check with the course coordinator if uncertain.
- h. The following guidelines for dress code apply when obtaining a clinical assignment in a hospital or community setting, older adult visits, simulation lab, and lab competencies.
- i. For professional dress events a photo identification badge must be worn with conservative, professional attire. Attire should cover cleavage, the midriff and underwear. Skirts, split skirts and dresses are to be no shorter fingertip length when arms are at the side of the body. Slacks shall be to the tops of shoes. Slits in skirts should be no higher than the knee. Shirts should have sleeves. No writing on shirts and no t-shirts. Shoes should be closed. Jeans are not acceptable.
- j. Failure to adhere to the dress code will result in being sent home from the clinical setting to change into approved clinical attire.

## **Title: Drug Calculation Proficiency Policy**

Approved by/date: SON-FGA 5/11/2015

Effective date: 1/8/2009

Reviewed: 04/18/2016

Amended: 2/26/2013

I. Purpose: To provide guidelines for testing and progressive competency in dosage calculation.

II. Policy Statements:

- A. Nursing students must demonstrate competence in dosage calculation skills for progression in the BSN-RN program. The following applies to all students in the BSN-RN program.
1. Math proficiency is an essential part of safe nursing practice. Therefore, nursing math concepts will be introduced during the first nursing course. Student must demonstrate knowledge and application of math skills by completing the dosage calculation assignments as directed throughout the nursing program.
  2. Use of personal calculators is prohibited, therefore, calculators will be provided by the School of Nursing during exams.
  3. Students must take and pass a dosage calculation exam with a minimum score of **95%** at the beginning of the following clinical courses to progress in the clinical rotations:
    - Fundamentals (PO medications only)
    - Adult Health Care I (PO and injectable medications only)
    - Adult Health Care II
    - Critical Care Nursing
    - Pediatrics
    - Capstone Practicum

III. Procedure:

- A. At the beginning of the select courses, faculty will administer the dosage calculation proficiency exam containing a minimum of 25 questions.
1. If a score of **95%** or higher is not earned on the first attempt, the student will be required to complete remediation activities and retake a different exam. Students will not be allowed to administer medications to patients in the clinical setting until the dosage calculation exam has been passed.
  2. A schedule with remediation activities and exam retake dates will be provided to students the first week of classes. The course coordinator will schedule Two hours of remediation after the first retake. Additional remediation activities will be scheduled on an individual basis as needed.
  3. Students who fail to complete remediation activities and/or pass the retake exam will be issued a UPC for each day in clinical the student is unable to administer medications to the patient.
  4. If student is not allowed to pass medications during clinical rotations for more than 50% of the time due to failures on the exam, the student will earn a clinical failure and will fail the course.
  5. One retake prior to each clinical week will be allowed. Students must complete remediation activities each week a dosage calculation exam failure occurs.

**TITLE:   Reactivation to the Nursing Major**

Approved: SON-FGA 5/20/2008

Effective date: 5/20/2008

Reviewed: 04/18/2016

Amended: 7/16/2007, 2/27/2006, 11/24/2003

I. Policy: Requirements for students who have withdrawn from the program and are applying for **reactivation** of status to the nursing major.

II. Procedure

- A. Students who have withdrawn voluntarily or involuntarily from this program will only be considered once for reactivation.
- B. Any student admitted to the nursing major who does not enroll for course work during any one semester will be considered withdrawn unless an individualized curriculum plan is on file with the student's academic adviser.
- C. Re-activation is based on current criteria used for admission to the program and space availability. To be considered for reactivation, a student must comply with the following criteria:
  - 1. Meet with the Associate Dean and present the request for reactivation in writing.
  - 2. Petition the Undergraduate Student Affairs Committee (USAC) in writing. The petition must contain:
    - a. A description of why the student believes he/she will be successful if permitted reactivation.
    - b. The reason(s) the student was unable to maintain a continuous progression during their previous enrollment in nursing and what will now be done to ensure successful completion.
    - c. Other information the student would like the USAC to consider.
- D. The USAC will review all students seeking reactivation. If space is available, reactivation approval will be based on the judgment of the USAC concerning the student's likelihood of academic success and willingness and ability to meet reasonable conditions. Students may be required to:
  - 1. Audit or repeat course(s) to ensure theoretical/clinical competency;
  - 2. Demonstrate clinical competencies through written and performance check offs (failure to perform satisfactorily will be grounds to disqualify reactivation);
  - 3. Demonstrate theoretical competencies through performance exam (failure to perform satisfactorily will be grounds to disqualify reactivation);
  - 4. Successfully pass the drug dosage calculation exam appropriate to the level of re-entry;
  - 5. Submit a current CPR certification, drug screen, negative TB test, current immunization record, background check, and any other required clinical documentation. This must be on file with the School of Nursing 30 days prior to enrolling in the first clinical course as a reactivated student.
- E. Students approved for reactivation will return on probationary status for the first semester. Satisfactory performance will be evaluated by USAC at the end of the first semester.

**TITLE: Permission to sit for the NCLEX Prior to Graduation to Obtain Out-of-state Licensure**

Approved: FGA 5/30/12 (email vote)

Effective date: 7/1/2012

Reviewed: 04/18/2016

Amended:

**I. Policy:**

Students may sit for the NCLEX prior to their official graduation date.

**II. Procedure**

- A. Students must be passing all senior level classes with a C or better AND have at least a 73% test average in all clinical courses at the time of the request to test early.
- B. Students must complete their capstone course predictor exam, with the minimum score designated to meet the benchmark probability of passing NCLEX on the first attempt. This score must be achieved prior to receiving the necessary approval for early NCLEX testing.

# **NURSE PRACTICE ACT**

**Missouri State Board of Nursing**

3605 Missouri Blvd; P.O. Box 656

Jefferson City, MO 65102-0656

**Phone: (573) 751-0681**

**FAX: (573) 751-0075**

**E-mail: [nursing@pr.mo.gov](mailto:nursing@pr.mo.gov)**

*Missouri Revised Statutes*

**Chapter 335 Nurses**

August 28, 2015

Short title.

335.011. Sections 335.011 to 335.096 may be known as "The Nursing Practice Act".

(L. 1975 S.B. 108 § 1)

Effective 1-21-76

Definitions.

335.016. As used in this chapter, unless the context clearly requires otherwise, the following words and terms mean:

- (1) "Accredited", the official authorization or status granted by an agency for a program through a voluntary process;
- (2) "Advanced practice registered nurse", a nurse who has education beyond the basic nursing education and is certified by a nationally recognized professional organization as a certified nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or a certified clinical nurse specialist. The board shall promulgate rules specifying which nationally recognized professional organization certifications are to be recognized for the purposes of this section. Advanced practice nurses and only such individuals may use the title "Advanced Practice Registered Nurse" and the abbreviation "APRN";
- (3) "Approval", official recognition of nursing education programs which meet standards established by the board of nursing;
- (4) "Board" or "state board", the state board of nursing;
- (5) "Certified clinical nurse specialist", a registered nurse who is currently certified as a clinical nurse specialist by a nationally recognized certifying board approved by the board of nursing;
- (6) "Certified nurse midwife", a registered nurse who is currently certified as a nurse midwife by the American College of Nurse Midwives, or other nationally recognized certifying body approved by the board of nursing;
- (7) "Certified nurse practitioner", a registered nurse who is currently certified as a nurse practitioner by a nationally recognized certifying body approved by the board of nursing;
- (8) "Certified registered nurse anesthetist", a registered nurse who is currently certified as a nurse anesthetist by the Council on Certification of Nurse Anesthetists, the Council on Recertification of Nurse Anesthetists, or other nationally recognized certifying body approved by the board of nursing;

(9) "Executive director", a qualified individual employed by the board as executive secretary or otherwise to administer the provisions of this chapter under the board's direction. Such person employed as executive director shall not be a member of the board;

(10) "Inactive nurse", as defined by rule pursuant to section 335.061;

(11) "Lapsed license status", as defined by rule under section 335.061;

(12) "Licensed practical nurse" or "practical nurse", a person licensed pursuant to the provisions of this chapter to engage in the practice of practical nursing;

(13) "Licensure", the issuing of a license to practice professional or practical nursing to candidates who have met the specified requirements and the recording of the names of those persons as holders of a license to practice professional or practical nursing;

(14) "Practical nursing", the performance for compensation of selected acts for the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in normal health processes. Such performance requires substantial specialized skill, judgment and knowledge. All such nursing care shall be given under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse. For the purposes of this chapter, the term "direction" shall mean guidance or supervision provided by a person licensed by a state regulatory board to prescribe medications and treatments or a registered professional nurse, including, but not limited to, oral, written, or otherwise communicated orders or directives for patient care. When practical nursing care is delivered pursuant to the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse, such care may be delivered by a licensed practical nurse without direct physical oversight;

(15) "Professional nursing", the performance for compensation of any act which requires substantial specialized education, judgment and skill based on knowledge and application of principles derived from the biological, physical, social and nursing sciences, including, but not limited to:

(a) Responsibility for the teaching of health care and the prevention of illness to the patient and his or her family;

(b) Assessment, nursing diagnosis, nursing care, and counsel of persons who are ill, injured or experiencing alterations in normal health processes;

(c) The administration of medications and treatments as prescribed by a person licensed by a state regulatory board to prescribe medications and treatments;

(d) The coordination and assistance in the delivery of a plan of health care with all members of a health team;

(e) The teaching and supervision of other persons in the performance of any of the foregoing;

(16) A "registered professional nurse" or "registered nurse", a person licensed pursuant to the provisions of this chapter to engage in the practice of professional nursing;

(17) "Retired license status", any person licensed in this state under this chapter who retires from such practice. Such person shall file with the board an affidavit, on a form to be furnished by the board, which states the date on which the licensee retired from such practice, an intent to retire from the practice for at least two years, and such other facts as tend to verify the retirement as the board may deem necessary; but



if the licensee thereafter reengages in the practice, the licensee shall renew his or her license with the board as provided by this chapter and by rule and regulation.

(L. 1975 S.B. 108 § 2, A.L. 1993 H.B. 564, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343, A.L. 2002 H.B. 1600, A.L. 2004 S.B. 1122, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2008 S.B. 724)

Intravenous fluids, administration requirements for practical nurses.

335.017. One of the selected acts which may be performed by persons licensed under the provisions of this chapter as licensed practical nurses is the administration of intravenous fluid treatment. The administration of intravenous fluid treatment may be performed only by licensed practical nurses who have been instructed and trained in such procedures in a course of instruction approved by the board. The board shall have the authority to adopt and revise rules and regulations which limit and define the scope of intravenous fluid treatment which may be performed by licensed practical nurses. Nothing herein shall be construed as prohibiting administration of intravenous fluid treatment by registered professional nurses. The board shall submit emergency rules to the secretary of state to implement the provisions of this section within thirty days of December 15, 1983, and the board shall act promptly on applications of organizations requesting approval of their course of instruction.

(L. 1983 1st Ex. Sess. H.B. 8)

Effective 12-15-83

Certificate of controlled substance prescriptive authority, issued when.

335.019. The board of nursing may grant a certificate of controlled substance prescriptive authority to an advanced practice registered nurse who:

- (1) Submits proof of successful completion of an advanced pharmacology course that shall include preceptorial experience in the prescription of drugs, medicines and therapeutic devices; and
- (2) Provides documentation of a minimum of three hundred clock hours preceptorial experience in the prescription of drugs, medicines, and therapeutic devices with a qualified preceptor; and
- (3) Provides evidence of a minimum of one thousand hours of practice in an advanced practice nursing category prior to application for a certificate of prescriptive authority. The one thousand hours shall not include clinical hours obtained in the advanced practice nursing education program. The one thousand hours of practice in an advanced practice nursing category may include transmitting a prescription order orally or telephonically or to an inpatient medical record from protocols developed in collaboration with and signed by a licensed physician; and
- (4) Has a controlled substance prescribing authority delegated in the collaborative practice arrangement under section 334.104 with a physician who has an unrestricted federal Drug Enforcement Administration registration number and who is actively engaged in a practice comparable in scope, specialty, or expertise to that of the advanced practice registered nurse.

(L. 2008 S.B. 724)

Board of nursing--members' qualifications, appointments, how made.

