



**MALONE
UNIVERSITY**

DEPARTMENT OF
NURSING

BSN PROGRAM


STUDENT
HANDBOOK
2024-2026

This Student Handbook is for the BSN program and it complements the Malone University Undergraduate Catalog and the Malone University Student Handbook. Enclosed are policies specific to the BSN major as well as additional information to assist the nursing student in their progression through the baccalaureate (pre-licensure) nursing program. Malone University and the BSN program reserve the right to amend the Admission and Progression criteria, standards, policies, and procedures at any time. Students will be notified individually of any changes through their Malone University email account or written communication from the Program Leadership. It is the responsibility of each student to check their Malone University email activity regularly. The student is responsible for checking handbook for updates at the beginning of each academic year. Students will be oriented to the handbook in their initial nursing course.

TABLE OF CONTENTS

Student Introduction Page.....	2
Table of Contents.....	3
“The Finest of the Fine Arts”.....	5
Letter of Welcome.....	6
Devotional Thought and Scripture.....	7
OVERVIEW OF NURSING PROGRAMS	
Philosophy.....	9
History: A Summary.....	11
CURRICULUM FOR THE BSN PROGRAM	
Curriculum Overview.....	13
STANDARDS FOR NURSING PRACTICE	
Essentials in Baccalaureate Education in Nursing (2008).....	17
ANA Scope and Standards of Practice.....	18
Quality of Care and The Ethical Code for Nurses.....	19
ANA Code of Ethics for Nurses.....	19
Quality and Safety Education for Nurses.....	20
The Practice of Nursing in the State of Ohio.....	20
POLICIES AND RELATED INFORMATION FOR NURSING STUDENTS	
Admission and Progression.....	22
Academic Advising.....	24
Policy on Repeat of Nursing and Support Courses.....	24
Policy for Students with Select Course GPA or Cumulative GPA Below 2.5.....	25
Student Decision to Exit from Progression in the Nursing Major.....	26
Pharmacology and Medical Math Competency Testing/Standardized Testing.....	27
Core Performance Standards.....	28
Special Considerations Regarding Clinical Performance.....	29
Procedure for Student Illness or Injury.....	30
Professional Behavior Policy.....	31
Netiquette Policy.....	34
Guidelines for use of Social Media.....	34
Class and Laboratory/Clinical Attendance.....	35
Policy for Student Request to Schedule an Excused Absence.....	36
Requirements and Guidelines for Participating in Clinical.....	37
Health Policies.....	38
Vaccine Requirements – COVID 19 and Flu.....	39
Policy on Mandatory Drug Screening for Nursing Majors.....	42
Policy on Criminal Background Checks.....	42

Clinical Grading	43
Clinical Preparation	48
Dress Code	49
Student Signature.....	50
Transportation	50
Nursing Fees and Expenses	51
Guidelines for the Centers for Study & Testing, Clinical Learning and Nursing Exploration	52
Tutoring Guidelines.....	53
Guidelines for Written Work	57
Nursing Literature	59
NURSING PROGRAM EVALUATION	
Assessment of Outcomes.....	61
Evaluation of Curriculum	62
Evaluation of Student Performance	62
Systematic Evaluation Plan	63
PROBLEM RESOLUTION	
Guiding Principles for Problem Resolution and Conflict Management	70
Nursing Academic Grievance Procedure.....	70
Probation, Suspension, and Dismissal	70
NURSING BYLAWS AND ORGANIZATIONS	
Department of Nursing Bylaws	72
Nursing Student Organizations.....	76
Malone Nurses Christian Fellowship Constitution	77
Malone Nursing Students Association Constitution	79



“Nursing is an art;
and if it is to be made an art,
it requires as exclusive a devotion,
as hard a preparation,
as any painter’s or sculptor’s work;
for what is the having to do with
dead canvas or cold marble,
compared with having to do
with the living body—
the temple of God’s spirit?
It is one of the Fine Arts. . .
The finest of the Fine Arts”

—Florence Nightingale



On behalf of the faculty, professional staff and administrative personnel, we welcome you to nursing at Malone University! It is an honor to be a part of your educational preparation for this exciting and rewarding profession. To many, nursing is the response to a calling from God. To others, it represents a desire to “follow in the footsteps” of certain individuals, often family members, for whom there is great respect and admiration. Still, some seek to become a nurse knowing only that they want to “help people”. The beauty of nursing is that it is all these things, and more. You have many reasons to be excited to begin this journey; we have many reasons to be excited for the unique and amazing ways you will make nursing your calling, your profession, your legacy.

What follows this page is an overview, and some detail, of the traditional undergraduate nursing curriculum, its policies and procedures, and important related information that will guide you along these next years of study and clinical experiences. Use it in conjunction with other policies for Malone students, located in the Malone University Catalog, to find answers to questions about your experiences within the University, Department of Nursing, and nursing curriculum.

In closing, we invite you to fully engage in the experience of being a student nurse at Malone University. Study hard and learn much, but, first and foremost, seek Christ’s Kingdom first. Be assured of our prayers for your success, well-being, and growth as a student, person, and nurse.

Sincerely yours,

Carrie Stroup

Carrie Stroup, DNP, RN, CNE
Dean, Division of Natural and Health Sciences
Chief Nurse Administrator
BSN Program Administrator



“And whatever you do, whether in word or deed, do it all in the name of the Lord Jesus, giving thanks to God the Father through him.” Colossians 3:17 (NIV)

This verse is inscribed on the cornerstone of Regula Hall, home of the Department of Nursing at Malone University.

Whatever you do, whether in word or deed. . .

During the next four years, you will find yourself busy with both. Reading, studying, taking exams, writing papers, and practicing are all important skills to master in preparing for a career as a nurse. Sometimes it won't be easy—and you may get discouraged. But remember that Jesus had to go through a learning process here on earth too. Luke 2:52 talks about His journey growing physically, mentally and socially. It is our hope that you too will be able to come together and learn from each other.

. . .do it all in the name of the Lord,

The uniqueness of the Nursing Program at Malone University lies not in the faculty, or in the curriculum, but in the philosophy of “Christ’s Kingdom First”. The mission statement found in the Undergraduate Catalog states that:

The mission of Malone University is to provide students with an education based on biblical faith in order to develop men and women in intellectual maturity, wisdom, and Christian faith who are committed to serving the church, community and world.

It is not just a saying here, but a driving force behind the faculty’s commitment to provide an educational experience that focuses not only on the intellectual but physical, emotional, social and spiritual aspects of life.

. . .giving thanks to God the Father through Him.

Let us come together this school year and learn from each other. Let us approach our learning in a holistic way, not forgetting to give thanks in everything. And let each of us assess our lives and discover how God would have us live on earth as we prepare to live in eternity with Him.

OVERVIEW OF NURSING PROGRAMS

Malone University Department of Nursing

NURSING PHILOSOPHY

The Department of Nursing is an integral part of Malone University and aligns itself with the University mission statement, foundational principles, educational goals and community responsibilities. The programs and policies of Malone University are founded upon a commitment to the evangelical Christian faith, the Biblical principles of God's love, and accountability to God for self and others.

It is this love and accountability to God and God's call to care for the needs of all people that provide a natural foundation for the Malone nursing student to study and prepare to enter the profession of nursing in a diverse global society.

In line with many of the grand theorists of nursing, the philosophy of the nursing programs center on four foundational nursing concepts that include person, environment, health, and nursing. The faculty believe that situating the nursing paradigm within the conceptual framework of the nursing curriculum provides for the organization of content, skills, and expected professional behavior (See Figure 1).



Figure 1. Department of Nursing Conceptual Framework

Person – Every person has been created in the image of God, and therefore is endowed with dignity, value, and worth, regardless of beliefs, cultural, mental, physical, or social characteristics.

Environment – Every environment includes elements that are natural and created, seen and unseen (spiritual and psychosocial-holistic) in a constant state of transition.

Health – Because we view the person as an integrated whole, “created to live in harmony with God, self, and others, and the environment”, we believe health is being able to function as God created us to be (Shelly et. al, 2021, p.186). This involves being reconciled to God and others, giving and accepting love and forgiveness, and having a sense of purpose and meaning in life that fosters joy and hope, and goes beyond the absence of disease or infirmity.

Nursing – Nursing is the integration of the arts, sciences, and caring into a professional practice that assists persons to attain, maintain or restore an optimal level of functioning. As reflected in the mission of Malone University, the nurse is

one who strives to deliver “excellence in physical care, good psychosocial support and spiritual care” (Shelly et. al, 2021, p.303) in service to the church, community, and world.

Nursing education is an interactive teaching-learning process within an interdisciplinary curriculum. Nursing scholarship serves to sustain and advance the knowledge and values of a profession dedicated to both social relevance and scientific advancement.

In addition to introducing students to the knowledge and values of the discipline, faculty and staff must also guide them to practice from a disciplinary perspective. Through the education experience, students become self-accountable and competent in seeing patients through the lens of wholeness and interconnectedness with family and community; appreciating how the social, political, and economic environment influences health; attending to what is most important to well-being; developing a caring-healing-relationship; and honoring personal dignity, choice and meaning.

Knowledge of the discipline continues to grow through graduate education, as students apply and generate nursing knowledge in their advanced nursing roles or develop and test theories as researchers. Nursing practice should be guided by a nursing perspective while functioning within an interdisciplinary arena. To appropriately educate the next generation of nurses, disciplinary knowledge must be leveled to reflect the competencies or roles expected at each level.

Through nursing education, scholarship, and practice, grounded in love and accountability to God and God's call to care for the needs of all people, Malone nursing students are prepared to enter the profession of nursing in a diverse global society.

Works cited: Shelly, J.A., Miller, A.B., & Fenstermacher, K.H. (2021). Called to care: A Christian vision for nursing. InterVarsity Press.

MALONE UNIVERSITY DEPARTMENT OF NURSING HISTORY: A SUMMARY

Malone College was relocated to Canton, Ohio in 1957 at which time it was identified as a liberal arts college. Prior to that time it was located in Cleveland, Ohio where, in 1892, Walter and Emma Malone established the Cleveland Bible College. The purpose then and now is to provide students with an education based on Biblical faith. Malone College officially became Malone University in 2008. Today Malone University is described as a Christian College for the Arts, Sciences, and Professions.

Nursing was established as a major in 1987. In 1990 the college graduated eight students with the BSN degree. In 1994 the BSN completion program was started for registered nurses. The lock-step delivery system for this separate program admitted a class to start every fall and spring semester. In the fall of 2002 the MSN program was started; one class is admitted each fall. As of 2022, Malone University has graduated nearly 2,400 women and men prepared to serve their community, church, and the world as compassionate, competent, professional nurses.

There have been two nursing student organizations active at Malone since 1990: the Malone University Nursing Student Association (MSNA) and the Malone University Nurses Christian Fellowship (MNCF). All nursing students are invited to these organizations, though they mainly serve the BSN program. Students hold elected offices and faculty/staff serve as advisors. Sigma Theta Tau International, nursing's national honor society, chartered the Pi Chi chapter of Malone University in 2000. We were honored to have Dr. Betty Neuman, an eminent nursing theorist, as the induction speaker during her second visit to the Malone campus in April of 2005. We celebrated the 20th anniversary of our charter during the 2020 fall induction ceremony and installation of new officers; such a momentous occasion! Invitations to eligible students are issued each fall and new members are inducted each October.

The baccalaureate program received initial nursing accreditation in 1992 by the National League for Nursing (NLN). This followed earlier approval by the Ohio Board of Nursing, authorization by the Ohio Board of Regents, and accreditation by The Higher Learning Commission - North Central Association. The next scheduled visit by the National League for Nursing in 1997 resulted in continuing accreditation with no recommendations – an unusual but affirming outcome! Prior to the next NLN reaccreditation period, the leadership team sought and was granted preliminary program approval from the Commission on Collegiate Nursing Education (CCNE). An evaluation visit with CCNE in November of 2004 resulted in extended accreditation for the BSN program until 2014 and initial accreditation for the MSN program that extended until 2009. Both programs have been continuously and unconditionally accredited by CCNE since that time. The next site visit for the BSN program is due in 2024, at which time the MSN program will also be reviewed for reaccreditation, conforming to CCNE's most recent stipulation that all programs be on one review/reaccreditation schedule.

The most recent survey visit by the Ohio Board of Nursing was conducted in September 2020 – our first virtual site visit (thanks to the pandemic)! The program received full approval for a period of 5 years; our next approval visit will occur in the fall of 2025. Program memberships are maintained with the American Association of Colleges of Nursing (AACN), the Commission on Collegiate Nursing Education (CCNE), and the National Organization of Nurse Practitioner Faculty (NONPF).

Throughout the years, the academic structure within the institution has changed, going through some seasons with schools and deans, to other seasons with departments and chairs, to the most recent iteration of divisions and deans. Beginning in August of 2024 the Department of Nursing became part of the newly developed Division of Natural and Health Sciences. Our division is one of four, the others being the Division of Social and Behavioral Learning, Division of Business and Technology, and Division of Humanities, Education, and Ministry. The Division of Natural and Health Sciences, and all nursing programs, are overseen by the Dean who is also the Chief Nurse Administrator. She is supported by the program directors for the BSN program, the MSN programs, and the Natural Science programs.

