NOTATIONS

The contents of this handbook may be subject to change throughout the program.

All courses (both nursing and non-nursing) in the pre-licensure Nursing Program must be completed with a minimum grade of a “C” in order to be accepted by the California Board of Registered Nursing for entrance into taking the NCLEX-RN licensing examination.

THIS INSTITUTION DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL OR ETHNIC ORIGIN, SEX, SEXUAL ORIENTATION, GENDER IDENTITY OR STATUS, MARITAL, PARENTAL, FAMILIAL, VETERAN OR MILITARY SERVICE STATUS AGE, OR DISABILITY.
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Introduction

Welcome to the WEST COAST UNIVERSITY Nursing Program. This student handbook is a supplement to the WEST COAST UNIVERSITY Catalog.

The purpose of the handbook is to provide information specifically related to the nursing program. As new policies relating to nursing student activities are formulated, they will be added to the handbook. It is important that you keep this handbook as a reference throughout the program. Current edition of the handbook is available at www.westcoastuniversity.com.

The faculty wishes you success in this important venture in nursing education.

WEST COAST UNIVERSITY offers nursing programs to obtain a Baccalaureate or Masters Degree. Students are admitted to the undergraduate nursing program at the beginning of each 10 week term or each semester according to the specifics of each program. The undergraduate program admits five times a year.

Upon successful completion of the program and the University’s graduation requirements, the student will be awarded either a Bachelors (BSN) or Masters of Science Degree in Nursing (MSN). The BSN graduate becomes eligible to apply to the California Board of Registered Nursing for licensure and for admission to the National Council of State Boards of Nursing (NCSBN) examination National Council Licensure Examination for Registered Nurses (NCLEX-RN) where applicable. If all California Board of Registered Nursing (BRN) requirements for licensure are met, the BRN will issue a license to practice nursing as a Registered Nurse in California. License to practice in other states or territories of the USA require application for licensure to that jurisdiction.

College of Nursing Mission Statement

The mission of the College of Nursing is to provide evidence-based and innovative nursing education to culturally diverse learners; preparing nurses to provide quality and compassionate care responsive to the needs of the community and the global society.

College of Nursing Philosophy

The philosophy of the College of Nursing is that education is a continuous process occurring in phases throughout an individual’s lifetime. Nurses are lifelong learners and critical thinkers.

Nursing Faculty Beliefs on Health, Nursing, Person/Client, Environment, Faculty, and Student
Health
Health is regarded as a state of equilibrium on a wellness to illness continuum. Individual health practices impact the value and meaning of health as determined by culture and society. Wellness is identified as successful management of multiple stresses from internal and external environments. Illness results when the bio-psycho-social system is disrupted. The patient’s/client’s ability to cope with illness is influenced by how successfully he/she is able to adapt within the healthcare environment. The perception of wellness to illness is a highly individualized process, which is influenced by the client’s health beliefs and health behaviors. An individual’s perceptions of and beliefs about health/illness impact this wellness/illness continuum. Each individual functions in a multitude of dimensions within his/her environment. The attributes of these functional patterns provide a vision of the state of health/illness for each individual (Gordon, 1998).

Nursing
Nursing is the art and science of caring. It is a science, an interpersonal process, and a human service, based on knowledge derived from nursing theory and from the biological, behavioral, physical and social sciences. The goal of this nursing process is the promotion, maintenance, and restoration of health for clients, their families, and society as a whole. Nursing is committed to maintaining human dignity. The nurse’s expertise is in the diagnosis and treatment of human response to health problems and to the evaluation of health outcomes. This is achieved by using the nursing process to provide and manage care.

Nursing has been transformed by societal needs. Nursing has assumed responsibility for meeting the health needs of individuals, families, and communities. Nursing’s goal is to optimize the functions of the individual, family, and community within the context of a particular environment. Nursing has also expanded globally and is concerned with issues that affect these expanded societies. The profession’s concerns are to understand the person, his/her environment, and how these two interact to influence, the former’s functioning. Assessment of this phenomenon provides nursing with a vision of the health status and needs of those seeking care, their potential for disease prevention, health promotion and restoration, and need for health education (Gordon, 1994).

Person/Client
A person/client is a bio-psycho-social, spiritual, intellectual and cultural person who functions within a particular environment. These functions are considered health patterns that may remain functional in the presence of wellness and become dysfunctional in the presence of illness. Personal functions are categorized as patterns of health perception, nutrition, elimination, activity, sleep, cognition, life roles, sexuality/reproduction, coping and stress tolerance, values and beliefs (Gordon, 1994).

Environment

---

The environment is the life-space within which individuals live and function. These life-spaces are composed of external and internal factors that influence the person and his/her ability to function. External factors are general aesthetic appearance of the community, housing, social services, socioeconomic and political factors, age and ethnicities represented, schools, rate of crime, health indicators (mortality and morbidity statistics), presence of exercise and health-related areas, industry and jobs, environmental factors may influence health and/or illness and disease, and finally, the community’s perceptions of its own status in society (Gordon, 1994).

The environment is dynamic. All people share functional patterns that affect their health, quality of life, and achievement of their maximum potential.

These patterns, as described by Gordon, provide a focus for organizing nursing practice to promote and maintain health.

**Faculty and Education**

The faculty are members of a profession who have learned to extend experiential events related to the subject they teach. Their view about education is the teaching/learning process is dynamic and takes place in diverse environments when there is exchange of information and experiences between faculty and students. Faculty is responsible for guiding and directing students toward the acquisition of knowledge and information in order to support critical thinking and skills acquisition. Faculty act as channels that inspire students toward learning what is necessary to become members of a profession. Members of a faculty group utilize varied and latest state of the art methods of delivering information to students in a supportive environment.

Faculty views the teaching/learning process as dynamic and as an experiential exchange between learners and mentors. It involves a variety of educational modalities, including multiple settings and formats for the presentation of content. The faculty utilizes adult learning theories to guide the learning process of students and assist to develop them to their full potential.

**Students**

Each student is unique and is the sum totals of his/her own biological, psychological, and maturational development as well as the socio-cultural, economic, and spiritual environment in which he/she functions. Each exists in a life space that includes the assumption of various roles may impact the student role. A student’s ability to learn within the three domains of learning (cognitive, affective, and behavioral) is based on personal abilities, desire to learn and achieve, methods implemented by faculty. The faculty methods are necessary in the application of didactic information to the clinical experiences, and the student’s past experiences in the educational environment. WEST COAST UNIVERSITY provides extensive support services throughout the curriculum and doing everything possible to enhance student success.
WEST COAST UNIVERSITY College of Nursing
RN Student Handbook
Bachelor of Science in Nursing (Cont.)

WEST COAST UNIVERSITY students come from a wide variety of backgrounds and the differences in age, life experiences, support systems, education, and economic resources influence the students’ learning process. Students are acculturated to become self-motivated, independent critical thinkers who accept personal accountability and responsibility in the learning and life skills processes.

The student, as a learner, is responsible for active participation in the educational process. The faculty view this partnership with the student in his/her educational journey as seeding a desire for excellence in practice and a commitment to continued life-long learning. Faculty recognize students come from various cultures and ethnic backgrounds and have different learning styles. For this reason, multiple methods of teaching and learning are addressed in both the theory and clinical learning settings, while incorporating critical thinking and evidenced based practice as some of many methods to assist students learn in a variety of ways.

Purpose of the Nursing Programs

Undergraduate
The purpose of the undergraduate nursing program is to provide the essential body of knowledge and experiences necessary to prepare students to move into the role as a professional registered nurse. The additional studies within the Bachelor Science, Nursing (BSN) program prepares students to practice nursing that requires enhanced critical thinking skills, well-developed nursing competencies including public health, and as health managers, coordinators of care, and leaders (according to the Nine Essentials of Baccalaureate Education for Professional Nursing Practice (American Association of Colleges of Nursing (AACN) 2008).

Graduate
The Master’s Program in following the AACN Masters Essentials prepares RN’s to acquire more advanced knowledge and skills and an in depth level of expertise required for more advanced nursing practice and in preparation for doctoral level education.

Conceptual Framework for the College of Nursing

Nursing is the art and science of caring. It is a science, an interpersonal process, and a human service based on knowledge derived from nursing theory and from biological, behavioral, physical and social sciences. The nursing curriculum evolves from the Conceptual Framework, which is based upon the Nursing Process. The Programmatic strands based upon AACN Essentials for Baccalaureate and Master’s Nursing Education are threaded throughout the curriculum.

The innovative curriculum which offers a tiered level of education that moves up the ladder of nursing practice directly reflects the Mission, Philosophy, and Objectives of the Nursing Program that is congruent with that of WCU. The conceptual framework serves as a unifying theme throughout the curriculum and is reflected in course syllabi, course objectives, evaluation tools, teaching strategies, nursing care plans, and student learning activities.
WCU defines the nursing process as a problem-solving critical thinking to the assessment, planning, implementation, and evaluation of nursing care, based upon the scientific method. It is a mechanism that gives the student direction for application of nursing theory and providing appropriate client care.

**Assessment** is the process of gathering, verifying, and communicating data about a client. Good data collection is the foundation of the nursing process. Gordon’s Functional Health Patterns provide a curricular framework for learning and organizing nursing assessment and focusing data collection across the curriculum. The diagnostic process is an analysis of assessment data culminating in identification of functional and dysfunctional health patterns involving the client, the family, and others of significance to the client. “A nursing diagnosis is a clinical judgment about individual, family, or community responses to actual or potential health problems and/or life processes. Nursing diagnosis provides the basis for selection of nursing interventions to achieve outcomes for which the nurse is accountable.”

The 11 basic functional health pattern areas as delineated by Gordon in 1982 are essential components of the School’s conceptual framework. Students use the Functional Health Patterns in assessment to generate nursing diagnoses in the initiation of the nursing process. Gordon (1994) states:

“All human beings have certain functional health patterns in common that contribute to their health, quality of life, and achievement of human potential. These common patterns are the focus of nursing assessment. Description and evaluation of health patterns permits the nurse to identify ‘functional patterns’ (client strengths) and ‘dysfunctional patterns’ (nursing diagnoses).”

**Diagnosis/Planning** is a nursing behavior and based on the nursing diagnosis. The client’s goals are determined, priorities are established, and expected outcomes of nursing care are projected, and the nursing care plan is communicated.

**Implementation** is the nursing action necessary for assisting the client to progress toward the expected outcomes. Independent and collaborative actions are initiated and completed. Documentation of nursing actions is an essential link between the provision of nursing care and the quality of care provided.

**Evaluation** is an ongoing process and measures the client’s progress toward achievement of the states expected outcomes. It is this component which is visualized as facilitating modification of the nursing care plan. Evaluation is continuous and interacts with other components of the nursing process.

The conceptual framework for the curriculum of the nursing program serves as a unifying theme, which supports the learning theory and prepares the graduates to function with beginning competencies in the role of provider and manager of care and contributing member.
of the collaborative health care team in nursing. The curriculum builds upon concepts from simple to complex. This allows new theoretical concepts to build on previously acquired knowledge.

**Repetition and reinforcement** are strategies used during the teaching/learning process. Consideration is given to the semester level of students and their ability to comprehend, apply, and correlate theoretical concepts into clinical practice. Theoretical and clinical content is relevant to the changing and contemporary healthcare environment and students are provided with the tools to apply knowledge in the various clinical settings.

Nursing care is based on an open system composed of socio-cultural, developmental, psychological, and physiological variables. Each individual has the potential to maintain varying degrees of equilibrium by using lines of defense in response to internal and/or external stressors or potential threats to their stability.

**Student competency** will be measured through use of behavioral objectives within the curriculum. Individual behavioral objectives for theory classes and clinical practicum extend from the terminal objectives. Behavioral objectives are expected competencies on the evaluation tool for each clinical course. Clinical indicators that serve as criteria for measuring student performance further explain the expected competencies. Evaluating NCLEX-RN results once a class has completed the program will also assess standards of competence.

**Curriculum Foundation**

The Foundation of our undergraduate pre-licensure curriculum is based on the California Code of Regulations, title 16, Section 1426(3)(d),(e).

Theory and clinical practice shall be concurrent in the following nursing areas: Medical-surgical, maternal/child, mental health, psychiatric nursing, public health and geriatrics. Instruction will be given, but not limited to, the following: Personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), communication, pharmacology, legal, social and ethical aspects of nursing, nursing leadership, and management.

The following shall be integrated throughout the entire nursing curricula:

a. Nursing process;

b. Basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;

c. Physical, behavioral and social aspects of human development from birth through all age levels;

d. The knowledge and skills required to develop collegial relationships with healthcare providers from other disciplines;

e. Communication skills including principles of verbal, written, and group communications;
f. Natural sciences including human anatomy, physiology, chemistry, and microbiology; and;
g. Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health and illness.

Curricular Strands

For the BSN program, WEST COAST UNIVERSITY is following the AACN Standards for the Essentials of Baccalaureate Education for Professional Nursing Practice and incorporating the following strands into syllabi and course work:

- **Nursing Process**: assess, arrive at nursing diagnosis, plan, implement, evaluate and modify health care AACN
- **Research**: research-based knowledge from nursing and the sciences as the basis of practice which also means using the research process to provide evidence-based practice in the delivery of nursing care AACN
- **Therapeutic Care**: (provision of care, disease/illness prevention, health restoration, rehabilitation and supportive care) AACN
- **Teaching/Learning** as part of the need to use information and health care technologies for the ability to provide needed information to the patient, family or health care team or intercede between the patient and technology AACN
- **Communications**: therapeutic, accurate, productive and effective communication skills AACN
- **Role Development**: leader, manager, provider of care, designer and manager of care, and coordinator of care as developed in the AACN Nine Essentials 2008 document under Role Development
- **Gordon’s 11 Functional Health Patterns**

Each strand will be developed throughout the nursing program (see Table 1). Students will become familiar with and utilize the processes beginning with the care of individuals, then older adults, developing families and patients with more complex health problems to aggregate groups and communities. Students will also have the opportunities to practice these processes in various patient care settings.

**BSN LEVELS (Commission on Collegiate Nursing Education (CCNE) Standard III)**

**Level 1** - Represents completion of the first nursing courses within the BSN7 Level 1 competency involves knowledge of basic evidence-based principles of health care and their expected outcomes. Also, the student will be able to employ knowledge of fundamental universal concepts and abstractions applicable to the nursing process. Level 1 encompasses all first year nursing courses which include fundamentals and introduction to medical surgical
nursing theory and practice, pharmacology and physical assessment. Most activities occur in
the skills lab and simple medical surgical nursing care environment.

Level 2 - Represents completion of the pre-licensure 200-level nursing courses of the BSN
program. Level 2 competencies involve basic analysis and problem solving from the simple to
the complex. It involves as essential components of the nursing process using evidence based
methodology. Level 2 encompasses all second year nursing courses. The foci includes medical
surgical nursing, mental health, maternal and child health, nutrition and role development and
evidenced based practice. Most activities are in acute care as well as some selected community
settings.

Level 3 - Represents completion of the third and fourth year nursing courses for the BSN
program. Graduates of the program are expected to demonstrate level 3 behaviors. Level 3
competencies include 1) advanced analysis of elements relationships, and organizational
principles; 2) the ability to synthesize and implement productive, therapeutic communication
that incorporates a proposed set of behaviors involving individuals as well as groups; 3) use of
judgment skills in evaluation has recourse to internal evidence as well as to external criteria; 4)
the ability to assess and implement evidence based practice; 5) demonstrate the ability to
advocate for patient care, 6) demonstrate leadership skills within the health care team. The
foci include integration of nursing practice, nursing research, issues and trends in health care
delivery and public health nursing. Most activities are in clinical setting dealing with complex
and critically ill patient and clients of any age with complex needs in community and public
health settings.

Table 1. BSN Programmatic Strand Development Across the Curriculum

<table>
<thead>
<tr>
<th>Strands</th>
<th>Level 1: Fundamentals</th>
<th>Level 2: Simple to Complex</th>
<th>Level 3: More complex Nursing in a Variety of Settings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nursing Process:</td>
<td>• Defines nursing process. • Demonstrates beginning knowledge and competency in health assessment for patients.</td>
<td>• Develops plan of care based on assessment, nursing diagnosis for individuals and families with specific simple to complex health care issues.</td>
<td>• Develops an evidence based plan of care for individuals and families with advanced and /or complex health care needs.</td>
</tr>
<tr>
<td>• Provider of care</td>
<td>• Arrives at nursing diagnoses with assistance.</td>
<td>• Implements and evaluates care. • Modifies individualized plan of care based on the client needs, goals, and objectives.</td>
<td>• Implements and evaluates nursing care outcomes.</td>
</tr>
<tr>
<td>• Assess</td>
<td>• Develops a plan of care including goals and objectives for non-complex client.</td>
<td></td>
<td>• Revises goals with the health care team, patients, and families, within a variety of health care settings.</td>
</tr>
<tr>
<td>• Nursing diagnosis</td>
<td>• Implements the plan of care.</td>
<td></td>
<td></td>
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<tr>
<td>• Plan care</td>
<td>• Evaluates the plan of care.</td>
<td></td>
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<tr>
<td>• Implement care</td>
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<td></td>
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<tr>
<td>• Evaluate care</td>
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<tr>
<td>• Modify care (AACN)</td>
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<tr>
<td>2. Research-based</td>
<td>• Access various sources including books, journals, and search engines to retrieve nursing, clinical data.</td>
<td>• Incorporates evidence based information from a variety of sources in nursing process and the nursing plan of care.</td>
<td>• Plans a simple nursing research proposal (data are not collected) related to developing evidence as part of nursing practice provided in a written and</td>
</tr>
<tr>
<td>• Knowledge from nursing and sciences as the basis of nursing practice: aka evidenced based practice (AACN).</td>
<td>• Apply simple research</td>
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<tr>
<td>Strands</td>
<td>Level 1: Fundamentals</td>
<td>Level 2: Simple to Complex</td>
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<tr>
<td></td>
<td>process in examining nursing diagnosis and its implication for care.</td>
<td>identification and investigation of problem resolutions to assigned patients utilizing evidenced based practice.</td>
<td>oral format. Provides care to individuals, families, &amp; communities in a variety of settings.</td>
</tr>
<tr>
<td>3. Therapeutic Care:</td>
<td>Provides nursing care to individual adult patients with simple health issues in sub-acute and acute care settings. Demonstrates knowledge of the importance and meaning of health and illness for the patient in providing nursing care. Performs simple direct and indirect therapeutic interventions. Protects the safety and privacy of patient in relation to the use of health care and information technology.</td>
<td>Provides nursing care to individuals &amp; families with complex health issues in acute care settings. Evaluates care. Develops a comprehensive plan of care in collaboration with the patient and family. Applies health care technologies to maximize optimal outcomes for patients. Demonstrates knowledge of human diversity in providing nursing care.</td>
<td>Provides care to individuals, families, &amp; communities in a variety of settings. Utilize outcomes to evaluate the effectiveness of care. Applies appropriate knowledge of major health problems and cultural diversity in performing nursing interventions. Incorporates principles of quality management into the plan of care. Establishes care plans utilizing legal, moral and ethical considerations.</td>
</tr>
<tr>
<td>4. Teaching/Learning:</td>
<td>Assesses one own learning needs and develop them to insure the best knowledge base for patient care. Assesses a health education need of a patient. Completes simple education session.</td>
<td>Designs an education plan in collaboration with patient and family, and evaluates knowledge acquisition. Adapts the use of technologies to meet patient needs.</td>
<td>Designs educational sessions appropriate to learning abilities in collaboration with individual, family, and interdisciplinary team. Evaluates extent of knowledge acquisition by self or patient or family or the community.</td>
</tr>
<tr>
<td>5. Communications</td>
<td>Applies proper therapeutic modes of communication. Implements basic therapeutic communications with individual patients, families and colleagues. Utilizes data from a wide range of resources and information technology.</td>
<td>Collaborates with individual and family about using the most effective communication styles. Uses therapeutic communications in the caring of patients and families with special needs. Documents accurately interventions and nursing outcomes.</td>
<td>Utilizes appropriate modes of communications with individuals, families, aggregates, communities and interdisciplinary team. Develops appropriate communication skills in the caring of patients and families with special needs. Provides relevant and sensitive health education information and counseling to patients.</td>
</tr>
</tbody>
</table>

Revised: June 2011
### Attributes of the Bachelor of Science Nursing Graduate

Upon graduation, the characteristics of the BSN graduate will be that each meets the requirements of baccalaureate curriculum, and the development of the core values as recommended by the AACN. This graduate will be able to assume roles in nursing, such as leader, manager, client advocate, patient educator, and public health nurse. For pre-licensure students, they will also meet the requirements of the BRN for eligibility for R.N. licensure and readiness to take the NCSBN NCLEX-RN.

<table>
<thead>
<tr>
<th>Strands</th>
<th>Level 1: Fundamentals</th>
<th>Level 2: Simple to Complex</th>
<th>Level 3: More complex Nursing in a Variety of Settings</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Role development:</td>
<td>Demonstrates beginning level decisions about care with adult patients.</td>
<td>Uses proper leadership styles depending on the nursing care situation with individuals, families, allied health care workers.</td>
<td>Takes on responsibility for managing the care of individuals, families, aggregates, and communities.</td>
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<td></td>
<td>Uses theory and research based knowledge in the direct and indirect delivery of care to patients and in the formation of partnerships with patients and the interdisciplinary health care team as leader, manager, patient advocate, provider of care, designer, manager, and coordinator of care (AACN).</td>
<td>Familiarizes self with responsibilities of leader, manager, patient advocate.</td>
<td>Utilizes referrals systems, with supervision, to enhance care of clients.</td>
</tr>
<tr>
<td>1. Health perception and health management pattern</td>
<td>Completes an admission health assessment.</td>
<td>Implements care plan based on data retrieved by using Gordon’s framework.</td>
<td>Utilizes the nursing process in providing quality patient care to patients in collaboration with, families, and the interdisciplinary team based on Gordon’s framework.</td>
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<tr>
<td>3. Elimination</td>
<td>Establishes a nursing diagnosis based on data from the assessment.</td>
<td>Collaborates with individuals, families, aggregates and communities in goal setting.</td>
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<td>4. Activity</td>
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<tr>
<td>5. Sleep-rest</td>
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<tr>
<td>6. Cognitive/ perceptual pattern</td>
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<tr>
<td>7. Self-perception-self concept</td>
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<tr>
<td>8. Role/relationship pattern</td>
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<tr>
<td>9. Sexuality- reproductive pattern</td>
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<tr>
<td>10. Coping-stress tolerance pattern</td>
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<tr>
<td>11. Value belief pattern beliefs (cultural, ethnic, and spiritual)</td>
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</tbody>
</table>
The graduate will be educationally prepared to successfully complete the NCLEX-RN and be employed in acute care, ambulatory, and skilled nursing facilities. In addition, once the BSN graduate completes the community health clinical hours and earns their RN license, he/she will be eligible to apply for the public health certificate in the State of California, thus being capable of working in public health departments. For the BSN graduate and as part of the leadership and management coursework and in cooperation with Sigma Theta Tau, the student will also gain a Nurse Manager Certificate upon earning their RN license, furthering her/his ability in the leadership roles. With about one year of additional clinical experiences, the BSN graduate with the RN license will also be eligible to consider the role as an assistant instructor in the clinical setting for nursing students.

BSN Program Learning Outcomes

The following Program Learning Outcomes were selected to provide the essential body of knowledge and experience necessary to educate students to move directly into their new role. For the undergraduate this role is as professional registered nurses according to the Nine Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), and as required by the Board of Registered Nursing. For the Masters student this involves meeting the AACN Masters Essentials.

Upon successful completion of the program, the BSN student will be able to:

1. Apply concepts or theories from biological, physical or natural sciences as basis for professional nursing practice.

2. Utilize nursing process in health promotion, restoration, and disease and illness prevention.

3. Apply evidence-based practice in providing therapeutic nursing interventions for patients and families in a wide variety of health care, and community setting.

4. Apply critical thinking skills in providing culturally sensitive and developmentally appropriate nursing care to patients who are experiencing simple and/or complex health problems in a variety of settings.

5. Provide health care education to individuals, families, aggregates.

6. Develop measurable goals that demonstrate the willingness to become a life-long learner in building expertise as a member of the nursing profession.

7. Utilize effective communication to interact with patients, families, and the interdisciplinary health team.

8. Assume responsibility for the delegation and supervision of the delivery of nursing care to subordinates based on the subordinate’s legal scope of practice and ability.
9. Demonstrate knowledge in applying client care technology skills such as computer and informatics skills when providing health care in a variety of settings.

The core courses and directed practicum offer expanded study in the health care areas of advocacy, program management, education, clinical practice, research, and health policy formulation. Graduates will be able to formulate an inspirational perspective of nursing, incorporating a wide range of theories from nursing and other sciences. Individuals who complete the core and educational component will be qualified to teach nursing.

**GRADUATE PROGRAM**

The purpose of the graduate program in nursing is to promote foundational competencies that are core to all advanced nurse practice in an ever-changing and globally reaching health care environment. Both academic, practicum and interpersonal preparation is characterized by increased depth in organizational and systems’ leadership within a culture of integrity and personal accountability in a community that values the dignity and contributions of our members. Standards of ethical behavior and decision-making are essential foundations of our graduate education programs, which guide individuals to distinguish ethical principles and understand the consequences and implications beyond personal and organizational self-interest. By pursuing more effective and innovative methodologies through which students utilize administrative expertise with the foresight to analyze problems, structure and facilitate development, and find and implement solutions, WCU graduates can and will make a positive impact on society.

The Master’s level of nursing education provides evidence-based and innovative nursing education to culturally diverse learners; preparing nurses to provide quality and compassionate care that is responsive to the needs of the community and the global society. The graduate educational experience provides students the opportunity to explore their values and analyze how these values shape their professional practice and influence their decisions. The College of Nursing offers Practicum courses, which are indicated with an “L” in the course title and description.

The core courses and directed practicum offer expanded study in the health care areas of advocacy, program management, education, clinical practice, research, and health policy formulation. Graduates will be able to formulate an inspirational perspective of nursing, incorporating a wide range of theories from nursing and other sciences. Individuals who complete the core and educational track will be qualified to teach nursing. We encourage students to also pursue certification in the clinical area of their choice.