335.021. 1. "The Missouri State Board of Nursing" shall consist of nine members, five of whom must be registered professional nurses. Two members of the board must be licensed practical nurses and one member a voting public member. Two of the five registered professional nurses shall hold a graduate degree in nursing, and at least one of the professional nurse members shall represent nursing practice. Any person, other than the public member, appointed to the board as hereinafter provided shall be a citizen of the United States and a resident of this state for a period of at least one year, a licensed nurse in this state, and shall have been actively engaged in nursing for at least three years immediately preceding the appointment or reappointment. Membership on the board shall include representatives with expertise

in each level of educational programs the graduates of which are eligible to apply for licensure such as practical, diploma, associate degree, and baccalaureate.

2. The governor shall appoint members to the board by and with the advice and consent of the senate when a vacancy thereon occurs either by the expiration of a term or otherwise; provided, however, that any board member shall serve until his or her successor is appointed and qualified. Every appointment except to fulfill an unexpired term shall be for a term of four years, but no person shall be appointed to more than two consecutive terms.

3. At least ninety days before the expiration of a term of a board member, and as soon as feasible after the occurrence of a vacancy on the board for reasons other than the expiration of a term, a list of three licensed and qualified nurses shall be submitted to the director of the division of professional registration. The list shall be submitted by the Missouri Nurses Association if the vacancy is for a registered professional nurse, and by the Missouri State Association of Licensed Practical Nurses if the vacancy is for a licensed practical nurse. The governor may appoint a board member to fill the vacancy from the list submitted, or may appoint some other qualified licensed nurse. This subsection shall not apply to public member vacancies.

4. The public member shall be at the time of his or her appointment a citizen of the United States; a resident of this state for a period of one year and a registered voter; a person who is not and never was a member of any profession licensed or regulated pursuant to this chapter or the spouse of such person; and a person who does not have and never has had a material, financial interest in either the providing of the professional services regulated by this chapter, or an activity or organization directly related to any profession licensed or regulated pursuant to this chapter. All members, including public members, shall be chosen from lists submitted by the director of the division of professional registration. The duties of the public member shall not include the determination of the technical requirements to be met for licensure or whether any person meets such technical requirements or of the technical competence or technical judgment of a licensee or a candidate for licensure.

(L. 1975 S.B. 108 § 3, A.L. 1981 S.B. 16, A.L. 1988 H.B. 1573, A.L. 1999 H.B. 343)

Oath of office, removal from board, when--meetings, when held, quorum--compensation and expenses.

335.026. 1. Before entering upon their duties, members of the board shall make and file with the secretary of state the oath of office required by article VII, section 11 of the Constitution of Missouri, for all civil officers of this state.

2. Any member of the board may be removed by the governor for misconduct, incompetency or neglect of duty. Before any member may be so removed, he shall be given a hearing and may appear in his own behalf, may be represented by counsel, and may present witness or other evidence. Any person aggrieved by the action of the governor after the hearing may appeal as provided in chapter 536.

3. The board shall meet at least once each year as determined by the board. The board may hold such additional meetings during the year as may be deemed necessary to perform its duties. A majority of the board, including at least one officer, shall constitute a quorum for the conducting of business.

4. Each member of the board shall receive as compensation an amount set by the board not to exceed fifty dollars for each day devoted to the affairs of the board; and shall be entitled to reimbursement of their expenses necessarily incurred in the discharge of their official duties.

(L. 1975 S.B. 108 § 4, A.L. 1981 S.B. 16)

Immunity of board members performing official duties.

335.031. Members of the board shall not be personally liable either jointly or separately for any act or acts committed in the performance of their official duties as board members.

(L. 1975 S.B. 108 § 5)  
Effective 1-21-76

Duties of board--fees set, how--fund, source, use, funds transferred from, when--rulemaking.

335.036. 1. The board shall:

(1) Elect for a one-year term a president and a secretary, who shall also be treasurer, and the board may appoint, employ and fix the compensation of a legal counsel and such board personnel as defined in subdivision (4) of subsection 10 of section 324.001 as are necessary to administer the provisions of sections 335.011 to 335.096;

(2) Adopt and revise such rules and regulations as may be necessary to enable it to carry into effect the provisions of sections 335.011 to 335.096;

(3) Prescribe minimum standards for educational programs preparing persons for licensure pursuant to the provisions of sections 335.011 to 335.096;

(4) Provide for surveys of such programs every five years and in addition at such times as it may deem necessary;

(5) Designate as "approved" such programs as meet the requirements of sections 335.011 to 335.096 and the rules and regulations enacted pursuant to such sections; and the board shall annually publish a list of such programs;

(6) Deny or withdraw approval from educational programs for failure to meet prescribed minimum standards;

(7) Examine, license, and cause to be renewed the licenses of duly qualified applicants;

(8) Cause the prosecution of all persons violating provisions of sections 335.011 to 335.096, and may incur such necessary expenses therefor;

(9) Keep a record of all the proceedings; and make an annual report to the governor and to the director of the department of insurance, financial institutions and professional registration;

(10) Establish an impaired nurse program.

2. The board shall set the amount of the fees which this chapter authorizes and requires by rules and regulations. The fees shall be set at a level to produce revenue which shall not substantially exceed the cost and expense of administering this chapter.

3. All fees received by the board pursuant to the provisions of sections 335.011 to 335.096 shall be deposited in the state treasury and be placed to the credit of the state board of nursing fund. All administrative costs and expenses of the board shall be paid from appropriations made for those purposes. The board is authorized to provide funding for the nursing education incentive program established in sections 335.200 to 335.203.

4. The provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be transferred and placed to the credit of general revenue until the amount in the fund at the end of the biennium exceeds two times the amount of the appropriation from the board's funds for the preceding fiscal year or, if the board requires by rule, permit renewal less frequently than yearly, then three times the appropriation from the board's funds for the preceding fiscal year. The amount, if any, in the fund

which shall lapse is that amount in the fund which exceeds the appropriate multiple of the appropriations from the board's funds for the preceding fiscal year.

5. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this chapter shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. All rulemaking authority delegated prior to August 28, 1999, is of no force and effect and repealed. Nothing in this section shall be interpreted to repeal or affect the validity of any rule filed or adopted prior to August 28, 1999, if it fully complied with all applicable provisions of law. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 1999, shall be invalid and void.

(L. 1975 S.B. 108 § 6, A.L. 1981 S.B. 16, A.L. 1985 S.B. 99, A.L. 1993 S.B. 52, A.L. 1995 S.B. 3, S.B. 452, A.L. 1999 H.B. 343, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2008 S.B. 788, A.L. 2011 H.B. 223 & 231 merged with S.B. 325)

License, application for--qualifications for, fee--hearing on denial of license.

335.046. 1. An applicant for a license to practice as a registered professional nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. The applicant shall be of good moral character and have completed at least the high school course of study, or the equivalent thereof as determined by the state board of education, and have successfully completed the basic professional curriculum in an accredited or approved school of nursing and earned a professional nursing degree or diploma. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration. Applicants from non-English-speaking lands shall be required to submit evidence of proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice nursing as a registered professional nurse. The applicant for a license to practice registered professional nursing shall pay a license fee in such amount as set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.

2. An applicant for license to practice as a licensed practical nurse shall submit to the board a written application on forms furnished to the applicant. The original application shall contain the applicant's statements showing the applicant's education and other such pertinent information as the board may require. Such applicant shall be of good moral character, and have completed at least two years of high school, or its equivalent as established by the state board of education, and have successfully completed a basic prescribed curriculum in a state-accredited or approved school of nursing, earned a nursing degree, certificate or diploma and completed a course approved by the board on the role of the practical nurse. Each application shall contain a statement that it is made under oath or affirmation and that its representations are true and correct to the best knowledge and belief of the person signing same, subject to the penalties of making a false affidavit or declaration. Applicants from non-English-speaking countries shall be required to submit evidence of their proficiency in the English language. The applicant must be approved by the board and shall pass an examination as required by the board. The board may require by rule as a requirement for licensure that each applicant shall pass an oral or practical examination. Upon successfully passing the examination, the board may issue to the applicant a license to practice as a licensed practical nurse. The applicant for a license to practice licensed practical nursing shall pay a fee in such amount as may be set by the board. The fee shall be uniform for all applicants. Applicants from foreign countries shall be licensed as prescribed by rule.

3. Upon refusal of the board to allow any applicant to sit for either the registered professional nurses' examination or the licensed practical nurses' examination, as the case may be, the board shall comply with the provisions of section 621.120 and advise the applicant of his or her right to have a hearing before the administrative hearing commission. The administrative hearing commission shall hear complaints taken pursuant to section 621.120.

4. The board shall not deny a license because of sex, religion, race, ethnic origin, age or political affiliation.

(L. 1975 S.B. 108 § 8, A.L. 1981 S.B. 16, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343)

Reciprocity--license without examination, temporary license, when.

335.051. 1. The board shall issue a license to practice nursing as either a registered professional nurse or a licensed practical nurse without examination to an applicant who has duly become licensed as a registered nurse or licensed practical nurse pursuant to the laws of another state, territory, or foreign country if the applicant meets the qualifications required of registered nurses or licensed practical nurses in this state at the time the applicant was originally licensed in the other state, territory, or foreign country.

2. Applicants from foreign countries shall be licensed as prescribed by rule.

3. Upon application, the board shall issue a temporary permit to an applicant pursuant to subsection 1 of this section for a license as either a registered professional nurse or a licensed practical nurse who has made a prima facie showing that the applicant meets all of the requirements for such a license. The temporary permit shall be effective only until the board shall have had the opportunity to investigate his qualifications for licensure pursuant to subsection 1 of this section and to notify the applicant that his or her application for a license has been either granted or rejected. In no event shall such temporary permit be in effect for more than twelve months after the date of its issuance nor shall a permit be reissued to the same applicant. No fee shall be charged for such temporary permit. The holder of a temporary permit which has not expired, or been suspended or revoked, shall be deemed to be the holder of a license issued pursuant to section 335.046 until such temporary permit expires, is terminated or is suspended or revoked. (L. 1975 S.B. 108 § 9, A.L. 1981 S.B. 16, A.L. 1999 H.B. 343)

Renewal of license, when due, fee--unlicensed practice prohibited.

335.056. The license of every person licensed under the provisions of sections 335.011 to 335.096 shall be renewed as provided. An application for renewal of license shall be mailed to every person to whom a license was issued or renewed during the current licensing period. The applicant shall complete the application and return it to the board by the renewal date with a renewal fee in an amount to be set by the board. The fee shall be uniform for all applicants. The certificates of renewal shall render the holder thereof a legal practitioner of nursing for the period stated in the certificate of renewal. Any person who practices nursing as a registered professional nurse or as a licensed practical nurse during the time his license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the provisions of sections 335.011 to 335.096.

(L. 1975 S.B. 108 § 10, A.L. 1981 S.B. 16)

Reinstatement of license, when--inactive status, board may provide for.

335.061. 1. Any licensee who allows his or her license to be placed on inactive status as provided in sections 335.011 to 335.096 shall be reinstated as provided by sections 335.011 to 335.096 and by rule and regulation. The board may by rule and regulation provide for an inactive license status. In the event the board shall refuse to renew the license pursuant to one of the provisions of this section and related requirements for relicensure, the individual may appeal to the administrative hearing commission pursuant to the provisions of section 621.120.

2. Any licensee who allows his or her license to lapse by failing to renew the license as provided in sections 335.011 to 335.096 shall be reinstated as provided by this chapter and by rule and regulation. The board may by rule and regulation provide for a lapsed license status. In the event the board shall refuse to renew the license pursuant to one of the provisions of this section and related requirements for re-licensure, the individual may appeal to the administrative hearing commission pursuant to the provisions of sections 621.120.

(L. 1975 S.B. 108 § 11, A.L. 1981 S.B. 16, A.L. 1999 H.B. 343)

Denial, revocation, or suspension of license, grounds for, civilimmunity for providing information--complaint procedures.

335.066. 1. The board may refuse to issue or reinstate any certificate of registration or authority, permit or license required pursuant to chapter 335 for one or any combination of causes stated in subsection 2 of this section or the board may, as a condition to issuing or reinstating any such permit or license, require a person to submit himself or herself for identification, intervention, treatment, or rehabilitation by the impaired nurse program as provided in section 335.067. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.