We are most blessed to offer expert faculty and exceptional staff who are dedicated to teaching and serving our students! The dedication of our current "home", Regula Hall, was May 19, 2007. A cornerstone verse was selected: "And whatever you do, whether in word or deed, do it all in the name of the Lord Jesus, giving thanks to God the Father through him." Colossians 3:17 (NIV). Our overall responsibility is to serve the community with professional health care, education, practice, and scholarly endeavors. As we begin a new school year, we give thanks and praise to our Lord and seek His guidance for the students, faculty and staff of the Department of Nursing and Malone University. May we always use our gifts *"to serve others, as faithful stewards of God's grace in its various forms"* (1 Peter 4:10).

Updated: 7/09 ... 8/14, 7/16, 8/18, 8/20, 5/22, 5/24

CURRICULUM FOR THE BSN PROGRAM

BACHELOR OF SCIENCE IN NURSING MAJOR

The primary purpose of the nursing major is to provide a quality nursing education curriculum whereby one may earn the Bachelor of Science in nursing degree (BSN). The basic program prepares a nurse generalist who is qualified to complete the national licensure exam (NCLEX-RN) once the program outcomes are fully met. The basic program allows graduates to pursue specialized study in a graduate program leading to the MSN degree and an advanced practice role/certification.

Courses in the Major (Beginning in Fall 2024*)

NURS 112 - Introduction to Professional Nursing	NURS 314 – Nursing Across the Lifespan II: Clinical
NURS 202 – Health Focused Cultural Theory	NURS 355 – Pathophysiology and Applied Therapeutics I
NURS 203 – Health Focused Cultural Application	NURS 356 – Pathophysiology and Applied Therapeutics II
NURS 215 – Foundations in Nursing Practice I: Theory	NURS 332 – Nursing Research and Evidence Based Practice
NURS 213 – Foundations in Nursing Practice I: Clinical	NURS 415 – Nursing Across the Lifespan III: Theory
NURS 221 - Health Assessment for the Professional Nurse	NURS 417 – Nursing Across the Lifespan III: Clinical
NURS 212 – Foundations in Nursing Practice II: Theory	NURS 419 – Professional Nursing: Leading & Managing I
NURS 214 – Foundations in Nursing Practice II: Clinical	NURS 412 – Complex and Critical Care Nursing: Theory
NURS 311 - Nursing Across the Lifespan I: Theory	NURS 414 – Complex and Critical Care Nursing: Clinical
NURS 313 - Nursing Across the Lifespan I: Clinical	NURS 442 - Professional Nursing: Leading and Managing II
NURS 312 – Nursing Across the Lifespan II: Theory	NURS 462 - The Professional Role

*Students enrolled in NURS courses prior to fall 2024, refer to 22-24 handbook

Support Courses for the Major

BIOL 131 – Human Anatomy & Physiology I	CHEM 115 – Physiology Chemistry
BIOL 132 – Human Anatomy & Physiology II	PSYC 121- Intro to Psychology
BIOL 190 – Nutrition	PSYC 220 – Psych of Human Development
BIOL 371 – Microbiology	

BSN Program Outcomes

Students will:

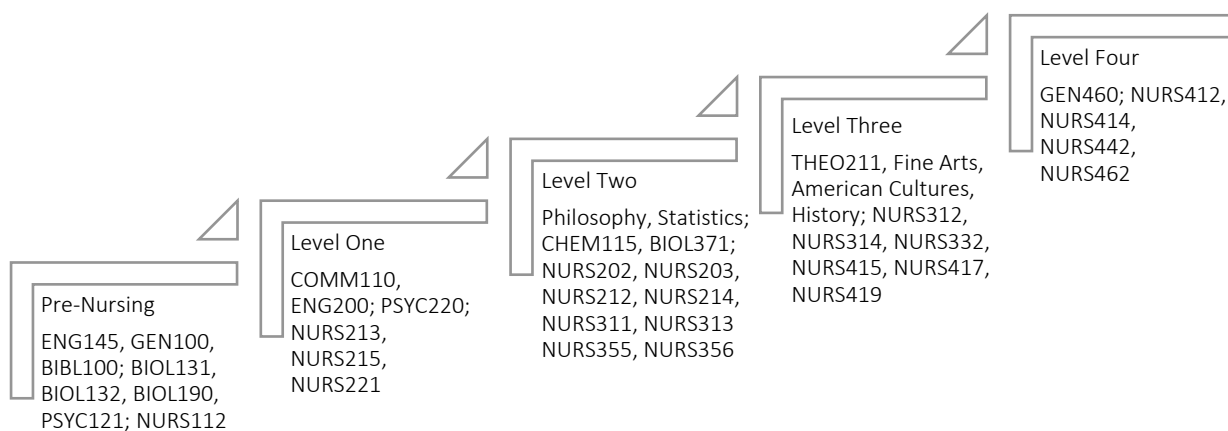
1. Synthesize theoretical and empirical knowledge from the liberal arts, sciences, humanities, Christian faith, and nursing as a source for advancing nursing scholarship and making nursing practice decisions in a variety of nursing contexts and settings.
2. Practice Christian values, ethics, and caring qualities in such a way that personal values are maintained while respecting the rights and dignity of persons with varying physiological, psychological, sociocultural, developmental, and spiritual needs resulting in a foundation for holistic care.
3. Analyze and interpret health status and health potential using the nursing process to facilitate clinical decision-making for prioritization and evaluation of nursing care of patients (person, family, community, and populations).
4. Practice professional accountability and responsibility to provide safe and effective care grounded in evidence-based practice to improve quality and patient outcomes.
5. Utilize effective leadership skills to facilitate the management of patient care through delegation, professional communication, and collaboration with an interdisciplinary team.

BSN Outcomes by Level:

	Level One Soph Fall	Level Two Soph Spring, Jr Fall	Level Three Jr Spring, Sr Fall	Level Four Sr Spring
1.	Apply knowledge from foundational courses in liberal arts, science, humanities and Christian faith to nursing care.	Integrate knowledge from courses in the liberal arts, sciences, humanities, Christian faith, and nursing as a foundation for making patient care decisions.	Apply evidence-based practice framework to integrate knowledge from the liberal arts, sciences, humanities, Christian faith, and nursing to formulate and answer clinical questions.	Integrate theory and scientific research from the liberal arts, sciences, humanities, Christian faith and nursing as a repository for increasing nursing scholarship and nursing decision making in a variety of clinical contexts and settings.
2.	Examine own Christian values, ethics, and caring qualities, and apply as a foundation for providing holistic, patient-centered care.	Integrate Christian values, ethics, and caring qualities to develop a foundation for providing holistic, patient-centered care.	Demonstrate Christian values, ethics, and caring qualities while respecting the rights and dignity of persons with varying physiological, psychological, sociocultural, developmental, and spiritual needs.	Apply Christian ethical values and compassionate care in a manner that shows respect for the rights and dignity of patients with varying physiological, psychological, sociocultural, developmental and spiritual needs to provide a basis for holistic care.
3.	Demonstrate basic use of the nursing process in providing care and making clinical decisions.	Demonstrate the use of the nursing process in developing and evaluation plans of care and making clinical decisions for patients in hospital-based healthcare settings.	Utilize the nursing process to interpret the health status and health potential of patients as a framework in making clinical decisions, prioritizing care, and evaluating outcomes in a variety of settings.	Review and describe health status indicators to analyze health outcomes utilizing the nursing process to enhance decision making for prioritization and evaluation of high acuity patient care.
4.	Describe the professional nurse's role in maintaining patient safety and improving patient outcomes based on current evidence and policy.	Demonstrate professional accountability and responsibility in order to provide safe and effective care in a healthcare setting that is grounded in evidence-based practice to improve quality and patient outcomes.	Apply and analyze the use of evidence-based practice and quality improvement strategies in maintaining patient safety and improvement of patient outcomes.	Utilize professional accountability, responsibility, and knowledge to provide safe and competent care tied to evidence-based practice to improve patient outcomes.
5.	Understand the unique scope and role of nurses on the healthcare team and the importance of collaboration.	Discuss the unique scope and role of nurses on the healthcare team and the importance of working in collaboration with members of the healthcare team.	Demonstrate sound communication and collaboration strategies in the provision of care for patients as part of a healthcare team.	Develop and implement effective professional leadership strategies to promote the management of patient care through delegation, communication and collaboration with an interdisciplinary team of health care providers.

As nursing students begin to progress through the curriculum, they are introduced to foundational concepts in general education and support courses which provide the scaffolding for their initial nursing courses. These introductory concepts are then built upon in Level One courses which allow students to develop a foundation of quality, safety, and professionalism. Level Two provides exposure to more advanced science courses and nursing courses. Students are able to apply growing nursing knowledge to the care provided in medical-surgical and maternity contexts. Level Three allows students to gain experience in further application of evidence-based practice and quality improvement strategies as they provide care in medical surgical, pediatric, community health, and psychiatric contexts. Level Four allows to students to grow in the care of high acuity patients and personal leadership and also provides a capstone precepting experience in their final senior semester.

Programmatic Levels by Course



**STANDARDS
FOR
NURSING PRACTICE**

The BSN curriculum aligns with the Essentials of Baccalaureate Education in Nursing (2008)

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.

Each course syllabus outlines the alignment of course objectives with the Essentials.

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

ANA STANDARDS OF PRACTICE AND PROFESSIONAL PERFORMANCE (2021)

Each of these 18 standards identifies corresponding competencies for the registered nurse.

STANDARDS OF PRACTICE

Standard 1. Assessment: The registered nurse collects pertinent data and information relative to the healthcare consumer's health or the situation.

Standard 2. Diagnosis: The registered nurse analyzes assessment data to determine actual or potential diagnoses, problems and issues.

Standard 3. Outcomes Identification: The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.

Standard 4. Planning: The registered nurse develops a collaborative plan encompassing strategies to achieve expected outcomes.

Standard 5. Implementation: The registered nurse implements the identified plan.

Standard 5A. Coordination of Care- The registered nurse coordinates care delivery.

Standard 5B. Health Teaching and Health Promotion - The registered nurse employs strategies to teach and promote health and wellness.

Standard 6. Evaluation: The registered nurse evaluates progress toward attainment of goals and outcomes.

STANDARDS OF PROFESSIONAL PERFORMANCE

Standard 7. Ethics: The registered nurse integrates ethics in all aspects of practice.

Standard 8. Advocacy: The registered nurse demonstrates advocacy in all roles and settings.

Standard 9. Respectful and Equitable Practice: The registered nurse practices with cultural humility and inclusiveness.

Standard 10. Communication: The registered nurse communicates effectively in all areas of professional practice.

Standard 11. Collaboration: The registered nurse collaborates with healthcare consumer and other key stakeholders.

Standard 12. Leadership: The registered nurse leads within the profession and practice setting.

Standard 13. Education: The registered nurse seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking.

Standard 14. Scholarly Inquiry: The registered nurse integrates scholarship, evidence, and research findings into practice.

Standard 15. Quality of Practice: The registered nurse contributes to quality nursing practice.

Standard 16. Professional Practice Evaluation: The registered nurse evaluates one's own and others' nursing practice.

Standard 17. Resource Stewardship: The registered nurse utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, financially responsible, and used judiciously.

Standard 18. Environmental Health: The registered nurse practices in a manner that advances environmental safety and health.

American Nurses Association (2021). *Nursing: Scope and standards of practice*. (4th ed.). Silver Spring, MD. ANA (pgs. 75-107).

QUALITY OF CARE AND THE ETHICAL CODE FOR NURSES

The profession of nursing is concerned about the quality of care. As a way to improve the quality of care, the American Nurses' Association has developed overall standards of nursing practice based on the nursing process. Standards specific to areas of nursing practice have also been developed, such as maternal - child health, medical - surgical, psychiatric and mental health, and community health nursing. These standards and selected others by specialty nursing organizations are shared with students as part of the curriculum of the Department of Nursing. Students are also made aware of the Ohio law and rules regulating the practice of nursing. An essential way to enhance the quality of care is to promote ethical nursing practice. The Department of Nursing embraces the ethical standards made explicit in Code of Ethics for Nurses with Interpretive Statements by the American Nurses Association (2015). This Code can be accessed in its entirety at <http://www.nursingworld.org/codeofethics>.

ANA CODE OF ETHICS PROVISIONS (2015)

Provision 1

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

Provision 2

The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

Provision 3

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

Provision 4

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

Provision 5

The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6

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

Provision 7

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

Provision 8

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

Provision 9

The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principle of social justice into nursing and health policy.

American Nurses Association (2015). *Code of Ethics for Nurses with Interpretive Statements*, Washington, D.C.: American Nurses Publishing.

QUALITY AND SAFETY EDUCATION FOR NURSES

QSEN competencies are threaded throughout the undergraduate nursing curriculum. Knowledge, skills, and attitudes for the six competencies are practiced and evaluated throughout the program. The undergraduate competencies are accessible [at this link](#).