**MSN Program Learning Outcomes**
The West Coast University Masters of Science in Nursing (MSN) Program is committed to the development of the nursing professional who can:

1. Integrate nursing science and related fields, such as physiology, statistics, psychosocial, political, financial, genetics, public health and organization sciences in the continued improvement of nursing across the continuum of health care settings.
2. Provide leadership in a variety of settings that promote high quality, safe patient care that also incorporates ethical decision making and effective inter-professional working relationships.
3. Demonstrate the skills needed to effect quality improvement that incorporates the various models, standards and performance measures necessary to apply quality principles, within any type of organization.
4. Apply evidenced based research in clinical practice by identifying actual or potential practice problems in a setting and resolving them through the role of change agent.
5. Demonstrate proficiency in computer skills both technical and in the application of informatics to enhance, deliver, communicate, integrate and coordinate patient care.
6. Recognize the need for and ability to affect policy changes by using the policy development process and advocacy strategies to influence individual health and health care systems.
7. Communicate and coordinate inter-professionally in a variety of settings to manage and coordinate care.
8. Identify and integrate the various evidenced based practices of health promotion and disease prevention using client centered, culturally and age appropriate concepts in the nursing process of services to individuals, families and broad-based aggregate populations.
9. Demonstrate an advanced level of scientific and nursing-specific knowledge with the ability to integrate that knowledge into nursing practice that influences health care outcomes for individual, families, populations and/or systems.
## Bachelor of Science in Nursing

<table>
<thead>
<tr>
<th>Semester One</th>
<th>General Education</th>
<th>General Education within Area of Study</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Term One</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>ANAT 260</td>
<td>Human Anatomy</td>
<td>4 Credits</td>
<td>X</td>
</tr>
<tr>
<td>ENGL 140</td>
<td>Written Communication I</td>
<td>3 Credits</td>
<td>X</td>
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</table>

**Term Two**

| **PHYS 261** | Human Physiology | 4 Credits | X |
| **SPCH 142** | Oral Communication | 3 Credits | X |

**Semester One Credits:** 14 Credits

<table>
<thead>
<tr>
<th><strong>Semester Two</strong></th>
<th>General Education</th>
<th>General Education within Area of Study</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td><strong>Term Three</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>SOCY 280</td>
<td>Introduction to Sociology</td>
<td>3 Credits</td>
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<tr>
<td>MATH 108</td>
<td>College Mathematics I</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>PSYC 260</td>
<td>Introduction to Psychology</td>
<td>3 Credits</td>
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</table>

**Term Four**

| **CHEM 210** | Chemistry | 4 Credits | X |
| **PSYC 290** | Life Span Psychology | 3 Credits | X |

**Semester Two Credits:** 16 Credits

<table>
<thead>
<tr>
<th><strong>Semester Three</strong></th>
<th>General Education</th>
<th>General Education within Area of Study</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td><strong>Term Five</strong></td>
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</tr>
<tr>
<td>MICR 140</td>
<td>General Microbiology</td>
<td>4 Credits</td>
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<tr>
<td>ENGL 340</td>
<td>Written Communication II</td>
<td>3 Credits</td>
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</table>

**Term Six**

| **HUM 470** | Cultural Pluralism | 3 Credits | X |
| **ANAT 270** | Pathophysiology (Must be taken at WCU) | 3 Credits | X |

**Semester Three Credits:** 13 Credits

**Note:** Students may transfer in most of the courses to meet the General Education and Pre-requisites listed above.
<table>
<thead>
<tr>
<th>Semester Four</th>
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<tbody>
<tr>
<td><strong>Term Seven</strong></td>
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</tr>
<tr>
<td>NURS 100</td>
<td>Fundamentals of Nursing</td>
</tr>
<tr>
<td>NURS 101L</td>
<td>Fundamentals of Nursing Skills Lab</td>
</tr>
<tr>
<td>NURS 280</td>
<td>Pharmacology</td>
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<td><strong>Term Eight</strong></td>
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</tr>
<tr>
<td>NURS 120</td>
<td>Introduction to Medical Surgical Nursing</td>
</tr>
<tr>
<td>NURS 121L</td>
<td>Introduction to Medical Surgical Nursing Practicum</td>
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<tr>
<td>NURS 290</td>
<td>Physical Assessment</td>
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<td>Semester Four Credits:</td>
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<table>
<thead>
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<th>Semester Five</th>
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<tbody>
<tr>
<td><strong>Term Nine</strong></td>
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<tr>
<td>NURS 201</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults</td>
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<tr>
<td>NURS 211L</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults Practicum</td>
</tr>
<tr>
<td>NURS 205</td>
<td>Introduction to Leadership and Management</td>
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<tr>
<td><strong>Term Ten</strong></td>
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<tr>
<td>NURS 430</td>
<td>Disaster Management</td>
</tr>
<tr>
<td>HCA 206</td>
<td>Epidemiology in Public Health Practice</td>
</tr>
<tr>
<td>MATH 310</td>
<td>Statistics (Recommended not required)</td>
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<td>Semester Five Credits:</td>
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<table>
<thead>
<tr>
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<tbody>
<tr>
<td><strong>Term Eleven</strong></td>
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<tr>
<td>NURS 204</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client</td>
</tr>
<tr>
<td>NURS 214L</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client Practicum</td>
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<tr>
<td>NURS 310</td>
<td>Nutrition in Health and Disease</td>
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### Term Twelve

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<tr>
<td>NURS 206</td>
<td>Expanding and Developing Family and Community</td>
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<tr>
<td>NURS 216L</td>
<td>Expanding and Developing Family and Community Practicum</td>
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<tr>
<td>HCA 434</td>
<td>Medical Ethics and Issues</td>
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**Semester Six Credits:** 16 Credits

### Semester Seven

**Term Thirteen**

<table>
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<th>Course</th>
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<td>NURS 203</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client</td>
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<td>NURS 213L</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client Practicum</td>
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<td>NURS 360</td>
<td>Principles of Teaching for Patient Care</td>
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### Term Fourteen

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<tbody>
<tr>
<td>NURS 350</td>
<td>Research in Nursing</td>
<td>3</td>
<td>X</td>
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<tr>
<td>NURS 440</td>
<td>Issues and Trends in Nursing</td>
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**Semester Seven Credits:** 15 Credits

### Semester Eight

**Term Fifteen**

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<tbody>
<tr>
<td>NURS 340</td>
<td>Public Health Nursing</td>
<td>3</td>
<td>X</td>
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<tr>
<td>NURS 341L</td>
<td>Public Health Nursing Practicum</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>NURS 420</td>
<td>Principles of Leadership and Management</td>
<td>3</td>
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### Term Sixteen

<table>
<thead>
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<tbody>
<tr>
<td>NURS 220</td>
<td>Integration of Nursing Concepts</td>
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<tr>
<td>NURS 221L</td>
<td>Integration of Nursing Practice</td>
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<tr>
<td>NURS 460</td>
<td>Professional Roles within Nursing</td>
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**Semester Eight Credits:** 16 Credits

**Total Program Credits:** 125 Credits
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<tr>
<td><strong>Term One</strong></td>
<td></td>
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<tr>
<td>CHEM 260</td>
<td>Biochemistry</td>
<td>5 Credits</td>
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<td>PSYC 290</td>
<td>Life Span Psychology</td>
<td>3 Credits</td>
<td>X</td>
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<tr>
<td><strong>Term Two</strong></td>
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<td></td>
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<tr>
<td>ANAT 270</td>
<td>Pathophysiology</td>
<td>3 Credits</td>
<td>X</td>
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<tr>
<td>ENGL 140</td>
<td>Written Communication I</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>SPCH 142</td>
<td>Oral Communication</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td><strong>Semester One Credits:</strong></td>
<td>17 Credits</td>
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<tr>
<td><strong>Semester Two</strong></td>
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<tr>
<td><strong>Term Three</strong></td>
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<td></td>
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</tr>
<tr>
<td>ENGL 340</td>
<td>Written Communication II</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>NURS 280</td>
<td>Pharmacology</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td><strong>Term Four</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>HUM 470</td>
<td>Cultural Pluralism</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>NURS 290</td>
<td>Physical Assessment</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>NURS 420</td>
<td>Principles of Leadership and Management</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td><strong>Semester Two Credits:</strong></td>
<td>15 Credits</td>
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<tr>
<td><strong>Semester Three</strong></td>
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<tr>
<td><strong>Term Five</strong></td>
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<tr>
<td>NURS 430</td>
<td>Disaster Management</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>NURS 310</td>
<td>Nutrition in Health and Disease</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>NURS 440</td>
<td>Issues and Trends in Nursing</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td><strong>Term Six</strong></td>
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<td></td>
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</tr>
<tr>
<td>HCA 206</td>
<td>Epidemiology in Public Health Practice</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>MATH 310</td>
<td>Statistics</td>
<td>3 Credits</td>
<td>X</td>
</tr>
<tr>
<td>HCA 434</td>
<td>Medical Ethics and Issues</td>
<td>3 Credits</td>
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<tr>
<td><strong>Semester Three Credits:</strong></td>
<td>18 Credits</td>
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</table>
**RN-to-Bachelor of Science in Nursing**

**Preparatory Courses and Required General Education (No recency requirement)**
- College Chemistry with Lab (CHEM 210) (4)
- Anatomy with Lab (ANAT 260) (4)
- Physiology with Lab (PHYS 261) (4)
- General Microbiology with Lab (MICR 140) (4)
- General Psychology or equivalent (PHYC 260) (3)
- Pharmacology (integrated or a separate course) (NURS 280) (3)
- Physical Assessment (may be challenged or taken concurrent with BSN if not previously taken (NURS 290) (3)
- Oral Communication (SPCH 180) or comparable course (3)
- English Composition I (ENGL 140) or comparable course (3)
- Additional 3 units of General Education (3)

<table>
<thead>
<tr>
<th>Transfer from General Education</th>
<th>34 Credits</th>
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<tbody>
<tr>
<td>Credits from pre-licensure program (RN) with validation</td>
<td>32 Credits</td>
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**Semester One**

**Term One**

<table>
<thead>
<tr>
<th>ENGL 340</th>
<th>Written Communication II (Maybe Transferred to WCU)</th>
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<tbody>
<tr>
<td>HUM 470</td>
<td>Cultural Pluralism (Maybe Transferred to WCU)</td>
<td>3 Credits</td>
</tr>
<tr>
<td>PSYC 290</td>
<td>Life Span Psychology (Maybe Transferred to WCU)</td>
<td>3 Credits</td>
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**Term Two**

<table>
<thead>
<tr>
<th>MATH 210 or MATH 108</th>
<th>College Mathematics or Statistics or (preferred if planning to go into a MSN program in the next five-years) (Maybe Transferred to WCU)</th>
<th>3 Credits</th>
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<tbody>
<tr>
<td>NURS 460</td>
<td>Professional Roles of Nursing</td>
<td>3 Credits</td>
</tr>
<tr>
<td>NURS 440</td>
<td>Issues and Trends in Nursing</td>
<td>3 Credits</td>
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**Semester Two**

**Term One**

<table>
<thead>
<tr>
<th>NURS 360</th>
<th>Principles of Teaching and Patient Care</th>
<th>3 Credits</th>
</tr>
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<tbody>
<tr>
<td>PATH 370</td>
<td>Pathophysiology</td>
<td>3 Credits</td>
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**Term Two**

<table>
<thead>
<tr>
<th>NURS 310</th>
<th>Nutrition in Health and Disease</th>
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<tbody>
<tr>
<td>NURS 470</td>
<td>Alternative Therapies in Nursing and Health Care</td>
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**Semester Three**

**Term One**

<table>
<thead>
<tr>
<th>HCA 306</th>
<th>Epidemiology in Public Health Practice</th>
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<tr>
<td>NURS 420</td>
<td>Principles of Leadership and Management</td>
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**Term Two**


<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>NURS 350</td>
<td>Research in Nursing</td>
<td>3</td>
</tr>
<tr>
<td>NURS 430</td>
<td>Disaster Management</td>
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**Semester Four**

**Term One**

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<tr>
<th>Course Code</th>
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<tbody>
<tr>
<td>NURS 340</td>
<td>Public Health Nursing</td>
<td>3</td>
</tr>
<tr>
<td>NURS 341L</td>
<td>Public Health Practicum</td>
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**Term Two**

<table>
<thead>
<tr>
<th>Course Code</th>
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<tr>
<td>HCA 434</td>
<td>Medical Ethics and Issues</td>
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<tr>
<td>NURS 490</td>
<td>Culminating Project</td>
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Transfer and Validation of Pre-licensure Nursing Credits: 66 Credits
Total Program and Upper Division Credits Taken at WCU: 54 Credits
Total Program with Transfer Credits: 120 Credits

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**LVN to Bachelor of Science In Nursing**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>General Education</th>
<th>General Education within Area of Study</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>ANAT 260</td>
<td>Human Anatomy</td>
<td>4 Credits</td>
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<tr>
<td>ENGL 140</td>
<td>Written Communication I</td>
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**Semester One**

**Term One**

<table>
<thead>
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<tbody>
<tr>
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<td>Human Physiology</td>
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<tr>
<td>SPCH 142</td>
<td>Oral Communication</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 260</td>
<td>Introduction to Psychology</td>
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Semester One Credits: 17 Credits

**Term Two**

<table>
<thead>
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<th>Course Code</th>
<th>Course Title</th>
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<td>PHYS 261</td>
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<tr>
<td>SPCH 142</td>
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<tr>
<td>PSYC 260</td>
<td>Introduction to Psychology</td>
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Semester Two

**Term Three**
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
<th>Term</th>
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<tbody>
<tr>
<td>SOCY 280</td>
<td>Introduction to Sociology</td>
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<tr>
<td>MATH 108</td>
<td>College Mathematics I</td>
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<tr>
<td>PSYC 290</td>
<td>Life Span Psychology</td>
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### Term Four

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<tbody>
<tr>
<td>CHEM 260</td>
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<td>HUM 470</td>
<td>Cultural Pluralism</td>
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Semester Two Credits: 17 Credits

### Semester Three

**Term Five**

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<tr>
<td>MICR 140</td>
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<td>ENGL 340</td>
<td>Written Communication II</td>
<td>3</td>
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<td>Medical Ethics and Issues</td>
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### Term Six

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<tbody>
<tr>
<td>MATH 310</td>
<td>Statistics (Recommended not required)</td>
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<tr>
<td>ANAT 270</td>
<td>Pathophysiology (Must be taken at WCU)</td>
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Semester Three Credits: 16 Credits

Note: Students may transfer in most of the General Education and Pre-requisite courses listed above.
## Semester Four

### Term Seven

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>NURS 200B</td>
<td>Transition to Professional Nursing</td>
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<tr>
<td>NURS 210LB</td>
<td>RN Skills Laboratory</td>
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<td>NURS 290</td>
<td>Physical Assessment</td>
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### Term Eight

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<tbody>
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<td>NURS 201</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults</td>
<td>3</td>
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<tr>
<td>NURS 211L</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults Practicum</td>
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<td>NURS 280</td>
<td>Pharmacology</td>
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Semester Four Credits: 15 Credits

## Semester Five

### Term Nine

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<tbody>
<tr>
<td>NURS 430</td>
<td>Disaster Management</td>
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<tr>
<td>NURS 360</td>
<td>Principles of Teaching for Patient Care</td>
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<tr>
<td>NURS 205</td>
<td>Introduction to Leadership and Management</td>
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### Term Ten

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<tbody>
<tr>
<td>NURS 204</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client</td>
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<tr>
<td>NURS 214L</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client Practicum</td>
<td>2</td>
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<tr>
<td>NURS 310</td>
<td>Nutrition in Health and Disease</td>
<td>3</td>
<td>X</td>
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<tr>
<td>HCA 206</td>
<td>Epidemiology in Public Health Practice</td>
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Semester Five Credits: 18 Credits

## Semester Six

### Term Eleven

<table>
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<tr>
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<tbody>
<tr>
<td>NURS 206</td>
<td>Expanding and Developing Family and Community</td>
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<tr>
<td>NURS 216L</td>
<td>Expanding and Developing Family and Community Practicum</td>
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<tr>
<td>NURS 350</td>
<td>Research in Nursing</td>
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## Term Twelve

<table>
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<tbody>
<tr>
<td>NURS 203</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client</td>
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<tr>
<td>NURS 213L</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client Practicum</td>
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<tr>
<td>NURS 440</td>
<td>Issues and Trends in Nursing</td>
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### Semester Six Credits: 18 Credits

## Semester Seven

### Term Thirteen

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<td>NURS 340</td>
<td>Public Health Nursing</td>
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<td>NURS 341L</td>
<td>Public Health Nursing Practicum</td>
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<tr>
<td>NURS 420</td>
<td>Principles of Leadership and Management</td>
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## Term Fourteen

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<td>NURS 220</td>
<td>Integration of Nursing Concepts</td>
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<tr>
<td>NURS 221L</td>
<td>Integration of Nursing Practice</td>
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<tr>
<td>NURS 460</td>
<td>Professional Roles within Nursing</td>
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</table>

### Semester Seven Credits: 16 Credits

### Total Program Credits: 117 Credits

### Total Program with Transfer Credits: 125 Credits
## Master of Science in Nursing

<table>
<thead>
<tr>
<th>Semester One</th>
<th>Term One</th>
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<tbody>
<tr>
<td>NURS 500  Theoretical Foundations of Nursing Practice</td>
<td>3 Credits</td>
</tr>
<tr>
<td>NURS 510  Policy, Organization &amp; Financing of Health Care</td>
<td>3 Credits</td>
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<table>
<thead>
<tr>
<th>Term Two</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 550  Advanced Practice Role Development</td>
</tr>
<tr>
<td>MATH 500  Biostatistics</td>
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</table>

Semester One Credits: 12 Credits

<table>
<thead>
<tr>
<th>Semester Two</th>
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<tbody>
<tr>
<td>Term Three</td>
</tr>
<tr>
<td>NURS 520  Ethics in Health Care</td>
</tr>
<tr>
<td>NURS 530  APRN Advanced Physiology and Pathophysiology</td>
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<table>
<thead>
<tr>
<th>Term Four</th>
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</thead>
<tbody>
<tr>
<td>NURS 540  Research Utilization</td>
</tr>
<tr>
<td>NURS 560  Health Promotion and Disease Prevention</td>
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Semester Two Credits: 12 Credits

<table>
<thead>
<tr>
<th>Semester Three</th>
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</thead>
<tbody>
<tr>
<td>Term Five</td>
</tr>
<tr>
<td>NURS 580  APRN Advance Health/Physical Assessment</td>
</tr>
<tr>
<td>NURS 570  Advanced Pharmacology</td>
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<table>
<thead>
<tr>
<th>Term Six</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 590  Advanced Clinical Practice: Theory</td>
</tr>
<tr>
<td>NURS 591L  Advanced Clinical Practice: Practicum</td>
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</table>

Semester Three Credits: 12 Credits

Total Program Credits: 36 Credits
# Master of Science in Nursing with Nurse Educator Certificate

## Semester One
### Term One
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>NURS 500</td>
<td>Theoretical Foundations of Nursing Practice</td>
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</tr>
<tr>
<td>NURS 510</td>
<td>Policy, Organization &amp; Financing of Health Care</td>
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### Term Two
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>NURS 550</td>
<td>Advanced Practice Role Development</td>
<td>3</td>
</tr>
<tr>
<td>MATH 500</td>
<td>Biostatistics</td>
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**Semester One Credits:** 12 Credits

## Semester Two
### Term Three
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<th>Course Title</th>
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<tbody>
<tr>
<td>NURS 520</td>
<td>Ethics in Health Care</td>
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<tr>
<td>NURS 530</td>
<td>APRN Advanced Physiology and Pathophysiology</td>
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### Term Four
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>NURS 540</td>
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<td>NURS 560</td>
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**Semester Two Credits:** 12 Credits

## Semester Three
### Term Five
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<th>Course Title</th>
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<tbody>
<tr>
<td>NURS 580</td>
<td>APRN Advance Health/Physical Assessment</td>
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<td>NURS 570</td>
<td>Advanced Pharmacology</td>
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### Term Six
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<td>NURS 610</td>
<td>Curriculum Design</td>
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**Semester Three Credits:** 12 Credits

## Semester Four
### Term Seven
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<tbody>
<tr>
<td>NURS 590</td>
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<tr>
<td>NURS 591L</td>
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### Term Eight
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<tr>
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<td>Educational Administration</td>
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<td>NURS 630</td>
<td>Simulation and Clinical Nursing Education</td>
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<td>NURS 641L</td>
<td>Education - Teaching Practicum</td>
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**Semester Four Credits:** 13 Credits
| Total Program Credits: | 49 Credits |
## RN to Master of Science in Nursing

<table>
<thead>
<tr>
<th>Transfer-In Credits from: Associates Degree in Nursing and RN Licensure</th>
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### Semester One

#### Term One

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
<th>Area of Study</th>
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</thead>
<tbody>
<tr>
<td>CHEM 210</td>
<td>Chemistry</td>
<td>5</td>
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</tr>
<tr>
<td>PSYC 290</td>
<td>Life Span Psychology</td>
<td>3</td>
<td>X</td>
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<tr>
<td>ENGL 140</td>
<td>Written Communication I</td>
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#### Term Two

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<tr>
<td>HUM 470</td>
<td>Cultural Pluralism</td>
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<td>SPCH 142</td>
<td>Oral Communication</td>
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**Semester One Credits:** 17 Credits

### Semester Two

#### Term Three

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<tbody>
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<td>Written Communication II</td>
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<td>NURS 430</td>
<td>Disaster Management</td>
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#### Term Four

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<td>Nutrition in Health and Disease</td>
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<td>Principles of Teaching for Patient Care</td>
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**Semester Two Credits:** 12 Credits

### Semester Three

#### Term Five

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#### Term Six

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<td>Public Health Nursing</td>
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<td>Public Health Nursing Practicum</td>
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**Semester Three Credits:** 12 Credits

*Note: Student may transfer in most of the General Education and Pre-requisite courses listed above.*
<table>
<thead>
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<th>Semester Four</th>
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<tbody>
<tr>
<td><strong>Term Seven</strong></td>
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</tr>
<tr>
<td>NURS 500</td>
<td>Theoretical Foundations of Nursing Practice</td>
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<tr>
<td>NURS 510</td>
<td>Policy, Organization &amp; Financing of Healthcare</td>
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<tr>
<td><strong>Term Eight</strong></td>
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</tr>
<tr>
<td>NURS 550</td>
<td>Advanced Nursing Practice Role Development</td>
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<td>NURS 530</td>
<td>Advanced Physiology and Pathophysiology</td>
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<td>MATH 500</td>
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<td><strong>Semester Six</strong></td>
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<td>NURS 580</td>
<td>Advanced Health/Physical Assessment</td>
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<td><strong>Term Twelve</strong></td>
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</tr>
<tr>
<td>NURS 590</td>
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<tr>
<td>NURS 591L</td>
<td>Advanced Clinical Practice: Practicum</td>
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<tr>
<td>Total Program with Transfer Credits</td>
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</table>
## RN to Master of Science in Nursing with Nurse Educator Certificate

<table>
<thead>
<tr>
<th>Transfer-In Credits from: Associates Degree in Nursing and RN Licensure</th>
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</table>

### Semester One

#### Term One

<table>
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<th>Course Name</th>
<th>Credits</th>
<th>Area of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHEM 210</td>
<td>Chemistry</td>
<td>4</td>
<td>General Education</td>
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<tr>
<td>PSYC 290</td>
<td>Life Span Psychology</td>
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<td>General Education</td>
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<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>ENGL 140</td>
<td>Written Communication I</td>
<td>3</td>
<td>General Education</td>
</tr>
<tr>
<td>SPCH 142</td>
<td>Oral Communication</td>
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**Semester One Credits:** 13 Credits

### Semester Two

#### Term Three

<table>
<thead>
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<th>Course Code</th>
<th>Course Name</th>
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<th>Area of Study</th>
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<tr>
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<td>General Education</td>
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<tr>
<td>HCA 206</td>
<td>Epidemiology in Public Health Practice</td>
<td>3</td>
<td>General Education</td>
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#### Term Four

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
<th>Credits</th>
<th>Area of Study</th>
</tr>
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<tbody>
<tr>
<td>HUM 470</td>
<td>Cultural Pluralism</td>
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</tr>
<tr>
<td>NURS 310</td>
<td>Nutrition in Health and Disease</td>
<td>3</td>
<td>General Education</td>
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</table>

**Semester Two Credits:** 12 Credits

### Semester Three

#### Term Five

<table>
<thead>
<tr>
<th>Course Code</th>
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<tbody>
<tr>
<td>NURS 420</td>
<td>Principles of Leadership and Management</td>
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<tr>
<td>NURS 430</td>
<td>Disaster Management</td>
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#### Term Six

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<tbody>
<tr>
<td>NURS 340</td>
<td>Public Health Nursing</td>
<td>3</td>
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</tr>
<tr>
<td>NURS 341L</td>
<td>Public Health Nursing Practicum</td>
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**Semester Three Credits:** 12 Credits

**Note:** Student may transfer in General Education and Pre-requisite courses listed above.
### Semester Four

#### Term Seven

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
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</tr>
</thead>
<tbody>
<tr>
<td>NURS 500</td>
<td>Theoretical Foundations of Nursing Practice</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NURS 510</td>
<td>Policy, Organization &amp; Financing of Health Care</td>
<td>3</td>
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#### Term Eight

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<tr>
<td>NURS 550</td>
<td>Advanced Nursing Practice Role Development</td>
<td>3</td>
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<tr>
<td>MATH 500</td>
<td>Biostatistics</td>
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Semester Four Credits: 12 Credits

### Semester Five

#### Term Nine

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<tbody>
<tr>
<td>NURS 530</td>
<td>Advanced Physiology and Pathophysiology</td>
<td>3</td>
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<tr>
<td>NURS 600</td>
<td>Principles of Teaching and Learning</td>
<td>3</td>
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#### Term Ten

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<tbody>
<tr>
<td>NURS 540</td>
<td>Research Utilization</td>
<td>3</td>
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<tr>
<td>NURS 520</td>
<td>Ethics In Health Care</td>
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Semester Five Credits: 11 Credits

### Semester Six

#### Term Eleven

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<tr>
<td>NURS 580</td>
<td>Advanced Health/Physical Assessment</td>
<td>3</td>
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<tr>
<td>NURS 570</td>
<td>Advanced Pharmacology</td>
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#### Term Twelve

<table>
<thead>
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<th>Title</th>
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<tbody>
<tr>
<td>NURS 610</td>
<td>Curriculum Design</td>
<td>3</td>
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<tr>
<td>NURS 560</td>
<td>Health Promotion and Disease Prevention</td>
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Semester Six Credits: 13 Credits
### Semester Seven

#### Term Thirteen

<table>
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<tbody>
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<td>NURS 590</td>
<td>Advanced Clinical Practice: Theory</td>
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<tr>
<td>NURS 591L</td>
<td>Advanced Clinical Practice: Practicum</td>
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#### Term Fourteen

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<thead>
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<th>Course</th>
<th>Title</th>
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</tr>
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<tbody>
<tr>
<td>NURS 620</td>
<td>Educational Administration</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>NURS 630</td>
<td>Simulation and Clinical Nursing Education</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>NURS 641L</td>
<td>Education - Teaching Practicum</td>
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</table>

**Semester Seven Credits:** 13 Credits

**Total Program Credits:** 86 Credits

**Total Program with Transfer Credits:** 146 Credits

### Nurse Educator’s Certificate

#### Semester One

#### Term One

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>NURS 600</td>
<td>Principles of Teaching and Learning</td>
<td>3</td>
</tr>
<tr>
<td>NURS 610</td>
<td>Curriculum Design</td>
<td>3</td>
</tr>
<tr>
<td>NURS 630</td>
<td>Simulation and Clinical Nursing Education</td>
<td>2</td>
</tr>
</tbody>
</table>

#### Term Two

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 620</td>
<td>Educational Administration</td>
<td>2</td>
</tr>
<tr>
<td>NURS 641L</td>
<td>Education - Teaching Practicum</td>
<td>3</td>
</tr>
</tbody>
</table>

**Semester One Credits:** 13 Credits

**Total Program Credits:** 13 Credits
Responsibilities of Students

Standards of Competent Performance

Board of Registered Nursing Regulation 1443.5 California Nurse Practice Act

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

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

Registration

Upon acceptance into the program, the WEST COAST UNIVERSITY College of Nursing controls registration and reserves space in the class for all nursing students throughout the entire program. It is the student’s responsibility to acquire the schedules from the Registrar. Only registered students admitted into the nursing program will be allowed to attend classes that are part of the nursing program (including clinical classes).

Additional Program Expenses

There may be additional costs, and other expenses related to clinical experience, success in the nursing program, and licensure application, such as:

- Physical exam and immunizations
- Background checks and fingerprinting
West Coast University College of Nursing  
RN Student Handbook

- Liability Insurance
- Academic Resources

Transportation

All transportation arrangements are the responsibility of the student. The student must have current vehicle identification, automobile insurance and a valid current driver’s license if they are using a car for transportation to and from school and/or any clinical or nursing-related school activities/work.

Current Contact Information

Each student must keep his/her current address, all telephone numbers, e-mail address, and other forms of contact as well as emergency contact information on file with the Registrar and give the updated information to the campus Dean of Nursing and current instructors. This information will be kept confidential but must be released to the faculty and clinical facilities.