2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:

(1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by sections 335.011 to 335.096;

(2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution pursuant to the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to sections 335.011 to 335.096, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to sections 335.011 to 335.096 or in obtaining permission to take any examination given or required pursuant to sections 335.011 to 335.096;

(4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;

(5) Incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by chapter 335. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;

(6) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:

- (a) Willfully and continually overcharging or overtreating patients; or charging for visits which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;
- (b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;
- (c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests, or nursing services;
- (d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;
- (e) Performing nursing services beyond the authorized scope of practice for which the individual is licensed in this state;
- (f) Exercising influence within a nurse-patient relationship for purposes of engaging a patient in sexual activity;
- (g) Being listed on any state or federal sexual offender registry;
- (h) Failure of any applicant or licensee to cooperate with the board during any investigation;
- (i) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;
- (j) Failure to timely pay license renewal fees specified in this chapter;
- (k) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;
- (l) Failing to inform the board of the nurse's current residence;
- (m) Any other conduct that is unethical or unprofessional involving a minor;
- (7) Violation of, or assisting or enabling any person to violate, any provision of sections 335.011 to 335.096, or of any lawful rule or regulation adopted pursuant to sections 335.011 to 335.096;
- (8) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- (9) Disciplinary action against the holder of a license or other right to practice any profession regulated by sections 335.011 to 335.096 granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
- (10) A person is finally adjudged insane or incompetent by a court of competent jurisdiction;
- (11) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by sections 335.011 to 335.096 who is not registered and currently eligible to practice pursuant to sections 335.011 to 335.096;

(12) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;

(13) Violation of any professional trust or confidence;

(14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;

(15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;

(16) Placement on an employee disqualification list or other related restriction or finding pertaining to employment within a health-related profession issued by any state or federal government or agency following final disposition by such state or federal government or agency;

(17) Failure to successfully complete the impaired nurse program;

(18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630, or for payment from Title XVIII or Title XIX of the federal Medicare program;

(19) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;

(20) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed, or administered by a provider who is authorized by law to do so;

(21) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section 302.525;

(22) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement, or licensee's professional health program.

3. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate, or permit.

4. For any hearing before the full board, the board shall cause the notice of the hearing to be served upon such licensee in person or by certified mail to the licensee at the licensee's last known address. If service cannot be accomplished in person or by certified mail, notice by publication as described in subsection 3 of section 506.160 shall be allowed; any representative of the board is authorized to act as a court or judge would in that section; any employee of the board is authorized to act as a clerk would in that section.

5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for re-licensure. Re-licensure shall be at the discretion of the board after compliance with all the requirements of sections 335.011 to 335.096 relative to the licensing of an applicant for the first time.



6. The board may notify the proper licensing authority of any other state concerning the final disciplinary action determined by the board on a license in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.

7. Any person, organization, association or corporation who reports or provides information to the board of nursing pursuant to the provisions of sections 335.011 to 335.259\* and who does so in good faith shall not be subject to an action for civil damages as a result thereof.

8. The board may apply to the administrative hearing commission for an emergency suspension or restriction of a license for the following causes:

(1) Engaging in sexual conduct \*\* as defined in section 566.010, with a patient who is not the licensee's spouse, regardless of whether the patient consented;

(2) Engaging in sexual misconduct with a minor or person the licensee believes to be a minor. "Sexual misconduct" means any conduct of a sexual nature which would be illegal under state or federal law;

(3) Possession of a controlled substance in violation of chapter 195 or any state or federal law, rule, or regulation, excluding record-keeping violations;

(4) Use of a controlled substance without a valid prescription;

(5) The licensee is adjudicated incapacitated or disabled by a court of competent jurisdiction;

(6) Habitual intoxication or dependence upon alcohol or controlled substances or failure to comply with a treatment or aftercare program entered into pursuant to a board order, settlement agreement, or as part of the licensee's professional health program;

(7) A report from a board-approved facility or a professional health program stating the licensee is not fit to practice. For purposes of this section, a licensee is deemed to have waived all objections to the admissibility of testimony from the provider of the examination and admissibility of the examination reports. The licensee shall sign all necessary releases for the board to obtain and use the examination during a hearing; or

(8) Any conduct for which the board may discipline that constitutes a serious danger to the health, safety, or welfare of a patient or the public.

9. The board shall submit existing affidavits and existing certified court records together with a complaint alleging the facts in support of the board's request for an emergency suspension or restriction to the administrative hearing commission and shall supply the administrative hearing commission with the last home or business addresses on file with the board for the licensee. Within one business day of the filing of the complaint, the administrative hearing commission shall return a service packet to the board. The service packet shall include the board's complaint and any affidavits or records the board intends to rely on that have been filed with the administrative hearing commission. The service packet may contain other information in the discretion of the administrative hearing commission. Within twenty-four hours of receiving the packet, the board shall either personally serve the licensee or leave a copy of the service packet at all of the licensee's current addresses on file with the board. Prior to the hearing, the licensee may file affidavits and certified court records for consideration by the administrative hearing commission.

10. Within five days of the board's filing of the complaint, the administrative hearing commission shall review the information submitted by the board and the licensee and shall determine based on that information if probable cause exists pursuant to subsection 8 of this section and shall issue its findings of

fact and conclusions of law. If the administrative hearing commission finds that there is probable cause, the administrative hearing commission shall enter the order requested by the board. The order shall be effective upon personal service or by leaving a copy at all of the licensee's current addresses on file with the board.

11. (1) The administrative hearing commission shall hold a hearing within forty-five days of the board's filing of the complaint to determine if cause for discipline exists. The administrative hearing commission may grant a request for a continuance, but shall in any event hold the hearing within one hundred twenty days of the board's initial filing. The board shall be granted leave to amend its complaint if it is more than thirty days prior to the hearing. If less than thirty days, the board may be granted leave to amend if public safety requires.

(2) If no cause for discipline exists, the administrative hearing commission shall issue findings of fact, conclusions of law, and an order terminating the emergency suspension or restriction.

(3) If cause for discipline exists, the administrative hearing commission shall issue findings of fact and conclusions of law and order the emergency suspension or restriction to remain in full force and effect pending a disciplinary hearing before the board. The board shall hold a hearing following the certification of the record by the administrative hearing commission and may impose any discipline otherwise authorized by state law.

12. Any action under this section shall be in addition to and not in lieu of any discipline otherwise in the board's power to impose and may be brought concurrently with other actions.

13. If the administrative hearing commission does not find probable cause and does not grant the emergency suspension or restriction, the board shall remove all reference to such emergency suspension or restriction from its public records. Records relating to the suspension or restriction shall be maintained in the board's files. The board or licensee may use such records in the course of any litigation to which they are both parties. Additionally, such records may be released upon a specific, written request of the licensee.

14. If the administrative hearing commission grants temporary authority to the board to restrict or suspend the nurse's license, such temporary authority of the board shall become final authority if there is no request by the nurse for a full hearing within thirty days of the preliminary hearing. The administrative hearing commission shall, if requested by the nurse named in the complaint, set a date to hold a full hearing under the provisions of chapter 621 regarding the activities alleged in the initial complaint filed by the board.

15. If the administrative hearing commission refuses to grant temporary authority to the board or restrict or suspend the nurse's license under subsection 8 of this section, such dismissal shall not bar the board from initiating a subsequent disciplinary action on the same grounds.

16. (1) The board may initiate a hearing before the board for discipline of any licensee's license or certificate upon receipt of one of the following:

(a) Certified court records of a finding of guilt or plea of guilty or nolo contendere in a criminal prosecution under the laws of any state or of the United States for any offense involving the qualifications, functions, or duties of any profession licensed or regulated under this chapter, for any offense involving fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(b) Evidence of final disciplinary action against the licensee's license, certification, or registration issued by any other state, by any other agency or entity of this state or any other state, or the United States or its territories, or any other country;

(c) Evidence of certified court records finding the licensee has been judged incapacitated or disabled under Missouri law or under the laws of any other state or of the United States or its territories.

(2) The board shall provide the licensee not less than ten days' notice of any hearing held pursuant to chapter 536.

(3) Upon a finding that cause exists to discipline a licensee's license, the board may impose any discipline otherwise available.

(L. 1975 S.B. 108 § 12, A.L. 1981 S.B. 16, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2013 H.B. 315)

\*Section 335.259 was repealed by S.B. 52, 1993.

\*\*Word "in" appears here in original rolls.

Impaired nurse program may be established by the board--purpose of program--contracts--immunity from liability, when--confidentiality of records.

335.067. 1. The state board of nursing may establish an impaired nurse program to promote the early identification, intervention, treatment, and rehabilitation of nurses who may be impaired by reasons of illness, substance abuse, or as a result of any mental condition. This program shall be available to anyone holding a current license and may be entered voluntarily, as part of an agreement with the board of nursing, or as a condition of a disciplinary order entered by the board of nursing.

2. The board may enter into a contractual agreement with a nonprofit corporation or a nursing association for the purpose of creating, supporting, and maintaining a program to be designated as the impaired nurse program. The board may promulgate administrative rules subject to the provisions of this section and chapter 536 to effectuate and implement any program formed pursuant to this section.

3. The board may expend appropriated funds necessary to provide for operational expenses of the program formed pursuant to this section.

4. Any member of the program, as well as any administrator, staff member, consultant, agent, or employee of the program, acting within the scope of his or her duties and without actual malice, and all other persons who furnish information to the program in good faith and without actual malice, shall not be liable for any claim of damages as a result of any statement, decision, opinion, investigation, or action taken by the program, or by any individual member of the program.

5. All information, interviews, reports, statements, memoranda, or other documents furnished to or produced by the program, as well as communications to or from the program, any findings, conclusions, interventions, treatment, rehabilitation, or other proceedings of the program which in any way pertain to a licensee who may be, or who actually is, impaired shall be privileged and confidential.

6. All records and proceedings of the program which pertain or refer to a licensee who may be, or who actually is, impaired shall be privileged and confidential and shall be used by the program and its members only in the exercise of the proper function of the program and shall not be considered public records under chapter 610 and shall not be subject to court subpoena or subject to discovery or introduction as evidence in any civil, criminal, or administrative proceedings except as provided in subsection 7 of this section.

7. The program shall disclose information relative to an impaired licensee only when:

- (1) It is essential to disclose the information to further the intervention, treatment, or rehabilitation needs of the impaired licensee and only to those persons or organizations with a need to know;
- (2) Its release is authorized in writing by the impaired licensee;
- (3) A licensee has breached his or her contract with the program. In this instance, the breach may be reported only to the board of nursing; or
- (4) The information is subject to a court order.

8. When pursuing discipline against a licensed practical nurse, registered nurse, or advanced practice registered nurse for violating one or more causes stated in subsection 2 of section 335.066, the board may, if the violation is related to chemical dependency or mental health, require that the licensed practical nurse, registered nurse, or advanced practice registered nurse complete the impaired nurse program under such terms and conditions as are agreed to by the board and the licensee for a period not to exceed five years. If the licensee violates a term or condition of an impaired nurse program agreement entered into under this section, the board may elect to pursue discipline against the licensee pursuant to chapter 621 for the original conduct that resulted in the impaired nurse program agreement, or for any subsequent violation of subsection 2 of section 335.066. While the licensee participates in the impaired nurse program, the time limitations of section 620.154 shall toll under subsection 7 of section 620.154. All records pertaining to the impaired nurse program agreements are confidential and may only be released under subdivision (7) of subsection 14 of section 620.010.

9. The board may disclose information and records to the impaired nurse program to assist the program in the identification, intervention, treatment, and rehabilitation of licensed practical nurses, registered nurses, or advanced practice registered nurses who may be impaired by reason of illness, substance abuse, or as the result of any physical or mental condition. The program shall keep all information and records provided by the board confidential to the extent the board is required to treat the information and records closed to the public under chapter 620.

(L. 2007 H.B. 780 and L. 2007 S.B. 308, A.L. 2011 H.B. 315)

Complaints to be sealed records, when.