1. Quality Improvement (QI): Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems.
2. Safety: Minimize risk of harm to patients and providers through both system effectiveness and individual performance.
3. Teamwork and Collaboration: Function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
4. Patient-centered Care: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs.
5. Evidence-Based Practice (EBP): Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
6. Informatics: Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

THE PRACTICE OF NURSING IN THE STATE OF OHIO

The practice of nursing is regulated by the [Ohio Board of Nursing](#). The [Law Regulating the Practice of Nursing](#) (Ohio Administrative Code - Chapter 4723) and [Rules Promulgated from the Law Regulating the Practice of Nursing](#) (Ohio Revised Code 4723) are the two documents which regulate the practice of nursing in Ohio. Students should become familiar with these documents; they are assigned readings for the NURS 462 course.

Please be advised that candidates for the licensing exam (NCLEX-RN) are required to indicate whether or not they have ever been convicted of a misdemeanor or a felony. In addition, all students entering a pre-licensure nursing program after June 1, 2003 who wish to sit for NCLEX-RN will be required to submit their fingerprints to the Bureau of Criminal Identification and Investigation (BCII). These requirements are explained more fully on the Ohio Board of Nursing website (<http://www.nursing.ohio.gov>)

**POLICIES
AND
RELATED INFORMATION
FOR
NURSING STUDENTS**

ADMISSION AND PROGRESSION

Criteria, Standards, and Procedure

Students should refer to the Malone University Catalog <http://catalog.malone.edu/> to review admission and progression policies which apply to all Malone students. Nursing students are accountable for these policies as well as the admission and progression policies in the Department of Nursing, which are approved by the nursing faculty. These policies are utilized as the Admission and Progression Committee monitors student performance and makes decisions regarding admission or progression to sophomore nursing courses, progression to junior nursing courses, progression to the senior level nursing courses and approval for graduation (see Table 1 below).

Student achievement of admission and progression criteria are evaluated through the following procedure. The student submits an application for progression at the conclusion of each academic year. The Admission and Progression Committee reviews the request to determine if criteria are met by the student before making a decision. All decisions are communicated in writing to the student and retained in the department file. Students may petition the Admission and Progression Committee if they are not satisfied with a decision made regarding their admission and/or progression.

All students are reviewed annually and those students who do not meet all the criteria are reviewed at the conclusion of every semester. Continuing students in good academic standing will be progressed and then returning students and transfer students will be reviewed for admission and readmission decisions. Transfer students requests for admission are reviewed individually. The Inter-institutional Transfer of Credit Policy is available in the Malone University Catalog <http://catalog.malone.edu/>. Malone University is a Military Friendly School. Additional information for veterans may be found at <https://www.malone.edu/academics/registrar/veterans/veteran-benefits-programs/>. Students may be accepted for transfer admission into the nursing major up until the beginning of the junior level. The Department of Nursing reserves the right to make changes in the Admission and Progression criteria, the required standardized tests, number of credits and/or courses required with students informed of changes prior to the semester of implementation. Applicable changes will be phased in per OBN rule 4723-5.

Table 1. Admission and progression criteria for each level of the BSN program.

<u>Traditional Admission Criteria</u>	Students may declare nursing as their major and begin nursing support courses their freshman year. Admission criteria is that which applies to all Malone University students. Once admitted, students will follow the progression criteria below.			
<u>CCP+3 Admission Criteria:</u>	Nursing courses to be completed with a C or higher	Support courses to be completed with a B or higher	Cumulative GPA requirements	Additional Criteria:
Admission to Sophomore Nursing Classes for students graduating high school in the preceding spring. Once admitted, students will follow the progression criteria below.	NURS112 (pre-requisite or co-requisite to NURS215)	BIOL131 and BIOL132 and a minimum of 2 of the following support courses: BIOL190, BIOL371, CHEM115, PSYC121, PSYC220	High School GPA: 3.0 or higher CCP GPA: 2.5 or higher	Complete 24 or more credit hours of CCP Dual Enrollment coursework prior to enrollment in 200 level nursing courses
<u>Progression Criteria:</u>	Nursing courses to be completed with a C or higher	Support courses to be completed with a C or higher	Cumulative GPA requirements	Select Nursing Course GPA requirements
Progression to Sophomore Nursing Courses for students enrolled at Malone in the preceding year and traditional transfer students.	NURS112 (pre-requisite or co-requisite to NURS215)	BIOL131 and BIOL132 and a minimum of 2 of the following support courses: BIOL190, BIOL371, CHEM115, PSYC121, PSYC220	2.5 or higher	Not applicable

Progression to Junior Nursing Courses	Previous courses plus: NURS202 (see bullet point #3 below), NURS211 or NURS215, NURS 213, NURS221, NURS212, NURS214, NURS353	All support courses must be completed prior to entering junior level nursing courses.	2.5 or higher	2.5 or higher Courses in this calculation include: NURS202 (see bullet point #3 below), NURS211 or NURS215, NURS212, NURS221, and NURS353 or NURS355
Progression to Senior Nursing Courses	Previous courses plus: NURS311, NURS313, NURS354, NURS312, NURS314, NURS402 (see bullet point #2 below)	Not Applicable	2.5 or higher	2.5 or higher (students cannot be admitted to senior level on probationary status) Courses in this calculation include: Previous courses plus NURS311, NURS312, NURS354 or NURS356, and NURS402 (see bullet point #2 below)

Curriculum Notes:

- Nursing Support courses include: BIOL131, BIOL132, BIOL190, BIOL371, CHEM115, PSYC121 AND PSYC220.
- Courses included in the SCGPA for students beginning sophomore level courses in fall 2023 and prior are: NURS211, NURS212, NURS221, NURS311, NURS312, NURS353, NURS354, and NURS402.
- Courses included in the SCGPA for students beginning sophomore level courses in fall 2024 and after are: NURS202, NURS212, NURS215, NURS221, NURS311, NURS312, NURS332, NURS355, and NURS356.

APPROVAL FOR PROGRAM COMPLETION:

1. Completion of graduation requirements as listed in the Malone University Catalog <http://catalog.malone.edu/>.
2. Attainment of an overall GPA in the nursing major of 2.5 or greater as specified in the Malone University Catalog <http://catalog.malone.edu/>
3. Completion of all nursing courses (NURS) with a grade of C or higher in each course.
4. Completion of senior level standardized test requirements.
5. Completion of any additional review activities identified by the Program.

SPECIAL CONSIDERATIONS:

1. Students will not be permitted to audit clinical courses. If a student has a leave of absence from nursing courses, he/she may be required to enroll in a clinical nursing course as a refresher prior to taking the next new clinical course. This will enhance the student's clinical experience and provide a foundation upon which to build in the new course.
2. Any student who has a leave of absence (one semester or greater) from the nursing courses should be reminded that upon return to nursing courses all current policies will be in effect for the student.
3. Students must complete the Sophomore-Senior nursing courses in no more than five consecutive calendar years unless special permission is granted by the Admission and Progression Committee to extend this time.
4. Nursing courses to be considered for transfer from another institution must have been completed within the past 5 academic years with a grade of C or better.
5. Support courses to be considered for transfer from another institution must have been completed within the past 10 academic years with a grade of C or better.
6. No nursing coursework will be accepted for transfer once a student is admitted and enrolled at Malone University unless special permission is granted by the Admission and Progression Committee.
7. The admission and Progression Committee reserves the right to make exceptions to or additions to the policy on an individual basis.

ACADEMIC ADVISING

Prior to the start of classes, Malone students are advised and registered for the first two semesters at Malone University through the Center for Student Success. Advisors within the Department of Nursing are assigned during fall semester of the freshman year. Exceptions are made for transfer nursing students. Students are encouraged to seek assistance from a faculty advisor whenever they have questions about their course progression or status in the program.

Freshman nursing students

These students will be assigned a nursing academic advisor during their first semester at Malone University. The assignment will occur prior to the time when students schedule classes for the following spring.

Transfer nursing students

The Director of the BSN Program or designee will advise transfer students beginning in their first semester at the University. This should occur no later than the midpoint of the first semester at the University.

5/94, Revised 4/98 ... 4/20; Reviewed 3/00 ... 7/14, 7/16, 8/18, 5/22, 5/24

POLICY ON REPEAT OF NURSING AND SUPPORT COURSES

A passing grade in a nursing support course or nursing course is defined as a grade between C and A. Students who receive a grade of C- or lower for any nursing or support course will be considered to have failed that course from a nursing perspective. Students who have a nursing course grade below C and desire to continue in the program must request permission to repeat the course. The request is initiated by completing and submitting the "Request to Repeat" form (available in the Department of Nursing) as soon as possible to the Admission and Progression Committee Chairperson (3 months prior to reentry semester).

Students will be permitted one withdrawal from any nursing support course and one withdrawal from a nursing course which is being taken for the first time. A second withdrawal or a withdrawal from a nursing course or nursing support course where the student has a previous grade below C will be considered to be a failing grade in that course. A nursing course with a grade below C may be repeated only one time to meet the grade requirement of C or better. A grade of C- or below in a second nursing course will result in automatic dismissal from the nursing program.

If a student earns a grade below C in a nursing support course which was taken at Malone University the course should be repeated at Malone University. A nursing support course with a grade below a C may be repeated only one time to meet the grade requirement of C or better. A grade of below a C on a third nursing support course will result in automatic dismissal from the nursing program.

The Admission and Progression Committee will complete decisions regarding a course repeat request after the class enrollment is determined by students progressing with satisfactory status. It is noted that the committee reserves the right to permit or deny a repeat request, to determine when a repeat may occur, and to identify any additional requirements of the student in order to enhance success.

9/94, Revised 12/98 ... 8/18; Reviewed 3/00 ... 7/14, 7/16, 4/20, 5/22, 5/24

POLICY FOR STUDENTS WITH SELECT COURSE GPA OR CUMULATIVE GPA BELOW 2.5

Progression to Sophomore Level courses is contingent upon attainment and maintenance of a Cumulative Grade Point Average (CGPA) of 2.5 or greater. Progression to Junior and Senior Level courses is contingent upon attainment and maintenance of both a Select Nursing Course Cumulative GPA (SCGPA) **and** a Cumulative GPA of 2.5 or greater. This is calculated at the end of every semester.

Students are encouraged to know and track their SCGPA and CGPA throughout the curriculum and to consult their assigned faculty advisor at any time, particularly if there is concern about failing to meet the 2.5 minimum. A form is available in the Department of Nursing office to assist students with the calculation of their SCGPA.

Members of the Department of Nursing faculty and staff are fully committed to facilitating each student's growth and learning, however, the ultimate responsibility for successful progression through the nursing program lies with the student.

The following describes events and options which will occur if a student has a SCGPA or CGPA below 2.5.

Process:

1. When SCGPA or CGPA falls below 2.5 the student will be able to see this information on Malone Xpress. Students will also receive notification of this in a written letter.
2. Students with SCGPA or CGPA below 2.5 will not be able to remain in the Nursing Major unless they are granted nursing probationary status by the Nursing Admission and Progression Committee.
3. Students who believe that they have the ability to raise their SCGPA or CGPA may appeal in writing to the Admission and Progression Committee requesting one semester in which to continue with nursing courses while working to raise their SCGPA or CGPA. Students are encouraged to explain factors which influenced past performance.
 - a. Nursing probationary status which allows students to continue forward in nursing courses may be granted to students who have grades of C or better in all nursing and support courses.
 - b. Students who are on probation with Malone University are not eligible for nursing probationary status.
 - c. Probationary status will not be granted to students who have received a grade below C in a nursing or support course in the preceding semester.
 - d. Students may be denied the opportunity to continue with nursing courses, while working to raise their SCGPA or CGPA, if the Admission and Progression Committee determines that there is significant evidence that the student is unlikely to be successful when progressing in the Nursing Major. (See #5)
 - e. Under no circumstance will a student be permitted to progress to senior level nursing courses until the SCGPA is at or above 2.5
4. At the end of one semester of Nursing Probationary Status the student will be evaluated by the Admission and Progression Committee.
 - a. Students who have raised their SCGPA or CGPA to 2.5 or above will be removed from probation
 - b. Students who have raised their SCGPA or CGPA significantly but who have not reached the minimum 2.5 required may appeal in writing to the Admission and Progression Committee to request one additional semester of probation in which they move forward in the program while working to reach 2.5 SCGPA or CGPA
 - c. Students may be denied the opportunity to continue with nursing courses, while working to raise their SCGPA or CGPA, if the Admission and Progression Committee determines that there is significant evidence that the student is unlikely to be successful when progressing in the Nursing Major. (See #5)
 - d. Under no circumstance will a student be permitted to progress to senior level nursing courses until the SCGPA is at or above 2.5
5. Alternate option by which students not granted the opportunity to continue forward with nursing courses may raise their SCGPA or CGPA.
 - a. Students with an identified area of weakness may request the opportunity to retake nursing or support course(s) which were previously passed. This request is initiated by completing and submitting the "Request to Repeat" form, available in the Department of Nursing office. If this request is approved, the intent is to provide stronger foundational knowledge and to facilitate future academic success. This type of repeat is offered at the discretion of the Admission and Progression Committee and does not apply to the number of repeats permitted when a student earns a grade below C in a nursing or support course.