Before You Get Started

- Organize your life and time; use a planner, calendar or other device to keep track of assignments, clinical schedules, and work and family obligations.
- Use the attached personal organizer to help plan out your schedule. It will change dramatically when enrolling in this fast paced accelerated program. Do not assume what you were able to do in the past for work, family, personal life or school will apply in this program. You will need to make some dramatic life changes.
- Get help with daily chores from family and friends; do not try and do it all as you did before the program.
- Realize school is a full-time job taking 35-50 hours per week of classes, studying, and clinical. Discuss your needs and goals with your family before beginning the nursing program, as it will change their lives as well. Do not assume because a class is on-line that it is easier because it is not. In fact many students state it is harder. (See Appendix A).
- Make some time for yourself somewhere in the schedule, even if it is only 15 minutes a day. Plan some fun activity once a week. Make sure your schedule includes outside activities and balance. A physical activity routine will help with stress and the resulting weight gain some people experience.
- For those with children or adult care responsibilities find reliable care sources and reliable back-up for unexpected events.
- Invest in computer hardware and software needed to run DVD’s, CD, internet, e-mail, word processing, PowerPoint and Excel. You are expected to be computer proficient and will be expected to complete your assignments using a word processing or comparable program that can also check your spelling and grammar. Computer
proficiency is a school and nursing program requirement. (See Catalog policy). You must have a valid e-mail account which you will need to access your messages from the school and faculty. Furthermore, you will be given CD’s and DVD’s, and there will be Internet- based research assignments and computerized testing with HESI and ATI as part of your learning experience. Therefore, a computer with a CD/DVD capability and an internet browser, and either wireless, DSL or cable hook-up capabilities are necessities. If you are taking on-line courses, a computer and the above peripherals is an absolute requirement.

- Read and organize your syllabus to ensure you know when reading, papers, and testing occur so you can prepare ahead of time.

- Be flexible and understand that the faculty and administration are working very hard to provide you with the best nursing education possible during times of a nursing shortage, which also means a shortage of instructors and difficulty with clinical site acquisition.

- Remember you are a guest of the clinical site. Based on the fact that both the College of Nursing and its faculty and students are guests at the clinical site we must adhere to their rules and regulations. This includes, but is not limited to, adhering to their requirement for immunizations, background checks, fingerprint checking, drug testing and a variety of other rules specific to that institution. You are there at their will and it is up to the facility to determine if they will allow a college or a particular student to be on their premises. The university does not and cannot pay for these sites but it is nevertheless a requirement of the university to provide and students to acquire clinical experience. You must therefore be on your best professional behavior as well as providing the best possible nursing care to their patients. The clinical sites have the right and responsibility to dismiss you from their facility if you do not act professionally, follow their rules, regulations and protocols or compromise patient care in any manner. If you are dismissed you must see the Dean of Nursing for follow up on the incident and there is no guarantee you can be placed at another site and this may cause you to fail a course. Your behavior at a clinical site may also cause the university to lose its clinical affiliation so your actions affect both the university and all the current and future students.

- Be prepared for clinical, arrive on time, dressed in a clean, pressed official uniform, clean shoes and socks and your personal appearance also presented in a professional manner.

- You must also be academically and clinically prepared with your nursing care plan or other assignments fully researched and completed. You are caring for a person who will rely on your expertise so be certain you are providing the care to them that you would want to have if the situation were reversed.

- Be aware of your surroundings, assignments, and patient care at all times. You must not let your guard down, as that is when mistakes can happen.
Aim for an A and you are more likely to succeed. Studying for the A now will help you later with passing the NCLEX-RN and in your professional life as a nurse.

The faculty wants you to succeed, and they are there to help you. The faculty is available to provide tutoring, go over your tests, and remediate you to help you succeed. Seek them out as soon as you are having difficulty or you do not pass a test, quiz, or assignment.

Keep up with your reading in your textbooks and other assignments. Your test questions will come from ALL sources, including the textbook, CD’s, DVD’s, internet assignments and other reading assignments. We have required books on your syllabus list and reading or other types of assignments from those books. Read them as assigned.

Get enough rest so your mind can absorb the material being provided. Use the computer lab resources, online access to case scenarios, practice tests and remediation resources, from ATI or HESI to learn NCLEX-RN style test taking, course content, practice exams and virtual scenarios to help you better succeed. The ATI online review is part of the required content for each clinical area so take advantage of this review that you can do via your home or school computer.

Use the skills lab to practice your skills, watch videos, get tutoring and get checked out using your skills lab booklet. Keep your skills lab check book as it documents what you have been checked off on by instructors. You have online access to all the required nursing skills at all the various levels on the nursing program which you will need to learn, review them before you go to your clinical so you are prepared for patient care.

Be kind and remember that nursing is the art and science of caring. Practice that caring in all settings.

Remember, this is a fast 60-160 week journey, and you develop your knowledge and skills each day. Make the most of each day for your learning, yourself, and your friends and family. This is NOT about the grade.

Your nursing education is about your learning to care for those who are ill or need your nursing expertise. See the BRN Standards of Competence.

Try not to work while you are in the program. If you must work, keep it under 20 hours per week. Research has shown that if you work more than 20 hours per week you have a high chance of failing either in the nursing program or the NCLEX-RN.

Remember there is a Chain of Command in the Nursing Program and where you will be working as an RN. With questions, issues or disputes, please see the clinical instructor first, then the lead (usually theory) instructor, then the Associate Dean or Campus Dean of Nursing and then the College Dean of Nursing. If issues are not resolved using this chain, then you may go to the Student Services Director and then the Executive Director of the campus and then the Provost. It does not help your case (and may hurt it) to bypass the Chain of Command.
• Faculty, staff, and administrators have office hours. Please use those resources to help with your success. You may be able to drop in sometimes, but otherwise, make an appointment.

• There are many scholarships available through financial aid and the Health Professions Institute, **www.healthprofessions.ca.gov** or **www.discovernursing.com**. Apply for them so you can work less hours and study more.

• Your first year of membership in the CSNA is paid for by the university and after that you pay for your membership so continue the Student Nurses Association and learn more about the nursing profession. As you approach graduation convert your CSNA membership to the ANA/C membership. You get a significant discount the first year that will more than pay for itself in the group benefits of membership as well as professional growth. You will also get free continuing education and discounted rates on certification examinations. One of the many benefits of membership is health insurance and liability insurance. Please investigate all the various benefits offered to you through this professional membership.

• Contact the instructor about any assistance, aid, or study strategies that may be useful to employ. The instructor will have information on the test taking strategies, CD’s, DVD’s, books, on line access, and the NCLEX-RN available in the library or through the computer network. If you are having trouble with the course, it is important that the student keeps in contact with the instructor and any available tutoring, counseling, and mentoring. Although it is the responsibility of instructors to contact students if the student begins to fail, it is also the students’ responsibility to contact the instructor.

• Contact the skills laboratory instructor for help with any skills that are presenting a problem. Please check hours of operation and utilize the opportunity of individual instruction from the skills laboratory instructor. There is tutoring available in the skills lab and with your instructor. You should take advantage of tutoring if you are receiving 76% or below on any theory tests or 85% or below on math tests or less than their required 900 on any HESI tests. Check the times when tutors are available to assist you with test taking, math, or other areas of need.

• Computers are another source of support. Students are encouraged to use the computer programs for the test taking skills and the NCLEX-RN test preparation on every subject matter taught in the nursing program. There are many new CD’s, videotapes, and other resources in the skills lab and on the computers. (*See Appendix B*).

• NCLEX-RN review books are helpful for support, so please add to your personal library. The books are designed to include the critical elements of any subject matter discussed in our program. It may be beneficial to read the ATI online review book **after reading the assigned materials in your text book** as a way to review. Completing your test book reading assignment is crucial to your learning and the review books do not substitute for the original text reading. It does not help to take practice tests and expect to learn the required material in this fashion. You need to read and learn first and then take the practice tests to help you apply the information appropriately.
The Integration of Nursing Concepts course NURS 220 is offered as a part of the nursing program in the last semester. Following the course syllabus and using the various HESI, ATI and Kaplan resources in preparation for taking the comprehensive examination will make passing this exam on the first attempt possible. You may receive a second attempt to pass the computerized examination but passing on the first attempt is linked with passing the NCXEX-RN so study hard as this is also a requirement for graduation. To assist with this, in addition to nursing theory content, case study, critical thinking, and test taking learning are important parts of your overall success. Each of the HESI or ATI tests that you take in each subject area give you print outs of the content areas you missed. Use this to help you remediate before taking the next examination.

Study groups have been shown to be effective and students are encouraged to form study groups immediately to help with studies throughout the program. Research states that study groups are predictors of success for successful completion of registered nursing classes. Study groups are a form of peer teaching the most successful form of learning. Study groups are NOT for sharing questions or homework from previous tests or assignments so you can get a better grade. They are meant to help you learn the material more thoroughly so you will be more successful on your own. Sharing test questions is a form of cheating and sharing parts of assignments that are not meant to be group assignments is also cheating.

**Required Documentation**

**Clinical Packet and Clinical readiness.** It is extremely important that you follow directions regarding clinical packet, these requirements may change from term to term as the availability of clinical sites change. **Students must submit the clinical packet in the term before entering the nursing classes.** This is so because the university is required to give the clinical sites the information about your immunizations and background checks, and drug testing at least six weeks prior to your arrival. This also means the university needs time to process your information and put it in the various formats the clinical sites required. This is a complicated process and we appreciate your help in getting this done. If you are having any difficulty with your provider or the clinical labs please notify the clinical coordinator and your instructor so they may assist you. Failure to meet these requirements may cause failure in the course. Furthermore students will not be allowed into any clinical area if they do not complete all the requirements. for immunizations, physical exams, RN student malpractice coverage, health insurance, BLS for health professionals, fire card, etc. *(See Appendix C for the complete list)* by the published date.

Instructors are required to send the student home until all documentation is received. This will count as one of the absences allowed as part of the 20% absence allowed in clinical courses.

While all this documentation must be provided in the first nursing courses, NURS 100 and 110L or NURS 200 and 210L, it is also required that **every entering nursing student make a personal copy of the entire package** and bring it with them on the first clinical day of each rotation and
for each different facility in the event they request to see the original documentation. It is also a good idea to keep this information in a safe place like your car at all times, so it can be verified at a moment’s notice. You should also scan the documents into your Professional Portfolio so you can keep a permanent record for school and later for employment. Students must sign a release of information form for the nursing program. The hospitals, however, require that it be provided to them in order to have academic clinical experience in their institutions. The instructor must have verification that all information has been provided or they have the right to dismiss the student from the clinical site. This will count as an absence.

Students must have the skills lab check-off book with them to present to the hospital upon request and for the instructor to sign off when performing nursing skills in the clinical area. This is also a BRN requirement that skills be practiced and verified first in the skills lab or simulation center before the procedures are performed on patients. The booklet keeps a record for the student. Students will be sent back to the skills lab for remediation when they do not demonstrate proficiency in the skills required from the course and from previous courses. Remember you have access to the various clinical skills online so please review nursing skills prior to going to clinical.

Background check, and drug screening will be done prior to the beginning of any clinical course, or the clinical orientation, as required by the clinical facility the student is attending. Drug tests may also be random. Students must be aware that if a background check comes back with a violation, this may prevent the student from being placed in a clinical rotation. Students must take the clinical portion of the class at the same time they take the theory, and if they cannot be placed in an appropriate clinical setting, they cannot complete the nursing program. Taking the theory and clinical classes at the same time is a BRN requirement. (See Appendix C for details on the Clinical Packet).

Registered Nursing – Essential Job Functions

Work hours:
1. Must be able to work at various clinical sites, including the hospital, at least 8-12 hours per day two days per week.
2. Must be able to attend the nursing and other college theory classes on additional 1-3 days per week.
3. Must be able, on some days, to take theory and clinical classes lasting as much or more than 12 hours per day.

Physical demands:
1. Must be able to complete all physical demands required in the Registered Nursing Handbook and the hospital unit where the clinical course is scheduled.
2. Must be able to use all physical senses, i.e., seeing, hearing, feeling, smelling in a manner that allows the nurse to be able to accurately assess the patient and clinical situation.
3. Must be able to use fine motor skills of the hands to carry out clinical procedures accurately and safely.
4. Must be able to operate varied medical equipment.
5. Must be able to perform such duties as, but not limited to:
   a. Lifting patients of various sizes and weights into, onto, and out of bed, chairs, stretchers, and other surfaces.
   b. Maneuvering, pulling, pushing, lifting, and turning of patients in awkward positions.
   c. Performing related tasks which require the use of hands, arms, shoulders, legs, and feet.
   d. Participating in work-related activities that require extensive bending, kneeling, crouching, stooping, standing, and critical movements.

**Work Environment**

1. Must be aware of potential risks in healthcare settings which require wearing of safety equipment, such as masks, head coverings, glasses, latex or non-latex gloves, shoe coverings, etc.
2. Must be able to meet hospital and college performance standards.
3. Must be able to travel to and from academic and clinical training sites.

**Cognitive Abilities**

1. Must be able to understand and work from written and verbal orders.
2. Must possess effective verbal and written communication skills in English sufficient to safely work in academic and clinical settings.
3. Must be able to understand and implement related academic and health regulations, healthcare facilities, and hospital policies and procedures.
4. Must follow all state, federal, and local hospital policies regarding confidentiality rules on patients’ personal, family, and health-related information.
5. Must possess technical competency in patient care and related areas.
6. Must be able to perform mathematical calculations to determine correct medicine dosage and intravenous flow rates.
7. Must be able to speak and communicate effectively in English to individuals and small groups in a manner that can be readily understood.
8. Must be able to conduct personal appraisals and counsel patients and families.
9. Must be in a functional state of mental health.
10. Must be able to demonstrate the ability to adapt to changing patient care and professional situations.
11. Must not have any disability that would interfere with cognitive, physical, or sensate ability to function safely in patient and nursing situations.

**American with Disabilities Act (ADA) Program and Services**

If you have a physical, mental, sensate, or learning disability, or think that you might have one, please see the Academic Dean for further assistance. Faculty or the NCLEX-RN Licensing Board
cannot assist you with any special accommodations until you have this evaluated by a person who specializes in this area to determine what special assistance you may need. If you do have special needs as identified by the specialized testing and you provide the university with the necessary documentation, then special testing considerations will be conducted by the nursing faculty as specified by the testing facility/professionals recommendations.

**California State Board Applications**

1. Graduation Evaluation is done the term before BSN graduation, in preparation for application for BRN licensure.
2. Applications to take the NCLEX-RN Examination for Registered Nurse licensure are downloaded from the BRN website and submitted to the BRN 4-5 weeks prior to expected graduation. The BRN website is: [www.rn.ca.gov](http://www.rn.ca.gov) and look for the “Applicants” tab for further details. Students are assisted with this process in their final course in the program. **A Social Security number is required to obtain licensure in California.** Completed applications are all sent to the BRN by WEST COAST UNIVERSITY.
3. All RN courses, BRN requirements, and general education college course requirements must be successfully completed with at least a grade of “C” **BEFORE** the student can take the licensing exam. **No incompletes will be accepted by the BRN.** If the student attempts to take the NCLEX-RN prior to completing all work for the degree, the BRN will list the student as a non-graduate and will **never change** that status even if the degree requirements are completed at a later date.
4. Students who DID NOT complete all prerequisites or required nursing courses at WEST COAST UNIVERSITY must verify that official transcripts and transfer course documentation is on file in the WEST COAST UNIVERSITY Transcript system and in their files. WEST COAST UNIVERSITY will submit transfer course documentation to the BRN. Only official transcripts from individual schools will be accepted. If transfer course documentation is not submitted when the NCLEX-RN scores are received, the exam scores and license **CANNOT and will not** be released by the BRN.
5. The Registrar will mail transcripts as soon as possible after grades are posted at the end of the term of graduation. The name written on the BRN application for licensure must be the **EXACT same name** that will be used for identification purposes when taking the NCLEX-RN examination.
6. Read all directions for the exam and for licensure carefully.
7. Be certain all the required paperwork are submitted including any legal files that may be required from live scan reports and other legal documents to insure eligibility for licensure. Visit the BRN website and see the section on Prior Convictions and Disciplinary Actions for further clarification. [www.rn.ca.gov](http://www.rn.ca.gov)
8. Be certain to submit a 2” x 2” passport type photo that meets BRN specifications with the application.
Professional Behavior

Guidelines for Professional Conduct

The fact that you have entered the profession of nursing intensifies the standards which you present as an individual. Your personality is the sum total of the behavior patterns by which you are known as a unique person.

The College of Nursing follows the WEST COAST UNIVERSITY policy regarding academic standards, policies and procedures. Please review the WEST COAST UNIVERSITY Catalog.

The College of Nursing follows the WEST COAST UNIVERSITY policies regarding Academic Integrity and Sexual Harassment. Please review the WEST COAST UNIVERSITY Catalog

The MTU Plan

Me To You Showing Manners and Thank You

<table>
<thead>
<tr>
<th>Concept</th>
<th>Action To You or Thank You</th>
</tr>
</thead>
<tbody>
<tr>
<td>Me, Manners</td>
<td>● Treat others better than you would treat yourself.</td>
</tr>
<tr>
<td>Being respectful and polite to everyone at all times</td>
<td>● Be appreciative of other’s efforts to help each other learn, faculty, nurses, doctors, other health professional staff, community sites, all staff, family, friends, classmates.</td>
</tr>
<tr>
<td></td>
<td>● Remember that no one achieves their goal in isolation.</td>
</tr>
<tr>
<td>Coming well prepared to clinical</td>
<td>● All our patients/people/families deserve our very best in the care we provide.</td>
</tr>
<tr>
<td>Ready to provide outstanding care.</td>
<td>● Legally, ethically, morally we are required to provide the best care using the best practice and adhering to the standards of care regardless of our learning status.</td>
</tr>
<tr>
<td></td>
<td>● People’s lives depend on our knowledge and abilities; there is no place for half hearted attempts.</td>
</tr>
<tr>
<td>Ensuring polite communication with everyone</td>
<td>● Respectful, concise and professional communication is a requirement of our profession.</td>
</tr>
<tr>
<td></td>
<td>● Ensure we are practicing safely and within the standards of care.</td>
</tr>
<tr>
<td>Being professional but also approachable.</td>
<td>● Recognizing others presence in a polite way by saying hello, introducing self to staff, patients, family and others around you.</td>
</tr>
<tr>
<td>Look and act professional.</td>
<td>● Clean orderly appearance with a clean pressed uniform, clean shoes, clean neat personal appearance, and name badge clearly displayed.</td>
</tr>
<tr>
<td></td>
<td>● Speak using correct professional English and speech patterns and language, in a calm polite tone of voice.</td>
</tr>
<tr>
<td>Ensuring communication and acknowledgement of</td>
<td>● Ensure staff and patients are aware of your presence</td>
</tr>
</tbody>
</table>
self to others

Acknowledgement of the help others provide to help you achieve your goals

by politely introducing yourself and acknowledging you are arriving or leaving an area.
• Saying thank you to the staff and patients when they or you leave for the day.
• At the end of each term send a written Thank You card to the clinical faculty.
• On WCU stationary cards, write a Thank You to the one special (but different) staff member who helped with student or faculty learning needs.
• Send a group thank you note to the Director of Nursing or Chief Nursing Officer, Director of Education and charge nurse of the floors or the community facility or person that helped with learning assignments.
• NEVER assume others owe you anything - they do not - regardless of what you think of yourself or your circumstances.

Academic Honor Code

Academic honesty, integrity, and ethics are required of all members of the WEST COAST UNIVERSITY community. Students are expected to conduct themselves in a manner reflecting the ideals, values, and educational aims of the University at all times. Academic integrity and honorable behavior are essential parts of the professionalism that will be required well beyond graduation from WCU. They are the foundation for ethical behavior in the workplace. See the University Catalog for further discussion.

There are issues and policies that are also specific to nursing that the student must be aware of and they include the following:

1. The WEST COAST UNIVERSITY College of Nursing has adopted the ANA Code of Ethics for Nurses and the National Student Nurses’ Association, Inc. Code of Academic and Clinical Conduct and the Code of Professional Conduct (see Appendix D).
2. Students are expected to participate in their Student Nurses’ Association as part of their learning experience in becoming a professional.
3. The highest ethical standard is required by students in the Nursing Program.
4. Students are accountable for information and skills learned in previous courses.
5. Students need to have respect for themselves, fellow students, faculty, administrators, other professionals, and the chain of command.
6. Students are required to demonstrate integrity, including honesty, following the honor code, not enabling others who are not doing their own work, reporting cheating or plagiarism, not lying in the patient care setting, forging, or omitting care.
7. No aggressive, disruptive, or stalking behaviors or any types of verbal threats will be tolerated in the Nursing Program and will be reported following the WEST COAST UNIVERSITY policy outlined in the college catalog under Causes for Discipline. This
reporting may go on your legal record and could cause a delay in obtaining your nursing license.

8. Cell phones, Palm Pilots, Blackberries, beepers, I-Pod’s, and other electronic devices are required to be turned off in the hospital and during class. If they are not turned off or are found to be in use, they may be confiscated by the instructor. Use of these devices in the clinical setting may be considered unsafe behavior and subject the student to disciplinary action.

**Disciplinary Procedures**

When a faculty member discovers a violation of the cheating or plagiarism policy, the faculty member:

1. Will arrange a conference with the student, and at that time, advise the student of the allegations.
2. Will notify the Dean of Nursing and the Academic Dean in writing that an act of dishonesty has occurred. This report will become a part of the student’s permanent record. A copy will be mailed or given to the student.
3. May give the student an “F” for the assignment and/or for the course, and the student may be disciplined by the Dean of Nursing and/or Academic Dean or dropped from the program, depending upon the seriousness of the infraction.

If the student’s permanent record indicates more than one occurrence of cheating or plagiarism, the student may be placed on probation, suspended or expelled.

A student may appeal to the WEST COAST UNIVERSITY’S Appeals Committee any sanctions based upon an allegation of dishonesty (see catalog policy).

Ethical issues – Those students who engage in questionable ethical behavior may be subject to dismissal from the Nursing Program after review by the faculty and WEST COAST UNIVERSITY administration. The student appeal process is the same as for cheating and plagiarism (see catalog policy).

**Personal Appearance**

The patient care environment includes the appearance and behavior of those caring for the patient. Therefore, nurses’ appearance is to provide a therapeutic environment for the patient and is NOT a place for the nurse to express individuality in a manner that is not therapeutic for the patient. Asepsis and comfort are integral parts of patient care. Student interference with these aspects of contributing factors must be corrected as determined by the instructor. Appropriate dress in the classroom setting is also a reflection of professional behavior; so please come to class in clean, neat, appropriate clothing that is conducive to a positive learning environment.

**Uniform**
Only the entire approved uniform can be worn by the students. **This uniform can only be purchased from the company specified at the orientation meeting.** The uniform must be clean, neat, pressed, complete and in good repair. Each hospital reserves the right to have students comply with the individual hospital uniform code. The hospital policy may supersede that of WEST COAST UNIVERSITY.

The uniform is to be worn only during assigned hospital experience, community experience, public health, and skills lab.

1. Uniform parts and use. The official uniform for WEST COAST UNIVERSITY consists of five parts. The clinical top is the white top with the blue border and the blue pants with the WCU logo. Under this top the student may add the long sleeved white top if extra warmth is needed or to cover tattoos. Over this the student may wear the blue blazer with white trim that has the WCU seal and logo. For the community site visits and for public health the white Oxford shirt with the WCU seal is worn under the blue WCU blazer and the blue pants with the WCU logo.

2. The standard approved uniform for all students also includes clean white hose or socks and white shoes (constructed to ensure safety and support). All shoes worn in clinical areas should be white, clean, in good repair and enclosed. NO OPEN areas on shoes (ex: no clogs or Birkenstocks). All undergarments must not be visible through the material of the uniform. A uniform-approved white shirt may be worn under the clinical short sleeve top for warmth, and must be worn to cover tattoos.

3. All students are required to have, as part of their uniform, a watch with a second hand, bandage scissors, and college identification and/or other identification required by the clinical facility.

4. Pins or any other paraphernalia indicating that the student is an RN must not be worn at any time until passing the NCLEX-RN examination and the license to practice as an RN is awarded. There are no nursing caps as part of this uniform and they may not be worn at any time.

5. “Belly bags,” “fanny packs,” “cellular phones,” and “pagers” are not permitted as part of the uniform. Cellular phones and pagers are not allowed in the hospital or classroom. They may be confiscated by the instructor if found during clinical or classroom sessions. **No lab coats are to be worn.**

6. In certain clinical settings, the student may not wear the entire uniform. In such settings, the community shirt with the clinical pants portion of the uniform will be worn.

7. When community events or school events occur, students are expected to wear their community uniform to the campus or school event. This includes wearing the appropriate shoes, hair, identification badges etc with the complete uniform (white top, blue pants, blue blazer).

**Hair**

Hair must be neat, clean, and not styled in such a manner that it could interfere with patient care or safety while on clinical assignments.
1. For female students, hair must be neat and clean and the guideline for length of hair is off the collar. No extreme hairstyles or colors are permitted. If hair is dyed it must be done in a version of a naturally occurring hair color. The hospital, in support of their patients, may ask for modification in hairstyles. Long hair must be worn up or tied back neatly so it cannot fall onto a patient care area.

2. For male students, hair must be neat and off the collar. No extreme hairstyles or colors permitted. If hair is dyed it must be done in a version of a naturally occurring hair color. The hospital, in support of their patients, may ask for modification in hairstyles.
   a. Sideburns should be neatly trimmed and groomed (not long and bushy).
   b. If required by hospital policy, beards must be shaved off.
   c. Beards may not be started during the course of the semester.

Make-Up and Perfume
Moderate, simple make-up, if any, is recommended. Extreme eye make-up (including false eyelashes) and extreme shades of lipstick and heavy cake makeup are not permitted. Clinical instructors, at their discretion, may ask students to alter make-up, nails and jewelry. Consideration must be given to the patient. Heavy fragrances are often offensive to those who are ill and many people are allergic to perfume; so do not wear it during clinical assignments.

Nails
Fingernails will need special care to ensure patient safety and asepsis and must be worn according to hospital guidelines. No artificial nails, acrylic nails, or nail polish is allowed. Natural nails must not extend beyond the tips of the fingers. A violation of this will cause you to have to cut your nails at the clinical site or be dismissed from class as an absence.

Jewelry
Small, inconspicuous pierced stud earrings may be worn. No other jewelry shall be worn while in the hospital except an engagement ring and/or wedding band as long as the ring is not prominent so as to be a problem with gloving or other patient care activities. (Jewelry is discouraged in the interest of asepsis and safety). No visible piercing is allowed except for one small post type earring per ear lobe. Some hospitals do not allow any jewelry and this must be honored when in that rotation.

Speech and Conversation

1. Be aware of your responsibility as well as the legal implications in respecting the rights of others, especially the right to privacy. **Confidentiality regarding patient information must never be violated.**

2. Be aware of and follow the Health Information Portability and Accountability Act (HIPAA) regulations and any others determined by the healthcare setting you are learning or working in.
3. Do not discuss any patient, patient family member, or any member of the health team, or any disease or symptoms in a place where the conversation might be overheard and possibly infringe on someone’s right to privacy.

4. You must never take any personal patient, family, or health-related information out of the hospital setting. This includes not photocopying the information even if you blackout identifying patient information.

5. Any written assignments must not have any patient identifying information on them and are to be treated with confidentiality, i.e., do not share any of the information or paperwork with others and only give that information to the instructor who can then provide feedback and grading.

Quality of Care

Patients have the right to safe nursing care. The California Board of Registered Nursing requires that the registered nursing student meet the standards of a Registered Nurse in providing patient care. When a nursing student performs care that is customarily given only by a registered nurse, the courts have held the nursing student to the high standard of care of the registered nurse. This is true regardless of what other licenses the person may hold. You are help to this higher standard once you enter an RN program.

Nursing students are expected to maintain a physical and mental state which will enable them to meet these professional responsibilities. This includes having sufficient and proper rest and nutrition prior to class attendance so that proper learning and clinical care can be accomplished. They must be intellectually and technically prepared to provide nursing care. Improper student conduct in the clinical area can result in civil liability, loss of clinical facilities, and loss of program accreditation or licensure. At no time would a student assume responsibility for nursing care without the knowledge and supervision of his/her instructor.

Guidelines and Policies (Clinical and Theory)

Placement of students into clinical rotations is the responsibility of the Dean or whomever she/he assigns that responsibility. Students are required to adhere to the policies of the clinical assignments.