335.068. 1. If the board determines that a complaint does not constitute a violation of the nursing practice act or that the complaint is unsubstantiated, then that complaint, and all documentation related to it, shall be deemed a sealed record. If the administrative hearing commission or a court of competent jurisdiction makes a finding that an action brought by the board does not constitute sufficient grounds to discipline the license of a licensee, that complaint, and all documentation related to it, shall be deemed a sealed record.

2. For purposes of this section, a "sealed record" shall mean that the complaint to which it refers shall be deemed to never have occurred. The licensee may properly reply that no record exists with respect to such complaint upon any inquiry in the matter. A sealed record shall not be disclosed or reported to any other state agency, other board of nursing, or any other organization without express, written permission of the licensee.

3. Upon determination by the board that a complaint is not a violation of the nursing practice act or that the complaint is unsubstantiated, or upon the conclusion of litigation resulting in a finding of insufficient grounds to impose discipline upon a licensee's license, the board and the division of professional registration shall, in a timely fashion:

(1) Notify any other licensing board in another state or any national registry regarding the board's action if they have been previously notified of the complaint; and

(2) Send a letter to the licensee that clearly states that the board found the complaint to be unsubstantiated or that litigation resulted in a finding that there are insufficient grounds to discipline the licensee's license, that the board has sealed all records concerning the complaint, and notify the licensee of the provisions of subsection 4 of this section.

4. Any person who has been the subject of an unsubstantiated complaint as provided in subsection 1 of this section shall not be required to disclose the existence of such complaint in subsequent applications or representations relating to their nursing professions.

5. Nothing contained in this section shall prevent the board of nursing from maintaining such records as to ensure that all complaints received by the board are properly investigated and reviewed by the board and the results of that investigation are reported to the appropriate parties.

(L. 1999 H.B. 343, A.L. 2007 H.B. 780 merged with S.B. 308)

Nursing schools, standards for approval, fees--noncompliance, effect of.

335.071. 1. Any institution desiring to conduct an approved educational program of professional nursing or of practical nursing shall apply to the board and submit evidence that it is prepared to meet standards established by this law and the board.

2. The board, through its executive officer or other authorized representatives, shall initially survey a nursing education program. A written report of the survey shall be submitted to the board. If the board determines that the requirements for an accredited nursing education program are met, such program shall be approved as a nursing education program for professional or for practical nurses upon payment of a fee in an amount to be set by the board and in accord with board rules.

3. The board, through its executive officer or other authorized representatives, shall periodically survey all nursing education programs in the state. Written reports of such surveys shall be submitted to the board. If the board determines that any approved nursing education program is not maintaining the standards required by sections 335.011 to 335.096 and by the board, notice thereof in writing specifying the defect or defects shall be immediately given to the institution conducting the program. A program which fails to correct these conditions to the satisfaction of the board within a reasonable time shall, after notice and hearing, be removed from the board's listing of approved programs. All hearings shall be conducted in accordance with chapter 621.

4. All such approved programs shall pay an annual registration fee in an amount to be determined by the board.

(L. 1975 S.B. 108 § 13, A.L. 1981 S.B. 16, A.L. 1999 H.B. 343)

Verification of licensure prior to hiring.

335.075. 1. Before hiring a registered nurse, licensed practical nurse, or advanced practice registered nurse in Missouri, an employer shall verify that the applicant has a current, valid license to practice nursing under chapter 335. This section shall not apply for employment which does not require the possession of a current, valid license to practice nursing.

2. Employers shall have a process in place to verify licensure status of each registered nurse, licensed practical nurse, or advanced practice registered nurse coinciding with the license renewal.

(L. 2010 H.B. 2226, et al.)

Titles, R.N., L.P.N., and APRN, who may use.

335.076. 1. Any person who holds a license to practice professional nursing in this state may use the title "Registered Professional Nurse" and the abbreviation "R.N.". No other person shall use the title "Registered Professional Nurse" or the abbreviation "R.N.". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a registered professional nurse.

2. Any person who holds a license to practice practical nursing in this state may use the title "Licensed Practical Nurse" and the abbreviation "L.P.N.". No other person shall use the title "Licensed Practical Nurse" or the abbreviation "L.P.N.". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is a licensed practical nurse.

3. Any person who holds a license or recognition to practice advanced practice nursing in this state may use the title "Advanced Practice Registered Nurse", and the abbreviation "APRN", and any other title designations appearing on his or her license. No other person shall use the title "Advanced Practice Registered Nurse" or the abbreviation "APRN". No other person shall assume any title or use any abbreviation or any other words, letters, signs, or devices to indicate that the person using the same is an advanced practice registered nurse.

4. No person shall practice or offer to practice professional nursing, practical nursing, or advanced practice nursing in this state or use any title, sign, abbreviation, card, or device to indicate that such person is a practicing professional nurse, practical nurse, or advanced practice nurse unless he or she has been duly licensed under the provisions of this chapter.

5. In the interest of public safety and consumer awareness, it is unlawful for any person to use the title "nurse" in reference to himself or herself in any capacity, except individuals who are or have been licensed as a registered nurse, licensed practical nurse, or advanced practice registered nurse under this chapter.

6. Notwithstanding any law to the contrary, nothing in this chapter shall prohibit a Christian Science nurse from using the title "Christian Science nurse", so long as such person provides only religious nonmedical services when offering or providing such services to those who choose to rely upon healing by spiritual means alone and does not hold his or her own religious organization and does not hold himself or herself out as a registered nurse, advanced practice registered nurse, nurse practitioner, licensed practical nurse, nurse midwife, clinical nurse specialist, or nurse anesthetist, unless otherwise authorized by law to do so.

(L. 1975 S.B. 108 § 14, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2008 S.B. 724)

Exempted practices and practitioners.

335.081. So long as the person involved does not represent or hold himself or herself out as a nurse licensed to practice in this state, no provision of sections 335.011 to 335.096 shall be construed as prohibiting:

- (1) The practice of any profession for which a license is required and issued pursuant to the laws of this state by a person duly licensed to practice that profession;
- (2) The services rendered by technicians, nurses' aides or their equivalent trained and employed in public or private hospitals and licensed long-term care facilities except the services rendered in licensed long-term care facilities shall be limited to administering medication, excluding injectable other than insulin;
- (3) The providing of nursing care by friends or members of the family of the person receiving such care;

- (4) The incidental care of the sick, aged, or infirm by domestic servants or persons primarily employed as housekeepers;
- (5) The furnishing of nursing assistance in the case of an emergency situation;
- (6) The practice of nursing under proper supervision:
  - (a) As a part of the course of study by students enrolled in approved schools of professional nursing or in schools of practical nursing;
  - (b) By graduates of accredited nursing programs pending the results of the first licensing examination or ninety days after graduation, whichever first occurs;
  - (c) A graduate nurse who is prevented from attending the first licensing examination following graduation by reason of active duty in the military may practice as a graduate nurse pending the results of the first licensing examination scheduled by the board following the release of such graduate nurse from active military duty or pending the results of the first licensing examination taken by the graduate nurse while involved in active military service whichever comes first;
- (7) The practice of nursing in this state by any legally qualified nurse duly licensed to practice in another state whose engagement requires such nurse to accompany and care for a patient temporarily residing in this state for a period not to exceed six months;
- (8) The practice of any legally qualified nurse who is employed by the government of the United States or any bureau, division or agency thereof, while in the discharge of his or her official duties or to the practice of any legally qualified nurse serving in the Armed Forces of the United States while stationed within this state;
- (9) Nonmedical nursing care of the sick with or without compensation when done in connection with the practice of the religious tenets of any church by adherents thereof, as long as they do not engage in the practice of nursing as defined in sections 335.011 to 335.096;
- (10) The practice of any legally qualified and licensed nurse of another state, territory, or foreign country whose responsibilities include transporting patients into, out of, or through this state while actively engaged in patient transport that does not exceed forty-eight hours in this state.  
(L. 1975 S.B. 108 § 15, A.L. 1982 S.B. 842, A.L. 1991 S.B. 358, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343, A.L. 2010 H.B. 2226, et al.)

Use of fraudulent credentials prohibited.

335.086. No person, firm, corporation or association shall:

- (1) Sell or attempt to sell or fraudulently obtain or furnish or attempt to furnish any nursing diploma, license, renewal or record or aid or abet therein;
- (2) Practice professional or practical nursing as defined by sections 335.011 to 335.096 under cover of any diploma, license, or record illegally or fraudulently obtained or signed or issued unlawfully or under fraudulent representation;
- (3) Practice professional nursing or practical nursing as defined by sections 335.011 to 335.096 unless duly licensed to do so under the provisions of sections 335.011 to 335.096;

(4) Use in connection with his name any designation tending to imply that he is a licensed registered professional nurse or a licensed practical nurse unless duly licensed so to practice under the provisions of sections 335.011 to 335.096;

(5) Practice professional nursing or practical nursing during the time his license issued under the provisions of sections 335.011 to 335.096 shall be suspended or revoked; or

(6) Conduct a nursing education program for the preparation of professional or practical nurses unless the program has been accredited by the board.

(L. 1975 S.B. 108 § 16)

Effective 1-21-76

Beginning January 1, 2017--Penalty for violation.

335.096. Any person who violates any of the provisions of this chapter is guilty of a class E felony and, upon conviction, shall be punished as provided by law.

(L. 1975 S.B. 108 § 18, A.L. 1981 S.B. 16, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2014 S.B. 491)

Effective 1-01-17

Until December 31, 2016--Penalty for violation.

335.096. Any person who violates any of the provisions of chapter 335 is guilty of a class D felony and, upon conviction, shall be punished as provided by law.

(L. 1975 S.B. 108 § 18, A.L. 1981 S.B. 16, A.L. 2007 H.B. 780 merged with S.B. 308)

\*This section was amended by S.B. 491, 2014, effective 1-01-17. Due to the delayed effective date, both versions of this section are printed here.

Board of nursing, powers, enforcement.

335.097. 1. The president or secretary of the board of nursing may administer oaths, issue subpoenas duces tecum and require production of documents and records. Subpoenas duces tecum shall be served by a person authorized to serve subpoenas of courts of record. In lieu of requiring attendance of a person to produce original documents in response to a subpoena duces tecum, the board may require sworn copies of such documents to be filed with it or delivered to its designated representative.

2. The board may enforce its subpoenas duces tecum by applying to a circuit court of Cole County, the county of the investigation, hearing or proceeding, or any county where the person resides or may be found, for an order upon any person who shall fail to comply with a subpoena duces tecum to show cause why such subpoena should not be enforced, which such order and a copy of the application therefor shall be served upon the person in the same manner as a summons in a civil action, and if the circuit court shall, after a hearing, determine that the subpoena duces tecum should be sustained and enforced, such court shall proceed to enforce the subpoena duces tecum in the same manner as though the subpoena duces tecum had been issued in a civil case in the circuit court.

3. Reports made to the board under the mandated reporting requirements as defined in chapter 383 shall not be deemed a violation of the federal Health Insurance Portability and Accountability Act (HIPAA) and the privacy rules located in the Act because the Missouri state board of nursing qualifies as a health oversight agency as defined in the HIPAA privacy rules.

(L. 1999 H.B. 343 § 4, A.L. 2007 H.B. 780 merged with S.B. 308)

Licensed practical nurse, additional authorized acts.

335.099. Any licensed practical nurse, as defined in section 335.016:



- (1) Who is an approved instructor for the level 1 medication aid program shall be qualified to teach the insulin administration course under chapter 198;
- (2) Shall be qualified to perform diabetic nail care and monthly onsite reviews of basic personal care recipients, as required by the department of social services, of a resident of a residential care facility or assisted living facility, as defined in chapter 198;
- (3) Shall be qualified to perform dietary oversight, as required by the department of health and senior services, of a resident of a residential care facility or assisted living facility, as defined in chapter 198.  
(L. 2011 S.B. 325)

Utilization of telehealth by nurses established--definition of telehealth--rulemaking authority--sunset provision.

335.175. 1. No later than January 1, 2014, there is hereby established within the state board of registration for the healing arts and the state board of nursing the "Utilization of Telehealth by Nurses". An advanced practice registered nurse (APRN) providing nursing services under a collaborative practice arrangement under section 334.104 may provide such services outside the geographic proximity requirements of section 334.104 if the collaborating physician and advanced practice registered nurse utilize telehealth in the care of the patient and if the services are provided in a rural area of need. Telehealth providers shall be required to obtain patient consent before telehealth services are initiated and ensure confidentiality of medical information.