Support Systems for Students with a SCGPA or CGPA below 2.5:

Students with SCGPA or CGPA below 2.5 are encouraged to utilize all the following support opportunities.

1. Any student with SCGPA or CGPA below 2.5 should make an appointment with their faculty advisor in order to develop an individualized plan for improving their GPA
2. Individual and small group tutoring is available to students.
3. Faculty Advisors may be consulted for assistance with time management
4. Students are encouraged to critically evaluate non-academic constraints on their time which may be impacting their ability to study and achieve academic success
5. The Center for Student Success provides workshops which assist with study skill development.

5/07; Revised 8/12 ... 8/14, 8/18; Reviewed 5/16, 4/20, 5/22, 5/24

STUDENT DECISION TO EXIT FROM PROGRESSION IN THE NURSING MAJOR

A student who decides to not continue with nursing (courses) or who decides to take a leave from nursing courses and return at a later date should contact the Department of Nursing and provide this information. A brief form is recommended to be completed and an appointment with the Program Director is advised, especially for the student who plans to return at a later date. It is important that students planning a leave from nursing also inform their academic advisor as well.

NOTE: It is extremely important to properly notify the Department of Nursing if you plan to return to the nursing program in the future. Your delayed progression and later enrollment will be dependent on space available in the particular nursing course(s). All current policies will be in effect at the time you are re-enrolled in the program.

Students withdrawing from the University during a semester and students planning for readmission to the University should refer to the current University catalog <http://catalog.malone.edu/> for guidelines and requirements.

1/94; Revised 8/12; Reviewed 8/98 ... 7/14, 7/16, 8/18, 4/20, 5/22, 5/24

TESTING POLICIES:

Pharmacology and Medical Math Competency Testing for Pre-Licensure Nursing Students

During each level of the nursing program students are taught pharmacology and medical math calculations. In the sophomore level, students have medical math and pharmacology testing after new content is introduced. The first test will count as 10% of their clinical course grade. Sophomore students must pass the test with a minimum overall score of 85%. Students who do not pass the test the first time must meet the passing threshold within 3 weeks and cannot pass medications in the clinical setting until this competency is met. Sophomore students who do not pass the test within three weeks will receive an unsafe for each additional week that passes without successfully meeting the passing standard. (Please see clinical grading policy)

Beginning at the junior level students will have pharmacology and medical math competency testing at the start of each semester. Students will be required to demonstrate competency for the pharmacology and medical math calculations content learned in previous semesters. Students will receive information about the content of the test prior to the start of school. Students must pass both the pharmacology section and the medical math section with a minimum score of 85% on each section. The overall score on the first competency test will count as 10% of their clinical course grade. Junior students who do not pass the test the first time must meet the passing threshold within 3 weeks and cannot pass medications in the clinical setting until this competency is met. Senior students who do not pass the test the first time must meet the passing threshold within 2 weeks and cannot pass medications in the clinical setting until this competency is met. Junior and Senior students who do not pass the competency test the first time will be able to have one retake of the test with no penalty. Students must wait a minimum of 24 hours prior to retaking the test. Students who do not pass the competency the first or second time will receive a clinical grade of unsafe for tests 3, 4 and 5. Any student who has not passed the entire test by the 5th attempt will receive a failing grade in the course. Please see clinical grading policy in the BSN Handbook.

Standardized Tests

Nationally standardized tests are given throughout the nursing program. These tests are used as a measure of students' academic success. The standardized tests scheduled for any nursing course will be noted in the Evaluation of Performance section of the syllabus. These tests must be completed in order for the student's course grade to be released to the registrar.

Any standardized exam(s) given within a theory course will count for 3% of the course grade. In the event two or more such exams are given during a course, the scores will be averaged and the resulting average will be counted as the final score. Students who reach a score of 850 or greater will receive full credit for 3% of the course grade. Students who have a score below 850 will receive zero credit for that 3% of their course grade.

CORE PERFORMANCE STANDARDS FOR ADMISSION, ACADEMIC PROGRESSION, AND GRADUATION

Malone University's nursing programs strive to prepare each student to think critically, and practice nursing competently and compassionately in rapidly changing practice environments. All efforts are designed to build nursing knowledge, enhance nursing practice and patient safety, foster professional integrity, and ultimately improve the health outcomes of patients, families, and communities across the continuum of care. In addition, certain functional abilities are essential for the delivery of safe, effective nursing care during clinical training activities. Therefore, the faculty has determined that certain technical standards are requisite for admission, progression, and graduation from the nursing programs.

In addition to classroom learning, clinical learning occurs throughout the program and involves considerations (such as patient safety and clinical facilities) that are not present for classroom accommodations. For this reason, any applicant or student who seeks accommodations prior to or immediately after enrolling in the nursing programs must also request an assessment of the types of reasonable accommodations needed for the clinical training component of the program.

An individual must be able to independently, with or without reasonable accommodation, meet the following technical standards of general abilities and those specifically of (1) observation; (2) communication; (3) motor; (4) intellectual, conceptual, and quantitative abilities; (5) essential behavioral and social attributes; and (6) ability to manage stressful situations. Individuals unable to meet these technical standards, with or without reasonable accommodation, will not be able to complete the program and are counseled to pursue alternate careers.

General Abilities: The student is expected to possess functional use of the senses of vision, touch, hearing, and smell so that data received by the senses may be integrated, analyzed, and synthesized in a consistent and accurate manner. A student must also possess the ability to perceive pain, pressure, temperature, position, vibration, and movement that are important to the student's ability to gather significant information needed to effectively evaluate patients. A student must be able to respond promptly to urgent situations that may occur during clinical training activities and must not hinder the ability of other members of the health care team to provide prompt treatment and care to patients.

Observational Ability: The student must have sufficient capacity to make accurate visual observations and interpret them in the context of laboratory studies, medication administration, and patient care activities. In addition, the student must be able to document these observations and maintain accurate records.

Communication Ability: The student must communicate effectively both verbally and non-verbally to elicit information and to translate that information to others. Each student must have the ability to read, write, comprehend, and speak the English language to facilitate communication with patients, their family members, and other professionals in health care settings. In addition, the student must be able to maintain accurate patient records, present information in a professional, logical manner and provide patient counseling and instruction to effectively care for patients and their families. The student must possess verbal and written communication skills that permit effective communication with instructors and students in both the classroom and clinical settings.

Motor Ability: The student must be able to perform gross and fine motor movements with sufficient coordination needed to perform complete physical examinations utilizing the techniques of inspection, palpation, percussion, auscultation, and other diagnostic maneuvers. A student must develop the psychomotor skills reasonably needed to perform or assist with procedures, treatments, administration of medication, management and operation of diagnostic and therapeutic medical equipment, and such maneuvers to assist with patient care activities such as lifting, wheel chair guidance, and mobility. The student must have sufficient levels of neuromuscular control and eye-to-hand coordination as well as possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, and physical exertion required for satisfactory and safe performance in the clinical and classroom settings including performing CPR, if necessary. The student must possess the ability of manual dexterity that would be required for certain activities, such as drawing up solutions in a syringe.

Intellectual, Conceptual, and Quantitative Abilities: The student must be able to develop and refine problem-solving skills that are crucial to practice as a nurse. Problem-solving involves the abilities to measure, calculate, reason, analyze, comprehend three-dimensional relationships, synthesize objective and subjective data, and make decisions. Students must retain and recall pertinent information often in a time urgent environment. Student problem-solving should reflect consistent and thoughtful deliberation and sound clinical judgment. Each student must demonstrate mastery of these skills and possess the ability to incorporate new information from peers, teachers, and the nursing and medical literature to formulate sound judgment in patient assessment, intervention, evaluation, teaching, and setting short and long term goals.

Behavioral and Social Attributes: Compassion, integrity, motivation, effective interpersonal skills, and concern for others are personal attributes required of those in the nursing programs. Personal comfort and acceptance of the role of a nurse functioning under supervision of a clinical instructor or preceptor is essential for a nursing student. The student must possess the skills required for full utilization of the student's intellectual abilities; the use of good judgment; the prompt completion of all responsibilities in the classroom and clinical settings; and the development of mature, sensitive, and effective relationships with patients and other members of the health care team. Each student must be able to demonstrate stable, sound judgment and to complete assessment and interventional activities. The ability to establish rapport and maintain sensitive, interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a nurse. The student must be able to adapt to changing environments; display flexibility; accept and integrate constructive criticism given in the classroom and clinical settings; effectively interact in the clinical setting with other members of the healthcare team; and learn to function cooperatively and efficiently in the face of uncertainties inherent in clinical practice.

Ability to Manage Stressful Situations: The student must be able to adapt to and function effectively to stressful situations in both the classroom and clinical settings, including emergency situations. The student will encounter multiple stressors while in the nursing programs. These stressors may be (but are not limited to) personal, patient care/family, faculty/peer, and or program-related.

Adapted with permission from: <http://www.drexel.edu/bsnnursing/studies/acceleratedCareer/learnMore/standards/>
7/14; Reviewed: 7/16, 8/18, 4/20, 5/22, 5/24

SPECIAL CONSIDERATIONS REGARDING CLINICAL PERFORMANCE

I. CONTAGIOUS ILLNESS

Any student with Herpes simplex or symptoms of any infectious disease will not be permitted to participate in clinical experiences.

II. PREGNANCY

Students who are pregnant are requested to inform the clinical faculty about the pregnancy as soon as they are aware of the pregnancy. This assists the faculty to avoid an assignment to patients with infectious diseases which cross the placental barrier or treatments which jeopardize the health of the student or the unborn baby. Confidentiality will be maintained. In addition, students who are pregnant are required to submit a healthcare provider release each trimester and after delivery to participate in classroom and clinical experiences.

III. LIMITATIONS

Students who have (or develop) factors or limitations which may influence their ability to meet the Core Performance Standards Policy or may place the student, or persons whom the students come in contact with at risk, whether in class or clinical experiences, are required to disclose this information promptly. At a minimum, such factors or limitations must be disclosed at the time of occurrence and prior to scheduled class or clinical experience each semester. Students are responsible for compliance with any identified restrictions or accommodations. The student may be requested to provide documentation from health official(s) regarding abilities in a practice setting. While every effort will be made to facilitate student success, there is no guarantee that compliance with restrictions or accommodations will result in satisfactory completion of a course. Malone University Department of Nursing holds no responsibility for any occurrence resulting in injury related to the limitation.

7/14; Reviewed: 7/16, 8/18, 4/20, 5/22, 5/24

PROCEDURE FOR STUDENT ILLNESS OR INJURY IN THE CLASSROOM OR CLINICAL SETTING

Promoting student safety is the priority when a student experiences illness or injury in the clinical or classroom setting.

Each student at Malone University is required to carry their own health insurance. Each student is financially responsible for their health care. The Health Center is open for basic health care needs when a situation does not require immediate attention.

When a student becomes ill during class the faculty member should call 911 for any urgent situation or situation when the student is unable to provide self-care safely. If the student is stable but feels unable to remain in class the student should make the determination about how to proceed. Options may include but are not limited to:

- Contacting a parent or other person
- Being escorted to a care provider
- Having an ambulance come for them
- Returning home unaccompanied

When a student becomes ill during clinical the faculty member should escort the student to the emergency room or call 911 if the situation is urgent or unstable. If the student is stable the student can make the determination about how to proceed. Options may include but are not limited to:

- Contacting a parent or other person
- Being escorted to a care provider
- Having an ambulance come for them
- Returning home unaccompanied

If a student has a needle stick or sharps injury or was exposed to blood or body fluids during clinical or lab the faculty member should have the student follow CDC guidelines located at https://www.cdc.gov/niosh/healthcare/risk-factors/infectious-agents.html?CDC_AAref_Val=https://www.cdc.gov/niosh/topics/bbp/emergnedl.html for immediately cleansing the area. An agency representative should be immediately consulted to begin the post-exposure evaluation process. This may include determining the infectious potential of the person who was the source of the blood or body fluids. It is the responsibility of the student to obtain immediate medical attention and prescribed follow-up.

Following any acute illness, injury or student exposure to blood or body fluids, the faculty member should complete the documentation of Student Injury or Illness form. The Course Faculty/Track Coordinator and Program Director should be notified. After completion the form will be placed in the student's file in the nursing office.

PROFESSIONAL BEHAVIOR POLICY

The behavior of nursing students in all settings and situations must be consistent with behavior described in the American Nurses Association Code of Ethics for Nurses, the Malone University Catalog <http://catalog.malone.edu/>, the Core Performance Standards for Nursing, and Ohio Law 4723-5-12 (C) 1-26*

1. Nursing Students are expected to demonstrate the professional behaviors of honesty and integrity in all situations. All work submitted by the students written or verbal should be their original work. All information borrowed from other authors should have a source cited. Students should refer to the Malone University Academic Integrity Policy in the Malone University undergraduate catalog (on-line). This policy describes behaviors to be avoided by those acting with integrity *as well as the process involved if a violation occurs*.

Those behaviors include but are not limited to:

- Plagiarism
- Accomplice in plagiarism
- Disruption of learning
- Academic or scientific misconduct

Students are not permitted to copy, photograph, manually or electronically duplicate, or take notes of any kind during test review or test taking. During test taking and test review students are not permitted to have book bags, books, notes, paper, or electronic devices. The only exception is a conventional calculator for math questions. Calculators cannot be shared by students.