Jury Duty

Students who are called for jury duty should advise the Academic Dean or the Dean of Nursing as soon as the summons is received. The student will be counseled about their need for service. Often a letter to the courts can be provided that will assist the student with deferment.

Clinical Courses

All students must be appropriately enrolled in their courses before going into the clinical setting. It is the student’s responsibility to ensure that all of their academic and financial responsibilities are met prior to attendance in class. Students who are not on the class roster
will be asked to leave the class, and it is the student’s responsibility to get the problem corrected with proof of the correction provided.

**Attendance**

Satisfactory attendance in courses is a requirement of the university and linked with student success. The percentage of attendance is calculated on the basis of the clock hours identified and varies by the type of course or major. For example, 30% of a three credit lecture course is 13.5 hours per week. Absences in excess of 30% of any course will result in a grade of “F” and the student will be required to repeat the course.

Students who are handed a call slip notice are expected to make an appointment to meet with the Dean of Nursing before they can attend their next class session. The Dean (or Associate Dean if the Dean is away) must see the students within one week and sign the necessary forms for the student to return to the clinical area.

1. Students must fully attend assigned clinical hours. Any time a student is away from a clinical setting, whether planned or unplanned, is considered an absence. Leaving a clinical session without instructor permission is contrary to program policy and may be considered abandonment of their patient which is a serious professional breech of conduct. It is expected that students will be on time and will stay the entire time. Those leaving early without instructor permission will be considered absent and subject to discipline. **All absences will be recorded in minutes not present and there are no excused absences.**

2. Regardless of the reason for not being present in a clinical class, the maximum amount of time permitted is 20% total of the clinical class time (as measured in minutes) or the student receives and F for the class and must repeat the entire theory and clinical class again.

3. Clinical absence is recorded on an hourly basis in minutes of absence, for each course of the program and can impact negatively on the student’s performance evaluation.

4. Students who are ill on a clinical day and unable to report to the hospital where they are assigned will be responsible for notifying the instructor and the agency in accordance with policies established by that agency and/or the clinical instructor. Failure to comply may result in a safety infraction on the students’ evaluation.

5. Students who miss ten consecutive calendar days, excluding holidays, and no contact has been made during that period, will be withdrawn from the university.

6. Students will be sent to the campus Dean of Nursing for counseling when the second absence occurs. The faculty will prepare the absence form and the student must bring that to the meeting where the Dean will complete it and put it in the permanent record with a copy back to the instructor.

7. When it is necessary for a student to repeat a course, reentry into any clinical course is **dependent on available space.** There are no guarantees that one will follow through
courses uninterrupted. Placement in the program is subject to availability. The final clinical class in the BSN program must be Integration of Nursing Concepts NURS 220 and NURS 221L Integration of Nursing Practice.

8. Progression in the sequence of nursing courses will be permitted only after the dropped or failed course that has prerequisite requirements for it or subsequent courses is repeated successfully. For example, if a student failed NURS 100 or 200, he/she will not be able to take any classes in the nursing curriculum until NURS 100 or 200 has been successfully repeated and completed.

9. Regardless of the circumstances, those courses in which a student receives a “D” or an “F” grade may be repeated only once, with the exception of Nursing 220. Only two courses within the entire nursing program may be repeated (this includes all pre-nursing classes as well and nursing classes).
   a. If a student earns a “D” or an “F” grade in a course, he/she may repeat the course only once.
   b. If a student is earning a “D” or an “F” grade at the time of withdrawal from a course prior to the drop deadline, the course may be repeated only once.
   c. During the repeat of the course, if the student drops prior to the drop deadline and is earning a “D” or an “F” grade, the student may not repeat the course again and may not continue in the program.
   d. During the repeat of a course, if the student is dropped by the Instructor due to absences prior to the drop deadline and is earning a “D” or an “F” grade, the student may not repeat the course again and may not continue in the program.

10. If students, by their absences, cannot meet objectives of the course by the time designated for each objective and to the degrees of mastery designated by the instructor, students may be dropped from the course.

11. All courses must be repeated in their entirety. Theory and corresponding clinical courses must be taken concurrently as per BRN regulations (Article 3, Title 16, Section 1426 (d)). If one is dropped, failed or withdrawn from either course, during the term, the other must also be dropped. If a student successfully completes the clinical course but fails the corresponding theory course at the end of the term, the student repeats only the theory course.

12. Only two courses within the pre-licensure programs may be repeated and any given course may only be repeated once, with the exception of NURS 220.

Grade Deficiencies
Any student not meeting clinical or theory objectives at a passing level at the fifth and seventh week of the term:

1. Will receive notification from the instructor;
2. Is required to meet with the instructor to receive remediation;
3. May be required to enter into an academic contract regarding their performance for the remainder of the course; and
4. May be subject to possible referral to the Dean or Associate Dean of Nursing for further counseling.

In addition:

1. Students failing any examinations (76% or lower for theory tests or other written work and 85% on math tests) are strongly encouraged to seek tutoring regarding the test and test taking skills as soon as the grade is earned.
2. Students who are in disagreement with the grade should first meet with the instructor to discuss the grade or testing issues and if additional assistance is required they can then meet with the Dean of Nursing. (See Grade Appeals policy in Catalog).
3. NURS 220 Integration of Nursing Concepts requires passing the HESI or ATI examinations with a score of 900 (HESI) or 70% (ATI) for the Exit examination in order to pass the class. The policy regarding two attempts on the tests applies; however, all tests must be successfully completed by the end of the term in which the student is enrolled in NURS 220 or the student will fail the class, delaying the student’s graduation. It is expected that if the student is not meeting the 900 score requirement on the HESI Exit Exam, he/she engage in remediation until they master the material needed to pass that subject and the entire course. The other grading specifics for the class may be found in the course syllabus. These HESI and ATI passing scores are not arbitrary but are based on research indicating what is necessary to be ready to pass the NCLEX-RN exam and be ready for safe clinical practice as a Registered Nurse.

Safety
The following policy applies to instructor initiated drops for students who are unsafe in the clinical setting.

1. Safety is directly concerned with the patient. Student nurses are entrusted with the responsibility of providing safe nursing care to patients. The BRN requires the students meet the same safety standards required of an R.N. per the Nurse Practice Act. Safety encompasses:
   a. Meeting the objectives of a course by the times designated for each objective and to the degree of mastery designated. This includes passing the medical mathematics tests with a grade of 85% or greater prior to passing Medications. The first grade on the math test is the one used for calculating the final grade, but two more opportunities may be provided if the first is failed.
   b. If there are three failures, the student cannot meet the objectives of the course, and therefore, cannot pass Medication and fails the course.
   c. Responsible actions based on good judgment that ensures the well-being of the patient at all times.
2. Students will be dropped immediately from clinical laboratory courses if unsafe patient care behaviors are demonstrated related to course objectives in which the student is currently enrolled to the course objectives of previously completed clinical laboratory
nursing courses, to irresponsibility, and to poor judgment. A drop in a clinical course requires a drop in the corresponding theory course per BRN regulations.

3. The following policy applies to hospital-initiated drops for students in the clinical setting:
   a. The hospital reserves the right to deny entrance onto its premises based on its belief that the student is not benefiting from instructions or that the student is unsafe or poses a problem for the institution. Special arrangements cannot be made for the student. The student will be dropped from the theoretical component of the program and, thus, from the nursing program, due to BRN regulations of concurrent enrollment requirements.
   b. Students must sign a release of information form so the Nursing Program can fulfill its legal contractual obligations and provide necessary academic and clinical performance information to the clinical settings where students are receiving experience in a regular nursing class. The student may not enroll in a clinical class without providing the required information to the school and therefore the hospital/clinical facility/community setting. The health care or related facility decides if the results of that information are satisfactory for the student to receive clinical instruction in their institution/facility/community setting.
   c. In addition to the Background Check and Live Scan Fingerprinting, drug testing may also be required by the clinical facility. The criminal background check is required for entrance into the clinical nursing courses. The students may be subject to a criminal background check by the clinical setting due to Joint Commission or other accreditation requirements. The university is contractually obligated to provide the hospital with results of the background check and drug testing. The health care or related facility decides if the results of that information are satisfactory for the student to receive clinical instruction in their institution/facility/community setting.

4. If a student becomes ill during his/her clinical rotation, the instructor must dismiss the student from the clinical site for the day. The hours missed will count as absence. The maximum allowed absences is 20% for clinical and/or nursing labs courses. Having a maximum of two days absence does not mean the students have two days they can take off to do other things. Those absences are only for real illness or emergencies.

**Nursing Lecture Courses**

**Attendance**

Satisfactory attendance in courses is a requirement of the university and linked with student success. The percentage of attendance is calculated on the basis of the clock hours identified and varies by the type of course or major. For example, 30% of a three credit lecture course is 13.5 hours. Absences in excess of 30% of any lecture course will result in a grade of “F” and the student will be required to repeat the course. Nursing students may not be absent for more than 20% of a NURS lab or clinical course identified as “L”.
Leaving a lecture class without instructor permission is contrary to program policy. It is expected that students will be on time and will stay the entire time. **All lateness, early departure or absences will be recorded.** Excessive absences may lead to dismissal from the class and the student may be required to repeat the class. Therefore students must be very careful with attendance.

It is expected while in the class that the student is paying attention to the instructor or other presenter and doing the work required for the class. Cell phones, blackberries, or other electronic devices not used directly for the purpose of the class are not allowed during class. The instructor may confiscate any such devices and report this behavior to the Dean.

**Grading in Nursing Courses**

Nursing has a different grading scale than other WCU programs. Students must pass the final computerized examination first before any other grades are considered for the class. The raw score is converted to a percent (%) score and that is what is used to calculate the final grade for the class along with the other course grades. A student must pass all examinations and course requirements with a cumulative grade in that class of 76% (or the higher grade noted in the syllabus for certain classes) to move on to the next nursing class. If a student fails a nursing course, they may repeat it once, but only a maximum of two courses in the entire nursing program may be repeated. If a student fails a course that is being repeated, the student will be dropped from the program.

The initial math testing occurs in the first nursing NURS 100 or 200 classes and is part of a student’s theory grade. For all other nursing courses, the math requirement is part of the clinical course and clinical grade. All students must pass the math test in order to pass Medications. Students will be given three opportunities to take the math exam. The first grade counts toward the course grade, and the other two are to assist the student in meeting course objectives. If a student cannot pass by the third examination, the student is not safe to pass Medications. If a student cannot pass Medications, he/she cannot meet the objectives of the course, and therefore, cannot pass the course regardless of whether the math is in the theory or clinical course or any other requirements or testing. If the student cannot pass the clinical course they must drop the corresponding theory course per BRN regulations.

**Testing and Examination Policy**

The University testing policy stipulates that no phones or other electronic devices, cameras, food or drink, papers, hats or backpacks can be taken into the examination area. In specific courses the faculty may have additional requirements. Talking during testing or sharing of information regarding the test questions is not allowed. Please review the policy for the complete list of testing requirements and the Academic Honor Code.

In courses with a computerized final examination, the student must attain at least 76% of the 80% of the combined examinations. After the student attains the 76% ) then the 20% formative
activities are added to calculate the final course grade. The student can attain 76% of the combined examinations and still be unsuccessful in the course if not attaining enough points from formative activities. See Evaluation Methods, Grading (Section IV) of individual syllabi for specific grading criteria.

During NURS 220, Integration of Nursing, the student must pass the national normed ATI Exit Exam. Students are given two (2) attempts to pass the final computerized examination. Also, to pass the course the student must maintain at least a 76% average overall on didactic examinations and non-didactic material (papers, presentations, etc.) according to the Evaluation Method.

Once the exam results are available, the students will be offered a test review. The student will be provided with a test copy (not applicable to ATI exams), answer sheet, and a copy of his or her Scranton, which must all be returned unchanged upon completion of review. No written or oral note or other forms of capturing the test information can be taken when a student reviews his or her exam. The school encourages students to review their test results as soon as the exam is completed. See Testing policy and Academic Honor Code in WCU catalog and/or Nursing Student Handbook.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Points</th>
<th>Nursing Numerical Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>4.0</td>
<td>91-100</td>
</tr>
<tr>
<td>B</td>
<td>3.0</td>
<td>84-90</td>
</tr>
<tr>
<td>C</td>
<td>2.0</td>
<td>76-83 (minimum passing grade)</td>
</tr>
<tr>
<td>D</td>
<td>1.0</td>
<td>64-75</td>
</tr>
<tr>
<td>F</td>
<td>0</td>
<td>63 and below</td>
</tr>
<tr>
<td>TC</td>
<td>N/A</td>
<td>Transfer Credit</td>
</tr>
<tr>
<td>W</td>
<td>N/A</td>
<td>Withdrawal</td>
</tr>
<tr>
<td>IN</td>
<td>N/A</td>
<td>Incomplete</td>
</tr>
<tr>
<td>CR</td>
<td>N/A</td>
<td>Credit (75 or higher)</td>
</tr>
<tr>
<td>NC</td>
<td>N/A</td>
<td>No Credit (74 or lower)</td>
</tr>
</tbody>
</table>

**Grading Scale**

**Grade Deficiencies**

A student with a fifth and seventh week theory or clinical grade of less than 76%:

1. Will receive notification from the instructor;
2. Is required to meet with the instructor to receive remediation;
3. May be required to enter into an academic contract regarding their performance for the remainder of the course;
4. May be subject to possible referral to the Dean or Associate Dean of Nursing for further counseling.

In addition:
Students who are in disagreement with their grade must first meet with the instructor and if this does not resolve the issue than the student can meet with the Dean of Nursing. See Catalog on Final course grade appeal policy.

Repeating Courses

1. Being dropped from a lecture course during the term requires that the concurrent clinical course be dropped also. Students may not continue in the concurrent clinical course per BRN regulations since the ability to learn and apply information is acquired from the theory course. If the student fails the theory/lecture course at the end of the term and successfully completed the clinical course, the student only needs to repeat the failed theory/lecture course.
2. Progression in the sequence of nursing courses will be permitted only after the dropped courses are repeated successfully.
3. After successfully repeating a nursing theory course, returning students will be allowed to continue in the successive theory course only if there is space available in the related concurrent clinical nursing course. If there are more students than spaces available for continuing the nursing courses, spaces in the class will be filled based on the out of sequence policy for program versus transfer students and then by random selection. The remaining students will be placed on the “Re-entry Waiting List”.
4. Regardless of the circumstances, those courses in which a student receives a “D” or an “F” grade may be repeated once only. Only two courses throughout the entire nursing program may be repeated (this includes all pre-nursing and nursing courses within the program).
   a. If a student earns a “D” or an “F” grade in a course, he/she may repeat the course once only.
   b. If a student is earning a “D” or an “F” grade at the time of withdrawal from a course prior to the drop deadline, the course may be repeated once only.
   c. During the repeat of the course, if the student drops prior to the drop deadline and is earning a “D” or an “F” grade, the student may not repeat the course again and may not continue in the program.
   d. During the repeat of a course, if the student is dropped by the Instructor due to absences prior to the drop deadline and is earning a “D” or an “F” grade, the student may not repeat the course again and may not continue in the program.
   e. All courses must be repeated in their entirety.
   f. A student may only fail two nursing courses after which they will be dismissed from the nursing program.

Re-Entry Policy

Please see the WCU School Catalog.

In addition:

1. Students must be in contact with the Dean of Nursing prior to dropping any nursing course.
2. Upon dropping a course or deferring enrollment, the student is strongly encouraged to re-enter within one term and follow the WCU policy on readmission to the university.
3. Re-entry students must wear the uniform currently being worn by the clinical group. If the College of Nursing changes uniforms while the student is gone they must use the new uniform with the class they are reentering.
4. RN-BSN or graduate students who drop a course which has been scheduled for them will put their stated graduation dates at risk.

Transfer Credits

Students must complete a minimum of 30 credits in residence of university required coursework into the Bachelors of Science Degree in Nursing program.

Of these units:
1. Up to 36 credits for the Bachelor Degree may be related to general education courses, such as English, Science, Communications, etc.
2. 8 credits for a LVN license are granted after successful completion of NURS 200 and 210L (grade of C (76%) or better).
   A student who obtained the LVN license but does not have a transcript to prove a 3.0 GPA for admission may apply for admission by taking and passing a LVN HESI Exit exam with a minimum raw score of 900.
3. Military personnel and LVN’s from other states or countries who obtained an LVN license and whose transcripts do not demonstrate a 3.0 GPA and also do not show evidence of maternity or pediatrics in their subjects taken during the nursing education must also take and pass the HESI LVN exit exam with a minimum raw score of 900. If attending the BSN program they must take Maternity and Pediatric NURS 206 and 216L as part of their nursing courses for the degree.
4. All credits must have been earned at a BPPE- (Bureau for Private Postsecondary Education) approved school or a school accredited by a national or regional accrediting body recognized by the United States Department of Education. Courses earned in foreign institutions will be evaluated using standards established by the National Council of Foreign Education Credentials or the California Board of Licensed Vocational Nursing.
5. Official transcripts from all previous institutions must be received by WCU for final transfer credit evaluation before being accepted into the nursing program and before starting any university course work. Copies of course descriptions/school catalogs and syllabi are also required for evaluation purposes. Applicants must submit a request for transfer credit prior to enrolling in the program. This request must be reviewed and signed by WCU’s Dean of Nursing prior to enrolling in the nursing program.
6. It is also advisable for students to keep a copy of all the syllabi, assignments, grades, books and other resource material and transcripts from the entire nursing program, general education and nursing courses, regardless of which school they were enrolled, for future records and assistance with transfer credits. This may be done as a supplement to their Professional Portfolio and/or can be electronically uploaded for future reference.
Challenge Credit

West Coast University has a policy of allowing students to “challenge” a course in some programs of study for which they have earned prior credit for but for which credit was not transferred in upon matriculation.

Challenge may be especially relevant for students whose prior academic experience with a particular course or subject area exceeds the University’s recency requirements, but who believe they are still current in the subject matter. To challenge a course, a student must submit a Challenge Exam Application Form to the Director of Student Services.

Students will only be allowed to take a challenge examination if they meet the general and program-specific criteria. If the request to challenge a course is approved, and the student passes the appropriate examination, it removes the course requirement from a student’s program of study. If the challenge examination is not successfully passed, the student must enroll and complete the course.

The student must declare which courses he/she would like to challenge and must gain approval from the program’s academic administration. Each program has its own unique requirements and deadlines for submitting an application to take a challenge examination. For further information pertaining to each program’s challenge exam requirements, see the program-specific information found in the Catalog.

Students may not apply for a challenge exam for courses in which they are currently enrolled or have previously taken at West Coast University. A course may be challenged only one time. Each program has established its own passing grade requirements for challenge exams, and no more than twelve (12) semester credits may be earned through challenge examinations.

Credits earned through challenge examinations do not count towards the in-residence requirements or towards a student’s cumulative grade point average (CGPA). In addition, a student’s financial aid may be affected if challenge credit is received; therefore students considering challenging a course should consult with their campus Financial Aid officer on the impact of doing so.

A non-refundable fee of $100 will be charged per exam ($500 for all nursing clinical course challenge exams). The fee must be paid prior to the exam and is not included as part of the student’s financial aid package.

The University’s decision on a student’s eligibility to take a specific challenge exam is final and may not be appealed. If a student achieves credit by successfully challenging a course and passing the challenge exam, no guarantee is made that the student will advance his or her degree completion date. Degree acceleration will be based on programmatic space availability.
Nursing Challenge Exam Additional Requirements
Additional Nursing-specific requirements include the following:

1. Students must be accepted into the nursing program in order to challenge a nursing course.
2. Students may not challenge a nursing course where there is evidence that a similar nursing course has been taken in the past for which the grade received was below a C.
3. Students who want to attempt a challenge examination for a clinical course must first: 1) transfer in credit for the related theory course or 2) pass the theory course challenge test prior to attempting the clinical challenge examination.
4. Students must satisfactorily meet all prerequisites of any courses prior to taking the challenge examination.
5. Students who attempt and did not pass a lower level nursing course with a clinical component may not challenge a higher level nursing course with a clinical component.
6. Challenge examinations for pre-licensure courses include HESI, ATI or other similar standardized computer examinations. The grade necessary to pass is outlined in the associated course syllabus.
   a. Students should acquaint themselves with the syllabus requirements for any course they wish to challenge.
   b. Nursing students must complete any NURS designated challenge examinations within the first two terms of entering the first nursing (core) course.
   c. Students must first successfully pass the challenged course prior to being allowed to enroll in a course that has this course as a pre/co-requisite.
   d. Students, who are unable to successfully challenge the requested course by the start date of that course, must enroll in the course.
   e. Students who wish to challenge a course must submit their application at least 4 weeks prior to the time when they would like to take the exam.
7. Additional information may be required prior to scheduling a challenge examination for clinical courses, such as immunization status, health records, background check, drug screening, fire & BLS cards (i.e.-Clinical packet information).

Nursing Transfer Credit Evaluation: With respect to the currency of the credit being considered, all Science course(s) must have been taken within the last five calendar years, unless the student possesses a degree or advanced degree in the specific field of study for which the student is seeking transfer credit. For nursing credits to be considered for transfer credit, there can be only one year between the end of the last nursing course taken at a previous institution and the beginning of the first course at West Coast University. The student must be listed in good standing with the prior institution.

Pregnancy and Sick Leave

Pregnancy Leave - Antepartum
1. A written clearance from a physician, nurse practitioner, or certified nursing midwife should be submitted to the Campus Dean of Nursing. This must be done within the first
trimester of pregnancy. The letter must indicate that the student is able to function at the full and essential RN level of practice as outlined in the ADA Registered Nurse Essential Job Functions. The specific school form must be signed by the physician, nurse practitioner, or certified nurse midwife.

2. The student may remain active in the nursing program with health provider clearance until she delivers, provided she is able to meet all the weekly clinical laboratory objectives and her attendance is satisfactory.

3. The student should notify the clinical instructor as soon as pregnancy is suspected. Some scheduled observational experience may need to be eliminated for her safety.

Pregnancy Leave - Postpartum
1. The student may return no sooner than one week postpartum.
2. The student must present a written clearance that she can perform the full duties of an RN, from her attending physician, nurse practitioner or certified nurse midwife. The specific school form must be submitted and signed by the physician, nurse practitioner or certified nurse midwife. This should be submitted to the Campus Dean of Nursing.
3. The maximum absence college policy will apply.
4. Lactating students must arrange for a suitable time and private place to expel breast milk. Children are not allowed in the classroom or clinical areas.

Extended Sick Leave - Post Surgery and/or Extended Illness
1. A student must present a written clearance from a physician to the Campus Dean of Nursing on the specialized forms from the university. The physician must certify that the student is able to perform all of the Essential Functions of a Registered Nurse prior to reentry.
2. The student must be able to meet all weekly objectives to remain in good standing in the program.
3. The maximum absence college policy will apply.
4. The clearance letter from the physician, NP or CNM must state that the student is able to return to the full and essential RN level of functioning as outlined in the ADA Registered Nursing Essential Job Functions.

Patients with Communicable Disease

Statement of Delivery of Health Care to Patients with Communicable Disease
1. The faculty members of the WEST COAST UNIVERSITY Nursing Program support the right of all consumers of healthcare to receive dignified healthcare as set forth in the California Administrative Code, Sections 1443.5.
2. The faculty also supports the right of the nurse to know the patient’s diagnosis/suspected diagnosis in a timely fashion in order to make an appropriate nursing care plan and to take necessary precautions to minimize the risk of contracting or spreading disease.
3. Although the nurse is not expected to take life threatening risks in caring for clients, it is not acceptable to abandon any client based on age, religion, gender, ethnicity,
diagnosis or sexual orientation. Decisions regarding the degree of risk involved in client care should be based on current scientific knowledge.

4. The latest information on issues related to communicable disease is available from the U.S. Centers for Disease Control and from agencies in the State Department of Health Services and County and City Health Agencies.

Evaluation and Grading System

Student Evaluation

1. At the beginning of each term, the student is given a course syllabus with specific objectives and expected outcomes. Requirements and assignments will be specified. In addition, the system of grading will be clearly defined on a percentage basis. In the clinical area, students will have a copy of the clinical evaluation tool they are to use to evaluate their progress and will receive periodic evaluations of their performance based on this tool. The location of the evaluation conferences will be arranged at the discretion of the instructor.

2. Evaluations are very important tools to assess student progress in the program. The student signature on the evaluation does not imply agreement, but rather indicates that the student has reviewed the evaluation. If the student does not sign the evaluation form, the faculty will duly note such on the form where the signature would have occurred.

Course and Program Evaluation

1. Course Evaluation – The evaluation process is valuable for use by the instructor in developing curriculum, course outlines, and improving instruction. These are provided for each course and will be given to the students for completion at the end of each course. They are also a part of the continuing accreditation process for the program and the university.

2. Program Evaluation – Program evaluation occurs periodically and students are requested to actively participate in that process. Graduates of the nursing program will be sent program evaluation forms approximately once a year. It is important that these forms be completed and returned. This information is used for the improvement of the nursing program. They are also a part of the continuing accreditation process for the program and the university.

Graduation Requirements

In order to be considered a graduate of WEST COAST UNIVERSITY and take the NCLEX-RN as a graduate, the Board of Registered Nursing (BRN) requires that the student completes ALL courses required for graduation and NOT just the nursing courses. If you take the NCLEX-RN before completing the courses for graduation, the BRN will either not release the results or will always consider you a non-graduate even if you complete the courses at a later date. This is an important distinction because if you should ever move to another state, that state may not issue a license to practice in the state if the BRN has you listed as a non-graduate. Furthermore,
if you do not complete all the courses necessary for graduation, you cannot put on an employment application that you are a WEST COAST UNIVERSITY graduate. The BRN will not release your licensing information until they receive your transcript and the schools forms indicating you have completed all required courses. If you do not complete all the courses you may also have difficulty moving on for any advanced degree in nursing or other subjects since you have not earned your degree. Some employers will not hire someone who is not a graduate.

**Student Complaint/Grievance Procedure**

Students with complaints/grievances relating to classroom or other matters are encouraged to do the following:

1. Discuss the issue with their instructor. Every attempt should be made by both the student and faculty member to resolve the matter at this level.
2. If it is not resolved at the instructor level, unresolved complaints/grievances should be submitted in writing to the Academic Dean or appropriate academic administrator for the program of enrollment.

A thorough review of the grievance and faculty response, as well as any additional information will be conducted. A written response will be provided to the student within 10 days of receiving the grievance.

If dissatisfied with the response or solution, a nursing student should follow the steps below:

**Level 1:** Contact the Executive Director of your respective campus. If dissatisfied with the response or solution, go to the next level.

**Level 2:** Contact the Dean of the College of Nursing for WEST COAST UNIVERSITY. If dissatisfied with the response or solution, go to the next level.

**Level 3:** Contact the Provost of WEST COAST UNIVERSITY.

If a student does not feel that the University has adequately addressed a complaint or concern, the student may consider contacting:

**Bureau for Private Postsecondary Education**

P.O. Box 980818
West Sacramento, CA 95798
1-800-952-5210
www.bppe.ca.gov

**Accrediting Council for Independent Colleges and Schools (ACICS)**

750 First Street, NE
Suite 980
Washington, DC 20002
(202) 336-6780
www.acics.org

If a Nursing student does not feel that the University has adequately addressed a complaint or concern, the student may consider contacting the following respective agencies:
Nursing Skills Laboratory

The nursing skills laboratory, the Simulation Center, the library and the computer classrooms and study areas are all available for student use. Students are encouraged to use the laboratory to reinforce and update specific nursing skills, request tutoring, practice skills, and use the computers for test taking skills and content skills learning. Please contact the Nursing Skills Resource Assistant and the skills lab faculty for laboratory hours. The computers throughout the campus are also available with many simulations and review of skills and course content.