2. As used in this section, "telehealth" means the use of medical information exchanged from one site to another via electronic communications to improve the health status of a patient, as defined in section 208.670.

3. (1) The boards shall jointly promulgate rules governing the practice of telehealth under this section. Such rules shall address, but not be limited to, appropriate standards for the use of telehealth.

(2) Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2013, shall be invalid and void.

4. For purposes of this section, "rural area of need" means any rural area of this state which is located in a health professional shortage area as defined in section 354.650.

5. Under section 23.253 of the Missouri sunset act:

(1) The provisions of the new program authorized under this section shall automatically sunset six years after August 28, 2013, unless reauthorized by an act of the general assembly; and

(2) If such program is reauthorized, the program authorized under this section shall automatically sunset twelve years after the effective date of the reauthorization of this section; and

(3) This section shall terminate on September first of the calendar year immediately following the calendar year in which the program authorized under this section is sunset.

(L. 2013 H.B. 315)

Sunset date 8-28-19

Termination 9-01-20

Nurse education incentive grants--definitions.

335.200. As used in sections 335.200 to 335.203, the following terms mean:

- (1) "Board", the state board of nursing;
  - (2) "Department", the Missouri department of higher education;
  - (3) "Eligible institution of higher education", a Missouri institution of higher education accredited by the higher learning commission of the north central association which offers a nursing education program;
  - (4) "Grant", a grant awarded to an eligible institution of higher education under the guidelines set forth in sections 335.200 to 335.203.
- (L. 1990 H.B. 1429 § , A.L. 2011 H.B. 223 & 231 merged with S.B. 325)

Nursing education incentive program established--grants authorized,limit, eligibility--administration--rulemaking authority.

335.203. 1. There is hereby established the "Nursing Education Incentive Program" within the department of higher education.

2. Subject to appropriation, grants shall be awarded through the nursing education incentive program to eligible institutions of higher education based on criteria jointly determined by the board and the department. Grant award amounts shall not exceed one hundred fifty thousand dollars. No campus shall receive more than one grant per year.

3. To be considered for a grant, an eligible institution of higher education shall offer a program of nursing that meets the predetermined category and area of need as established by the board and the department under subsection 4 of this section.

4. The board and the department shall determine categories and areas of need for designating grants to eligible institutions of higher education. In establishing categories and areas of need, the board and department may consider criteria including, but not limited to:

- (1) Data generated from licensure renewal data and the department of health and senior services; and
- (2) National nursing statistical data and trends that have identified nursing shortages.

5. The department shall be the administrative agency responsible for implementation of the program established under sections 335.200 to 335.203, and shall promulgate reasonable rules for the exercise of its functions and the effectuation of the purposes of sections 335.200 to 335.203. The department shall, by rule, prescribe the form, time, and method of filing applications and shall supervise the processing of such applications.

6. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2011, shall be invalid and void.

(L. 1990 H.B. 1429 § 2, A.L. 2011 H.B. 223 & 231 merged with S.B. 325)

Section: 335.0206.1(Repealed L. 2011 H.B. 223 & 231 § A merged with S.B. 325 § A)

335.206. 1. The nurse training incentive fund shall, upon appropriation, be used to provide incentive grants to eligible nursing programs which increase enrollment. Grants shall not be awarded to classes begun on or after July 1, 1996.

2. Grants shall be awarded to eligible nursing programs which increase enrollment pursuant to subsection 3 of this section. Eligible programs receiving grants provided under sections 335.200 to 335.209 shall monitor the enrollment of nontraditional students in their program and shall annually report to the board the number of nontraditional students enrolled therein. It shall be the intent of sections 335.200 to 335.209 to encourage the enrollment and graduation of nontraditional students in nursing education programs.

3. Incentive grants shall be awarded to professional nurse education programs, as follows:

(1) A grant of eight thousand dollars for each entering class of ten students by which the program increases its enrollment over the number of entering students admitted in the fall of 1989; and

(2) A grant of four hundred dollars for each student from each entering class cited in subdivision (1) of this section by which the program increases its number of graduates over the number of students graduated in the preceding year; or

(3) Beginning with the first graduating class of the classes which enter and are enrolled after August 28, 1990, a grant of four hundred dollars for each student by which the program increases its number of graduates over the number of graduates of the preceding year, if the program is not otherwise qualified to receive the grant provided pursuant to subdivision (1) of this section.

Section: 335.0209.1(Repealed L. 2011 H.B. 223 & 231 § A merged with S.B. 325 § A) 335.209. No rule or portion of a rule promulgated under the authority of sections 335.200 to 335.209 shall become effective unless it has been promulgated pursuant to the provisions of section 536.024.

Definitions.

335.212. As used in sections 335.212 to 335.242, the following terms mean:

(1) "Board", the Missouri state board of nursing;

(2) "Department", the Missouri department of health and senior services;

(3) "Director", director of the Missouri department of health and senior services;

(4) "Eligible student", a resident who has been accepted as a full-time student in a formal course of instruction leading to an associate degree, a diploma, a bachelor of science, a master of science in nursing (M.S.N.), a doctorate in nursing (Ph.D. or D.N.P.), or a student with a master of science in nursing seeking a doctorate in education (Ed.D.), or leading to the completion of educational requirements for a licensed practical nurse. The doctoral applicant may be a part-time student;

(5) "Participating school", an institution within this state which is approved by the board for participation in the professional and practical nursing student loan program established by sections 335.212 to 335.242,

having a nursing department and offering a course of instruction based on nursing theory and clinical nursing experience;

(6) "Qualified applicant", an eligible student approved by the board for participation in the professional and practical nursing student loan program established by sections 335.212 to 335.242;

(7) "Qualified employment", employment on a full-time basis in Missouri in a position requiring licensure as a licensed practical nurse or registered professional nurse in any hospital as defined in section 197.020 or in any agency, institution, or organization located in an area of need as determined by the department of health and senior services. Any forgiveness of such principal and interest for any qualified applicant engaged in qualified employment on a less than full-time basis may be prorated to reflect the amounts provided in this section;

(8) "Resident", any person who has lived in this state for one or more years for any purpose other than the attending of an educational institution located within this state.

(L. 1990 H.B. 1429 § 5, A.L. 2004 S.B. 1122, A.L. 2006 H.B. 1234 merged with S.B. 980, A.L. 2007 H.B. 780 merged with S.B. 308 merged with S.B. 513, A.L. 2009 H.B. 247 merged with S.B. 152)

Department of health and senior services to administer programs--advisory panel--members--rules, procedure.  
335.215.

1. The department of health and senior services shall be the administrative agency for the implementation of the professional and practical nursing student loan program established under sections 335.212 to 335.242, and the nursing student loan repayment program established under sections 335.245 to 335.259\*.

2. An advisory panel of nurses shall be appointed by the director. It shall be composed of not more than eleven members representing practical, associate degree, diploma, baccalaureate and graduate nursing education, community health, primary care, hospital, long-term care, a consumer, and the Missouri state board of nursing. The panel shall make recommendations to the director on the content of any rules, regulations or guidelines prior to their promulgation. The panel may make recommendations to the director regarding fund allocations for loans and loan repayment based on current nursing shortage needs.

3. The department of health and senior services shall promulgate reasonable rules and regulations for the exercise of its function pursuant to sections 335.212 to 335.259\*. It shall prescribe the form, the time and method of filing applications and supervise the proceedings thereof. No rule or portion of a rule promulgated under the authority of sections 335.212 to 335.257 shall become effective unless it has been promulgated pursuant to the provisions of section 536.024.

4. Ninety-five percent of funds loaned pursuant to sections 335.212 to 335.242 shall be loaned to qualified applicants who are enrolled in professional nursing programs in participating schools and five percent of the funds loaned pursuant to sections 335.212 to 335.242 shall be loaned to qualified applicants who are enrolled in practical nursing programs. Priority shall be given to eligible students who have established financial need. All loan repayment funds pursuant to sections 335.245 to 335.259\* shall be used to reimburse successful associate, diploma, baccalaureate or graduate professional nurse applicants' educational loans who agree to serve in areas of defined need as determined by the department.

(L. 1990 H.B. 1429 § 6, A.L. 1993 S.B. 52, A.L. 1995 S.B. 3)

\*Section 335.259 was repealed by S.B. 52 § A, 1993.

Nurse loan repayment fund established--administration.

335.218. There is hereby established the "Professional and Practical Nursing Student Loan and Nurse Loan Repayment Fund". All fees pursuant to section 335.221, general revenue appropriations to the student loan or loan repayment program, voluntary contributions to support or match the student loan and loan repayment program activities, funds collected from repayment and penalties, and funds received from the federal government shall be deposited in the state treasury and be placed to the credit of the professional and practical nursing student loan and nurse loan repayment fund. The fund shall be managed by the department of health and senior services and all administrative costs and expenses incurred as a result of the effectuation of sections 335.212 to 335.259 shall be paid from this fund.  
(L. 1990 H.B. 1429 § 7)

Education surcharge, amount, deposit in nursing student loan and nurse loan repayment fund.

335.221. The board, in addition to any other duties it may have regarding licensure of nurses, shall collect, at the time of licensure or licensure renewal, an education surcharge from each person licensed or relicensed pursuant to sections 335.011 to 335.096, in the amount of one dollar per year for practical nurses and five dollars per year for professional nurses. These funds shall be deposited in the professional and practical nursing student loan and nurse loan repayment fund. All expenditures authorized by sections 335.212 to 335.259\* shall be paid from funds appropriated by the general assembly from the professional and practical nursing student loan and nurse loan repayment fund. The provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be transferred and placed to the credit of general revenue.

(L. 1990 H.B. 1429 § 8, A.L. 1995 S.B. 452)

Effective 6-13-95

\*Section 335.259 was repealed by S.B. 52 § A, 1993.

Contracts for repayment of loans.

335.224. The department of health and senior services shall enter into a contract with each qualified applicant receiving financial assistance under the provisions of sections 335.212 to 335.242 for repayment of the principal and interest.

(L. 1990 H.B. 1429 § 9, A.L. 1995 S.B. 452)

Effective 6-13-95

Eligibility for loan.

335.227. An eligible student may apply to the department for financial assistance under the provisions of sections 335.212 to 335.242 if, at the time of his application for a loan, the eligible student has formally applied for acceptance at a participating school. Receipt of financial assistance is contingent upon acceptance and continued enrollment at a participating school.

(L. 1990 H.B. 1429 § 10)

Financial assistance, amount.

335.230. Financial assistance to any qualified applicant shall not exceed five thousand dollars for each academic year for a professional nursing program and shall not exceed two thousand five hundred dollars for each academic year for a practical nursing program. All financial assistance shall be made from funds credited to the professional and practical nursing student loan and nurse loan repayment fund. A qualified applicant may receive financial assistance for each academic year he remains a student in good standing at a participating school.

(L. 1990 H.B. 1429 § 11)

Schedule for repayment of loan--interest, amount.

335.233. The department shall establish schedules for repayment of the principal and interest on any financial assistance made under the provisions of sections 335.212 to 335.242. Interest at the rate of nine and one-half percent per annum shall be charged on all financial assistance made under the provisions of

sections 335.212 to 335.242, but the interest and principal of the total financial assistance granted to a qualified applicant at the time of the successful completion of a nursing degree, diploma program or a practical nursing program shall be forgiven through qualified employment.  
(L. 1990 H.B. 1429 § 12, A.L. 2006 H.B. 1234 merged with S.B. 980)

#### Repayment of loan--when.

335.236. The financial assistance recipient shall repay the financial assistance principal and interest beginning not more than six months after completion of the degree for which the financial assistance was made in accordance with the repayment contract. If an eligible student ceases his study prior to successful completion of a degree or graduation at a participating school, interest at the rate specified in section 335.233 shall be charged on the amount of financial assistance received from the state under the provisions of sections 335.212 to 335.242, and repayment, in accordance with the repayment contract, shall begin within ninety days of the date the financial aid recipient ceased to be an eligible student. All funds repaid by recipients of financial assistance to the department shall be deposited in the professional and practical nursing student loan and nurse loan repayment fund for use pursuant to sections 335.212 to 335.259.