2. Nursing Students must maintain confidentiality of all patient health information. Confidentiality of patient information is required by the Health Insurance Portability and Accountability Act (HIPAA) and is essential to the nurse-patient relationship. All students are required to review and pass a quiz on the HIPAA rules during orientation to the clinical agencies. Students are authorized to review patient documents and information necessary for the provision of care. It is also appropriate for students to discuss patients with nursing peers and faculty in the context of student learning. All patient information is to be considered confidential and must be protected from intentional and unintentional exposure. No patient information shall be disseminated via social media, texting, emailing etc. other than as required by course faculty to complete clinical assignments. To the maximum extent possible no identifiable patient health care information shall be disclosed by a student. Students who demonstrate professional behavior protect patient privacy as required by HIPAA. Each student should follow HIPAA policy in all conversations and communications.

3. Nursing Students must communicate in a professional manner, demonstrating an ability to meet the behavioral and social attributes described in the Core Performance Standards.

Students are responsible for their own behavior and its effect on other persons. Students are to recognize that they are part of a community and in accordance with scripture should interact with others in a manner which reflects patience, kindness, gentleness, self-control and humility. Students should become familiar with and follow the Community Responsibilities and Attitudinal and Behavioral Expectations as described in the Malone University Catalog <http://catalog.malone.edu/>. Students should also familiarize themselves with, and follow the guidelines set forth in the Department of Nursing Guidelines for the Use of Social Media and Core Performance Standards. These documents are found in the student handbook.

Students must demonstrate professional behavior in order to remain in the nursing program. Students that do not demonstrate professional behavior will receive a penalty which could include a zero in the assigned activity to failure in the course.

The section below lists student behaviors prohibited by Ohio Law 4723-5-12 (C) 1-26, which states:

In addition to the policies required in paragraph (A) of this rule, the program administrator and faculty shall implement policies related to student conduct that incorporate the standards for safe nursing care set forth in Chapter 4723 of the Revised Code and the rules adopted under that chapter, including, but not limited to the following:

1. A student shall, in a complete, accurate, and timely manner, report and document nursing assessments or observations, the care provided by the student for the patient, and the patient's response to that care.
2. A student shall, in an accurate and timely manner, report to the appropriate practitioner errors in or deviations from the current valid order.
3. A student shall not falsify any patient record or any other document prepared or utilized in the course of, or in conjunction with, nursing practice. This includes, but is not limited to, case management documents or reports, time records or reports, and other documents related to billing for nursing services.
4. A student shall implement measures to promote a safe environment for each patient.
5. A student shall delineate, establish, and maintain professional boundaries with each patient.
6. At all times when a student is providing direct nursing care to a patient the student shall:
 - (a) Provide privacy during examination or treatment and in the care of personal or bodily needs; and
 - (b) Treat each patient with courtesy, respect, and with full recognition of dignity and individuality.
7. A student shall practice within the appropriate scope of practice as set forth in division (B) of section 4723.01 and division (B)(20) of section 4723.28 of the Revised Code for a registered nurse, and division (F) of section 4723.01 and division (B)(21) of section 4723.28 of the Revised Code for a practical nurse;
8. A student shall use universal and standard precautions established by Chapter 4723-20 of the Administrative Code;
9. A student shall not:
 - (a) Engage in behavior that causes or may cause physical, verbal, mental, or emotional abuse to a patient;
 - (b) Engage in behavior toward a patient that may reasonably be interpreted as physical, verbal, mental, or emotional abuse.
10. A student shall not misappropriate a patient's property or:
 - (a) Engage in behavior to seek or obtain personal gain at the patient's expense;
 - (b) Engage in behavior that may reasonably be interpreted as behavior to seek or obtain personal gain at the patient's expense;
 - (c) Engage in behavior that constitutes inappropriate involvement in the patient's personal relationships; or
 - (d) Engage in behavior that may reasonably be interpreted as inappropriate involvement in the patient's personal relationships.

For the purpose of this paragraph, the patient is always presumed incapable of giving free, full, or informed consent to the behaviors by the student set forth in this paragraph.

11. A student shall not:
 - (a) Engage in sexual conduct with a patient;
 - (b) Engage in conduct in the course of practice that may reasonably be interpreted as sexual;
 - (c) Engage in any verbal behavior that is seductive or sexually demeaning to a patient;
 - (d) Engage in verbal behavior that may reasonably be interpreted as seductive, or sexually demeaning to a patient.

For the purpose of this paragraph, the patient is always presumed incapable of giving free, full, or informed consent to sexual activity with the student.

12. A student shall not, regardless of whether the contact or verbal behavior is consensual, engage with a patient other than the spouse of the student in any of the following:
 - (a) Sexual contact, as defined in section 2907.01 of the Revised Code;
 - (b) Verbal behavior that is sexually demeaning to the patient or may be reasonably interpreted by the patient as sexually demeaning.
13. A student shall not self-administer or otherwise take into the body any dangerous drug, as defined in section 4729.01 of the Revised Code, in any way not in accordance with a legal, valid prescription issued for the student, or self-administer or otherwise take into the body any drug that is a schedule I controlled substance.
14. A student shall not habitually or excessively use controlled substances, other habit-forming drugs, or alcohol or other chemical substances to an extent that impairs ability to practice.
15. A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of the use of drugs, alcohol, or other chemical substances.
16. A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of a physical or mental disability.
17. A student shall not assault or cause harm to a patient or deprive a patient of the means to summon assistance .
18. A student shall not misappropriate or attempt to misappropriate money or anything of value by intentional misrepresentation or material deception in the course of practice .
19. A student shall not have been adjudicated by a probate court of being mentally ill or mentally incompetent, unless restored to competency by the court.
20. A student shall not aid and abet a person in that person's practice of nursing without a license, practice as a dialysis technician without a certificate issued by the board, or administration of medications as a medication aide without a certificate issued by the board.
21. A student shall not prescribe any drug or device to perform or induce an abortion, or otherwise perform or induce an abortion.
22. A student shall not assist suicide as defined in section 3795.01 of the Revised Code.
23. A student shall not submit or cause to be submitted any false, misleading or deceptive statements, information, or document to the nursing program, its administrators, faculty, teaching assistants, preceptors, or to the board.
24. A student shall maintain the confidentiality of patient information. The student shall communicate patient information with other members of the health care team for health care purposes only, shall access patient information only for purposes of patient care or for otherwise fulfilling the student's assigned clinical responsibilities, and shall not disseminate patient information for purposes other than patient care or for otherwise fulfilling the student's assigned clinical responsibilities through social media, texting, emailing or any other form of communication.
25. To the maximum extent feasible, identifiable patient health care information shall not be disclosed by a student unless the patient has consented to the disclosure of identifiable patient health care information. A student shall report individually identifiable patient information without written consent in limited circumstances only and in accordance with an authorized law, rule, or other recognized legal authority.

For purposes of paragraphs (C)(5), (C)(6), (C)(9), (C)(10), (C)(11) and (C)(12) of this rule, a student shall not use social media, texting, emailing, or other forms of communication with, or about a patient, for non-health care purposes or for purposes other than fulfilling the student's assigned clinical responsibilities.

GUIDELINES FOR NETIQUETTE

In a face-to-face classroom, body language, verbal responses, and questions help the facilitator and participants communicate with each other. In an electronic environment, however, misunderstandings can easily occur when participants do not follow basic rules of netiquette (online etiquette). Therefore, please use the following guidelines when communicating:

- Do not use all capital letters in online communication, as doing so indicates you are yelling. Limited use of capitalized words is acceptable when you need to emphasize a point.
- Use a descriptive subject line in all communication.
- Include your name in all e-mails because recipients cannot always tell who you are based on your e-mail address.
- Derogatory comments, ranting, and vulgar language are not acceptable in any form of communication in this course.
- Please keep in mind that something considered offensive may be unintentional. If you are concerned about something that appears unacceptable, please inform your instructor.

GUIDELINES FOR USE OF SOCIAL MEDIA

Social networking sites such as Facebook, Instagram, LinkedIn, Twitter, and more, are commonly used to share personal information. Unfortunately the line between personal and professional is very easily crossed. Any student who identifies themselves as a Malone University student is unavoidably creating an impression about themselves, and the University. Students working in healthcare settings also might unknowingly violate HIPAA guidelines with a posting. For these reasons it is essential that all students abide by the following guidelines. Violation of these guidelines will be considered a violation of professional accountability.

- Remember that **NOTHING** you post, or are tagged by is confidential. Even after deleting a post it will still remain on servers. Social media content may impact your reputation for years to come. Only post information that you would share with a faculty member or employer. Potential employers and academic institutions commonly search social media sites for information about any applicant.
- Be sure that everything you post is your personal information. Respect the privacy of others. Remember to also respect copyright and trademark information. Use citations correctly. Nothing displaying the Malone University name or logo should be posted without permission from the appropriate University administrator.
- Any group account which *identifies* an affiliation with the Department of Nursing must allow nursing faculty access to the site upon request. The privacy settings for the group should be set to 'closed.'
- Never post information which provides information about the patient's identification, health status or care being provided to the patient. It is a violation of patient privacy to post any information about a patient even if the patient is not identified. Be familiar with HIPAA.
- Always act with integrity. Never misrepresent yourself. Remember that you are creating a public reputation for yourself. Be sure that your postings are in keeping with the Malone Mission Statement, Community Agreement, Foundational Values and other documents published in the student handbooks.

CLASS AND LABORATORY/CLINICAL ATTENDANCE

Students are expected to attend all scheduled class and laboratory/clinical experiences. Nursing is a professional discipline in which classroom learning is applied to patient care. Classroom absence may result in the student having inadequate information, which could lead to unsafe patient care. Absence in the clinical course may result in the student's inability to meet the objectives of the course.

Mastery of the course objectives is the responsibility of the student. Class or clinical absence beyond 7% of the total course clock hours, whether excused or unexcused, is considered excessive. Students with excessive absences should make an appointment with the faculty member to document a method of achieving the course objectives. Excessive absences may result in the student being asked to withdraw from the course or failure in the course.

Policy for Late Class Assignments

All course assignments must be completed in order to receive course credit. Assignments submitted late may have the grade reduced. Specific details are in each course syllabus.

Excused Absences

Absences are considered excused when students demonstrate accountability and responsibility for their learning by notifying the appropriate persons prior to the absence. Absence which results from situations outside the student's control may be considered excused if the student notifies the appropriate persons prior to the absence or as soon as possible and discusses a method by which the class objectives may be met.

The following persons need to be notified prior to an absence:

<u>Situation</u>	<u>Person(s) to Notify</u>
Absence due to death of family member or relative and hospitalization/extended severe illness.	Provost's Office (330-471-8119)
Absence from a regularly scheduled class or laboratory experience from Malone University or absence from an appointment with faculty or an additional laboratory experience	Department of Nursing Secretary (330-471-8166) or the individual faculty member.
Absence from clinical experience.	Follow the "call off" procedure outlined by course faculty

Scheduled Absences

With consent from course faculty students may negotiate an absence in order to participate in events helpful to professional or spiritual development. Typical examples of scheduled absences include student-sponsored activity such as The Ohio Student Nurse Convention or to participate in University-sponsored activities including field trips, sports events, as well as drama/musical presentations. It is the responsibility of the student to contact the curriculum coordinator or course faculty prior to the absence. Students should submit in writing the reason for the scheduled absence and a plan to complete any class activities that will be missed. (See Policy for Student Request to Schedule an Excused Absence and Excused Absence Request Form).

Unexcused Absences

An unexcused absence is recorded when a student fails to notify course faculty prior to missing a class, clinical or lab experience. Make up activities may not always be available for activities missed during unexcused absences. Successful completion of the course may not be possible if the unexcused absence negatively impacts the ability of the student to meet course objectives.

Healthcare Provider Release

Students who experience illness or are on medication that may impact their performance or have an injury requiring attention by a healthcare provider must verbally notify clinical faculty. They must submit to the program director a letter of release from healthcare provider to participate in classroom and clinical experiences. Students who are pregnant must submit a letter of release from the healthcare provider each trimester and after delivery to participate in classroom and clinical experiences.

POLICY FOR STUDENT REQUEST TO SCHEDULE AN EXCUSED ABSENCE

Scheduled Absences Process:

With consent from course faculty, students may negotiate an absence in order to participate in events helpful to professional or spiritual development. Typical examples of approved scheduled absences include student-sponsored activity such as the Ohio Student Nurse Convention or to participate in University-sponsored activities including field trips, sports events as well as drama/musical presentations. . Examples of activities which will not be approved for a scheduled absence are weddings, vacations and family gatherings. It is the responsibility of the student to contact the curriculum coordinator or course faculty prior to the absence. Students should submit in writing the reason for the scheduled absence and a plan to complete any class activities that will be missed. (See Absence Request Form).