Student Rights

Students have the right to:

1. Have access to their educational records according to the Family Educational Rights and Privacy Act (FERPA). The University will not release the records to anyone who is not designated by the student to receive them, except as provided by law itself and as outlined in the release of information the students must sign in order to obtain clinical placement or financial aid.
2. Explanation of entries in their educational records.
3. Challenge contents in their educational records.
4. Use the University’s appeal and grievance procedure as indicated in the WCU catalog.
5. During the first class session of the course, be given written information detailing course assignments, expectations, grading system, and pertinent schedules.
6. General advisement as well as assistance with course work from their instructors.
7. Offer constructive input regarding the instructional process and overall program curriculum.
8. Prompt verbal and written notice of unacceptable and/or unsafe behaviors as a student nurse that includes suggestions for resolution of related problems.
Educational Program Standards and Progress
Efforts shall be made to maintain high standards for educational programs to ensure that students will meet requirements for the occupations for which they are preparing. This includes a commitment to provide adequate facilities and materials and qualified instructional personnel, as well as administrative support and supervision.

Likewise, students are expected to maintain established performance standards. Failure to do so jeopardizes their right to continuing attendance. Students are to be kept informed relative to their educational performance and progress.

Student Assistance

Policy Statement
The WEST COAST UNIVERSITY Nursing Program recognizes that student nurses affected by mental illness, alcoholism, and drug abuse are faced with personal problems that can readily result in serious, disruptive, and dysfunctional consequences to the individuals and their families. Mental illnesses and addictive processes of any nature are regarded as disease and require therapeutic interventions and appropriate regimens to achieve a state of recovery.

In such cases, it is the responsibility of the student nurse voluntarily to seek assessment, diagnosis, and treatment for suspected illness. Confidentiality must be ensured in every aspect of intervention, assessment, diagnosis, and treatment.

Instructors have the responsibility and authority to take immediate corrective action with regard to a student nurse’s conduct and performance in the classroom and clinical setting.

For patient safety, the student will, when deemed appropriate by the Dean of Nursing, not only make contact with a university resource person, but sign a form that allows the Dean to have contact with the agency to ensure that the student is being seen by a counselor. The safety of our patients is important, and it is imperative that we do nothing to compromise patient safety.

Guidelines

Definitions
Personal problems or mental illness includes psychological, physical, or chemical dependency illnesses, and legal, financial, marital or other types of problems that definitely and repeatedly interfere with the student’s academic performance.

Academic Performance
The Nursing Program is concerned with academic and clinical performance which includes the student’s class attendance continued progress towards program completion, conduct and reliability during scheduled class and clinical assignments. It is the responsibility of the
instructor evidencing substandard academic and clinical performance to seek to remedy the situation and make recommendations for the student to bring his/her performance up to standard. If it appears that the student’s academic and clinical performance is being negatively influenced by a personal or emotional problem, and if after every alternative measure to deal with the substandard performance fails to improve the performance, the student will be sent to the Dean of Nursing for follow up and resolution.

Procedures
1. At all times, it is the prerogative of the student nurse to accept or reject referral and/or treatment. If the student elects to reject referral and/or treatment, it becomes the responsibility of the student to bring his/her performance up to standard or face such academic action as may be appropriate. If the student nurse elects to accept referral and/or treatment, this fact will be regarded in the same manner as treatment for any illness. Upon completion of the treatment, it will be the student nurse’s responsibility to achieve and maintain standard performance.

2. The Nursing Program recognizes that a students’ academic and clinical performance can be adversely affected by the stresses resulting from personal or emotional problems of family members and loved ones. Accordingly, assistance under WCU Psychological Services is available to any student experiencing such a problem.

Role of Instructors and Administrative Staff
Motivation to accept treatment or counseling is the first phase of restoring a student to an acceptable level of academic and clinical performance. The instructors and administrative staff are an integral link in the helping process of the troubled student nurse. Instructors and administrative staff have more opportunity to consistently and objectively observe the student’s behavior and performance academically and clinically, and therefore, can identify a negative change in behavior. Consistent with assigned duties, instructors and department personnel are responsible for focusing on academic and clinical performance and not for diagnosing personal problems. Just as nurses are not asked to make a medical diagnosis of physical illness, instructors and administrative staff are not asked to diagnose personal problems such as mental illness and substance abuse. They are responsible for evaluating academic and clinical performance and accurately and completely documenting performance behaviors. When the quality of performance declines, the responsibility of the instructor is to plan and conduct all appropriate interventions.

When all the usual methods do not correct the problems and when it seems likely that the poor performance is caused by a personal problem, psychological service offers a positive alternative.

Instructional personnel do not need therapeutic or diagnostic skills concerning personal problems. They do, however, need skills of objective observation, documentation, problem solving, discipline, and referral to psychological services.
Appendix A - Personal Education Plan (PEP)

See the sample calendar below. Complete it each week. Put such a calendar in your day book or electronic calendar. Post important days, tests, and projects in multiple places.

I. Prepare for the Student Role
   a. Overcoming Barriers
      i. What were your strengths that you could share with the class based on your experiences?
      ii. Identify potential barriers you anticipate and your plan to overcome these barriers.
      iii. Develop your own personal educational schedule and stick to it.
   b. Your own Private Secure Study Space
      i. Prepare a study space that is just for you with signs that say “Studying in Progress” “DO NOT DISTURB”.
      ii. You will need a secure surface space where you can organize your books, papers, computer and projects so no one else will disturb that space.
      iii. You will need a computer with internet access, and word processing, spread sheet and visual presentation software like MS Office.
      iv. The space needs to be separated by a door or other physical barrier so you can have the environment you need to read your books, study, write your papers and concentrate on learning everything outlined in your various course syllabi.
      v. The space needs to have some security to it so the “dog won’t eat the homework” or some other version of that old story.
   c. Preparing for Computerized Exams
      i. List the areas on campus or off campus where you or your study partners can meet to review for the exams.
      ii. Take the computerized exams available through HESI, ATI, or NCLEX RN resources to identify areas or topics that need improvement.
      iii. Write the dates, times and places to meet with your study partners to review areas/topics that need improvement.
   d. Developing Student Success Strategies
      i. Write all the resources you have available to be utilized. Name computer programs, CDs, DVDs, review books and textbooks.
ii. Write the traits/characteristics and roles of mentors and study groups that will enhance your success in passing the computerized finals.

e. Time Management  
   i. Write your action plan for effective time management as you develop your plan. (In summary, how are you going to manage each week of each term)?  
   ii. Develop a weekly calendar indicating course assignments and study times. See sample PEP below.

f. Family  
   i. Inform your family and friends of your new schedule and that you may not be able to join in all the various events you have in the past.  
   ii. If you liked to party a lot, curtail it. If you coached little league you may need to stop until you finish school. If you were part of church group activities inform them of your new responsibilities and ask for their assistance in helping you succeed.  
   iii. Work with your family for them to take on new responsibilities for activities you use to do and can no longer contribute given your new schedule and responsibilities.  
   iv. Teach each of them what they need to do and why and then let them learn to do it their way.  
   v. Resist getting pulled into doing the same old thing because it is easier for you to “just do it”.  
   vi. Resist getting pulled into being the chauffer because the kids or family or friends asked you to. This is especially true if you are doing on line classes. If they see you at home they may think you are free to do their work or take them places (hence the need for the door and the do not disturb sign).

II. Sailing to Success in the Nursing Program  
   a. Participate in the Sailing to Success Nursing program. It is a comprehensive student mentoring enrichment program for West Coast University nursing students.
## Personal Education Plan

### Sample Calendar:

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sun</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
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<tr>
<td><strong>Sleep - 8hr/day</strong></td>
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<td><strong>Personal Care Time-ADL</strong></td>
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<td><strong>Eating, Food Preparation and Clean Up</strong></td>
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<td>for 3 meals plus snacks for self and family</td>
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<td><strong>Maintenance of Home, Car, Landscape, Environment, etc.</strong></td>
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<td><strong>Shopping, Errands for Self and Family</strong></td>
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<td><strong>Care of Family, friend, pet Responsibilities</strong></td>
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<td><strong>Travel Time</strong></td>
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<td>For school, family, car pool, work and personal needs in LA about 2-3 hrs/day</td>
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<td><strong>Individual Study Time</strong></td>
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<td>3hrs study for each hour of theory class 2 hr study/prep time for each clinical class</td>
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<td><strong>Class Time</strong></td>
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<td><strong>Lab or Clinical Time</strong></td>
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<td><strong>Study Group Time</strong></td>
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<td>Plan at least 15 minutes of fun time/day or 1-2 hrs/wk</td>
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<td>Research shows if you work more than 20 hrs per week you have a high chance of</td>
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failing in a nursing program
Appendix B – NCLEX-RN Preparation

Integration of Nursing Concepts NURS 220 will help with NCLEX-RN Preparation

- LVN NCLEX 3500 test bank for preparation for NURS 200 final.
- RN NCLEX 4000, test bank of questions.
- HESI practice tests www.hesitest.com and EVOLVE website.
- HESI case studies.
- HESI review book and CD ROM with practice tests.
- Computer programs – simulations and case studies.
- ATI online review and tutoring, DVD’s and unproctored tests on-line at www.atitesting.com.
- Three-day HESI review course in preparation for the NCLEX-RN.
- Kaplan review course and book which includes the diagnostic and readiness testing.
- Virtual ATI to help with NCLEX-RN preparation.

Other NCLEX-RN review resources available include sites listed on the California Board of Registered Nursing website: www.rn.ca.gov/schools/nclexreview.htm.

The National Council of State Boards of Nursing also has an on-line course that is very good. http://www.learningext.com.
Appendix C – Student Nurse Clinical Packet

NOTICE:
The following documents are required prior to attending clinical orientation. It is imperative the required information is collected ASAP. Make appointments immediately in order to gather the required documents in a timely manner.

Completion of the CLINICAL PACKET is mandatory. Packets are part of the first Nursing Lab course and are due on the first day of class. This assignment counts toward 20% of the grade. An incomplete packet jeopardizes continuation in the program.

IMPORTANT: Make Two Copies of ALL Documents collected.

1. Please place one complete set of original documents in a RED folder provided, and a complete set of copies in a BLUE folder.

2. The BLUE folder will be retained by WCU and be used to provide needed documentation to health care facilities.

3. The RED folder shall contain original documents and be kept with student. This folder shall be kept with the student at all times during clinical and will be the needed proof provided to clinical instructor and agency if and when questions arise.

CLINICAL PACKET DUE DATE: _____________
Clinical Packet Instructions

1. Instructor
   A. The follow-up instructor for this course is: ____________________________
   
   B. Appointments with instructor are by arrangement only (please email for appointment or questions).

2. Student ID badge
   A. Please contact Student Services for a photo ID badge if you do not already have one.
   B. Place copy of ID badge to be included in red and blue folders.

3. Drug Screening
   A. Only US HealthWorks can provide this service.
   B. You CAN use any US HealthWorks nearest you that provides the tests you need, remember to present them with the HealthWorks Authorization form.
   C. To find the closest site go to: www.ushealthworks.com/findClinic/regionResults.asp?RegionID=1
   D. Follow Directions on the HealthWorks Authorization form in this packet.
   E. Take the HealthWorks Authorization form from this packet along with a photo ID.
   F. WEST COAST UNIVERSITY pays for drug screening service ONLY.
   G. Sometimes there is a wait period for this service, if you sign-in and then leave the test site, your drug screening automatically becomes a positive test.
   H. You must obtain a receipt of testing when you’ve completed the test, to submit as evidence of completed testing with your clinical packet.

4. Student Malpractice Insurance
   A. Log onto www.nso.com and follow the directions.
   B. The certificate must read ‘REGISTERED NURSE STUDENT’.
   C. The certificate must be current at time of submission, and remain current through the length of the program.

5. Background Checks (FYI only)
   A. Fill out the form provided (not included in this package) – we do the rest.
   B. Background checks will be submitted during the first week of the 5th term.
   C. Student’s will not be allowed in clinical without this required information.
   D. If you have any criminal history or concerns regarding criminal background checks, please discuss with the Deans of Nursing.

6. BLS (CPR) Card
   A. American Heart Association professional health care provider card is the ONLY.
   B. Accepted BLS card its certification is valid for 2 years. No “Heart saver” courses.
   C. The only acceptable version is the ‘professional health care provider’ course.
   D. The card must always be kept current- and always renewed within one month prior to expiration date.
E. **Online BLS courses/cards are not accepted.**

7. **Fire Card**
   A. Students using Los Angeles area clinical facilities are required to submit a FIRE CARD – Check with your location to determine if your location requires a fire card.
   B. The Director of Student Services posts Fire Safety Classes (check elevator in LA).
   C. Student’s must attend the session offered or bring proof of an acceptable class prior to.
   D. The start of the offered fire safety class.
   E. The card must always be kept current – and renewed within one month prior to the expiration date.
   F. **Online Fire Card courses/cards are NOT accepted.**
   G. Cost for the fire course is $25.00 cash.

8. **Immunizations & Immunity Status**
   A. Retain all originals in RED folder, place complete set of copies in BLUE folder.
   B. Copies of immunization cards, flow sheets, or computer printouts from the health care providers’ offices are the only documents accepted.
   C. Prescription pad statements are NOT accepted.
   D. The following are required:

   ➢ **MMR - * 2 doses required/ 1 dose or titer within the last 5 years**
     Immunization: Mumps: evidence of 2 doses required or titer showing immunity.
     Rubella: evidence of 2 doses required or titer showing immunity.
     Rubeola: evidence of 2 doses required or titer showing immunity.
     Immunity: If no documented proof of immunization, titers (IgG) will be required for each Mumps, Rubella, and Rubeola.

   ➢ **Tetanus “Td”* (see Tdap below)**
     Immunization: Only an immunization is accepted within the last 10 years and must not be allowed to expire while in the program.

   ➢ **Tdap (*in place of TD)**
     Immunization: **Adults 19 through 64 years of age** should substitute Tdap for one booster dose of Td. Td should be used for later booster doses.
     Adults who expect to have close contact with an infant younger than 12 months of age should get a dose of Tdap. Waiting at least 2 years since the last dose of Td is suggested, but not required.
Healthcare workers who have direct patient contact in hospitals or clinics should get a dose of Tdap. A 2-year interval since the last Td is suggested, but not required. (2008 CDC)

- **Varicella (Chicken Pox)**
  - Immunization: No documentation of disease or immunization is accepted
  - Immunity: Only a titer is accepted.
  - If a titer does not show evidence of protection, immunization should be given followed by a titer.

- **Hepatitis B**
  - Immunization: Completed or partially completed series is accepted. If partially completed you will need to complete the waiver form.
  - Immunity: Proof of immunity via a titer is accepted. For personal safety, it is strongly recommended that students obtain a Hepatitis B titer so that they are fully aware of protection status.
  - Waiver: Student’s may decline this immunization by signing the waiver form included in this packet.

  **Note:** Students must sign the top signature of the form AND the second or third line if they apply. See Student Statement regarding Hepatitis B, Blood Borne Pathogens and Influenza mandatory signature sheet.

- **Tuberculosis “TB” (PPD)**
  - Students must provide proof that they have had a negative skin TB test within the last 6 months.
  - If student has **NOT a negative skin TB test within the last 6 months student must COMPLETE a 2-STEP TB screening.**
  - A 2-step TB procedure test occurs when two PPD’s are done 10 days apart and both ‘results’ are negative. (Website and printed information included in packet).
  - Students will be required to provide a negative skin TB test **EVERY 6 months throughout the remainder of the program.**
  - If student tests positive or has tested positive in the past, student will need to provide a chest X-Ray report indicating no evidence of disease along with a health care provider note stating that student is free from disease. This “proof” must be completed within 3 months of enrollment in to the 5th term and each 12 months thereafter.

- **Influenza**
  - Immunization: Annual influenza ‘flu shot’ is recommended by the CDC.
  - Waiver: You may decline this immunization by signing the waver form included in this packet.
Note: All students must sign the top signature of the form AND the second or third line if they apply. See page 10.

9. Health Examination Form
   A. Only the form supplied in this packet is acceptable.
   B. Please have the health care provider sign BOTH areas of the form.
   C. Provider must be a licensed physician, physician’s assistant, nurse midwife or nurse practitioner.
   D. Please assemble a list of immunizations or other tests needed to fulfill this requirement PRIOR to going to appointment.
   E. This packet includes a letter that may be given to the health care provider.

10. Further Information:
    A. Tuberculosis and two-step TB tuberculin skin testing
        http://www.osha.gov/SLTC/tuberculosis/
        http://www.nationaltbcenter.edu/abouttb/tbcontrol_faqss/1_why_perform_2step_tst.pdf
        http://www.cedars-sinai.edu/6990.html?gclid=Coyo1YzRtpQCFROA1QodijGwTQ
    B. Hepatitis B Vaccine and blood borne pathogens
        http://www.emedicinehealth.com/hepatitis_b/article_em.htm
    C. Varicella (Chicken Pox)
    D. Tdap
    E. Influenza
        http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e717a1.htm
    F. Vaccines
        http://www.cdc.gov/vaccines/
    G. Professional Liability Insurance
        http://www.nso.com/
Two Step TB Testing Required By OSHA AND CDC

U.S. Department of Labor

Occupational Safety & Health Administration
www.osha.gov
Federal Registers
Occupational Exposure to Tuberculosis; Proposed Rule - 62:54159-54309

Federal Registers - Table of Contents

- Publication Date: 10/17/1997
- Publication Type: Final Rules
- Fed Register #: 62:54159-54309
- Standard Number: 1910; 1904; 1926.62; 1960

DEPARTMENT OF LABOR
Occupational Safety and Health Administration
29 CFR Part 1910
[Docket No. H-371]
RIN 1218-AB46

Occupational Exposure to Tuberculosis

AGENCY: Occupational Safety and Health Administration (OSHA), Labor

ACTION: Proposed rule and notice of public hearing.

With regard to two-step testing, both OSHA and CDC require or recommend two-step testing at the time baseline skin testing is administered. Also, both OSHA and CDC add that two-step testing is not necessary if the employee has had a documented negative skin test within the last 12 months. CDC is different from OSHA in that its Guidelines imply that two-step testing can be discontinued if there is evidence of a low frequency of boosting in the facility. OSHA's proposed standard does not allow such an exemption, i.e., for each employee who must have a baseline skin test at the time of the initial medical examination, the skin test must include a two-step test unless the employee has a documented negative test within the last 12 months, regardless of the frequency of boosting in the facility. The value of two-step skin testing is that it enables one to distinguish true conversions from boosted reactions. OSHA believes that this is important to know for each employee because if the employee is incorrectly identified as having converted, he or she may needlessly be subjected to preventive therapy that may have toxic side effects of its own. Since it is important to know the true skin test status for each employee, OSHA has preliminarily concluded that it is inappropriate to allow the overall frequency of boosting among employees in a facility to dictate whether any one employee receives two-step testing at the time of his or her baseline testing.

College of Nursing Student
Drug Screen Authorization Form

Please accept this as an authorization to conduct a drug screen on the following student listed below:

Student Name: ________________________________________________________
(Print first and last name)

WCU Student ID#: ______________________________________________________

Test to be performed: 10 Panel DSP with Urine Alcohol Screen
Reason for test: Pre-clinical assignment

Note: Individual campus forms include the account number.

_________________________________________  __________________________
WCU representative authorization  Date

University contact:

Los Angeles Campus
Clinical Coordinator
12215 Victory Blvd
No. Hollywood, CA 91606
Phone: (818) 299-5518
Fax: (818) 299-5545

Orange County Campus
Associate Dean of Nursing
1477 S. Manchester Ave.
Anaheim, CA 92802
Phone: (714) 782-1700
Fax: (714) 533-8742

Inland Empire
Associate Dean of Nursing
and/or Clinical Coordinator
2855 E. Guasti Rd.
Ontario, CA 91761
Phone: (909) 467-6100
Fax: (909) 467-6102

Nursing student instructions:

1. Proceed to a collection site.
2. Bring Picture ID to collection site.
3. Arrive at collection site at least one hour before closing time.
   (It may take more than one or two hours.)

To locate a site near you (make sure they do drug and alcohol testing):

www.ushealthworks.com/findClinic/regionResults.asp?RegionID=1
Dear Healthcare Provider:

The student bearing this letter is enrolled in our University. He/She needs several items in order to be allowed into the health care facility. “Clinical” is an important part of their educational program and our students cannot attend without it.

I. Health Examination Form

Please complete your exam and document on the form provided. Please sign both signature areas and place your office/clinic stamp on the form.

II. Accepted proof of immunization/immunity

<table>
<thead>
<tr>
<th>Disease/Immunization</th>
<th>Proof of Immunization on Immunization Card is accepted</th>
<th>Proof of Immunity (Titer) Copy Lab test accepted</th>
</tr>
</thead>
<tbody>
<tr>
<td>MMR</td>
<td>Proof of 2 immunizations required or titer * ONE within the last 5 years</td>
<td>(OR) Rubella IgG AND Rubeola IgG AND Mumps IgG</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Series recommended (0M, 1M, 6M) with titer</td>
<td>Series with Anti-HBs (Hepatitis B surface antibody) titer RECOMMENDED</td>
</tr>
<tr>
<td>Tetanus</td>
<td>Must be current * w/in last 10 yrs.</td>
<td>None accepted</td>
</tr>
<tr>
<td>Tdap</td>
<td>One dose in place of 1 TD booster in adulthood CDC recommended.</td>
<td>None Accepted</td>
</tr>
<tr>
<td>Varicella</td>
<td>Not accepted – if student not immune – please start series</td>
<td>Must be a titer Herpes Zoster IgG</td>
</tr>
<tr>
<td>Influenza</td>
<td>Annual immunization recommended by CDC</td>
<td>Record of immunization recommended</td>
</tr>
<tr>
<td></td>
<td>Must decline if refused</td>
<td>Must decline if refused</td>
</tr>
<tr>
<td>TB screening</td>
<td>Our hospitals REQUIRE a 2- step series for those students who have not have a negative test within the last 6 months.</td>
<td>If test is positive, please follow protocol for chest x-ray</td>
</tr>
</tbody>
</table>

Recommended procedure for a 2-step PPD (TB) test:
1) Perform skin test
2) If test is negative, repeat test in 7 – 10 days and provide test results
3) If test is positive, need to have a chest x-ray.

Thank you in advance for your cooperation.
Health Examination Form

Each nursing student must have a licensed M.D., N.P., C.N.M., or P.A. complete the form below and document that you are able to fulfill the ESSENTIAL JOB FUNCTIONS of an R.N. listed on the next page.

Student name: __________________________ Birth Date: ______________

SS# __________________

Gender: male ____ female ____ Height __________ Weight __________
Vital Signs: B/P _____/_____ Pulse ____ Respiratory rate _____ Temperature ______
Vision OS: _________ OD: _______ OU: _______ Hearing R: _______ L: _______

<table>
<thead>
<tr>
<th>System</th>
<th>Function WNL</th>
<th>Ability to Perform</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
<td></td>
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<tr>
<td>HEENT</td>
<td></td>
<td></td>
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<tr>
<td>CV</td>
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<td>Pulmonary</td>
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<td>GI</td>
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<td>GU</td>
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<tr>
<td>Neurological</td>
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<tr>
<td>Integument</td>
<td></td>
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<tr>
<td>Musculoskeletal</td>
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<td></td>
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<tr>
<td>Immune system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endocrine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Provider’s Signature: ____________________________
Print Name: ____________________________
Date: ____________________________

Office/Clinic Stamp
Dear Health Care Provider,

Below is a list of essential job functions that the student **MUST** be able to execute in order to perform successfully in the role of a registered nurse. By signing below you acknowledge that to the best of your knowledge, there are no reasons you are aware that would prohibit a student from accomplishing any of the following functions within normal expectations. Attach comments if any. Thank you.

Signature: ___________________________ Date: __________________

Printed name or stamp: _______________________

**Work hours:**
1. Must be able to work at various clinical sits, including the hospital, at least 8-12 hours per day two days per week.
2. Must be able to attend the nursing and other college theory classes on additional 1-3 days per week.
3. Must be able to take theory and clinical classes lasting as much as 12 hours per day.

**Physical demands:**
1. Must be medically cleared to complete all physical demands required of a registered nurse in a health care setting.
2. Must be able to use all physical senses, i.e., seeing hearing, feeling, smelling in a manner that allows the nurse to be able to accurately assess the patient and clinical situation.
3. Must be able to use fine motor skills of the hands to carry out clinical procedures accurately and safely.
4. Must be able to operate carried medical equipment.
5. Must be able to perform such duties as, but not limited to:
   a. Transfer patients of various sizes and weights into onto and out of bed, chairs, stretchers and other surfaces.
   b. Lifting at least 20 pounds.
   c. Maneuvering, pulling, pushing, lifting and turning of patients in awkward positions.
   d. Performing related tasks which require the use of hands, arms, shoulders, legs and feet.
   e. Participating in work related activities that require extensive bending, kneeling, and crouching, stooping, standing and critical movements.

**Work Environment:**
1. Must be able to recognize potential risks in health care settings which require the wearing of safety equipment such as masks, head coverings, glasses, latex or non-latex gloves, shoe coverings, etc.
2. Must be able to meet hospital and college performance standards
3. Must be able to travel to and from academic and clinical training sites.

**Cognitive Abilities:**
1. Must be able to understand and work from written and verbal orders.
2. Must possess problem solving skills
3. Must possess effective verbal and written communication skills in English sufficient to safely work in academic and clinical settings.
4. Must possess technical competency.
5. Must be in a functional state of mental health.
6. Must not have any disability that would interfere with cognitive, physical or sensate ability to function safely in patient care (nursing) situations.
7. Must possess the ability to adapt quickly to changes renascent of the health care environment.
Student Statement regarding Hepatitis B, Blood Borne Pathogens and Influenza

I understand that as a nursing student I will potentially be exposed to blood borne pathogens or other potentially infectious materials (OPIM), and that I may be at risk of acquiring the Hepatitis B Virus (HBV) infection or other potentially dangerous diseases such as influenza as an occupational hazard.

I further understand that while I am in process of receiving the series of vaccine injections for Hepatitis B, I may not be fully protected against the disease and may continue to be at risk for the Hepatitis B Virus. I also recognize that completing the Hepatitis B series also does not guarantee my immunity from the disease, and that only by obtaining a titer can this be determined.

I also understand that it is my right to decline the Hepatitis B vaccination series at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials, and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at any time.

WEST COAST UNIVERSITY strongly urges you to use precautions when dealing with potentially infectious materials and to obtain a Hepatitis B immunization series followed by a titer to determine whether you are protected from the disease.

By choosing nursing as a career path, I acknowledge my risk of exposure to blood borne pathogens and other potentially infectious materials such as the influenza virus and accept full responsibility.

Student signature: ___________________________ Date: ________________

Printed Name: ______________________________

I have completed the Hepatitis B series or am in the process of completing the series and accept that this does not guarantee me immunity from the disease.

Student signature: ___________________________ Date: ________________

Printed Name: ______________________________

I decline the ☐ Hepatitis B series and/or the ☐ influenza immunization at this time and accept this risk to my health. (Please check appropriate boxes).