(L. 1990 H.B. 1429 § 13)

#### Deferral of repayment of loans--when.

335.239. The department shall grant a deferral of interest and principal payments to a financial assistance recipient who is pursuing an advanced degree, special nursing program, or upon special conditions established by the department. The deferral shall not exceed four years. The status of each deferral shall be reviewed annually by the department of health and senior services to ensure compliance with the intent of this section.

(L. 1990 H.B. 1429 § 14)

#### Action to recover loans due.

335.242. When necessary to protect the interest of the state in any financial assistance transaction under sections 335.212 to 335.259, the department of health and senior services may institute any action to recover any amount due.

(L. 1990 H.B. 1429 § 15)

#### Definitions.

335.245. As used in sections 335.245 to 335.259\*, the following terms mean:

- (1) "Department", the Missouri department of health and senior services;
- (2) "Eligible applicant", a Missouri licensed nurse who has attained either an associate degree, a diploma, a bachelor of science, or graduate degree in nursing from an accredited institution approved by the board of nursing or a student nurse in the final year of a full-time baccalaureate school of nursing leading to a baccalaureate degree or graduate nursing program leading to a master's degree in nursing and has agreed to serve in an area of defined need as established by the department;
- (3) "Participating school", an institution within this state which grants an associate degree in nursing, grants a bachelor or master of science degree in nursing or provides a diploma nursing program which is accredited by the state board of nursing, or a regionally accredited institution in this state which provides a bachelor of science completion program for registered professional nurses;
- (4) "Qualified employment", employment on a full-time basis in Missouri in a position requiring licensure as a licensed practical nurse or registered professional nurse in any hospital as defined in section 197.020 or public or nonprofit agency, institution, or organization located in an area of need as determined by the department of health and senior services. Any forgiveness of such principal and interest for any qualified

applicant engaged in qualified employment on a less than full-time basis may be prorated to reflect the amounts provided in this section.

(L. 1990 H.B. 1429 § 16, A.L. 2004 S.B. 1122)

\*Section 335.259 was repealed by S.B. 52 in 1993.

Department of health and senior services to administer program--rules and regulations.

335.248. Sections 335.245 to 335.259 shall be known as the "Nursing Student Loan Repayment Program". The department of health and senior services shall be the administrative agency for the implementation of the authority established by sections 335.245 to 335.259. The department shall promulgate reasonable rules and regulations necessary to implement sections 335.245 to 335.259. Promulgated rules shall include, but not be limited to, applicant eligibility, selection criteria, prioritization of service obligation sites and the content of loan repayment contracts, including repayment schedules for those in default and penalties. The department shall promulgate rules regarding recruitment opportunities for minority students into nursing schools. Priority for student loan repayment shall be given to eligible applicants who have demonstrated financial need. All funds collected by the department from participants not meeting their contractual obligations to the state shall be deposited in the professional and practical nursing student loan and nurse loan repayment fund for use pursuant to sections 335.212 to 335.259. (L. 1990 H.B. 1429 § 17)

Loan repayment contract--qualified employment--recovery of amounts due.

335.251. Upon proper verification to the department by the eligible applicant of securing qualified employment in this state, the department shall enter into a loan repayment contract with the eligible applicant to repay the interest and principal on the educational loans of the applicant to the limit of the contract, which contract shall provide for instances of less than full-time qualified employment consistent with the provisions of section 335.233, out of any appropriation made to the professional and practical nursing student loan and nurse loan repayment fund. If the applicant breaches the contract by failing to begin or complete the qualified employment, the department is entitled to recover the total of the loan repayment paid by the department plus interest on the repaid amount at the rate of nine and one-half percent per annum. (L. 1990 H.B. 1429 § 18)

Law not to require certain contracts.

335.254. Sections 335.212 to 335.259 shall not be construed to require the department to enter into contracts with individuals who qualify for nursing education loans or nursing loan repayment programs when federal, state and local funds are not available for such purposes. (L. 1990 H.B. 1429 § 19)

Verification of qualified employment.

335.257. Successful applicants for whom loan payments are made under the provisions of sections 335.245 to 335.259 shall verify to the department twice each year, in June and in December, in the manner prescribed by the department that qualified employment in this state is being maintained. (L. 1990 H.B. 1429 § 20)

Findings and declaration of purpose.

335.300. 1. The party states find that:

- (1) The health and safety of the public are affected by the degree of compliance with and the effectiveness of enforcement activities related to state nurse licensure laws;
- (2) Violations of nurse licensure and other laws regulating the practice of nursing may result in injury or harm to the public;

(3) The expanded mobility of nurses and the use of advanced communication technologies as part of our nation's health care delivery system require greater coordination and cooperation among states in the areas of nurse licensure and regulation;

(4) New practice modalities and technology make compliance with individual state nurse licensure laws difficult and complex;

(5) The current system of duplicative licensure for nurses practicing in multiple states is cumbersome and redundant to both nurses and states.

2. The general purposes of this compact are to:

(1) Facilitate the states' responsibility to protect the public's health and safety;

(2) Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation;

(3) Facilitate the exchange of information between party states in the areas of nurse regulation, investigation, and adverse actions;

(4) Promote compliance with the laws governing the practice of nursing in each jurisdiction;

(5) Invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.

(L. 2009 S.B. 296)

Definitions.

335.305. As used in this compact, the following terms shall mean:

(1) "Adverse action", a home or remote state action;

(2) "Alternative program", a voluntary, nondisciplinary monitoring program approved by a nurse licensing board;

(3) "Coordinated licensure information system", an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a nonprofit organization composed of and controlled by state nurse licensing boards;

(4) "Current significant investigative information":

(a) Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or

(b) Investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond;

(5) "Home state", the party state that is the nurse's primary state of residence;

(6) "Home state action", any administrative, civil, equitable, or criminal action permitted by the home state's laws that are imposed on a nurse by the home state's licensing board or other authority including



actions against an individual's license such as: revocation, suspension, probation, or any other action affecting a nurse's authorization to practice;

(7) "Licensing board", a party state's regulatory body responsible for issuing nurse licenses;

(8) "Multistate licensing privilege", current, official authority from a remote state permitting the practice of nursing as either a registered nurse or a licensed practical/vocational nurse in such party state. All party states have the authority, in accordance with existing state due process law, to take actions against the nurse's privilege such as: revocation, suspension, probation, or any other action that affects a nurse's authorization to practice;

(9) "Nurse", a registered nurse or licensed/vocational nurse, as those terms are defined by each state's practice laws;

(10) "Party state", any state that has adopted this compact;

(11) "Remote state", a party state, other than the home state:

(a) Where a patient is located at the time nursing care is provided; or

(b) In the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located;

(12) "Remote state action":

(a) Any administrative, civil, equitable, or criminal action permitted by a remote state's laws which are imposed on a nurse by the remote state's licensing board or other authority including actions against an individual's multistate licensure privilege to practice in the remote state; and

(b) Cease and desist and other injunctive or equitable orders issued by remote states or the licensing boards thereof;

(13) "State", a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico;

(14) "State practice laws", those individual party's state laws and regulations that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. State practice laws does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

(L. 2009 S.B. 296)

General provisions and jurisdiction.

335.310. 1. A license to practice registered nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in such party state. A license to practice licensed practical/vocational nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a licensed practical/vocational nurse in such party state. In order to obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as well as all other applicable state laws.

2. Party states may, in accordance with state due process laws, limit or revoke the multistate licensure privilege of any nurse to practice in their state and may take any other actions under their applicable state

laws necessary to protect the health and safety of their citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.

3. Every nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but shall include all nursing practice as defined by the state practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing board and the courts, as well as the laws, in that party state.

4. This compact does not affect additional requirements imposed by states for advanced practice registered nursing. However, a multistate licensure privilege to practice registered nursing granted by a party state shall be recognized by other party states as a license to practice registered nursing if one is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.

5. Individuals not residing in a party state shall continue to be able to apply for nurse licensure as provided for under the laws of each party state. However, the license granted to these individuals will not be recognized as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.

(L. 2009 S.B. 296)

Applications for licensure in a party state.

335.315. 1. Upon application for a license, the licensing board in a party state shall ascertain, through the coordinated licensure information system, whether the applicant has ever held, or is the holder of, a license issued by any other state, whether there are any restrictions on the multistate licensure privilege, and whether any other adverse action by any state has been taken against the license.

2. A nurse in a party state shall hold licensure in only one party state at a time, issued by the home state.

3. A nurse who intends to change primary state of residence may apply for licensure in the new home state in advance of such change. However, new licenses will not be issued by a party state until after a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.

4. When a nurse changes primary state of residence by:

(1) Moving between two party states, and obtains a license from the new home state, the license from the former home state is no longer valid;

(2) Moving from a nonparty state to a party state, and obtains a license from the new home state, the individual state license issued by the nonparty state is not affected and will remain in full force if so provided by the laws of the nonparty state;

(3) Moving from a party state to a nonparty state, the license issued by the prior home state converts to an individual state license, valid only in the former home state, without the multistate licensure privilege to practice in other party states.

(L. 2009 S.B. 296)

Adverse actions.

335.320. In addition to the general provisions described in article III of this compact, the following provisions apply:

- (1) The licensing board of a remote state shall promptly report to the administrator of the coordinated licensure information system any remote state actions including the factual and legal basis for such action, if known. The licensing board of a remote state shall also promptly report any significant current investigative information yet to result in a remote state action. The administrator of the coordinated licensure information system shall promptly notify the home state of any such reports;
  - (2) The licensing board of a party state shall have the authority to complete any pending investigations for a nurse who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate actions, and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions;
  - (3) A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the license issued by the home state;
  - (4) For purposes of imposing adverse action, the licensing board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such conduct had occurred within the home state, in so doing, it shall apply its own state laws to determine appropriate action;
  - (5) The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action;
  - (6) Nothing in this compact shall override a party state's decision that participation in an alternative program may be used in lieu of licensure action and that such participation shall remain nonpublic if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.
- (L. 2009 S.B. 296)

Additional authorities invested in party state nurse licensing boards.

335.325. Notwithstanding any other powers, party state nurse licensing boards shall have the authority to:

- (1) If otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;
  - (2) Issue subpoenas for both hearings and investigations which require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses, and/or the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses and evidence are located;
  - (3) Issue cease and desist orders to limit or revoke a nurse's authority to practice in their state;
  - (4) Promulgate uniform rules and regulations as provided for in subsection 3 of section 335.335.
- (L. 2009 S.B. 296)

Coordinated licensure information system.

335.330. 1. All party states shall participate in a cooperative effort to create a coordinated database of all licensed registered nurses and licensed practical/vocational nurses. This system will include information on the licensure and disciplinary history of each nurse, as contributed by party states, to assist in the coordination of nurse licensure and enforcement efforts.

2. Notwithstanding any other provision of law, all party states' licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials to the coordinated licensure information system.

3. Current significant investigative information shall be transmitted through the coordinated licensure information system only to party state licensing boards.

4. Notwithstanding any other provision of law, all party states' licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with nonparty states or disclosed to other entities or individuals without the express permission of the contributing state.

5. Any personally identifiable information obtained by a party state's licensing board from the coordinated licensure information system may not be shared with nonparty states or disclosed to other entities or individuals except to the extent permitted by the laws of the party state contributing the information.

6. Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information shall also be expunged from the coordinated licensure information system.

7. The compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection, and exchange of information under this compact.

(L. 2009 S.B. 296)

Compact administration and interchange of information.

335.335. 1. The head of the nurse licensing board, or his/her designee, of each party state shall be the administrator of this compact for his/her state.

2. The compact administrator of each party shall furnish to the compact administrator of each other party state any information and documents including, but not limited to, a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this compact.

3. Compact administrators shall have the authority to develop uniform rules to facilitate and coordinate implementation of this compact. These uniform rules shall be adopted by party states, under the authority invested under subsection 4 of section 335.325.

(L. 2009 S.B. 296)

Immunity.

335.340. No party state or the officers or employees or agents of a party state's nurse licensing board who acts in accordance with the provisions of this compact shall be liable on account of any act or omission in good faith while engaged in the performance of their duties under this compact. Good faith in this article shall not include willful misconduct, gross negligence, or recklessness.