Unexcused Absences Process:

An unexcused absence is recorded when a student fails to notify course faculty prior to missing a class, clinical or lab experience. An unexcused absence will also be recorded for an absence which has not been approved as a scheduled absence. A grade of zero will be recorded for course activities missed because of an unexcused absence. An unexcused clinical absence will receive an unsatisfactory grade for the day. Course activities missed during an unexcused absence must be made up if the opportunity is provided by faculty. Make up opportunities may not always be available for activities missed during unexcused absences. Successful completion of the course may not be possible if the unexcused absence negatively impacts the ability of the student to meet course objectives.

REQUIREMENTS AND GUIDELINES FOR PARTICIPATION IN CLINICAL

Nursing is a practice discipline; therefore, a part of the educational process for the nursing student is participation in clinical experience through various external agencies. Certain requirements must be met by the student prior to participating in clinical experiences to assure our compliance with agency-generated agreements, as well as, the health and safety for both student and patients. These requirements are explained in the following policies: Health Insurance, Criminal Background Check, Health and Vaccine Policies, Professional Behavior, Guidelines for Use of Social Media, Dress Code, Class and Laboratory/Clinical Attendance, and Clinical Preparation. All clinical requirements must be met and verified prior to the start of each academic year. CPR certification is required every two years. If students do not meet these requirements they will not be permitted to attend clinical experiences and be unsatisfactory for any loss of clinical time. Students must utilize the department designated electronic database for maintaining these records. Health records are confidential and will be maintained accordingly. Each student will be asked to sign a release authorizing the Department of Nursing to release information about health requirements. This information will be shared with clinical agencies or clinical faculty only when required for a specific clinical experience.

Health Insurance

All nursing students enrolled in clinical nursing courses are required to provide documentation demonstrating that they carry health insurance.

BSN STUDENT HEALTH AND VACCINE POLICIES

Documented proof that the student meets the following health policy requirements must be provided prior to the start of each academic year. Students must be in compliance with all policies throughout the program. NOTE: Students who fail to complete the clinical health and safety requirements or refuse needed medical treatment will not be permitted to attend clinical experiences and will be unsatisfactory for any loss of clinical time.

PLEASE READ INSTRUCTIONS CAREFULLY

- Make an appointment with your licensed clinician for a physical exam and to have immunizations evaluated for any deficiencies.
- Once your clinician has reviewed your records, administered immunizations, or drawn blood for titers as needed, he/she must complete, sign, and date the form.

These records will be maintained in accordance with FERPA rules and regulations.

1. Mantoux tuberculin (Tb) skin test using the two-step method for the initial test and at any time when more than a year has passed since the last Tb skin test. Two-step method means that you will receive a first Tb skin test and one week later you will receive the second Tb skin test. Results of EACH step must be submitted. If you have been receiving an annual Mantoux Tb test, document the date of the current year and the previous year.
 - a. Results of a one-step Mantoux Tb skin test must be submitted each year thereafter while you remain a student.
 - b. If you have a positive (5mm or greater) reaction to Tb, you are required to have an interferon-Gamma release assay (IGRA). If the IGRA is positive you must seek medical management. Students with a positive reaction to a Mantoux Tb skin test will need to have yearly IGRA testing.
2. Rubeola (Measles), Mumps, and Rubella (MMR). Two vaccinations are required after one year of age and at least one month apart, or one MMR vaccination within the last six (6) years. Titer indicating immunity is also acceptable. Those born before 1/1/1957 are age deferred.
3. Adult Diphtheria Tetanus within the last ten (10) years. Tdap (tetanus, diphtheria, and pertussis) is required within the following parameters:
 - a. Can be received only after at least two years of receiving the Adult Diphtheria Tetanus.
 - b. Can be received only one time as an adult.
4. Hepatitis B vaccination series and titre indicating immunity are required. A declination of titre is available.
5. Varicella – documentation of disease, two vaccinations or titer is required.
6. Physical examination within one year prior of admission to the program and each year thereafter.
7. Influenza Immunization yearly by October 15 or agency requirement – please see separate policy and FAQ's for additional information.
8. Covid-19 vaccination is required. Please see vaccine requirements policy for information regarding exemptions.
9. Yearly negative urine '10 panel' Drug Screen.
10. A copy of your current CPR (cardiopulmonary resuscitation) card. **Certification must be BLS for Healthcare Provider through the American Heart Association ONLY.**
11. Background check – see policy on criminal background checks for additional information.

Reviewed 8/14, 8/16, 8/18, 4/20, 5/22, 4/24; Revised 5/21

VACCINE REQUIREMENTS - COVID-19 AND FLU

Policy, Instructions and Frequently Asked Questions Regarding Exemption

To whom does this policy apply?

This applies to all Department of Nursing undergraduate and graduate students enrolled in courses with a clinical experience component.

What is the policy?

Students must provide documentation proving they meet all clinical-site imposed health policy requirements prior to the start of each academic year. Students must comply with all policies throughout the program. Students who fail to complete the clinical health and safety requirements or refuse needed medical treatment will not be permitted to attend clinical experiences and will be deemed unsatisfactory for any loss of clinical time.

That said, Malone University is committed to safety, diversity, and inclusiveness of all our students and employees. In the case of the Covid-19 vaccine required by our clinical agency partner(s), an accommodation for medical or religious beliefs may be requested. A reasonable medical or religious accommodation is a change in the work requirements, or in the way tasks or responsibilities are customarily done that enables a student or employee to safeguard their personal health or religious principles without undue hardship on the conduct of the agency partner. One such accommodation is an exemption of the requirement to be fully vaccinated against Covid-19. To obtain an accommodation, the student or employee must follow the instructions below as they are written and submit all paperwork before or by the deadline(s) noted.

Be advised: this accommodation process applies to the Covid-19 vaccine ONLY; students *will not be exempted* from obtaining an annual influenza vaccine.

What is the deadline for being fully vaccinated against COVID-19 or having an approved exemption in order to engage in clinical experiences?

For students enrolled in courses with a clinical experience component or those employed as instructors in the clinical setting, the deadline for being fully vaccinated or having an approved exemption on file is **4 weeks prior to the start of the clinical experience** (see below for specific guidelines on valid exemptions).

How do I get an approved exemption from the COVID-19 vaccination requirement?

The nursing department will consider requests for an exemption to the COVID-19 vaccination requirement. Each request will be considered annually, on a case-by-case basis; there is no guarantee that a request for exemption will be approved. Exemption requests must be submitted to the nursing department chair according to the instructions in the following responses. Each request for exemption will first be considered by the nursing department and the outcome will be communicated the student along with any necessary additional instructions. Because our clinical agency requirements related to vaccination status *must* be met first and foremost, University approval of an exemption request will not serve as a guarantee that an Agency will permit an unvaccinated student's participation in clinical experiences.

What exemptions are allowed under this recommendation?

- An exemption based on an individual's religious beliefs or practices can be requested by completing the form titled "Request for Religious Exemption". As stated on the form, "In some cases, we will need to obtain documentation or other authority regarding your religious practice or belief. We may need to discuss the nature of your religious belief(s), practice(s) and accommodation with your religion's spiritual leader (if applicable) or religious scholars to address your request for an accommodation." Failure to provide this documentation or information will result in the request being declined.
- An individual can request an exemption based on a health-related contraindication through submission of the form titled "Request for Medical Exemption" from their treating health-care provider (MD, DO, CNP). Please note that pregnancy, breastfeeding, and/or being a woman of childbearing age are **not** considered contraindications to receiving the COVID-19 vaccine.
 - Both the American College of Obstetrics and Gynecology (ACOG) and the Society for Maternal-Fetal Medicine (SMFM) strongly recommend the COVID-19 vaccine for patients who are pregnant or breastfeeding.

- The ACOG recommendations state “claims linking COVID-19 vaccines to infertility are unfounded and have no scientific evidence supporting them. ACOG recommends vaccination for all eligible people who may consider future pregnancy.”
- An individual can request an exemption to this recommendation if they have a documented allergic reaction to an ingredient in the COVID-19 vaccine. Appropriate documentation of the allergic reaction from the individual’s treating health-care provider (MD, DO, CNP) is required.
 - Polyethylene Glycol (PEG) is an ingredient in the mRNA of COVID-19 vaccines (Moderna and Pfizer) and an individual with a documented PEG allergy should not receive an mRNA vaccine.
 - Polysorbate is an ingredient in the J&J/Janssen vaccine, and an individual with a documented polysorbate allergy should not receive a J&J/Janssen vaccine.
- Those with a history of allergic reactions to other vaccines or other medical injections will be considered for an exemption on a case-by-case basis, and will be determined based on appropriate documentation of the allergic reaction provided by the individual’s treating health care provider (MD, DO, CNP).

What conditions generally do not qualify for a COVID-19 vaccination exemption?

- A history of vaccine side effects over the 24-72 hours after receiving a non-COVID-19 vaccine, such as a low-grade fever, chills, headache or body aches, will not be considered for exemptions to this recommendation.
- The U.S. Centers for Disease Control and Prevention recommends that individuals with allergies to foods, oral medications, animals/pets, venom, latex or other environmental allergens be vaccinated. A history of these types of allergies will not be considered for exemptions to this recommendation.
- Other examples of conditions that are not eligible for a medical exemption include:
 - A history of COVID-19 infection.
 - A history of receiving monoclonal antibody infusion for COVID-19 prior to 90 days before the deadline.
 - Presence of a positive COVID-19 antibody on a blood test.
 - A history of immune-compromising conditions in which vaccines may be less effective in some patients.

Students who are not vaccinated and do not have an Agency-approved exemption will not be able to complete their clinical course requirements; inability to participate in clinical experiences due to COVID-19 vaccine status will deter progression in the education program. Instructional faculty who are not vaccinated and do not have an Agency-approved exemption will not be able to fulfill their contractual obligations, which may affect their status as an employee of Malone University. **Further, the University will not seek to provide students or instructional faculty with an alternate site that does not require vaccination or that allows exemption.**

How, where, and when do I submit my request for exemption from the COVID-19 vaccination requirement?

For medical and religious exemption requests, submit the necessary supporting documentation (request plus letter from medical provider or the religious accommodation form) to the nursing department chair, c/o Regula Hall 201. Students can request one or both of these forms from the nursing department Administrative Assistant. All requests and corresponding documentation for exemptions must be submitted **annually at least 6 weeks prior to the start of the clinical experience** to allow time for review by both the department and the corresponding Agency, with vaccination timelines noted above in mind.

How will I be informed about the outcome of my COVID-19 vaccine exemption request?

Individuals requesting an exemption from the COVID-19 vaccination requirement will receive an email message from the nursing department chair informing them of whether the request was approved, declined, or if more information is necessary to approve the exemption.

What do I have to do if my exemption request is approved and then approved by the Agency?

If an individual’s exemption request is approved by the department chair and subsequently approved by the Agency, the individual will be required to conform to all Agency-stipulated requirements. Any costs associated with complying with such requirements will be paid for by the exempted individual. Failure to comply with all requirements will be considered a violation of the university’s Community Agreement and the Academic Integrity policy, thus subjecting the individual to disciplinary measures.

What if I do not get either a COVID-19 vaccine or an exemption by the deadline to engage in clinical education experiences?

A student will not be allowed to attend clinical rotations at any Agency requiring the vaccine until the compliance is met or an approved and approved exemption is on file; the *University will not seek to provide students or instructional faculty with an alternate site that does not require vaccination or that allows exemption.*

Failure to comply with this policy by the stated deadline will hinder the student's ability to complete clinical course requirements and progress in the program. In this case, the program director and the student's academic advisor will reach out to work collaboratively with the student in creating an alternate plan of study, which may include changing majors or transferring to another university.

POLICY ON MANDATORY DRUG SCREENING FOR NURSING MAJORS

All nursing majors should be familiar with the *Malone University Substance Use and Abuse Policy for Employees and Students*. This policy can be found in the Malone University Student Handbook.

Nursing majors may be required to have a mandatory drug screening. Reports from mandatory drug screens will be submitted to the student's program director. No student who is found to be in violation of the *Malone University Substance Use and Abuse Policy for Employees and Students* will be able to remain enrolled in the Nursing program.

Students found in violation of the policy will meet with their program director and/or the Chair of the Department of Nursing. These students will be encouraged to participate in the Malone University Student Assistance Program. Decisions about re-enrolling in courses within the Department of Nursing will be handled on a case by case basis.

POLICY ON CRIMINAL BACKGROUND CHECKS

All BSN students are required to complete a criminal background check, including the FBI check, by the Bureau of Criminal Identification and Investigation (BCII). This must be done prior to beginning clinical experiences in the program. These tests will need to be completed annually thereafter. These should be completed at Malone University and can be charged to your student account.

You will be contacted should there be any question regarding your background report. The department uses the guidelines provided at the Ohio Board of Nursing web site as to a decision for admission to the program, progression through the program, and release decision regarding application for licensure.