Student signature: ___________________________ Date: ________________

Printed Name: ______________________________
Clinical Packet Submission Form

- Submit this completed form (Blue folder) with copies of all listed items.
- Show originals to instructor. Maintain originals and a copy of all listed items at home. (Red Folder)
- **ALWAYS** bring your Red Folder on the first day of each clinical rotation.
- Clinical packet submitted on due date will be scored (a total of 20% of Lab grade)
- Submission Form Complete (10%)
- Copies of all required forms (10%)

<table>
<thead>
<tr>
<th>Item (point value)</th>
<th>Description</th>
<th>Dates MM/DD/YY</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>ID Badge (5)</td>
<td>WCU ID badge (enter ID badge # below)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Exam (10)</td>
<td>Page 1 &amp; 2 signed, dated and stamped</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug Screen (5)</td>
<td>From HealthWorks only</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MMR (5) (2 needed)</td>
<td>MMR Immunization (latest immunization)</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Rubeola (Measles) Titer (IgG)</td>
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<td></td>
<td>Mumps Titer</td>
<td></td>
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<tr>
<td></td>
<td>Rubella (German Measles) Titer (IgG)</td>
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<tr>
<td>Hepatitis B (5)</td>
<td>HepB#1</td>
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<td></td>
<td>HepB#2</td>
<td></td>
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<td></td>
<td>HepB#3</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>HepB Titer (Anti-HBs: hep B surface antibody)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tetanus (5)</td>
<td>Immunization</td>
<td>Tdap (preferred)</td>
<td>Td</td>
</tr>
<tr>
<td>Varicella (5)</td>
<td>Herpes Zoster titer (Must be IgG)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TB Screening (5)</td>
<td>Step #1</td>
<td></td>
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<tr>
<td></td>
<td>Step #2</td>
<td></td>
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<td></td>
<td>CXR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BLS Card (5)</td>
<td>Expiration Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire Card (5)</td>
<td>Expiration Date</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Last Name: ____________________________
Student First Name: __________________________
Student Email: _______________________________
Student Name ___________________________ Date ____________

To be completed in NURS 100, 110L or 210L and NURS 200

Date Task Completed

_________ 1. Background Check Completed

_________ 2. HIPPA and Patient Confidentially Training

_________ 3. Illness and Injury Training

_________ 4. Injury, Illness Prevention, Standard Precautions and Needle Safety

_________ 5. FIT Test for Isolation Mask Completed

_________ 6. Drug Screening Completed

_________ 7. Received and Read the Student Nurses Handbook

_________ 8. Dress Code as per Student Handbook reviewed in NURS 210L
   Read and Reviewed

_________ 9. Fitted for and received WEST COAST UNIVERSITY Student Nurse uniform (white vest, white pants, blue shirt)

Note: No substitutions for any part of the uniform. Only WCU issued uniforms are acceptable.

A white uniform shirt may be ordered and worn under blue shirt to cover tattoos or to keep warm. They can be ordered from Rene Venegas at Mobile Uniforms (818) 767-0036

Student Signature ___________________________ Date ____________

Instructor Signature ___________________________ Date ____________
Appendix D – Code of Ethics

American Nurses’ Association Code of Ethics

- The nurse provides services with respect for human dignity and the uniqueness of the client, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
- The nurse safeguards the client's right to privacy by judiciously protecting information of a confidential nature.
- The nurse acts to safeguard the client and the public when healthcare and safety are affected by the incompetent, unethical or illegal practice of any person.
- The nurse assumes responsibility and accountability for individual nursing judgments and actions.
- The nurse maintains competence in nursing.
- The nurse exercises informed judgment and uses individual competence and qualifications as criteria in seeking consultation, accepting responsibilities, and delegating nursing activities to others.
- The nurse participates in activities that contribute to the ongoing development of the profession's body of knowledge.
- The nurse participates in the profession's efforts to implement and improve standards of nursing.
- The nurse participates in the profession's effort to establish and maintain conditions of employment conducive to high quality nursing care.
- The nurse participates in the profession's effort to protect the public from misinformation and misrepresentation and to maintain the integrity of nursing.
- The nurse collaborates with members of the health professions and other citizens in promoting community and national efforts to meet the health needs of the public.
National Student Nurses Association Code of Academic and 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:

- Advocate for the rights of all clients.
- Maintain client confidentiality.
- Take appropriate action to ensure the safety of clients, self, and others.
- Provide care for the client in a timely, compassionate and professional manner.
- Communicate client care in a truthful, timely and accurate manner.
- Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
- Promote excellence in nursing by encouraging lifelong learning and professional development.
- Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
- Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
- Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
- Encourage faculty, clinical staff, and peers to mentor nursing students.
- Refrain from performing any technique or procedure for which the student has not been adequately trained.
- 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.
- Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorization is obtained from clients regarding any form of treatment or research.
Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
- Strive to achieve and maintain an optimal level of personal health.
- Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
- 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
National Student Nurses’ Association Code of Professional Conduct

As a member of the National Student Nurses’ Association, I pledge myself to:

- Maintain the highest standard of personal and professional conduct.
- Actively promote and encourage the highest level of ethics within nursing education, the profession of nursing, and the student nurses’ association.
- Uphold all Bylaws and regulations relating to the student nurses’ association at the chapter, state and national levels, reserving the right to criticize rules and laws constructively, but respecting the rules and laws as long as they prevail.
- Strive for excellence in all aspects of decision making and management at all levels of the student nurses’ association.
- Use only legal and ethical principles in all association decisions and activities.
- Ensure the proper use of all association funds.
- Serve all members of the student nurses’ association impartially, provide no special privilege to any individual member, and accept no personal compensation from another member or non-member.
- Maintain the confidentiality of privileged information entrusted or known to me by virtue of an elected or appointed position in the association.
- Refuse to engage in, or condone, discrimination on the basis of race, gender, age, citizenship, religion, national origin, sexual orientation, or disability.
- Refrain from any form of cheating or dishonesty, and take action to report dishonorable practices to proper authorities using established channels.
- Always communicate internal and external association statements in a truthful and accurate manner by ensuring that there is integrity in the data and information used by the student nurses’ association.
- Cooperate in every reasonable and proper way with association volunteers and staff, and work with them in the advocacy of student rights and responsibilities and the advancement of the profession of nursing.
- Use every opportunity to improve faculty understanding of the role of the student nurses’ association.
- Use every opportunity to raise awareness of the student nurses’ association’s mission, purpose, and goals at the school chapter level.
- Promote and encourage entering nursing students to join and become active in NSNA.
- Promote and encourage graduating seniors to continue their involvement by joining professional nurses’ associations upon licensure as Registered Nurses.

Adopted by the 1999 House of Delegates
Pittsburgh, PA at the 47th Annual NSNA Convention

References: American Society of Association Executives and the National Society for Fund Raising Executive
Appendix E - Prior Criminal Activities

Nursing Position Statement – Background Checks

To comply with Joint Commission, state, and local regulations regarding background checks for healthcare providers, the following position statement has been drafted by the OC/LB Consortium for Nursing:

“Nursing students must have clear criminal background checks to participate in placement(s) in clinical facilities. The background check is not a requirement for admission to a nursing program but will be conducted around the time of admission. Background checks are required for registration in clinical nursing courses. The initial background check satisfies this requirement during continuous enrollment in the program, and should the educational process be interrupted, a new background check will be required. In some clinical settings and for RN licensure application a Live Scan Fingerprinting will also be required”. The university has the right to add additional times when a background check will be required to insure that students who are enrolled will in fact be able to be placed clinically. In additional some clinical facilities also require fingerprint checks prior to clinical placement in their facility. The fingerprint check is also required to obtain a license in California and other US states and territories.

Background checks will minimally include the following:
- Seven years of history
- Address verification
- Sex offender database search
- Two names (current legal and one other name)
- Three counties OIG search
- Social Security Number verification

Students will be unable to attend clinical facilities for the following convictions:
- Murder
- Felony assault
- Sexual offenses/sexual assault
- Felony possession and furnishing (without certificate of rehabilitation)
- Felony Drug and alcohol offenses (without certificate of rehabilitation)
- Other felonies involving weapons and/or violent crimes
- Class B and Class A misdemeanor theft
- Felony theft
- Fraud and identity theft

Students may be denied access to clinical facilities based on offenses appearing on the criminal record which may have occurred more than seven years ago. Students must provide schools with information allowing the school (and clinical facilities as necessary) access to the
background check. If the student’s record is not clear, the student will be responsible for obtaining documents and having the record corrected to clear it. If this is not possible, the student will be unable to attend clinical rotations. Clinical rotations are a mandatory part of nursing education; therefore, the student will be ineligible to continue in a Nursing Program. If after reviewing the background check the school is unable to determine placement status, the school may check with clinical facilities with WCU contracts. If both agree that the student should be cleared for placement in a clinical facility, the school may place the student in clinical rotations.

Final placement status based on background check information is the school’s determination. Students under 18 years of age are exempt from this requirement. Applicable BRN and/or BVNPT guidelines will be incorporated into these guidelines as they become available.

**Reporting Prior Conviction or Discipline Against Licenses**

Applicants are required under law to report all misdemeanor and felony convictions. “Driving under the influence” convictions must be reported. Convictions must be reported even if they have been expunged under Penal Code 1203.4 or even if a court-ordered diversion program has been completed under Penal Code Section 1000. Also, all disciplinary action against an applicant’s registered nurse, practical nurse, vocational nurse, or other professional license must be reported.

*Failure to report prior convictions or disciplinary action is considered falsification of application and is grounds for denial of licensure or revocation of license.*

When reporting prior convictions or disciplinary action, the applicant is required to provide a full written explanation of the underlying circumstances, date of incident(s), date of conviction(s), or disciplinary action(s), specific violation(s) (cite section of law if convicted), court location or jurisdiction, sanctions or penalties imposed, and completion dates. Court documents or State Board determinations/decisions should also be included. To make a determination in these cases, the Board considers the nature and severity of the offense, additional subsequent acts, how recent the acts or crimes were, compliance with court sanctions, and evidence of rehabilitation.

**The burden of proof lies with the applicant to demonstrate acceptable documented evidence of rehabilitation.**

Examples of rehabilitation evidence would include, but are not limited to:

1. Recent dated letter from applicant describing rehabilitative efforts or changes in life to prevent future problems.
2. Letters on official letterhead from professional counselors, instructors, employers, probation or parole officers. An order of the court is also considered to be appropriate.
3. Letter from recognized recovery programs and/or counselors attesting to current sobriety and length of time of sobriety, if there is a history of alcohol or drug abuse.
4. Proof of community work, schooling, and self-improvement efforts.
5. Court issued certificate of rehabilitation or evidence of expunge.
6. Current mental status examination by clinical psychologist or psychiatrist which includes psychological testing, if applicable.

All of the above items should be mailed **directly** to the Board by the individual(s) or agency that is providing information about the applicant. Have these items sent to the Board of Registered Nursing, Licensing Unit, P.O. Box 944210, Sacramento, CA 94244-2100.

**It is the applicant’s responsibility to provide sufficient rehabilitation evidence on a timely basis so that a licensing determination can be made.** If the applicant is applying to take the licensing examination, all evidence of rehabilitation must be submitted prior to being found eligible for an examination.

An applicant is also required to immediately report, in writing, to the Board any conviction(s) or disciplinary action(s) which occur between the dates the application was filed and the date that a California registered nursing license is issued. Failure to report this information is grounds for denial of licensure or revocation of license.

**NOTE:** The application must be completed and signed by the applicant under the penalty of perjury.
Appendix F – Graduation Requirements

To prevent any confusion at the time of graduation, please note the following:

1. If you have taken any classes at other institutions, please contact the health careers at other institutions. Please contact the health careers liaison first, then the Dean if further clarification is needed. All waivers or course substitution must be approved by the Dean.

2. Only those students who have completed our prescribed program will sit for the Board. There are no exceptions.

3. If you have a conviction for any misdemeanors or felony conviction, please arrange to meet with the Dean as soon as possible.

4. All students in their last semester of school must have a graduation check.

Below is a list of program prerequisites and general education requirements that must be completed, in addition to nursing program courses, before you can sit for the board examination.

BSN Program

1. 80% on HESI or 1500/1000 SAT or 20 on ACT testing
2. HS graduate
3. Anatomy
4. Physiology
5. Microbiology
6. Pathophysiology
7. Elementary Algebra or Advanced Math College level math (Math 1 or higher)
8. Statistics (recommended)
9. Epidemiology
10. Chemistry
11. English – college level 1 and 2
12. Introductory Sociology
13. Cultural Pluralism
14. General Psychology
15. Life Span Psychology
16. Speech
17. Medical Ethics and Issues
18. Portfolio based on AACN 9 Essentials required for CCNE accreditation

**MSN program**

1- Completion with a minimum of a 3.0 CGPA in all courses in the MSN curriculum and specific to the particular MSN track enrolled in as listed earlier in this document.
2- Completion of the Professional Portfolio related to the AACN MSN Essentials required for CCNE accreditation.
3- Completion of a theory (NURS 590) and clinical practicum (NURS 591L) and advancement toward a certification in an area of nursing specialty (not APRN) of interest to the student. This work needs to start earlier in the curriculum so the student is able to identify their area of interest and secure a clinical site that meets the requirements of the students certification of choice. See the ANCC website for examples of such certifications and their requirements.
http://www.nursecredentialing.org/
Appendix G – LVN to RN 30 Unit Option

WEST COAST UNIVERSITY offers two options for Licensed Vocational Nurses (LVN) articulating to become Registered Nurses (RN).

The LVN-BSN program for California Licensed Vocational Nurses requires 160 weeks (four 20-week semesters) of the Nursing Program. Those students considering taking the 30 unit option would take Physiology and Microbiology and certain of the five semesters of prelicensure nursing courses. They are not required to take the clinical portion of the Expanding and Developing Family and Community Practicum (216L) or Integration of Nursing Concepts (NURS 220 or 221L) or any upper division BSN nursing but may do so if they would like. The 30 unit option student does not receive a certificate or degree from WEST COAST UNIVERSITY and is not considered a graduate of the University. **IMPORTANT:** Students requesting the 30 unit program MUST DECLARE this option PRIOR to enrolling in the LVN-BSN program. Once students have begun the LVN-BSN program, the 30 unit option is not available. **Financial aid is not available** for students choosing the 30 unit option since this is not an option leading to a degree.

Please see the Dean of Nursing, or designee regarding this option. Please call to schedule an appointment with the Dean of Nursing to ensure you are taking the correct courses in the correct sequence.

**PLEASE SIGN BELOW UPON ACCEPTANCE INTO THE NURSING PROGRAM**

Student acknowledgement of the choice they are making with the 30 unit Option LVN to RN: **(Please initial each statement)**

- The 30 unit Option is unique to California and applicants need to be aware that some states will not issue a license to a person who was originally licensed in California under the 30 unit Option regulations.
- Licensure by Endorsement in other states is not guaranteed as most states will not allow non-graduates to take the NCLEX-RN or obtain a license in their state.
- I understand that the Board of Registered Nursing will not change my non-graduate, 30 unit option, and status even if I obtain a degree at a later date.
- I understand I cannot put on an employment application that I am a graduate of WEST COAST UNIVERSITY.
- I understand that the 30 unit Option is not a program accredited by ACICS, CCNE or other accrediting bodies and therefore I am not eligible for Title IV financial aid.
- I understand that all prerequisites have been shown to be linked with success in the nursing program, and by not taking those prerequisites; I may be putting myself at greater risk for not completing the nursing program and not passing the NCLEX-RN.
- I understand that the non-graduate status is not an accredited program and therefore the person may not be eligible for employment by certain employers including the military or any federally funded or governed facilities such as the Veterans Administration.

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
<th>Dean Signature</th>
<th>Date</th>
</tr>
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</table>

**LVN 30 Unit Option Curriculum**

Revised: February, 2011
### FIRST YEAR – FIRST SEMESTER – FIRST TERM

<table>
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<tr>
<th>Course Number</th>
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<th>Units</th>
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<tr>
<td>MICR 140</td>
<td>General Microbiology</td>
<td>4</td>
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<tr>
<td>PHYS 261</td>
<td>Human Physiology</td>
<td>4</td>
</tr>
<tr>
<td>NURS 200B</td>
<td>Transition to Registered Nursing</td>
<td>2 (optional)</td>
</tr>
<tr>
<td>NURS 210BL</td>
<td>RN Skills Laboratory</td>
<td>1 (optional)</td>
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<td><strong>TOTAL UNITS:</strong></td>
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### FIRST YEAR – FIRST SEMESTER – SECOND TERM

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<td>NURS 201</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults</td>
<td>3</td>
</tr>
<tr>
<td>NURS 211L</td>
<td>Medical Surgical Nursing: Promoting Wellness in Older Adults Practicum</td>
<td>3</td>
</tr>
<tr>
<td>NURS 204</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client</td>
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</tr>
<tr>
<td>NURS 214L</td>
<td>Mental Health/Psychiatric Nursing: Promoting Wellness in the Mentally Ill Client Practicum</td>
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### SECOND YEAR – FIRST SEMESTER – FIRST TERM

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<th>Course Title</th>
<th>Units</th>
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<tbody>
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<td>NURS 203</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client</td>
<td>3</td>
</tr>
<tr>
<td>NURS 213L</td>
<td>Advanced Medical Surgical Nursing: Promoting Wellness in the Critically Ill Client Practicum</td>
<td>3</td>
</tr>
<tr>
<td>NURS 206</td>
<td>Expanding and Developing Family and Community</td>
<td>3</td>
</tr>
<tr>
<td>NURS 216L</td>
<td>Expanding and Developing Family and Community Practicum</td>
<td>3 (optional)</td>
</tr>
<tr>
<td>NURS 205</td>
<td>Introduction to Leadership and Management</td>
<td>2</td>
</tr>
<tr>
<td>NURS 220</td>
<td>Integration of Nursing</td>
<td>2 (optional)</td>
</tr>
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<td><strong>TOTAL UNITS:</strong></td>
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<tr>
<td><strong>GRAND TOTAL</strong></td>
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<td><strong>29-31</strong></td>
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Appendix H – Non-Graduate Status

Non-Graduation Status Disclosure Information Sheet
Eligibility to take the Nursing licensing examination, known as the NCLEX-RN, requires approval from the Dean of Nursing. This approval certifies the student completed all course work required for licensure, according to the California Board of Registered Nursing. Coursework required to earn a Bachelor degree at WCU includes courses over and above those required for simple licensure. Prior to a student making the decision to attempt the NCLEX-RN in a "non-graduate” status, defined as a person completing the minimum requirements for licensure without completing the requirements for a degree, the University wants to ensure the student understands the full ramifications of this decision.

Please call to schedule an appointment with the Dean of Nursing to ensure you are fully informed of the significant limitations of “non-graduate” status. The Student must acknowledge each aspect of “non-graduate” status before the Dean of Nursing will certify him/her as a non-graduate eligible for the NCLEX-RN.

Please indicate your understanding by initialing each section below:

_____ The Non-graduate is unique to California. Not all states will issue a license to a person who was originally licensed in California as a non-graduate.

_____ Licensure by Endorsement in other states is not guaranteed. Most states will not allow non-graduates to take the NCLEX-RN or obtain a license in their state.

_____ The California Board of Registered Nursing will NEVER change my non-graduate status even if I obtain a degree at a later date.

_____ I cannot indicate on an employment application that I am a graduate of WEST COAST UNIVERSITY.

_____ The non-graduate status is not an accredited program and therefore the person may not be eligible for employment by certain employers including the military or any federally funded or governed facilities such as the Veterans Administration.

_____ If I do not hold a degree I may not be eligible to pursue an advanced degree at a later date.

_____ There is no guarantee credits earned at WEST COAST UNIVERSITY will transfer to another institution. If I choose to complete my degree at another institution in the future, I may not be able to transfer my earned credits into another nursing program at a different institution.
All courses required for the degree have been linked with successfully achieving RN licensure and by not taking all courses required for my degree, I am placing myself in great risk of not passing the NCLEX-RN.

Successful completion of NURS 220, Integration of Nursing Concepts, is directly linked with passing the NCLEX-RN. Successfully completing this course dramatically improves a student’s ability to pass the NCLEX-RN licensure examination. Those students who do not successfully pass NURS 220 and attempt the NCLEX-RN have a high failure rate. It is in the student’s best interests to complete and pass this course to ensure the best opportunity to achieve RN licensure.

If a student chooses to withdraw from the University and take the NCLEX-RN against the advice of the University prior to successfully completing NURS 220 and then later wants to return to obtain his/her degree, re-admission to the BSN program is not available.
Appendix I - Malpractice Insurance Requirements

All nursing students at WEST COAST UNIVERSITY are required to carry professional malpractice insurance coverage of at least $1,000,000 per occurrence and $3,000,000 per year.

This is the financial responsibility of each student.

LVN students must have coverage for RN student level. Their LVN coverage is not sufficient. Each student must have their own private coverage and cannot use any coverage from a place of employment since it does not cover your work as a student or in other places of clinical placement.

On a yearly basis, students must present validation of current insurance coverage prior to being permitted in the hospital for clinical learning. Students without coverage will be denied access to the hospital laboratory and will be counted absent.

It takes approximately six (6) weeks for the company to process an application for malpractice insurance. Please attach a copy of your money order or your credit card receipt of payment to the information package before you turn it into the Nursing Program. A copy of an un-cancelled personal check is not acceptable validation of payment.

If you have any questions regarding the insurance and/or procedure for applying for it, please contact the Campus Dean of Nursing.
Appendix J – Nursing and WCU Forms
Medical Release

Student Name: ________________________________

Date of Birth: ________________________________

Date of Release: ________________________________

The student may return to school doing the following activities:

Attend classes

Attend science labs (exposure to chemicals including liquids, gases, and powders)

Attend clinical rotations of 12 hour shifts

Specific limitations: ________________________________

______________________________________________

______________________________________________

Provider: ________________________________

Date: ________________________________

Clinic/Office Stamp

Revised: February, 2011
APENDIX K – Sample Clinical Evaluation Tool

College of Nursing
Clinical Facility Evaluation by Student

Clinical Facility: ___________________ Semester & Term: ___________________

INSTRUCTIONS: Please choose one number which best describes your experience:

Rating Scales: 4 – Strongly Agree   3 – Agree   2 – Disagree   1 – Strongly Disagree

The unit environment was appropriate to your learning needs:

1. Orientation to the clinical site  4  3  2  1
2. Number of Patients  4  3  2  1
3. Variety of Diagnosis  4  3  2  1
4. Equipment  4  3  2  1
5. Unit Resources  4  3  2  1
6. Learning Resources (library, reference materials)  4  3  2  1
7. Facilities (dining, parking, storage space)  4  3  2  1

The nursing staff maintained open communication appropriate in meeting your learning needs:

8. Knowledge level  4  3  2  1
9. As role models  4  3  2  1
10. Supportive  4  3  2  1
11. Fostered independence  4  3  2  1
12. I feel I have benefited from this experience  4  3  2  1

PLEASE ADD YOUR OPINIONS AND SUGGESTIONS

13. The strengths of this clinical experience were:
14. My recommendation for improvements of this clinical experience:

15. Additional information or experience I would like to have been provided:

16. Additional comments:
Appendix L – Drug and Alcohol Abuse Policy

Notice to All Employees and Students
In accordance with Federal Government law, this institution is committed to maintaining a drug-free workplace and school. The unlawful manufacture, distribution, dispensing, possession or use of drugs, alcohol or other controlled substances, including the possession of the associated paraphernalia, at this institution is strictly prohibited. Students and employees are required, as a condition of enrollment and/or employment, to abide by this policy.

As required, this institution will report all employees convicted of a criminal drug offense occurring in the workplace to the U.S. Department of Education. Also, employees, as a condition of employment, are required to provide written notice to this Institution of their conviction for a criminal drug offense occurring at the workplace within five days after the conviction. Additionally, students receiving Pell Grants who are convicted of a criminal drug offense during the period of enrollment for which the Pell Grant was awarded, are required by federal regulations to report that conviction in writing to the:

Dean/Director of Grants and Services
US Department of Education
400 Maryland Ave. SW
Room 3124, GSA Regional Office Blvd., #3
Washington, DC 20202-4Room 3124, GSA Regional Office Blvd., #3
Washington, DC 20202-4571

The report must be made within ten (10) days after the conviction. In addition to institution sanctions, students and employees convicted of the unlawful possession or distribution of illicit drugs or alcohol, including the possession of the associated paraphernalia, could face local, state and federal penalties which include the loss of eligibility for federal financial aid, fines, imprisonment, and the seizure of drug-related assets.

Drug awareness programs, counseling, treatment, and other related services are available on an ongoing basis through:

Charter Hospital: 800-262-1414 or
Narconon International: 323-962-2404 (narconon.org)

Students and employees seeking assistance in overcoming a drug or alcohol-related problem are encouraged to contact one of these organizations.
Campus Drug Policy & Resource Guide

It is the University’s policy that no students shall be involved with unlawful use, possession, sale or transfer of illegal drugs and/or narcotics in any manner that may impair their ability to perform.

The University is a drug-free work and educational environment and is committed to enforce all policies related to such, including contacting law enforcement officials if caught on campus using drugs or alcohol. The University is committed to enforce all policies related to such, including contacting law enforcement officials if caught on campus using drugs or alcohol. The University is committed to confidentiality if a student wished to contact us for assistance in obtaining help.

Effects of Drug Abuse
Physically, many drugs have profound effects upon various body systems that are extremely dangerous to good health. Psychologically, excessive drug use tends to focus the user on their drugs and their availability. Life becomes centered on drugs to the exclusion of health, work, school, family, and general well-being. Functionally, when life becomes centered on drug use, other areas suffer and responsibilities and duties to self and others are neglected. Therefore, excessive drug use or drug abuse has profoundly negative effects on the user and those people and organizations with which she or he is involved.

Often the effects of drug use are complicated by increasing tolerance developed by the user to the drug of choice. This tolerance may be psychological, physiological, or both. Such tolerance may lead to greater danger of overdose. When you detect a change in the ability of a student, a colleague, a friend or family member, or in yourself to function adequately, it is appropriate to be concerned with drug use and abuse. Although other causes for negative functional changes clearly exist, given the present high level of drug use in our society, concern about drug abuse is certainly justified.

Types of Drugs and Their Effects

Alcohol
The alcohol we refer to is chemically known as ethyl alcohol or ethanol. There are numerous other types of alcohol, which have very toxic and poisonous effects. Alcohol is the most widely used psychoactive drug. Some 90% or more of the population has used alcohol regularly. Whether the alcohol is contained in wine, beer, or hard liquor makes no difference as to its effects. It is the amount of alcohol consumed that is of importance, not the mixture in which it is consumed.

To many users, alcohol is experienced as a very attractive drug because its’ immediate effects at low to moderate consumption levels are felt to be very pleasant. It increases sociability, gives some feeling of euphoria or well being, and many increase appetite.
At heavier dosage levels, it causes loss of balance and coordination, mental dysfunction, including speech and thought disruption, and severe lapses in judgment leading to very serious dangers such as dangerous risk taking.

At heavier dosage levels, alcohol causes loss of consciousness. At very heavy dosage levels, it yields loss of involuntary nervous system control leading to respiratory system depression as well as heart and circulatory system failure which may result in death. At moderate to heavy levels of use, there is the vomiting and hangover syndrome so widely known. Beyond its’ immediate effects, alcohol use in excess causes many serious chronic health problems including liver dysfunction, heart inflammation, brain damage, and various types of digestive system cancers. Long term abusive alcohol use may also cause organic brain disease and psychiatric illness.

Heavily abusive drinking of alcohol over long time periods is termed alcoholism. This is generally agreed to be an addictive disease with very poor progenies unless the patient ceases alcohol consumption. Alcoholics Anonymous (AA) has had the best record in dealing with people whose lives are so focused around alcohol that we label them alcoholics. Medical treatment is indicated for acute and/or chronic alcohol abuse. There is some evidence that a genetic component exists in alcoholism.

**Central Nervous System Depressants**

There are many central nervous system (CNS) depressants of varying chemical makeup. They are generally labeled with the name “downers” although specific drugs have specific names. The CNS depressants include all sleeping medications, anti-anxiety drugs such as Valium or Librium, and alcohol. They are widely prescribed medically, probably far beyond their actual medical usefulness. They are also widely available illicitly or on the street under a variety of names.

Many of the CNS depressants interact with each other or with alcohol to produce a toxic effect far more severe than one would expect. Thus, these drugs are very life threatening and have a high potential for producing severe medical emergencies. Users of these drugs become increasingly tolerant of them. Thus they tend to increase their dosage and put their lives at severe risk.

CNS depressants produce a “buzz” or feeling of well being similar to that of alcohol. Some users report a kind of floating magical sensation that is very peaceful and pleasant. These drugs tend to block out worry and anxiety and to cover depressant and other unpleasant mood states.

As with alcohol, low to moderate dosages produces the feelings of well being referred to earlier. At heavier dosages, some of the same toxic reactions will occur including loss of judgment and coordination, unconsciousness, and thought disruption.
Many of these drugs at high dosage levels will lead to heart and respiratory collapse, including death. When used abusively, withdrawal from these drugs, as with alcohol, may produce effects that need proper medical care and treatment. Addiction to CNS depressants is similar to alcoholism in that it is a very serious disease. Medical treatments and/or AA involvement are recommended with CNS depressant abuse.