(L. 2009 S.B. 296)

Entry into force, withdrawal and amendment.

335.345. 1. This compact shall enter into force and become effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this compact by enacting a statute repealing the same, but no such withdrawal shall take effect until six months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.

2. No withdrawal shall affect the validity or applicability by the licensing boards of states remaining party to the compact of any report of adverse action occurring prior to the withdrawal.
3. Nothing contained in this compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a non-party state that is made in accordance with the other provisions of this compact.
4. This compact may be amended by the party states. No amendment to this compact shall become effective and binding upon the party states unless and until it is enacted into the laws of all party states. (L. 2009 S.B. 296)

Construction and severability.

335.350. 1. This compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this compact shall be severable and if any phrase, clause, sentence, or provision of this compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this compact and the applicability thereof to any government, agency, person, or circumstance shall not be affected thereby. If this compact shall be held contrary to the constitution of any state party thereto, the compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.

2. In the event party states find a need for settling disputes arising under this compact:

- (1) The party states may submit the issues in dispute to an arbitration panel which will be comprised of an individual appointed by the compact administrator in the home state, an individual appointed by the compact administrator in the remote states involved, and an individual mutually agreed upon by the compact administrators of all the party states involved in the dispute;
- (2) The decision of a majority of the arbitrators shall be final and binding. (L. 2009 S.B. 296)

Applicability of compact.

335.355. 1. The term "head of the nurse licensing board" as referred to in article VIII of this compact shall mean the executive director of the Missouri state board of nursing.

2. A person who is extended the privilege to practice in this state pursuant to the nurse licensure compact is subject to discipline by the board, as set forth in this chapter, for violation of this chapter or the rules and regulations promulgated herein. A person extended the privilege to practice in this state pursuant to the nurse licensure compact shall be subject to adhere to all requirements of this chapter, as if such person were originally licensed in this state.

3. Sections 335.300 to 335.355 are applicable only to nurses whose home states are determined by the Missouri state board of nursing to have licensure requirements that are substantially equivalent or more stringent than those of Missouri.

4. This compact is designed to facilitate the regulation of nurses, and does not relieve employers from complying with statutorily imposed obligations.

5. This compact does not supercede existing state labor laws. (L. 2009 S.B. 296)

**Iowa Board of Nursing****CHAPTER 6**  
**NURSING PRACTICE FOR REGISTERED NURSES****655—6.1(152) Definitions.**

*“Accountability”* means being obligated to answer for one’s acts, including the act of supervision.

*“Advanced registered nurse practitioner (ARNP)”* means a nurse with current licensure as a registered nurse in Iowa or who is licensed in another state and recognized for licensure in this state pursuant to the nurse licensure compact contained in 2000 Iowa Acts, House File 2105, section 8, and is also registered in Iowa to practice in an advanced role. The ARNP is prepared for an advanced role by virtue of additional knowledge and skills gained through a formal advanced practice education program of nursing in a specialty area approved by the board. In the advanced role, the nurse practices nursing assessment, intervention, and management within the boundaries of the nurse-client relationship. Advanced nursing practice occurs in a variety of settings, within an interdisciplinary health care team, which provide for consultation, collaborative management, or referral. The ARNP may perform selected medically delegated functions when a collaborative practice agreement exists.

*“Basic nursing education”* means a nursing program preparing a person for initial licensure to practice nursing as a registered nurse or licensed practical nurse.

*“Board”* as used in this chapter means the Iowa board of nursing.

*“Certified clinical nurse specialist”* means an ARNP prepared at the master’s level who possesses evidence of current certification as a clinical specialist in an area of nursing practice by a national professional nursing association as approved by the board.

*“Certified nurse-midwife”* means an ARNP educated in the disciplines of nursing and midwifery who possesses evidence of current certification by a national professional nursing association approved by the board. The certified nurse-midwife is authorized to manage the care of normal newborns and women, antepartally, intrapartally, postpartally or gynecologically.

*“Certified nurse practitioner”* means an ARNP educated in the disciplines of nursing who has advanced knowledge of nursing, physical and psychosocial assessment, appropriate interventions, and management of health care, and who possesses evidence of current certification by a national professional nursing association approved by the board.

*“Certified registered nurse anesthetist”* means an ARNP educated in the disciplines of nursing and anesthesia who possesses evidence of current certification by a national professional nursing association approved by the board.

*“Competence in nursing”* means having the knowledge and the ability to perform, skillfully and proficiently, the functions within the role of the licensed nurse.

*“Expanded intravenous therapy certification course”* means the Iowa board of nursing course required for licensed practical nurses to perform procedures related to the expanded scope of practice of intravenous therapy.

*“Midline catheter”* means a long peripheral catheter in which the distal end resides in the mid to upper arm, but the tip terminates no further than the axilla.

*“Minimum standards”* means standards of practice that interpret the legal definition of nursing as well as provide criteria against which violations of the law can be determined.

*“Nursing diagnosis”* means a judgment made by a registered nurse, following a nursing assessment of individuals and groups about actual or potential responses to health problems, which forms the basis for determining effective nursing interventions.

*“Nursing facility”* means an institution as defined in Iowa Code chapter 135C. This definition does not include acute care settings.

*“Nursing process”* means ongoing assessment, nursing diagnosis, planning, intervention, and evaluation.

*“Peripheral intravenous catheter”* means a catheter three inches or less in length.

*“Peripherally inserted central catheter”* means a soft flexible central venous catheter inserted into an extremity and advanced until the tip is positioned in the vena cava.

*“Proximate area”* means that the registered nurse analyzes the qualifications of the licensed practical nurse in relationship to nursing needs of the client in determining the appropriate distance within the building and the time necessary to be readily available to the licensed practical nurse.

*“Unlicensed assistive personnel”* is an individual who is trained to function in an assistive role to the registered nurse and licensed practical nurse in the provision of nursing care activities as delegated by the registered nurse or licensed practical nurse.

This rule is intended to implement Iowa Code chapter 152.

[ARC 9329B, IAB 1/12/11, effective 2/16/11]

**655—6.2(152) Minimum standards of nursing practice for registered nurses.**

**6.2(1)** The registered nurse shall recognize and understand the legal implications within the scope of nursing practice. The scope of nursing practice considered to be minimum standards of nursing practice shall not be interpreted to include those practices currently ascribed to the advanced registered nurse practitioner.

**6.2(2)** The registered nurse shall utilize the nursing process in the practice of nursing, consistent with accepted and prevailing practice. The nursing process is ongoing and includes:

- a. Nursing assessments about the health status of an individual or group.
- b. Formulation of a nursing diagnosis based on analysis of the data from the nursing assessment.
- c. Planning of nursing care which includes determining goals and priorities for actions which are based on the nursing diagnosis.
- d. Nursing interventions implementing the plan of care.
- e. Evaluation of the individual's or group's status in relation to established goals and the plan of care.

**6.2(3)** The registered nurse shall conduct nursing practice by respecting the rights of an individual or group.

**6.2(4)** The registered nurse shall conduct nursing practice by respecting the confidentiality of an individual or group, unless obligated to disclose under proper authorization or legal compulsion.

**6.2(5)** The registered nurse shall recognize and understand the legal implications of accountability. Accountability includes but need not be limited to the following:

a. Performing or supervising those activities and functions which require the knowledge and skill level currently ascribed to the registered nurse and seeking assistance when activities and functions are beyond the licensee's scope of preparation.

b. Assigning and supervising persons performing those activities and functions which do not require the knowledge and skill level currently ascribed to the registered nurse.

c. Using professional judgment in assigning and delegating activities and functions to unlicensed assistive personnel. Activities and functions which are beyond the scope of practice of the licensed practical nurse may not be delegated to unlicensed assistive personnel. For the purposes of this paragraph, “unlicensed assistive personnel” does not include certified emergency medical services personnel authorized under Iowa Code chapter 147A performing nonlifesaving procedures for which those individuals have been certified and which are designated in a written job description, after the patient is observed by a registered nurse.

d. Supervising, among other things, includes any or all of the following:

- (1) Direct observation of a function or activity.
- (2) Assumption of overall responsibility for assessing, planning, implementing, and evaluating nursing care.

(3) Delegation of nursing tasks while retaining accountability.

(4) Determination that nursing care being provided is adequate and delivered appropriately.

e. Executing the regimen prescribed by a physician. In executing the medical regimen as prescribed by the physician, the registered nurse shall exercise professional judgment in accordance with minimum standards of nursing practice as defined in these rules. If the medical regimen prescribed by the physician is not carried out, based on the registered nurse's professional judgment, accountability shall include but need not be limited to the following:

(1) Timely notification of the physician who prescribed the medical regimen that the order(s) was not executed and reason(s) for same.

(2) Documentation on the medical record that the physician was notified and reason(s) for not executing the order(s).

*f.* Wearing identification which clearly identifies the nurse as a registered nurse when providing direct patient care unless wearing identification creates a safety or health risk for either the nurse or the patient.

**655—6.3(152) Minimum standards of practice for licensed practical nurses.**

**6.3(1)** The licensed practical nurse shall recognize and understand the legal implications within the scope of nursing practice. The licensed practical nurse shall perform services in the provision of supportive or restorative care under the supervision of a registered nurse or physician as defined in the Iowa Code.

**6.3(2)** The licensed practical nurse shall participate in the nursing process, consistent with accepted and prevailing practice, by assisting the registered nurse or physician. The licensed practical nurse may assist the registered nurse in monitoring, observing and reporting reactions to therapy.

**6.3(3)** The licensed practical nurse shall not perform any activity requiring the knowledge and skill ascribed to the registered nurse, including:

- a.* The initiation of or assessment related to procedures/therapies requiring the knowledge or skill level ascribed to the registered nurse.
- b.* The initiation of intravenous solutions, intravenous medications and blood components.
- c.* The administration of medicated intravenous solutions, intravenous medications and blood components.
- d.* The initiation or administration of medications requiring the knowledge or skill level currently ascribed to the registered nurse.

**6.3(4)** A licensed practical nurse, under the supervision of a registered nurse, may engage in the limited scope of practice of intravenous therapy. The licensed practical nurse shall be educated and have documentation of competency in the limited scope of practice of intravenous therapy. Limited scope of practice of intravenous therapy may include:

- a.* Addition of intravenous solutions without adding medications to established peripheral intravenous sites.
- b.* Regulation of the rate of nonmedicated intravenous solutions to established peripheral intravenous sites.
- c.* Administration of maintenance doses of analgesics via the patient-controlled analgesia pump set at a lock-out interval to established peripheral intravenous sites.
- d.* Discontinuation of peripheral intravenous therapy.
- e.* Administration of a prefilled heparin or saline syringe flush, prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse, to an established peripheral lock, in a licensed hospital, a nursing facility or a certified end-stage renal dialysis unit.

**6.3(5)** When nursing tasks are delegated by the registered nurse to the licensed practical nurse in a certified end-stage renal dialysis unit, the facility must have a written policy that defines the practice and written verification of the education and competency of the licensed practical nurse in accordance with the facility's written policy. Nursing tasks which may be delegated to the licensed practical nurse for the sole purpose of hemodialysis treatment include:

- a.* Initiation and discontinuation of the hemodialysis treatment utilizing any of the following established vascular accesses: central line catheter, arteriovenous fistula, graft.
- b.* Administration, during hemodialysis treatment, of local anesthetic prior to cannulation of the vascular access site.
- c.* Administration of prescribed dosages of heparin solution or saline solution utilized in the initiation and discontinuation of hemodialysis.
- d.* Administration, during hemodialysis treatment via the extracorporeal circuit, of the routine intravenous medications erythropoietin, Vitamin D Analog, intravenous antibiotic solutions prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse, and iron, excluding any iron preparation that requires a test dose. The registered nurse shall administer the first dose of erythropoietin, Vitamin D Analog, antibiotics, and iron.

**6.3(6)** The licensed practical nurse may provide nursing care in an acute care setting. When the nursing care provided by the licensed practical nurse in an acute care setting requires the knowledge and skill level currently ascribed to the registered nurse, a registered nurse or physician must be present in the proximate area. Acute care settings requiring the knowledge and skill ascribed to the registered nurse include, but are not



limited to:

- a.* Units where care of the unstable, critically ill, or critically injured individual is provided.
- b.* General medical-surgical units.
- c.* Emergency departments.
- d.* Operating rooms. (A licensed practical nurse may assist with circulating duties when supervised by a registered nurse circulating in the same room.)
- e.* Postanesthesia recovery units.
- f.* Hemodialysis units.
- g.* Labor and delivery/birthing units.
- h.* Mental health units.