CRIMINAL RECORD CHECKS FOR NCLEX EXAMINATION CANDIDATES

All nursing education NCLEX examination candidates who entered a pre-licensure nursing education program on or after June 1, 2003 are required to submit Civilian and FBI fingerprints to the Bureau of Criminal Identification and Investigation (BCI&I) for criminal record checks. This is in accordance with the law (Section 4723.09 and 4723.28) that regulates the practice of nursing in Ohio. The law allows the Board to automatically preclude from initial licensure anyone who has previously been convicted of, pleaded guilty to, or had a judicial finding of guilt for an egregious felony in Ohio or another jurisdiction. The egregious felonies triggering automatic preclusion are: (1) aggravated murder; (2) murder; (3) voluntary manslaughter; (4) felonious assault; (5) kidnapping; (6) rape; (7) sexual battery; (8) gross sexual imposition; (9) aggravated arson; (10) aggravated robbery; and (11) aggravated burglary. Please see Ohio Board of Nursing Discipline and Compliance policy located at <http://www.nursing.ohio.gov/discipline.htm> for detailed information.

This law change requires Bureau of Criminal Identification & Investigation (BCI&I) and FBI background check during the last year of schooling, in order to make sure results are received by the Board before licensure. No candidate will be eligible to take the NCLEX examination without the required criminal record check being completed and on file at the Board of Nursing.

Revised 7/16, 8/18, 4/20; Reviewed 5/22, 5/24

CLINICAL GRADING

Grading of Knowledge, Attitude and Performance for Nursing Majors

This grading system will be used throughout the nursing courses to indicate when a student's course participation falls below that which is required or expected in the areas of knowledge, performance, and attitude. Individual behaviors may be designated Unsafe or Unsatisfactory as defined below. These graded behaviors are separate from assignments which receive a numerical grade.

1. **Unsafe Performance:** That which threatens or *potentially threatens safety of others*. Students who have a knowledge or attitude deficiency may perform in an unsafe manner and thus receive an "unsafe" grade.
2. **Unsatisfactory Performance:** That which is below the level of performance anticipated for a student in that course and setting.

The three areas for evaluation of behavior are identified as:

Knowledge:

1. In courses, independent of graded assignments, an unsatisfactory or unsafe level of knowledge may be determined.
2. Unsatisfactory or unsafe levels of knowledge may reflect a lack of essential knowledge, correct knowledge, or failure to progress at a rate expected of all students at this time.

Performance:

1. Student performance will be independent of graded assignments and may reflect poor performance in providing care to others, completion of lab or simulation activities or participation in learning activity assignments for a theory course.
2. An unsatisfactory or unsafe designation for performance indicates that the student has an inability to perform or progress at a level expected of all students at this time or to meet the Core Performance Standards.

Attitude:

1. Attitude of students at all times should reflect behaviors as described in the Professional Behavior Policy and in the Core Performance Standards policy.
2. Deviation from those expected attributes will result in an unsatisfactory or unsafe designation.

Academic success in a nursing course is based on satisfactory completion of the following three components:

1. A variety of graded learning experiences will be planned by the course faculty. Students will receive a grade for these experiences (quizzes, written papers, oral presentations, post-conference activities, etc). Grades for these experiences will be computed and a composite grade of C or higher is required.
2. Behaviors (knowledge, performance, and attitude) determined by the course faculty and outlined in course syllabus must be consistently and satisfactorily met by the student.
3. Safe performance exists at all times.

Academic failure (as defined for progression within nursing) in a nursing course is defined as any of the following:

1. A composite course grade of below C (77%)
2. The inability of the student to consistently and satisfactorily perform the stated behaviors (knowledge, performance, and attitude). A failure occurs when a student receives a sixth unsatisfactory for a four credit course. A failure also occurs if a student has a fourth unsatisfactory grade in a one or two credit course. An unsatisfactory grade is documented if there is an inability to perform or progress at a level expected of all students at this time. An unsatisfactory grade is not recorded if the deficiency relates to learning of a competency currently being taught.
3. A third unsafe clinical evaluation during the course where another is placed at risk for physical or emotional harm or the safety of others is threatened. An unsafe performance is recorded as an unsafe and unsatisfactory grade.
4. **SUBSTANCE ABUSE, ACADEMIC DISHONESTY, MISUSE OF LANGUAGE, OR OTHER RELATED BEHAVIORS MAY BE CAUSE FOR FAILURE IN THE COURSE OR DISMISSAL FROM THE PROGRAM** (see [Malone University Catalog](#), Ohio Law 4723-5-12 C 1-26, or the American Nurses Association Code of Ethics for Nurses).

SATISFACTORY BEHAVIOR

Reflects the ability of the student to consistently perform the stated behaviors (knowledge, performance, and attitude). A satisfactory grade is documented if:

- a. The student is prepared with essential knowledge, correct knowledge, and progresses at a level expected of all students at this time.
- b. The student is able to perform and progress at a level expected of all students at this time.
- c. The student is able to demonstrate professional behavior and communication expected of a student at this time.

UNSATISFACTORY BEHAVIOR

Every two unsatisfactory behaviors will reduce the number of unsafe behaviors allowed by one. (i.e. Two unsatisfactory grades count as one unsafe)

The first 5 unsatisfactory designations in a four credit course or the first 3 unsatisfactory designations in a one or two credit course will result in a 1% reduction in the student's corresponding course grade.

DUE PROCESS FOR UNSATISFACTORY COURSE EXPERIENCES:

First unsatisfactory occurrence

1. The student will receive an unsatisfactory grade.
2. The faculty member will review occurrence with the student.
3. The faculty member will complete a report for the student's department file.

Second, Third and Fourth unsatisfactory occurrence (second in a one or two credit course)

1. The student will receive an unsatisfactory grade for each occurrence.
2. The student will meet with at least two course faculty members to develop a plan for the student to be successful.
3. The faculty member will complete a report for the student's department file.
4. The Program Director will receive a copy of the 3rd & 4th incident report.

Fifth unsatisfactory occurrence (third in a one or two credit course)

1. The student will receive an unsatisfactory grade.
2. The student will meet with at least two faculty members to review the entire clinical situation.
3. The Faculty member will complete a report for the student's department file.
4. The Chair and Program Director will receive a copy of the report.
5. The student will meet with the Program Director
6. The faculty will meet with the Program Director.

Sixth occurrence (fourth in a one or two credit course)

1. The student will receive an automatic course grade of F.
2. The faculty member will complete a report for the student's department file.
3. The Chair, Program Director and Admission and Progression Committee will receive a report.

NOTE: The process for each unsatisfactory occurrence must be completed prior to returning to the course setting.

UNSAFE BEHAVIOR

An unsafe behavior is when the student places *or potentially places* another at risk for physical or mental harm or the safety of others is threatened.

The first two designations of unsafe performance will result in a 2% reduction in the student's course grade.

DUE PROCESS FOR UNSAFE PERFORMANCE

Each unsafe behavior will reduce the number of unsatisfactory behaviors allowed by 2. (i.e. One unsafe grade counts as two unsatisfactory grades.)

First unsafe occurrence

1. The faculty member may remove the student from the class or clinical area.
2. The faculty member will complete a report for the student's department file.
3. The student shall remediate, review unsafe performance, and potential harm with two faculty members.

Second unsafe occurrence

1. The faculty member may remove the student from the class or clinical area.
2. The student will meet with two faculty members to remediate, review unsafe performance, and potential harm.
3. The faculty member will complete a report for the student's department file.
4. The student will meet with the Program Director and faculty member.
5. The faculty member will meet with the Program Director
6. The Chair and Program Director will receive a copy of the report.
7. An additional clinical faculty member will accompany the student for their return to clinical to provide 1:1 remediation until safe performance in the previously identified unsafe area is demonstrated.

Third unsafe occurrence

1. The faculty member may remove the student from the class or clinical area.
2. The student will receive an automatic course grade of F.
3. The faculty member will complete a report for the student's department file.
4. The Chair, Program Director and Admission and Progression Committee will receive a copy of the report.

EXAMPLES* OF SATISFACTORY BEHAVIOR

Attitude

Discusses negative feelings about patient with instructor. Is able to care for patient in appropriate manner or requests a change of assignment.

Complies with guidelines for dress code and clinical attendance.

Arrives on time for clinical and completes assignments on time.

Brings required items to clinical such as photo id and/or completes required documentation of clinical requirements.

Knowledge

Care plan is adequate to provide for patient needs and comprehensive for the level.

Describes asepsis.

Determines safe medication dose or seeks instructor assistance when unsure of calculation of safe dose.

Comes to clinical with adequate data to identify patient priority needs.

Written assignments submitted on time.

Performance

Care is organized and basic care is completed in allotted time.

Documentation is accurate and done individually.

EXAMPLES* OF UNSATISFACTORY BEHAVIOR

Attitude

Verbalizes critical attitude toward patient. Fails to show caring, compassionate manner toward patient.

Breaks guidelines for dress code or clinical attendance.

Arrives late for clinical without obtaining permission in advance from instructor

Forgets to bring essential items to clinical and/or fails to complete required documentation of clinical requirements.

Knowledge

Care plan is not adequate to provide for patient needs or comprehensive for the level.

Unable to describe asepsis.

Does not determine safe medication dose.

Comes to clinical without adequate data to identify patient priority needs.

Assignments not submitted or submitted late.

Performance

Care is disorganized. Unable to complete basic care in time allotted.

Documentation is copied or not the student's own work. (such documentation is a violation of academic integrity)

EXAMPLES* OF SAFE BEHAVIOR

Correct medication or IV prepared and ready to give.

Checks with instructor or staff RN (when approved by instructor) before giving medications.

Uses side rails when indicated.

Recognizes break in asepsis and corrects technique.

Recognizes threats to patient safety and takes action to prevent injury.

Corrects behaviors which were previously identified as unsatisfactory.

Informs instructor when performing new skills and reviews techniques prior to demonstration.

Interviews patient and reviews chart prior to assuming care for a patient.

Includes all essential interventions in delivery of care.

Reports off to another nurse prior to leaving unit.

Informs instructor and staff nurse of a potential problem which exists for patient.

Follows direction given by instructor or discusses with instructor if unable to carry out instructions.

Maintains confidentiality of patient information.

Is honest in any communication.

* This list is not comprehensive, but provides examples. Refer to individual course evaluation tools for specific behaviors expected in each course.

EXAMPLES* OF UNSAFE BEHAVIOR

Incorrect medication or IV prepared and ready to give. Prepares to administer medication without calculating safe dose.

Gives medication without checking with instructor or staff RN (when approved by instructor).

Does not use side rails when indicated.

Does not acknowledge a break in asepsis and continues with procedure.

Does not recognize threats to patient safety. Does not take action to prevent injury.

Failure to correct behaviors which were previously identified as unsatisfactory.

Performs new skills or unfamiliar techniques without informing and reviewing with instructor.

Cares for patient without collecting significant assessment data.

Delivers care and omits essential interventions.

Leaves the unit without reporting off to another nurse who will watch the patient.

Fails to address a patient need which poses potential threat to patient safety.

Fails to follow directions given by instructor or discuss with instructor if unable to carry out instructions.

Breaks confidentiality of patient information.

Is dishonest in any communication.

CLINICAL PREPARATION

To portray the Malone University Department of Nursing philosophy of caring and to protect the patient's safety, the student must come fully prepared for clinical experiences. To demonstrate preparation for clinical experience, the student must be fully prepared to discuss the assigned patient's medical and nursing diagnoses, treatment, diagnostic tests, and medications. The student must be prepared to present the assigned clinical papers to the faculty member prior to each day of clinical experience.

Failure to be adequately prepared for clinical experiences may result in the student not being permitted to participate in clinical activities. Students unable to participate in clinical activities because of inadequate preparation will receive an unsatisfactory or unsafe evaluation for the day. (See Clinical Grading policy) The student will be responsible for meeting with the course faculty to establish a means for successfully meeting course objectives.

The faculty plan assignments to assist the student in meeting course objectives. The student portrays accountability and responsibility by completing these assignments and submitting them in a timely manner. They are due at the time specified by the faculty unless the student has negotiated an alternate time with the faculty.

Policy for Late Clinical Papers

Clinical paperwork is due at a time determined by the course faculty. Students may contact course faculty to negotiate an alternate submission time. Paperwork from the previous week must be submitted in order for the student to progress to succeeding clinical experiences. Students who have not submitted paperwork from the previous week and are not permitted to participate in clinical experiences will receive an unsatisfactory evaluation and unexcused absence for missed clinical experiences. A grade of zero (0) will be given for any graded assignments.

DRESS CODE

As a nursing student you are representative of Malone University and the profession of nursing. Therefore, your appearance and actions should reflect this. The following dress code shall be adhered to when obtaining patient/patient assignments, for check-off or simulation in the Center for Clinical Learning and/or when attending non-uniform clinical assignments:

The official Malone University uniform or white long-sleeved lab coat, picture name tag, and agency I.D. tag (if applicable) identifies you as a Malone University Nursing Student and authorizes your presence in clinical facilities. When the student is in the facility to receive his/her assignment and make an initial visit to a patient, either the uniform or a short white long-sleeved lab coat, agency I.D. (if applicable), and Malone University name tag are to be worn.