Central Nervous System Stimulants
Unlike CNS depressants, CNS stimulants increase activity in the central nervous system. Thus, they are generally known as “uppers” although there are particular street names for particular drugs. The most available and popular of the CNS stimulants appear to be amphetamines. There are various kinds of amphetamines; a popular form in street use is Methamphetamine or “crystal.” Cocaine, a stimulant drug of a different chemical make-up, has also been widely available and abused. Often, amphetamine is purposely sold as cocaine by deceptive dealers. Most CNS stimulants are highly addictive.

CNS stimulants produce a sense of excitement and arousal often called a “high,” thus, the slang name of uppers. They may decrease fatigue and increase alertness. Subjective feelings of heightened sexual arousal feelings may occur. Deceptive feelings of increased physical strength and coordination may also occur.

After using CNS stimulants, the body tends to try to re-stabilize itself and thus after use, depression may occur. This leads the user to take more of the drug to rid him or herself of depression. Accordingly, these drugs tend to reinforce their own use. Tolerance also develops to CNS stimulants. Consequently, users tend to increase their dosage leading to increased potential to overdose. The effects of overdose may be excess excitability, excess irritability, delusions of grandeur, excess aggressiveness, severe loss of judgment, suspiciousness, as well as heart and circulatory system failure and arrest. It is clear that CNS stimulants have addictive properties as do alcohol and the CNS depressants. Medical treatment of abuse is indicated. Beyond AA, organizations have been formed to aid CNS stimulant users: Narcotics Anonymous (NA) and Cocaine Anonymous (CA). There is a national cocaine hotline, 1-800-COCAIN, for anonymous and confidential help to cocaine users.

Marijuana or The Cannabinols
In the sixties, marijuana was the most popular of the illicit drugs among a large portion of the population. It is still a very widely used drug. Since 1970, scientific cultivation and increased imports from tropical climates have greatly increased the potency of today’s marijuana. It is now quite a powerful drug and has more potent mind-altering effects than in the past.

The active ingredient is called tetrahydrocannabinol or THC. THC is also the active ingredient of hashish, a refined form of marijuana produced from marijuana plants and in a resin form.

Marijuana use produces sense of euphoria and altered sense of time. It, therefore, tends to relieve the user of worry and anxiety and to produce a false sense of well-being. Some people
who use marijuana experience visual and auditory hallucinations, although this is an uncommon occurrence.

Unlike the drugs discussed above, neither increasing tolerance nor physical dependence is a major problem with marijuana. Many users become heavily dependent psychologically upon it and have a difficult time ceasing use.

As with other drugs, people who use marijuana abusively tend to focus their lives on the drug and neglect other areas of functioning. Marijuana also produces errors in judgments and negatively affects physical coordination that leads to accidents. Driving under the influence of marijuana is similar to driving under the influence of alcohol.

Marijuana is particularly dangerous for people with heart conditions, as it may increase the heart rate over-stressing the heart. New medical evidence clearly shows that chronic use of marijuana has toxic effects on the lungs. It may lead to chronic bronchitis and other obstructive lung diseases. There is evidence that chronic use may also lead to lung cancer. Treatment of abuse may require medical intervention. AA and NA are valuable treatment alternatives.

**Opiates and Other Pain Killers**

This class of drugs is called narcotic analgesics. An analgesic is another word for a painkiller. Although these drugs are clearly sometimes medically useful, THEY HAVE NO VALID NON-MEDICAL USE. Some drugs, such as heroin and morphine, are made from opium poppy. Others are synthetically produced, such as Darvon and Demerol. Regardless of their origin, they are highly addictive. Their use leads to severe withdrawal reaction when the drug is removed from addicted persons. Users of these drugs rapidly develop tolerance to them. Thus, to get a desired effect, they increase their dosage. This produces life threatening and life ending situations through overdose.

As many of these drugs are injected intravenously, many users contract severe diseases such as hepatitis (liver disease) or AIDS (acquired immune deficiency syndrome) from contaminated needles and drug paraphernalia.

Users of opiates who develop into addicts often find themselves engaged in criminal activity to provide funds for purchasing drugs. This pattern of using criminal means to support a “habit” is also common among users of other mind-altering drugs, particularly amphetamine and cocaine.

Specific “antagonist” drugs exist for opiate users and are used at times of treatment of overdoses. These antagonist drugs are not useful in long-term treatment. As mentioned above, opiates carry a high health risk in terms of death from overdose caused by respiratory and coronary collapse. Users are also at risk from very serious and at times fatal diseases passed through contaminated needles directly into the bloodstream.

Medical treatment of opiate abusers and addicts is strongly indicated with follow-up and maintenance programs necessary for long-term success.
Psychedelics or Hallucinogens
These are drugs that produce mental images and distortions known as hallucinations. Hallucinations are imaginary phenomena produced by the brain that appear real to the hallucinatory. They may be seen, heard, felt, tasted, or smelled by the subject. Most often these drugs produce visual hallucinations. Often, the hallucinations are very frightening to the user and cause the user to become very anxious and sometimes to panic. Reassurance and the provision of prompt medical treatment are indicated.

Some hallucinogens are LSD (lysergic acid diethylamide), psilocybin (mushrooms), STP, and PCP. PCP is a particularly dangerous drug and the user may become highly anxious and aggressive and very difficult to control. PCP is very widely available on the street and is substituted for other drugs or mixed with other drugs, leading to unexpected and unwanted hallucinatory effects that are more frightening to the user. It is reasonable to expect PCP involvement with someone who is very anxious, fearful, and out of control. Intervention in this circumstance requires professional help from paramedics, police, or other trained sources of aid.

Hallucinogenic drugs are generally addictive. However, high levels of overdose can produce life threatening physical symptoms such as fever and convulsions.

Some other common substances are used for their mind hallucinogenic properties. Among them are nutmeg and morning glory seeds. Catnip is also sometimes used. These drugs provide a mild delusion-like experience. Morning glory seeds, if taken intravenously, may produce a shock syndrome with potential lethal consequences.

Resources For Drug Abuse Treatment
As community and governmental concern has increased, resources for and knowledge about treatment of drug abuse have become widely available. Many communities now have resources for drug treatment that were not in existence several years ago. Larger cities are likely to have a larger number of resources available. Generally, those resources for treatment and aid that are part of a patient’s home community are most useful. This is due to ease of access and likelihood for continuing with aftercare that is so important in drug abuse treatment. Various types of resources are available.

Hospitality Emergency Room
These are preferred facilities of choice when an overdose of mind-altering drugs is suspected. Since the results of overdose of many of these drugs can be life threatening, it is best to treat potential overdose situations conversely and to obtain emergency treatment with all due speed.

Police, Fire and Paramedic Services
If a drug abuse situation appears especially dangerously based on the symptoms of the patient, it is wise to use these services to provide the quickest access to treatment. If the behavior of a
suspected drug user is so disturbed or inappropriate that you believe it is out of control, use of the police and paramedic service is also appropriate.

**Emergency Outpatient Treatment Facilities**
These facilities, sometimes known as “Redi-care” or “Surgi-care,” differ from fully-equipped hospital emergency rooms in their ability to provide a wide range of treatment options. They also cannot provide in-patient care. In serious abuse situations, use of a hospital emergency room is preferred.

**Drug Treatment Centers**
Many types of drug treatment centers exist. Some work on an outpatient basis and others on in-patient depending on the type of abuse involved and their philosophy of treatment. It is wise to survey the community for types of treatment centers available, the type of patients they treat, and the economics of treatment.

**Alcoholics Anonymous and Similar Organizations**
AA is a very important resource for those dealing with alcoholic problems. As mentioned earlier, similar organizations exist to cocaine abusers, such as Cocaine Anonymous, and for other drug users, Narcotics Anonymous.

These organizations are non-profit, no-cost groups run by their membership. Many of the most successful drug treatment programs are based upon AA methods. Many communities have multiple chapters of all of these organizations with multiple meetings and contact opportunities. Their importance as primary resources in drug abuse treatment cannot be overemphasized.

**Community Agencies and Social Service Groups**
Many communities provide social service-based facilities and groups for drug treatment. Various types of treatment methods are used, depending upon the community, the range of services available, and the severity of the abuse involved. Information about such treatment resources can be obtained through community departments of social services or medical services.

**Church Groups**
Many churches and religious organizations have programs to aid drug users and abusers. These groups are generally without fee. Information can be obtained through churches directly or often through community social service agencies.

**National Hotline Numbers:**
Charter Hospital: 800.262.1414
Narconon International: 323.962.2404
APPENDIX M - The Essentials of Baccalaureate Education

American Association of Colleges of Nursing (AACN), 2008

Executive Summary

The Essentials of Baccalaureate Education for Professional Nursing Practice (2008)

This Essentials document serves to transform baccalaureate nursing education by providing the curricular elements and framework for building the baccalaureate nursing curriculum for the 21st century. These Essentials address the key stakeholders’ recommendations and landmark documents such as the IOM’s recommendations for the core knowledge required of all healthcare professionals. This document emphasizes such concepts as patient centered care, inter-professional teams, evidence based practice, quality improvement, patient safety, informatics, clinical reasoning/critical thinking, genetics and genomics, cultural sensitivity, professionalism, and practice across the lifespan in an ever-changing and complex healthcare environment.

Essential IX delineate the outcomes expected of graduates of baccalaureate nursing programs. Achievement of these outcomes will enable graduates to practice within complex healthcare systems and assume the roles: provider of care; designer/ manager/ coordinator of care; and member of a profession. Essential IX describes generalist nursing practice at the completion of baccalaureate nursing education. This Essential includes practice focused outcomes that integrate the knowledge, skills, and attitudes delineated in Essentials I – VIII. The time needed to accomplish each Essential will vary, and each Essential does not require a separate course for achievement of the outcomes.

The Nine Essentials are:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
  ➢ A solid base in liberal education provides the cornerstone for the practice and education of nurses.

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
  ➢ Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

Essential III: Scholarship for Evidence Based Practice
  ➢ Professional nursing practice is grounded in the translation of current evidence into one’s practice.

Essential IV: Information Management and Application of Patient Care Technology
  ➢ Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.
Essential V: Health Care Policy, Finance, and Regulatory Environments
   ➢ Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
   ➢ Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

Essential VII: Clinical Prevention and Population Health
   ➢ Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.

Essential VIII: Professionalism and Professional Values
   ➢ Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.

Essential IX: Baccalaureate Generalist Nursing Practice
   ➢ The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments.

   ➢ The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Learning opportunities, including direct clinical experiences, must be sufficient in breadth and depth to ensure the baccalaureate graduate attains these practice focused outcomes and integrates the delineated knowledge and skills into the graduate’s professional nursing practice. Clinical learning is focused on developing and refining the knowledge and skills necessary to manage care as part of an interprofessional team. Simulation experiences augment clinical learning and are complementary to direct care opportunities essential to assuming the role of the professional nurse. A clinical immersion experience provides opportunities for building clinical reasoning, management, and evaluation skills.
Appendix N – BSN Students Portfolio

Hello RN-BSN and BSN Students!

WEST COAST UNIVERSITY has implemented a new graduation requirement for all students in the RN to BSN program and BSN program: a professional portfolio.

Why a portfolio?

- Your portfolio is framed by the Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). A copy is attached and you will find these in your “NURS” core classes, too. Therefore, you will include samples of your best work from your theory and clinical courses throughout the BSN curriculum.
- The portfolio will demonstrate to you and others that you have achieved success in meeting the standards of AACN National accreditation and the curricular outcomes of WCU College of Nursing.
- Designing your portfolio is a creative endeavor that showcases your professional accomplishments.

Portfolio uses:

- Graduation requirement reflecting achievement.
- Professional portfolio may be used in interviews for potential employment to highlight entire BSN best achievement.
- Reflects upon major accomplishments form the beginning at novice level to advanced beginner upon graduation.

Where can I see a sample of a Portfolio?

You can access a sample of a portfolio during office hours in the Library and Career Services.
Examples of items you may include within your portfolio:

- Must include work that reflects the humanities – i.e. museum field trip, botanical photos of plants and foods that promote natural healing, music therapy or art therapy for children, etc.
- Paper written for a literature or theology course.
- Art work – drawing, painting, video, poem or song.
- Presentation turned in for a science, math or arts course.
- Your philosophy of nursing at the beginning and end of the program.
- Reflective essay on how the arts and sciences have helped you develop a personal value system that includes the capacity to make and act upon ethical judgments.
- Transcript of manager certificate.
- Describe the process for changing current practice.
- Flow chart of the research process.
- Compare and contrast the problem solving process, the nursing process and the research process.
- Write a letter to a senator or congressman about new patient care technologies for safe, quality care.
- Budget for operation of a nursing unit.
- Scheduling spreadsheet.
- Paper on ethics in healthcare.
- First care plan and last care plan that you developed with a reflective essay on how you’ve developed from a novice to an advanced beginner in the field of nursing.
- Team project with explanation of group process skills used to accomplish a task.
- Patient education materials, i.e. Posters, teaching projects, etc.
- Search the Centers for Disease Control Site for the leading cause of death in the United States for teens, adults and elders. Describe the contributing factors, health promotion, illness and/or injury prevention appropriate for each age group.
- Describe how attitudes, values, and expectations impact patient care.
- Reflect on how your beliefs affect your professional practice.
- Paper describing how your philosophy of nursing practice evolved.
- Paper reflecting on how spiritual beliefs impact a patient's health.
Professional Portfolio

Guidelines for
Bachelor of Science in Nursing (BSN) Degree Student

College of Nursing
Section 1 Portfolio Basics
Introduction
These portfolio guidelines will assist you in the process of displaying selected professional achievements or highlight your most significant activities from the arts, sciences, and nursing courses on your journey to becoming a professional nurse. These guidelines may be applied in the future to further demonstrate enhancement of your ongoing professional development to potential employers, for application to graduate schools, or for other purposes such as application for awards. The process of building your portfolio will encourage you to evaluate the contributions of your courses and clinical experiences to the development of knowledge and the skills needed to be successful in your nursing career.

What is a portfolio?
Portfolios have been defined as a purposeful collection of student work that exhibits the student’s efforts, progress, and achievement in one or more areas.

Reflective portfolios have been defined as the collection of evidence that attests to achievement as well as personal and professional development through a critical analysis and reflection of its contents. What separates a reflective portfolio from the “showcasing of best work” is engaging in introspection. This definition has been used extensively in the nursing medical literature (Plaza et. al, 2007).

What constitutes a professional portfolio?
A professional portfolio includes a number of core components that includes biographical data, education, certification and/or awards, transcripts, a resume’ and personal and professional goals. Summarize your background and professional achievements in the following format to further highlight your unique qualities. Attach these documents at the beginning or end of your portfolio.

How will the portfolio process relate to my BSN program?
Your nursing program and the portfolio process are both designed around the Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). This common link will allow you to see how your learning experiences and your selections for the portfolio relate across the nursing program as a whole. As you progress through the nursing program, many of your courses will have activities that will be directed toward meeting one or more of the essentials.

Organization of the portfolio
The portfolio will be organized around the nine essentials outlined in the Essentials of Baccalaureate Education for Professional Nursing Practice from the American Association of Colleges of Nursing (AACN, 2008) and the conceptual framework by Gordon of the WEST COAST UNIVERSITY BSN nursing program. One of the main goals of the portfolio is to demonstrate to yourself and others that you are achieving success in meeting the standards of student
excellence set forth by the university and required by the Board of Registered Nursing and the Commission for Collegiate Nursing Education.

Your portfolio will be organized in a 3-ring binder with tabs indicating the nine essentials of nursing practice and incorporating the WCU conceptual framework. The essentials and examples of submissions are outlined below. Be as professional and creative as you wish in designing your portfolio. Include a variety of your work which reflects best achievements from among courses and clinical experience that reflect the arts, sciences, humanities, and theoretical and clinical courses in nursing. Within nursing courses and clinical practicum’s, endeavor to describe, in a concise narrative, changes in your viewpoint regarding nursing practice and/or your professional growth.

**Academic Portfolio Grading Criteria**

1. The portfolio is a curricular requirement for the BSN program which incorporates the Nine Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), the WCU nursing conceptual framework/programmatic strands, terminal nursing program objectives and the nursing program outcomes (refer to portfolio documents, pp 8-11).

2. Gathering of data for the portfolio begins with the first courses in the curriculum and includes general education as well as required nursing courses and clinical.

3. A statement about the portfolio will be added to all syllabi for BSN students or during each course orientation; a more in-depth orientation will be provided for BSN transfer students.

4. A graded project, the portfolio will be evaluated by nursing faculty as a capstone project worth 30% of the grade in NURS 460. Students must achieve an 80% passing grade on the portfolio to pass NURS 460. The due date will be announced by faculty in the NURS 460 course.

5. Two checkpoints for evaluation of progress, feedback, and final grading by faculty will be implemented:
   a. Checkpoint One: NURS 290, Physical Assessment course, evaluation, and feedback, due date TBA.
   b. Checkpoint Two: NURS 460, Professional Roles, final evaluation and grade, due date TBA.

**Note:** BSN Program Outcomes #1 and #2 will be evaluated by the end of program and graduate surveys, employer surveys, and NCLEX-RN results after graduation.

**Cover Letter:** Name, address, phone number, fax number, and email address.

**Curriculum Vitae (C.V.):** Describe your work history with particular attention to knowledge, skills, and achievements in nursing practice, education and/or administration. Do not exceed two pages.
References Page: Include a reference page of colleagues, employers, faculty that you have worked with and will provide a potential employer with more information as needed as to why you are a great candidate for potential employment and/or internship. When writing your professional references you should include your reference's name, job title, company, address, and phone number. Make sure you get prior approval before listing any references.

Recommendation Letters: Include letters from Faculty, Clinical Instructors, and/or Current or Previous Employers.

Nursing Student evolution from novice to beginning professional nurse: As you progress from one course to the next, changes will be taking place on a professional and personal level, document these changes in reflective summaries after the following courses: NURS 100, NURS 120, NURS 201, NURS 203, NURS 204, NURS 205, NURS 206, NURS 340, NURS 420, and NURS 430. Classes within that set term can also be reflected upon, for example, with NURS 100 you may reflect upon Pharmacology and skills lab as well.

Competency: Showcase your skills checklist used in nursing school, selected superior care plans, papers, or end-of-course faculty theory or clinical evaluations which highlights your excellence in practice, knowledge, skills, etc.

Personal and Professional Goals: Develop at least five professional goals and evaluate progress towards achievement near the time of graduation; update and/or revise overtime but at least annually throughout your career. The goals need to have a date of completion, must be measureable and you must state briefly how you will attain those goals.

Copies of Licenses and Certifications: Showcase your skills by including any certifications, licenses, for example, certification for Phlebotomy, Certified Nursing Assistant, Basic Life Support (BLS), and/or First Aid Training.

Professional Affiliations: If you are affiliated with any professional organizations, list them in this section such as National Student Nurses’ Association, California Student Nurses’ Association, or any other professional organizations that showcases your commitment to the profession.

Community Service/Volunteer Hours: List any volunteer hours whether related to the medical field or not. This shows commitment and a want to help others as well as dedication.

Awards/Honors: List any awards, honors you have received – including Honor Roll, scholarships, etc.

Any other highlights: If you are involved in any other activities that will show core values such as commitment, dedication and trust – list them here. An example is being a member of the
Armed Services. Include in this section your immunizations, malpractice insurance, and any other documents you may need to attend your clinical rotations.

Adapted from:

**Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice**

Outcomes:
1. Integrate theories and concepts from liberal education into nursing practice.
2. Synthesize theories and concepts from liberal education to build an understanding of the human experience.
3. Use skills of inquiry, analysis, and information literacy to address practice issues.
4. Use written, verbal, non-verbal, and emerging technology methods to communicate effectively.
5. Apply knowledge of social and cultural factors to the care of diverse populations.
6. Engage in ethical reasoning and actions to provide leadership in promoting advocacy, collaboration, and social justice as a socially responsible citizen.
7. Integrate the knowledge and methods of a variety of disciplines to inform decision making.
8. Demonstrate tolerance for the ambiguity and unpredictability of the world and its effect on the healthcare system.
9. Value the ideal of lifelong learning to support excellence in nursing practice.

**Essential I Examples:**
- Paper written for a literature or theology course.
- Art work – drawing, painting, video, poem, song.
- Report about a visit to a museum, play or concert.
- Presentation given in a science, math or arts course.
- Calculation of drug dosages, explaining the importance of correct calculation.
- Reflective essay on how the arts and sciences have helped you develop a personal value system that includes the capacity to make and act upon ethical judgments.
- Paper demonstrates your stand on a current ethical, political or nursing practice issue (with supporting evidence).
- Philosophy of nursing at the beginning and end of the program.

**Note:** These are just some examples of what can be included in the portfolio. For each example selected throughout the nine elements write a brief reflective summary about how the example influenced your viewpoint and/or growth in professional nursing.

**Section 3**
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety

Outcomes:
1. Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, healthcare team coordination, and the oversight and accountability for care delivery in a variety of settings.
2. Demonstrate leadership and communication skills to effectively implement patient safety and quality improvement initiatives within the context of the interprofessional team.
3. Demonstrate an awareness of complex organizational systems.
4. Demonstrate a basic understanding of organizational structure, mission, vision, philosophy, and values.
5. Participate in quality and patient safety initiatives, recognizing that these are complex system issues, which involve individuals, families, groups, communities, populations, and other members of the healthcare team.
6. Apply concepts of quality and safety using structure, process, and outcome measures to identify clinical questions and describe the process of changing current practice.
7. Promote factors that create a culture of safety and caring.
8. Promote achievement of safe and quality outcomes of care for diverse populations.
9. Apply quality improvement processes to effectively implement patient safety initiatives and monitor performance measures, including nurse-sensitive indicators in the microsystem of care.
10. Use improvement methods, based on data from the outcomes of care processes, to design and test changes to continuously improve the quality and safety of health care.
11. Employ principles of quality improvement, healthcare policy, and cost-effectiveness to assist in the development and initiation of effective plans for the microsystem and/or system-wide practice improvements that will improve the quality of healthcare delivery.
12. Participate in the development and implementation of imaginative and creative strategies to enable systems to change.

Essential II Examples:
- Transcript of manager certificate.
- Organizational diagram.
- Apply safety principles to your clinical experience.
- Describe the process for changing current practice.
- Explain how quality improvement improves the quality of patient care.

Section 4
Essential III: Scholarship for Evidence-Based Practice

Outcomes:
1. Explain the interrelationships among theory, practice, and research.
2. Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice.
3. Advocate for the protection of human subjects in the conduct of research.
4. Evaluate the credibility of sources of information, including but not limited to databases and Internet resources.
5. Participate in the process of retrieval, appraisal, and synthesis of evidence in collaboration with other members of the healthcare team to improve patient outcomes.
6. Integrate evidence, clinical judgment, inter-professional perspectives, and patient preferences in planning, implementing, and evaluating outcomes of care.
7. Collaborate in the collection, documentation, and dissemination of evidence.
8. Acquire an understanding of the process for how nursing and related healthcare quality and safety measures are developed, validated, and endorsed.
9. Describe mechanisms to resolve identified practice discrepancies between identified standards and practice that may adversely impact patient outcomes.

**Essential III Examples:**
- Paper that describes the interrelationships among theory, practice, and research.
- Flow chart of the research process.
- Letter to senator or congressman regarding legislation on the protection of human subjects.
- Evaluate the credibility of sources of information in an evidence based practice guideline for the nursing care of a selected patient diagnosis. Chose a nursing generated evidenced-based practice guideline (Nursing Research University of Iowa, College of Nursing, other).
- Compare and contrast the problem solving process, the nursing process and the research process.

**Section 5**

**Essential IV: Information Management and Application of Patient Care Technology**

Outcomes:
1. Demonstrate skills in using patient care technologies, information systems, and communication devices that support safe nursing practice.
2. Use telecommunication technologies to assist in effective communication in a variety of healthcare settings.
3. Apply safeguards and decision making support tools embedded in patient care technologies and information systems to support a safe practice environment for both patients and healthcare workers.
4. Understand the use of CIS (computer information systems) to document interventions related to achieving nurse sensitive outcomes.
5. Use standardized terminology in a care environment that reflects nursing’s unique contribution to patient outcomes.
6. Evaluate data from all relevant sources, including technology, to inform the delivery of care.
7. Recognize the role of information technology in improving patient care outcomes and creating a safe care environment.
8. Uphold ethical standards related to data security, regulatory requirements, confidentiality, and clients’ right to privacy.
9. Apply patient-care technologies as appropriate to address the needs of a diverse patient population.
10. Advocate for the use of new patient care technologies for safe, quality care.
11. Recognize that redesign of workflow and care processes should precede implementation of care technology to facilitate nursing practice.
12. Participate in evaluation of information systems in practice settings through policy and procedure development.

**Essential IV Examples:**
- Write a letter to a senator or congressman about new patient care technologies for safe, quality care.
- Explain how information technology improves patient care outcomes.
- Describe any one nationally recognized current nursing data set used in practice.
- Scheduling spreadsheet.
- Budget for operation of a nursing unit.
- Describe two examples of online patient education resources for the layman and at least two patient education resources that you have used in practice for individual families, groups or communities.

**Section 6**

**Essential V: Healthcare Policy, Finance, and Regulatory Environments**

**Outcomes:**
1. Demonstrate basic knowledge of healthcare policy, finance, and regulatory environments, including local, state, national, and global healthcare trends.
2. Describe how health care is organized and financed, including the implications of business principles, such as patient and system cost factors.
3. Compare the benefits and limitations of the major forms of reimbursement on the delivery of health care services.
4. Examine legislative and regulatory processes relevant to the provision of health care.
5. Describe state and national statutes, rules, and regulations that authorize and define professional nursing practice.
6. Explore the impact of socio-cultural, economic, legal, and political factors influencing healthcare delivery and practice.
7. Examine the roles and responsibilities of the regulatory agencies and their effect on patient care quality, workplace safety, and the scope of nursing and other health professionals’ practice.
8. Discuss the implications of healthcare policy on issues of access, equity, affordability, and social justice in healthcare delivery.
9. Use an ethical framework to evaluate the impact of social policies on health care, especially for vulnerable populations.
10. Articulate, through a nursing perspective, issues concerning healthcare delivery to decision makers within healthcare organizations and other policy arenas.
11. Participate as a nursing professional in political processes and grassroots legislative efforts to influence healthcare policy.
12. Advocate for consumers and the nursing profession.

**Essential V Examples:**
- Paper relating to healthcare policies and their impact on culturally diverse populations.
- Explain the role of regulating agencies and how they affect patient care quality.
- Describe how healthcare is financed in the United States. How does the U.S. healthcare structure differ from other countries.
- Demonstrate involvement and your contributions to a professional organization.
- Paper on ethics in healthcare.

**Section 7**

**Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes**

Outcomes:
1. Compare/Contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e., scope of discipline, education and licensure requirements).
2. Use inter- and intra-professional communication and collaborative skills to deliver evidence-based, patient-centered care.
3. Incorporate effective communication techniques, including negotiation and conflict resolution to produce positive professional working relationships.
4. Contribute the unique nursing perspective to interprofessional terms to optimize patient outcomes.
5. Demonstrate appropriate team building and collaborative strategies when working with interprofessional teams.
6. Advocate for high quality and safe patient care as a member of the interprofessional team.

**Essential VI Examples:**
- Paper comparing communication and collaboration between nursing and other healthcare professionals.
- Care plan.
- Patient education materials, i.e. Posters, teaching projects, etc.
- PowerPoint presentation about patient teaching and adult learning principles.
- Explain a patient care or professional conflict that you helped to resolve – focus on steps of the problem solving process, negotiation skills and the outcome.
- Team project with explanation of group process skills used to accomplish a task.