**6.3(7)** The licensed practical nurse may provide nursing care in a non-acute care setting. When the nursing care provided by the licensed practical nurse in a non-acute care setting requires the knowledge and skill level currently ascribed to the registered nurse, the registered nurse or physician must be present in the proximate area. The non-acute care settings requiring the knowledge and skill level ascribed to the registered nurse include, but are not limited to:

- a.* Community health. (Subrules 6.6(1) and 6.6(4) are exceptions to the “proximate area” requirement.)
- b.* School nursing. (Subrules 6.6(2) and 6.6(3) are exceptions to the “proximate area” requirement.)
- c.* Occupational nursing.
- d.* Correctional facilities.
- e.* Community mental health nursing.

**6.3(8)** The licensed practical nurse shall conduct nursing practice by respecting the rights of an individual or group.

**6.3(9)** The licensed practical nurse shall conduct nursing practice by respecting the confidentiality of an individual or group, unless obligated to disclose under proper authorization or legal compulsion.

**6.3(10)** The licensed practical nurse shall recognize and understand the legal implications of accountability. Accountability includes but need not be limited to the following:

- a.* Performing those activities and functions which require the knowledge and skill level currently ascribed to the licensed practical nurse and seeking assistance when activities and functions are beyond the licensee’s scope of preparation.

- b.* Accepting responsibility for performing assigned and delegated functions and informing the registered nurse when assigned and delegated functions are not executed.

- c.* Executing the medical regimen prescribed by a physician. In executing the medical regimen as prescribed by the physician, the licensed practical nurse shall exercise prudent judgment in accordance with minimum standards of nursing practice as defined in these rules. If the medical regimen prescribed by the physician is not carried out based on the licensed practical nurse’s prudent judgment, accountability shall include but need not be limited to the following:

- (1) Timely notification of the physician who prescribed the medical regimen that said order(s) was not executed and reason(s) for same.

- (2) Documentation on the medical record that the physician was notified and reason(s) for not executing the order(s).

- d.* Wearing identification which clearly identifies the nurse as a licensed practical nurse when providing direct patient care unless wearing identification creates a safety or health risk for either the nurse or the patient.

This rule is intended to implement Iowa Code chapters 152 and 152E.

[ARC 9329B, IAB 1/12/11, effective 2/16/11]

## **655—6.4(152) Additional acts which may be performed by registered nurses.**

**6.4(1)** A registered nurse shall be permitted to practice as a diagnostic radiographer while under the supervision of a licensed practitioner provided that appropriate training standards for use of radiation-emitting equipment are met as outlined in 641—42.1(136C).

**6.4(2)** A registered nurse, licensed pursuant to Iowa Code chapter 152, may staff an authorized ambulance, rescue, or first response service provided the registered nurse can document equivalency through education and additional skills training essential in the delivery of out-of-hospital emergency care. The equivalency shall be accepted when documentation has been reviewed and approved at the local level by the medical director of the

ambulance, rescue, or first response service in accordance with the form adopted by the Iowa department of public health bureau of emergency medical services. An exception to this subrule is the registered nurse who accompanies and is responsible for a transfer patient.

This rule is intended to implement Iowa Code section 147A.12 and chapters 136C and 152.

**655—6.5(152) Additional acts which may be performed by licensed practical nurses.**

**6.5(1)** A licensed practical nurse shall be permitted to supervise unlicensed assistive personnel under the provisions of Iowa Code section 152.1(4) “b.”

*a.* Supervision, among other things, includes any or all of the following:

- (1) Direct observation of a function or activity.
- (2) Delegation of nursing tasks while retaining accountability.
- (3) Determination that nursing care being provided is adequate and delivered appropriately.

*b.* Supervision shall be in accordance with the following:

(1) A licensed practical nurse working under the supervision of a registered nurse shall be permitted to supervise in an intermediate care facility for the mentally retarded or in a residential health care setting.

(2) A licensed practical nurse working under the supervision of a registered nurse shall be permitted to supervise in a nursing facility.

The licensed practical nurse shall be required to complete a curriculum which has been approved by the board and designed specifically for the supervision role of the licensed practical nurse in a nursing facility. The course must be presented by a board-approved nursing program or an approved provider of continuing education. Documentation of the completion of the curriculum as outlined in this subparagraph shall be maintained by the licensed practical nurse.

(3) A licensed practical nurse shall be entitled to supervise without the educational requirement outlined in subparagraph 6.5(1) “b”(2) if the licensed practical nurse was performing in a supervisory role on or before October 6, 1982. The licensed practical nurse being employed in a supervisory role after the enactment of these rules shall complete the curriculum outlined in subparagraph 6.5(1) “b”(2) within six months of employment.

(4) A licensed practical nurse working under the supervision of a registered nurse may direct the activities of other licensed practical nurses and unlicensed assistive personnel in an acute care setting in giving care to individuals assigned to the licensed practical nurse. The registered nurse must be in the proximate area.

**6.5(2)** A licensed practical nurse shall be permitted to practice as a diagnostic radiographer while under the supervision of a licensed practitioner provided that appropriate training standards for use of radiation-emitting equipment are met as outlined in 641—42.1(136C).

**6.5(3)** A licensed practical nurse shall be permitted to perform, in addition to the functions set forth in subrule 6.3(4), procedures related to the expanded scope of practice of intravenous therapy upon completion of the board-approved expanded intravenous therapy certification course.

**6.5(4)** To be eligible to enroll in the course, the licensed practical nurse shall:

- a.* Hold a current unrestricted Iowa license or an unrestricted license in another state recognized for licensure in this state pursuant to the nurse licensure compact contained in Iowa Code chapter 152E.
- b.* Have documentation of 1040 hours of practice as a licensed practical nurse.
- c.* Be practicing in a licensed hospital, a nursing facility or a certified end-stage renal dialysis unit whose policies allow the licensed practical nurse to perform procedures related to the expanded scope of practice of intravenous therapy.

**6.5(5)** The course must be offered by an approved Iowa board of nursing provider of nursing continuing education. Documentation of course completion shall be maintained by the licensed practical nurse and employer.

**6.5(6)** The board-approved course shall incorporate the responsibilities of the licensed practical nurse when providing intravenous therapy via a peripheral intravenous catheter, a midline catheter and a peripherally inserted central catheter (PICC) to children, adults and elderly adults. When providing intravenous therapy, the LPN shall be under the supervision of a registered nurse. Procedures which may be performed if delegated by the registered nurse are as follows:

- a.* Initiation of a peripheral intravenous catheter for continuous or intermittent therapy using a catheter not to exceed three inches in length.

*b.* Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of premixed electrolyte solutions or premixed vitamin solutions. The first dose shall be administered by the registered nurse. The solutions must be prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse.

*c.* Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of solutions containing potassium chloride that do not exceed 40 meq per liter and that do not exceed a dose of 10 meq per hour. The first dose shall be administered by the registered nurse. The solutions must be prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse.

*d.* Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of intravenous antibiotic solutions prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse. The first dose shall be administered by the registered nurse.

*e.* Maintenance of the patency of a peripheral intravenous catheter, midline catheter, and a PICC line with a prefilled heparin or saline syringe flush, prepackaged by the manufacturer or premixed by a registered pharmacist or registered nurse.

*f.* Changing the dressing of a midline catheter and a PICC line per sterile technique.

**6.5(7)** Procedures which shall not be delegated by the registered nurse to the licensed practical nurse are as follows:

*a.* Initiation and discontinuation of a midline catheter or a peripherally inserted central catheter (PICC).

*b.* Administration of medication by bolus or IV push except maintenance doses of analgesics via a patient-controlled analgesia pump set at a lock-out interval.

*c.* Administration of blood and blood products, vasodilators, vasopressors, oxytoxics, chemotherapy, colloid therapy, total parenteral nutrition, anticoagulants, antiarrhythmics, thrombolytics, and solutions with a total osmolarity of 600 or greater.

*d.* Provision of intravenous therapy to a client under the age of 12 or any client weighing less than 80 pounds, with the exception of those activities authorized in the limited scope of practice found in subrule 6.3(4).

*e.* Provision of intravenous therapy in any other setting except a licensed hospital, a nursing facility and a certified end-stage renal dialysis unit, with the exception of those activities authorized in the limited scope of practice found in subrule 6.3(4).

This rule is intended to implement Iowa Code chapters 136C and 152.

[ARC 9329B, IAB 1/12/11, effective 2/16/11]

655—6.6 (152) Specific nursing practice for licensed practical nurses.

6.6(1) The licensed practical nurse shall be permitted to provide supportive and restorative care in

the home setting under the supervision of a registered nurse, as defined in subrule 6.2(5), or a physician. When the licensed practical nurse provides care under the supervision of the registered nurse, the initial assessment and ongoing application of the nursing process shall be provided by the registered nurse.

6.6(2) The licensed practical nurse shall be permitted to provide supportive and restorative care to a specific student in the school setting in accordance with the student's health plan when under the supervision of and as delegated by the registered nurse employed by the school district.

6.6(3) The licensed practical nurse shall be permitted to provide supportive and restorative care in a Head Start program under the supervision of a registered nurse, as defined in subrule 6.2(5), or a physician if the licensed practical nurse were in this position prior to July 1, 1985.

6.6(4) The licensed practical nurse shall be permitted to provide supportive and restorative care in a camp setting under the supervision of a registered nurse, as defined in subrule 6.2(5), or a physician. When the licensed practical nurse provides care under the supervision of the registered nurse, the initial assessment and ongoing application of the nursing process are performed by the registered nurse. The licensed practical nurse is responsible for requesting registered nurse consultation as needed.

6.6(5) The licensed practical nurse shall be permitted to provide supportive and restorative care in a county jail facility or municipal holding facility operating under the authority provided by Iowa Code chapter 356. The supportive and restorative care provided by the licensed practical nurse in such facilities shall be performed under the supervision of a registered nurse, as defined in subrule 6.2(5). The registered nurse shall perform the initial assessment and ongoing application of the nursing process. The registered nurse shall be available 24 hours per day by teleconferencing equipment, and the time necessary to be readily available on site to the licensed practical nurse shall be no greater than ten minutes. This exception to the proximate area requirement is limited to a county jail facility or municipal holding facility operating under the authority of Iowa Code chapter 356 and shall not apply in any other correctional facility.

6.6(6) The licensed practical nurse shall be permitted to conduct height, weight and hemoglobin screening and record responses to health questions asked in a standardized questionnaire under the supervision of a registered nurse in a Women, Infants and Children (WIC) clinic. A registered nurse employed by or under contract to the WIC agency will assess the competency of the licensed practical nurse to perform these functions and will be available for consultation. The licensed practical nurse is responsible for performing under the scope of practice for licensed practical nurses and requesting registered nurse consultation as needed. This exception to the proximate area requirement is limited to WIC clinics and to the services permitted in this subrule.

This rule is intended to implement Iowa Code sections 17A.3 and 152.1.

655—6.7 (152) Specific nursing practice for registered nurses. A registered nurse, while circulating in the operating room, shall provide supervision only to persons in the same operating room.  
This rule is intended to implement Iowa Code section 152.1.

## **RULES**

<https://www.legis.iowa.gov/law/administrativeRules/chapters?agency=655>

## **BSN-RN Student Handbook Agreement**

2016-2017

This handbook prescribes standards of conduct for students enrolled in the nursing program. Violation of any such standard may serve as grounds for program dismissal, suspension, or other discipline.

Every nursing student is expected to know and comply with all current policies, rules, and regulations as printed in the handbook, syllabi, calendar and university catalog. Copies are available on-line and through the department.

I have reviewed the 2016- 2017 BSN-RN Nursing Student Handbook for my program. I understand this handbook contains information about the guidelines and procedures of GU nursing program. The nursing program will send out notification of any major revisions to the handbook. I also understand that the handbook is updated frequently and I am responsible for all policies and updates to the handbook.

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STUDENT SIGNATURE

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DATE

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Name Printed