**Section 8**
Essential VII: Clinical Prevention & Population Health

Outcomes:
1. Assess protective and predictive factors, including genetics, which influence the health of individuals, families, groups, communities, and populations.
2. Conduct a health history, including environmental exposure and a family history that recognizes genetic risks, to identify current and future health problems.
3. Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities, and populations.
4. Use behavioral change techniques to promote health and manage illness.
5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral, and follow-up throughout the lifespan.
6. Use information and communication technologies in preventive care.
7. Collaborate with other healthcare professionals and patients to provide spiritually and culturally appropriate health promotion and disease and injury prevention interventions.
8. Assess the health, healthcare, and emergency preparedness needs of a defined population.
9. Use clinical judgment and decision-making skills in appropriate, timely nursing care during disaster, mass casualty, and other emergency situations.
10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.
11. Participate in clinical prevention and population-focused interventions with attention to effectiveness, efficiency, cost-effectiveness, and equity.
12. Advocate for social justice, including a commitment to the health of vulnerable populations and the elimination of health disparities.
13. Use evaluation results to influence the delivery of care, deployment of resources, and to provide input into the development of policies to promote health and prevent disease.

Section 9

Essential VII Examples:
- Search the Centers for Disease Control Site for the leading cause of death in the United States for teens, adults, and elders. Describe the contributing factors, health promotion, illness and/or injury prevention appropriate for each age group.
- Search the Internet for the specific healthcare risks and needs for a specific ethnic group.
- Research a local hospital emergency plan in the case of a disaster.
- Health history you have completed on an assigned patient using “Gordon’s framework” and a plan of care outlining primary, secondary and/or tertiary interventions for health promotion for a family, other group or community.
Section 10
Essential VIII: Professionalism and Professional Values
Outcomes:
1. Demonstrate the professional standards of moral, ethical, and legal conduct.
2. Assume accountability for personal and professional behaviors.
3. Promote the image of nursing by modeling the values and articulating the knowledge, skills, and attitudes of the nursing profession.
4. Demonstrate professionalism, including attention to appearance, demeanor, respect for self and others, and attention to professional boundaries with patients and families as well as among caregivers.
5. Demonstrate an appreciation of the history of and contemporary issues in nursing and their impact on current nursing practice.
6. Reflect on one’s own beliefs and values as they relate to professional practice.
7. Identify personal, professional, and environmental risks that impact personal and professional choices and behaviors.
8. Communicate to the healthcare team one’s personal bias on difficult healthcare decisions that impact one’s ability to provide care.
9. Recognize the impact of attitudes, values, and expectations on the care of the very young, frail older adults, and other vulnerable populations.
10. Protect patient privacy and confidentiality of patient records and other privileged communications.
11. Access interprofessional and intraprofessional resources to resolve ethical and other practice dilemmas.
12. Act to prevent unsafe, illegal, or unethical care practices.
13. Articulate the value of pursuing practice excellence, lifelong learning, and professional engagement to foster professional growth and development.
14. Recognize the relationship between personal health, self renewal, and the ability to deliver sustained quality care.

Essential VIII Examples:
- Describe how attitudes, values, and expectations impact patient care.
- Describe the importance of confidentiality when providing patient care.
- Reflect on how your beliefs affect your professional practice.
- Describe the evolution of your nursing care philosophy.

Section 11
Essential IX: Baccalaureate Generalist Nursing Practice
Outcomes:
1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches.
2. Recognize the relationship of genetics and genomics to health, prevention, screening, diagnostics, prognostics, selection of treatment, and monitoring of treatment effectiveness, using a constructed pedigree from collected family history information as well as standardized symbols and terminology.

3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings.

4. Communicate effectively with all members of the healthcare team, including the patient and the patient’s support network.

5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences.

6. Implement patient and family care around resolution of end-of-life and palliative care issues, such as symptom management, support of rituals, and respect for patient and family preferences.

7. Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient engagement in their care.

8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan.


10. Facilitate patient-centered transitions of care, including discharge planning and ensuring the caregiver’s knowledge of care requirements to promote safe care.

11. Provide nursing care based on evidence that contributes to safe and high quality patient outcomes within healthcare Microsystems.

12. Create a safe care environment that results in high quality patient outcomes.

13. Revise the plan of care based on an ongoing evaluation of patient outcomes.

14. Demonstrate clinical judgment and accountability for patient outcomes when delegating to and supervising other members of the healthcare team.

15. Manage care to maximize health, independence, and quality of life for a group of individuals that approximates a beginning practitioner’s workload.

16. Demonstrate the application of psychomotor skills for the efficient, safe, and compassionate delivery of patient care.

17. Develop a beginning understanding of complementary and alternative modalities and their role in health care.

18. Develop an awareness of patients as well as healthcare professionals’ spiritual beliefs and values and how those beliefs and values impact health care.

19. Manage the interaction of multiple functional problems affecting patients across the lifespan, including common geriatric syndromes.

20. Understand one’s role and participation in emergency preparedness and disaster response with an awareness of environmental factors and the risks they pose to self and patients.
22. Demonstrate tolerance for the ambiguity and unpredictability of the world and its effect on the healthcare system as related to nursing practice.

Essential XII Examples:
- Paper describing how your philosophy of nursing practice evolved.
- Paper reflecting on how spiritual beliefs impact a patient’s health.
- Compare and contrast a care plan from each nursing course by discussing how your patient interventions and personal professional growth/viewpoints evolved over time (beginning to more complex).
- Discharge planning for a particular patient.

Tabs
1. Career Development
   a. CV, Reference Page, Recommendation Letters
2. Evolution from novice to beginning professional nurse
3. Competency
4. Personal and Professional Goals
5. Copies of Licenses & Certifications
6. Professional Affiliations
7. Community Service/Volunteer Hours
8. Awards/Honors
9. Misc – Any other highlights, documents
10. Philosophies of health, nursing, client/person, environment, faculty and student
11. Essential I Liberal Education
12. Essential II Organization, Leadership, Quality Care
13. Essential III Evidenced based practice
14. Essential IV Information management and patient care technology
15. Essential V Healthcare policy, finance, regulatory environment
16. Essential VI Interprofessional communication and collaboration
17. Essential VII Clinical prevention and population health
18. Essential VIII Professionalism and professional values
19. Essential IX Baccalaureate nursing practice
20. Summary and References

PROFESSIONAL PORTFOLIO GRADING CRITERIA – NURS 460

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>Possible Points</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Professional binder</td>
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<td></td>
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<td>B. Resume</td>
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<td>D. Recommendation letters</td>
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<td>H. Awards/Honors</td>
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<td>V. Personal and professional goals</td>
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<td>VI. Philosophy of health, nursing, client/person, and environment</td>
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<td>VII. The Nine Essentials</td>
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<td>VII. The Nine Essentials</td>
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COMMENTS: ______________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

STUDENT SIGNATURE: _____________________________ DATE: ______

INSTRUCTOR SIGNATURE: ___________________________ DATE: ______
## Portfolio Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Exceeds Expectations (4)</th>
<th>Meets Expectations (3)</th>
<th>Approaching Expectations (2)</th>
<th>Not Meeting Expectations (1)</th>
<th>Weight</th>
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<tr>
<td>Professional Presentation</td>
<td>The portfolio is in a 3-ring binder with all appropriate tabs and with a professional look.</td>
<td>The portfolio is in a 3-ring binder with less than 90% appropriate tabs and with a professional look.</td>
<td>The portfolio is in a 3-ring binder with less than 80% appropriate tabs and with a professional look.</td>
<td>The portfolio is not a 3-ring binder with less than 50% appropriate tabs and not with a professional look.</td>
<td>X 1</td>
</tr>
<tr>
<td>Career Development</td>
<td>All areas of the Career Development are included and complete.</td>
<td>90% or more of areas of the Career Development are included and complete.</td>
<td>80% or more of the areas of the Career Development are included and complete.</td>
<td>50% or more of the areas of the Career Development are included and complete.</td>
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<tr>
<td>Evolution from Novice to Beginning Professional Nurse</td>
<td>The student is able to describe growth and development in becoming a professional nurse after each nursing core course (12 courses).</td>
<td>The student is able to describe growth and development in becoming a professional nurse after each nursing core course (10 courses).</td>
<td>The student is able to describe growth and development in becoming a professional nurse after each nursing core course (8 courses).</td>
<td>The student is able to describe growth and development in becoming a professional nurse after each nursing core course (6 or less courses).</td>
<td>X 3</td>
</tr>
<tr>
<td>Competency</td>
<td>The student is able to showcase competencies throughout the clinical experience (8 Clinical Labs).</td>
<td>The student is able to showcase competencies throughout the clinical experience (6 Clinical Labs).</td>
<td>The student is able to showcase competencies throughout the clinical experience (4 Clinical Labs).</td>
<td>The student is able to showcase competencies throughout the clinical experience (2 or less Clinical Labs).</td>
<td>X 2</td>
</tr>
<tr>
<td>Personal &amp; Professional Goals</td>
<td>The student will have five personal and professional goals.</td>
<td>The student will have four personal and professional goals.</td>
<td>The student will have three personal and professional goals.</td>
<td>The student will have two or less personal and professional goals.</td>
<td>X 2</td>
</tr>
<tr>
<td>Criteria</td>
<td>Exceeds Expectations (4)</td>
<td>Meets Expectations (3)</td>
<td>Approaching Expectations (2)</td>
<td>Not Meeting Expectations (1)</td>
<td>Weight</td>
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<tr>
<td>Philosophy of health, nursing, client/person, and environment</td>
<td>The student articulates a philosophy and shows 3-4 examples of integration into professional practice.</td>
<td>The student articulates a philosophy clearly and has one example of how practice is influenced.</td>
<td>The student has a philosophy but no evidence of integration into practice.</td>
<td>The student has not articulated a clear philosophy or integrated the philosophy into practice.</td>
<td>X 1</td>
</tr>
<tr>
<td>The Nine Essentials</td>
<td>The student will show multiple examples of how the nine essentials have been successfully achieved.</td>
<td>The student will show 2 examples of how the nine essentials have been successfully achieved.</td>
<td>The student will show 1 example of how the nine essentials have been successfully achieved.</td>
<td>The student is unable to show examples of how the nine essentials have been successfully achieved.</td>
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<td>Overall Range</td>
<td>Exceeds Expectations 84-69</td>
<td>Meets Expectations 68-53</td>
<td>Approaching Expectations 52-37</td>
<td>Not Meeting Expectations 36-21</td>
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APPENDIX O – MSN PORTFOLIO

Section 1 Portfolio Basics

WEST COAST UNIVERSITY has a graduation requirement for all students in the MSN Program: a portfolio to assess achievement of the role competencies for advanced nursing practice. The process of building your portfolio will encourage you to evaluate the contributions of your courses and clinical experiences to the development of knowledge and skills needed to be successful in an advanced nursing practice role.

Continuous change and innovation within the healthcare delivery system underscores the need for the nursing profession to look to the future and anticipate the healthcare needs for which nurses must be prepared. The complexities of health and nursing care today make expanded nursing knowledge a necessity in contemporary healthcare settings. The transformation of health care and nursing practice requires a new conceptualization of master’s education. Master’s education must prepare the graduate to:

• Assume accountability for quality care outcomes,
• Navigate and integrate care services across the healthcare system,
• Lead and mentor healthcare team members,
• Collaborate with and build interprofessional care teams,
• Design innovative nursing practices, and
• Facilitate the translation of evidence into practice.

Graduates of master’s degree programs in nursing are prepared with broad knowledge and practice expertise that builds and expands on baccalaureate or entry-level nursing practice. The portfolio is used to reflect achievement of the competencies achieved in the graduate program.

Why a portfolio?

• The portfolio will demonstrate to you and others that you have achieved success in meeting the educational outcomes of the WCU College of Nursing and the standards for an advanced nursing practice role set by the American Association of Colleges of Nursing.
• Designing your portfolio is a creative endeavor that showcases your educational accomplishments.

Portfolio uses:

• Graduation requirement reflecting achievement of Program Learning Outcomes.
West Coast University College of Nursing  
RN Student Handbook

- May be used in interviews for potential employment to highlight entire MSN achievement.
- Reflects upon major accomplishments from the start of the MSN program to attainment of advanced nursing practice role competencies.
- Used to support an application to a doctoral program.

**Where can I see a sample of a Portfolio?**

You can access a sample of a portfolio during office hours in the Library and Career Services. The graduate version will be housed electronically and available at a later date.

**What is a portfolio?**

Portfolios have been defined as a purposeful collection of student work that exhibits the student’s efforts, progress, and achievement in one or more areas.

Reflective portfolios have been defined as the collection of evidence that attests to achievement as well as personal and professional development through a critical analysis and reflection of its contents. What separates a reflective portfolio from the “showcasing of best work” is engaging in introspection. This definition has been used extensively in the nursing and medical literature (Plaza et. al., 2007, Norman. K. 2008).

**How will the portfolio process relate to my MSN program?**

Your portfolio is framed by the Program Learning Outcomes (PLOs) for the graduate program and the Essentials of Master’s Education for Professional Nursing Practice (AACN, 2011). A copy of the Essentials is in Appendix C which elaborates in detail the content and experiences which lead to competency. Throughout the MSN program you will save samples of your best work from your theory and clinical courses which reflect achievement of the PLOs and the Essentials. These works will be included in the portfolio.

As you progress through the nursing program, many of your courses will have activities that will be directed toward meeting the program learning outcomes and the Essentials.

**Academic Portfolio Grading Criteria**

6. The portfolio is a curricular requirement for the MSN program which reflects achievement of the nine Program Learning Outcomes.
7. Gathering of data for the portfolio begins with the first courses in the curriculum.
8. The portfolio will be evaluated by nursing faculty as a capstone project worth 30% of the grade in NURS 590. Students must achieve an 85% passing grade on the portfolio to pass NURS 590. The due date will be announced by faculty in the NURS 590 course.
9. Two checkpoints for evaluation of progress, feedback, and final grading by faculty will be implemented:
a. Checkpoint One:  NURS 550 Advanced Practice Role course, evaluation, and feedback, due date TBA.
b. Checkpoint Two:  NURS 590, Advanced Clinical Practice Theory, final evaluation and grade, due date TBA

Portfolio Organization

The portfolio will be organized around the nine Program Learning Outcomes and the nine Essentials. One of the main goals of the portfolio is to demonstrate to yourself and others that you are achieving success in meeting the standards of student excellence set forth by the university.

Your portfolio will be organized in an ePortfolio (electronic) format with sections indicating (Until that is available use the hard copy mode) Be as professional and creative as you wish in designing your portfolio. Include a variety of your work which reflects best achievements from among courses and clinical experience. Within nursing courses and clinical practicum’s, endeavor to describe, in a concise narrative, changes in your viewpoint regarding nursing practice and/or your professional growth.

Portfolio Sections (Tabs)

21. Professional Career Development
   a. Cover Letter

   **Cover Letter:**  Name, address, phone number, fax number, email address. This one page cover letter should also have a brief summary of your qualifications and preparation to assume an advanced nursing practice role.

   b. Curriculum Vitae

   **Use the format template for the American Academy of Nursing (Appendix A).** Describe your work history with particular attention to knowledge, skills, and achievements in nursing practice, education and/or administration. Do not exceed four pages.

   c. Evolution from novice to advanced nursing practice

   As you progress from one course to the next, changes will be taking place on a professional and personal level, document these changes in reflective summaries after each graduate course.

   d. Personal and Professional Goals

   Develop at least five professional goals and evaluate progress towards achievement near the time of graduation; update and/or revise over time but at
least annually throughout your career. The goals need to have a date of completion, must be measurable and you must state briefly how you will attain those goals.

e. Highlights of Excellence in Clinical Practice

Showcase your graduate level skills used in graduate school, selected superior papers, projects or end-of-course clinical evaluations which highlight your excellence in practice, knowledge, skills, etc. Highlight your personal educational graduate level work and growth each term; you may also highlight those areas where you felt you had the greatest growth and what brought about the most change.

f. Copies of Licenses & Certifications

Showcase your skills by including any certifications, licenses, for example, certification for Nurse Manager certificate, Registered Nurse License, Public Health Certificate, ACLS, Basic Life Support (BLS), and/or specialized certifications in areas of clinical practice.

g. Professional Affiliations

If you are affiliated with any professional organizations, list them in this section such as American Nurses’ Association, ANA\C, or any other professional organizations that showcases your commitment to the profession.

h. Community Service/Volunteer Hours

List any volunteer hours whether related to the medical field or not. This shows commitment and a want to help others as well as dedication.

i. Awards/Honors

j. Misc – Any other highlights, documents

If you are involved in any other activities that will show core values such as commitment, dedication and trust – list them here. An example is being a member of the Armed Services. Include in this section your immunizations, malpractice insurance, and any other documents you may need to attend your clinical rotations.

22. Philosophy of Professional Nursing Practice

23. Exemplars of BSN Essentials Competence (Appendix B RN-MSN Students Only)

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

24. Exemplars of Achieving Program Learning Outcomes and MSN Essentials Competence (Appendix C)
   a. Integrate nursing science and related fields, such as physiology, statistics, psychosocial, political, financial, genetics, public health and organization sciences in the continued improvement of nursing across the continuum of health care settings.
      i. Essential I: Background for Practice from Sciences and Humanities

      Examples: Uses theory from the humanities, biopsychosocial fields, genetics, public health, quality improvement, health economics, translational science, and organizational sciences to analyze clinical problems; design care to meet the needs of multiple populations; evaluate diagnostic, educational and therapeutic interventions.

      b. Provide leadership in a variety of settings that promote high quality, safe patient care that also incorporates ethical decision making and effective inter-professional working relationships.

      i. Essential II: Organizational and Systems Leadership

      Examples: Scholarly paper on health disparities and a program to promote excellence in practice; plan a change in the delivery system for the purpose of providing better care; evidence of skill development in communication, collaboration, negotiation, delegation, and coordination; healthcare team leadership; management of human, fiscal and physical healthcare resources.
c. Demonstrate the skills needed to effect quality improvement that incorporates the various models, standards and performance measures necessary to apply quality principles, within any type of organization.

i. Essential III: Quality Improvement and Safety

Examples: Design process to make patients safe; propose a system to create a just culture of safety; evaluate, calculate and improve the overall reliability of safety processes; use national patient safety resources, initiatives and regulations to support a safety plan; design and implement a quality improvement proposal.

d. Apply evidenced based research in clinical practice by identifying actual or potential practice problems in a setting and resolving them through the role of change agent.

i. Essential IV: Translating and Integrating Scholarship Into Practice

Examples: Identify gaps in practice where research is needed; apply research outcomes in practice; identify researchable questions; search for or create the evidence to support potential solutions/innovations; skill development in knowledge acquisition and dissemination, working in groups and change management; rigorous critique of evidence; protection of human subjects (IRB).

e. Demonstrate proficiency in computer skills both technical and in the application of informatics to enhance, deliver, communicate, integrate and coordinate patient care.

i. Essential V: Informatics and Healthcare Technologies

Examples: Use of communication technologies to coordinate care; use data management to improve patient care; use technology to educate health professionals, staff, patients and caregivers; ethically manage data (HIPAA); use research and clinical evidence to inform practice decisions; epidemiological analysis; promote health literacy; analyze data sets (SPSS).

f. Recognize the need for and ability to affect policy changes by using the policy development process and advocacy strategies to influence individual health and health care systems.

i. Essential VI: Health Policy and Advocacy

Examples: Influence policy formation; affect a change in a delivery system; promote social justice; voice a position on a health issue or policy at the institution, state or federal level; develop and implement a policy; reflect on the linkages between policy, financing and quality health care.
g. Communicate and coordinate inter-professionally in a variety of settings to manage and coordinate care.

   i. Essential VII: Interprofessional collaboration for Improving Patient and Population Health Outcomes

Examples: Paper or project which reflects cooperation, communication and collaboration among all member of the health care team; plan to improve patient care outcomes by recognition of patient values, preferences and culture; leadership of an interprofessional team.

h. Identify and integrate the various evidenced based practices of health promotion and disease prevention using client centered, culturally and age appropriate concepts in the nursing process of services to individuals, families and broad-based aggregate populations.

   i. Essential VIII: Clinical Prevention and Population Health for Improving Health

Examples: Plan population-oriented preventive interventions; provide care and services to a unique culture or ethnic group; design and deliver clinical prevention interventions to meet a health disparity; design patient-centered and culturally responsive strategies; promote population-based health policy.

   i. Demonstrate an advanced level of scientific and nursing-specific knowledge with the ability to integrate that knowledge into nursing practice that influences health care outcomes for individual, families, populations and/or systems.

   i. Essential IX: Master’s-Level Nursing Practice

Examples: Influence healthcare of individuals, populations or systems; plans for life-long learning and professional development; practice experiences beyond those acquired in a pre-licensure nursing program; integrate quality improvement, patient safety, economics of health care, epidemiology, genetics/genomics, gerontology, global healthcare, health policy, informatics, organizations and systems, communication, negotiation, advocacy and interprofessional practice in advanced nursing practice.
**Additional examples of items you may include within your portfolio.**

- Must include work that reflects evidence of quality care outcomes, best practices, leadership, interprofessional team membership and team work, innovative nursing practice and the translation of evidence into practice. – i.e.
- Paper written regarding ethical issues within nursing and healthcare.
- Art work – drawing, painting, color, video, poem or song or sounds, particularly as it is evidence of translating evidence into practice
- Presentation turned in for a science, statistics, research or practice course.
- Your philosophy of nursing at the beginning and end of the program. Journal of your progress throughout the program
- Reflective essay on how the MSN level coursework has helped you develop a personal value system that includes the capacity to make and act upon ethical judgments.
- Describe the process for changing current practice.
- Flow chart of the research concepts implemented in your coursework.
- Compare and contrast the problem solving process, the nursing process and the research process.
- Write a letter to a senator or congressman about new patient care technologies for safe, quality care. Financial and scholarly paper or budgets related to the implementation of healthcare or nursing policy implementation.
- Advanced nursing practice issues related to the business and politics of health care
- Paper on ethics in healthcare.
- Team project with explanation of group process skills used to accomplish a task.
- Search the Centers for Disease Control Site for the leading cause of death in the United States for teens, adults and elders.
  1. Describe the contributing factors, health promotion, illness and/or injury prevention appropriate for each age group.
  2. Demonstrate your understanding of health care statistics and how it is used to develop research questions and policy implementation
- Describe how attitudes, values, and expectations impact patient care.
- Reflect on how your beliefs affect your professional practice.
- Paper describing how your philosophy of nursing practice evolved.
- Paper reflecting on how spiritual beliefs impact a patient’s health.
- Demonstration of the work required to obtain certification in a specialty area of nursing

Adapted from:
American Association of Colleges of Nursing *The Essentials of Baccalaureate Education for Professional Nursing Practice* (2008)

*The Essentials of Master's Education in Nursing* (2011)

Moore, D.S. (2011) *You know you are a nurse- when you are employed as one.* The Nursing Voice January 2011. [www.anacalifornia.ORG](http://www.anacalifornia.ORG)
## PORTFOLIO GRADING CRITERIA MSN – NURS 590

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<thead>
<tr>
<th>CRITERIA</th>
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<td>Evidence supports portfolio binder is appropriate and student has</td>
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<tr>
<td>addressed all components. Use APA formatting and appropriate</td>
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<td>references in APA style where appropriate.</td>
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<td><strong>II. Professional Presentation</strong></td>
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<td>J. Curriculum Vitae</td>
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<td>K. Evolution from novice professional to advanced</td>
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<td>nursing practice</td>
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<td>L. Personal and Professional Goals</td>
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<td>M. Highlights of Excellence in Clinical Practice</td>
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<td>N. Copies of licenses and certifications</td>
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<td>P. Community Service/Volunteer Hours</td>
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<td>Q. Awards/Honors</td>
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<td>R. Any other highlights</td>
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<td><strong>VIII. Philosophy of Professional Nursing</strong></td>
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<td><strong>IX. Exemplars of BSN Essentials Competence</strong></td>
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<td><strong>TOTAL POINTS AWARDED</strong></td>
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**COMMENTS:**

__________________________

STUDENT SIGNATURE: ____________________________  DATE: _______________

Faculty Signature: ____________________________  Date ________________
## Professional Portfolio Rubric MSN

<table>
<thead>
<tr>
<th>Criteria</th>
<th>%</th>
<th>Exceeds Expectations (4)</th>
<th>Meets Expectations (3)</th>
<th>Approaching Expectations (2)</th>
<th>Not Meeting Expectations (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Presentation of Portfolio</td>
<td>5</td>
<td>The portfolio is in a 3-ring binder or other professional binding with all appropriate tabs and with a professional look.</td>
<td>The portfolio is in a 3-ring binder or other professional binding with less than 90% appropriate tabs and with a professional look.</td>
<td>The portfolio is in a 3-ring binder with less than 90% appropriate tabs and with a professional look.</td>
<td>The portfolio is not a 3-ring binder with less than 50% appropriate tabs and not with a professional look.</td>
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<td>15</td>
<td>All areas of the Career Development are included and complete.</td>
<td>90% or more of areas of the Career Development are included and complete.</td>
<td>80% or more of the areas of the Career Development are included and complete.</td>
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<td>• Other</td>
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<td>Evolution from Novice to Advanced Nursing Practice</td>
<td>5</td>
<td>The student is able to describe in detail and with proper English and creative writing their growth and development in becoming an advanced practice nurse</td>
<td>The student is able to describe using proper English, their growth and development in becoming an advanced practice nurse</td>
<td>The student describes their basic growth and development in becoming an advanced practice nurse</td>
<td>The student poorly describes either in content, format or proper English their growth and development in becoming an advanced practice nurse</td>
</tr>
<tr>
<td>Personal &amp; Professional Goals</td>
<td>5</td>
<td>The student will show evidence in obtaining five personal goals.</td>
<td>The student will show evidence in obtaining four personal and professional goals.</td>
<td>The student will show evidence in obtaining three personal and professional goals.</td>
<td>The student will show evidence in obtaining two personal and professional goals.</td>
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<tr>
<td>Highlights of Excellence in Clinical Practice</td>
<td>5</td>
<td>The student is able to showcase outstanding examples of excellence in clinical practice</td>
<td>The student is able to showcase very good examples of excellence in clinical practice</td>
<td>The student is able to showcase an acceptable level of excellence in clinical practice</td>
<td>The student is only able to showcase minimal examples of excellence in clinical practice</td>
</tr>
<tr>
<td>Philosophy of Professional Nursing Practice</td>
<td>5</td>
<td>The student presented a well developed and clearly articulated personal and professional philosophy and beliefs about professional and advanced nursing practice</td>
<td>The student showed evidence of an acceptable stage of development of their own personal and professional philosophy and beliefs about professional and advanced nursing practice</td>
<td>The student showed minimal evidence that they were able to develop their own personal and professional philosophy and beliefs about professional and advanced nursing practice</td>
<td>The student did not develop their own personal and professional philosophy and beliefs about professional and advanced nursing practice</td>
</tr>
<tr>
<td>Exemplars of BSN Essentials Competency (RN-MSN Students Only)</td>
<td>10</td>
<td>The student shows exceptional evidence that the BSN Essentials have been successfully achieved.</td>
<td>The student shows very good evidence that the BSN Essentials have been successfully achieved.</td>
<td>The student shows average/acceptable evidence that the BSN Essentials have been successfully achieved.</td>
<td>The student shows minimal evidence that the BSN Essentials have been successfully achieved.</td>
</tr>
<tr>
<td>Exemplars of Achieving PLOs and MSN Essentials</td>
<td>50 - 60</td>
<td>The student shows exceptional evidence that the</td>
<td>The student shows very good evidence that the nine</td>
<td>The student shows average/acceptable evidence</td>
<td>The student shows minimal evidence that the nine</td>
</tr>
<tr>
<td>nine essentials have been successfully achieved.</td>
<td>essentials have been successfully achieved.</td>
<td>that the nine essentials have been successfully achieved.</td>
<td>essentials have been successfully achieved.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix P – Nursing Student Handbook Receipt Form

Student Nursing Handbook Receipt

Please sign and date this form to verify you have been provided with a copy of the WEST COAST UNIVERSITY Nursing Handbook. It is your responsibility to read this handbook in its entirety and keep it for reference throughout your time in the nursing program. Policies are subject to change at any time.

__________________________________________________________________________

Student Signature

Date

__________________________________________________________________________

Name (Please print)