Appropriate dress beneath your lab coat is as follows:

1. Women: Washable dress slacks and blouses, dresses, or skirts and blouses are to be worn. Jeans, sweat pants, sheer blouses, shorts, mini-skirts, tank dresses, tank tops, halter tops, hoodies, hats and canvas shoes or shoes with heels higher than 1 1/2 inches are **not** acceptable. All clothes should be neat, clean, and in good repair.
2. Men: Washable dress slacks, shirts, socks, and shoes are to be worn. Jeans, sweat pants, T-shirts, tank tops, shorts, and canvas shoes are not acceptable. All clothes should be neat, clean, and in good repair.

Dress Code for Clinical

The official nursing uniform is as follows:

1. Women: Official Malone University nursing student uniform (dark blue top and bottom), picture name tag, dark blue warm-up jacket if needed, and white, black, or gray leather shoes. You may wear a dark blue or white t-shirt under your uniform.
2. Men: Official Malone University nursing student uniform, (dark blue top and bottom) dark blue t-shirt, warm-up jacket if needed, picture name tag, and white, black, or gray leather shoes.

The uniform must be clean (washed prior to each clinical experience) and in good repair. While wearing the uniform, the following should be observed:

- Hair must be neat and clean and must not fall around the face or to the front of the shoulders. No extremes in coloring or dyeing are permitted.
- Mustaches and beards must be kept neat and trimmed close to the face. The maximum beard length should not exceed ½ inch. Facial hair should not conflict with safety standards, i.e., masks.
- Minimal jewelry should be worn. Visible body piercings should be limited to 2 studs per ear.
- Fingernails should be moderate length. Clear nail polish is acceptable. Artificial nails are not acceptable. Makeup should be moderate and in good taste. No perfume, lotions, cologne, or aftershave should be worn, as this may be offensive or injurious to individuals who are ill. Personal cleanliness is a must.
- Tattoos are permitted except on the face or neck. Exposed tattoos cannot include profanity, disrespect, nudity, racial or sexual comments or inconsistencies with Malone's Community Standards. While at clinicals, tattoos must also align with clinical healthcare partners' tattoo policy.
- Total appearance should be neat, attractive, and professional.
- Shoes must be white, gray, or black and clean, with clean, matching laces and worn only for nursing. (Minimal color in logo is permitted for athletic shoes.) Some, but not all agencies may permit white leather clogs, no Crocs are permitted.
- Students may wear the matching dark blue warm-up jacket (only) over the student uniform.
- Whenever dressed in uniform or lab coat, students are expected to conduct themselves in accordance with the code of conduct in the Malone University Student Handbook and as professional individuals.
- Gum may not be chewed during clinical time.
- Appropriate dress for some clinical experience varies from the previously stated dress code. For these clinical experiences, please refer to the specific course syllabus or directions from course faculty.
- The Malone University uniform, picture name tag and student I.D. are not to be worn for purposes other than Malone University clinical experiences and special nursing events.
- Failure to adhere to the dress code may result in dismissal from the clinical setting, an unexcused absence, and an unsatisfactory for a clinical grade.

Exceptions:

Any exceptions to the uniform policy must be approved by the Director of the BSN Program.

8/88, Revised 7/89 ...7/14, 4/20, 5/23; Reviewed 8/91 ... 7/16, 8/18, 5/22

STUDENT SIGNATURE

When signing patient records the student shall sign his/her first initial and last name, followed by the initials "MUNS", and I, II, III, or IV, corresponding to the academic year of current nursing coursework. Example: "M. White, MUNS II." The initials "MU" stand for "Malone University", "NS" stands for "Nursing Student", and "II" stands for nursing coursework during the sophomore academic year.

It is illegal to enter the computer or chart under an ID number other than your own. If your ID number does not work, you must contact the computer center at the agency to get the problem corrected.

8/88, Revised 7/89 ... 6/18; Reviewed 5/90 ... 7/14, 7/16, 4/20, 5/22

TRANSPORTATION

Travel to and from clinical agencies is the responsibility of each nursing student. Students having the same clinical assignment may decide to carpool. Student drivers are advised to have adequate liability insurance as they use their vehicles for carpooling. Students must have their own transportation for the NURS 413 and NURS 442 courses. This is because each student will make visits to various agencies and clinics as well as to private homes.

4/92 Revised 8/12; Reviewed 9/94 ... 7/14, 7/16, 8/18, 4/20, 5/22

NURSING FEES AND EXPENSES

Baccalaureate nursing education requires diverse teaching - learning strategies including a simulated laboratory setting, self-directed learning packages, diagnostic testing, and a low faculty - student ratio for the laboratory and clinical settings. These are necessary in order to comply with state and national accreditation standards, to achieve positive student outcomes, and to provide a supportive environment for effective learning. Nursing students are assessed a fee each semester in order to offset these teaching -learning provisions unique for nursing education. The following expense amounts are listed.

1. Laboratory/Clinical/Testing student fee for each semester having a clinical course. Clinical courses are: NURS213, NURS214, NURS221, NURS313, NURS314, NURS413, and NURS414. A course fee (refer to the [Malone University Catalog http://catalog.malone.edu/](http://catalog.malone.edu/)) is assessed for the NURS462 course. This fee offsets the cost of standardized testing as well as the resources needed to prepare students for the NCLEX-RN Licensure Examination.
2. Nursing Textbooks are expensive but most of the nursing textbooks are used for several courses. An example is the Pharmacology text purchased by sophomore nursing students which is used throughout their junior and senior level courses. For this reason, some semesters will require the purchase of more textbooks than other semesters. Many of the textbooks will continue to be used as graduates enter the work setting and continue with life-long learning.
3. Uniform and accessory expenses are initiated for the NURS213 and NURS221 courses. This is when students begin their laboratory and clinical experiences. The estimated cost for the uniform (scrubs, lab coat) is \$80-90, and for equipment (stethoscope, pen light, bandage scissors, carrying case) is \$90-100. One set is needed for sophomore level; Junior and Senior level students may decide to purchase a second set.
4. Health fees through the department designated provider, for the physical exam, TB test and drug screen are \$90-100 (estimate).
This can be billed to the student account upon request. Please refer to the Clinical Health and Safety Requirements for further information.
5. Antibody titers are required if there is no proof of immunization. The cost will vary with the specific test. These may be completed at the department designated provider. Approximate cost is \$100 each.
6. Typhon - \$60 one-time fee for retention of health and clinical records.
7. Professional Liability Insurance – All nursing students are required to be covered by nursing liability insurance, which is provided by the University; the cost for liability insurance is included in students' clinical course fees.
8. Transportation (please refer to the Transportation Policy). Students are responsible for all costs for transportation to and from clinical sites. Expenses may be shared as students carpool, however seniors must have their own transportation for NURS413.
9. Other out-of-pocket expenses include, but are not restricted to, application fee for licensure and the NCLEX exam (senior level, spring semester) and CPR certification every two years.
10. The NURS432 course expenses are dependent on the student's choice and will vary depending on the site and the clinical experiences as well as the travel and living expenses.
11. Refer to the Malone University Catalog <http://catalog.malone.edu/> for the graduation expenses for all students. These expenses are presented so that you may plan and budget accordingly.

**MALONE UNIVERSITY
DEPARTMENT OF NURSING
NURSING ACADEMIC & CLINICAL SUPPORT SERVICES**

THE CENTERS FOR STUDY & TESTING, CLINICAL LEARNING, AND NURSING EXPLORATION

The Department of Nursing is uniquely invested in nursing students' success and demonstrates that investment through the Nursing Academic & Clinical Support Services (NACSS), which is composed of the Center for Clinical Learning (CCL), the Center for Nursing Exploration (CNE), and the Center for Study and Testing (CST). By coming alongside our students as they develop psychomotor clinical skills, proficiency in clinical reasoning and critical thinking, and identify as a professional nurse, these centers provide students valuable resources and the opportunity to engage with faculty, staff, and peers – modeling the professional and collaborative practice known as nursing.

- Hours are posted for these areas each semester. Times will vary each semester. Students are expected to maintain a quiet and orderly environment. The CCL and CNE are to be used only by students in the Department of Nursing.
- The NACSS are open to and used by all nursing students but are often reserved for scheduled sessions at the sophomore, junior, and senior levels. Similarly, any student may utilize the CST during open hours, but it is sometimes reserved for certain test-taking sessions or simulations. Students are referred to the following Guidelines as well as to staff members and the Resource Lists located in these areas for center-specific information and questions.
- For safety reasons, children are not allowed in the NACSS.
- An unusual occurrence relating to the practice of skills in the CCL or CNE or other use of these areas which results in physical injury will necessitate the writing of an incident report. Refer to the Incident Report Form. If an injury occurs, the student may be referred to the Student Health Center or other appropriate health care center. The faculty are not responsible for consequences of said incident if the student elects not to follow the faculty referral.

GUIDELINES for use of the CENTER FOR STUDY & TESTING

The Center for Study and Testing (CST) provides nursing students with a quiet environment conducive to independent, effective learning. All teaching learning materials will be located in the CST whereas all skills and related equipment will be located in the Center for Clinical Learning (CCL). The CST is not a duplicate or scaled down model of the University Library. Rather, it is a center which can support and provide students with: independent viewing of assigned videos or webinars, taking or retaking quizzes and exams, and, for select topics, tutoring. Materials generally are not available for loan unless duplicate copies are available or if the materials are used for certification exam preparation. Students are expected to maintain a quiet and orderly environment. Policies in the syllabus in regards to test taking will apply to any students taking a test in the CST. Students are expected to sign in and sign out when using the CST outside of class times.

TUTORING GUIDELINES

The following guidelines were created to assist students as they use the tutoring services available in the Center for Study and Testing (CST). These guidelines were made to ensure that the highest quality of tutoring was available to as many as possible.

1. Individual or small group sessions will be offered sessions with a CST staff member or a peer tutor. These sessions will be determined based on input from nursing faculty and individual student need. Sessions must be scheduled at least 24 hours in advance and will only be 1 hour in length. If students can no longer attend the session they must notify the tutor at least 12 hours before their appointment. If a student does not notify the CST/is a no-show to a scheduled tutoring session, they may lose future individual tutoring privileges.
2. When attending tutoring sessions, students must sign-in to the CST as well as sign the tutoring book. Students should write down the course for the tutoring in the tutoring book.
3. Students are required to come prepared to a tutoring session. If the session includes going over study questions that were assigned in class, the student must have attempted the questions before the session. If a small group is going over study questions together, any student who has not completed the questions will be excused from the session. Students are required to complete the required readings before each session. A session should not include reading over all of the notes but rather discussing targeted areas. Students should know which areas they need further help on before the session. If a student is being disruptive to a session or is not participating, that student will be excused.
4. We recommend that students use each other as resources as well. Students are encouraged to study in groups in the CST where a staff member is available for questions as needed.

GUIDELINES for use of the CENTER FOR CLINICAL LEARNING

Purpose

The CCL is utilized for simulated clinical learning experiences and hands on practice. It is furnished with bed units, study areas, and equipment necessary for the practice of nursing skills.

Faculty and staff in the CCL will:

- Provide a caring atmosphere for student learning.
- Provide individual instruction and assistance for students learning various skills in a simulated patient care environment.
- Demonstrate the use of various materials and equipment to students.
- Observe and evaluate student performance of skills and procedures.
- Record data relating to the utilization of the CCL.

Guidelines for Use of CCL equipment

- Wash hands prior to all CCL experiences.
- Sign in and out when using the CCL outside of class times
- Regard the manikins as human beings and treat them with respect and dignity.
- Respect the rights of others using the CCL.
- Preschedule a time for competency check offs with CCL staff or faculty. There are times when the student will need to preschedule times for practice in the CCL. Students are expected to be prepared prior to competency check offs. This includes completion of reading assignments and independent practice.
- Report damaged equipment or educational materials immediately to faculty or CCL staff.
- Upon leaving the CCL, return equipment to appropriate storage area and leave the CCL in a neat and orderly condition.

Equipment Loan Policy

Equipment is to be used in the Center for Clinical Learning. Occasionally equipment may be loaned. This is ONLY with faculty/staff approval. The following rules are to be followed if the borrowing of equipment is necessary and approved:

- Students borrowing equipment must be knowledgeable in the use of the equipment to be borrowed.
- Equipment must be handled with care and appropriately stored.
- Equipment must be signed out with approval of a CCL Staff RN, CCL Student Lab Assistant, CST Staff RN, or a member of the Nursing Faculty. Students borrowing equipment must sign equipment out on the Equipment Loan Sheet at the front desk in the CCL.
- Individuals other than the student borrower are not permitted to use the borrowed equipment.
- Equipment may be signed out for overnight use. It should be signed out after 4pm and returned by 11AM the following day the lab is open. There may be times when equipment is not available for sign-out. This will be up to the discretion of the CCL staff.
- The condition of the equipment is to be checked by the student and the CCL staff prior to signing it out and upon its return to the CCL. Equipment must be returned in the same condition as when it was borrowed.
- Students assume responsibility and accountability for reporting and paying for equipment damaged or lost while in their possession.
- Failure to return equipment at the designated time will result in the loss of privileges for the borrowing of equipment in the future.
- Any equipment not returned will be charged to the student account.

There are limited supplies available. We strive to make sure all students have what they need to facilitate their learning. Be respectful of the equipment, it is very expensive and difficult to maintain in good working condition. If you know of a piece of equipment that is not in good working condition, please report this to CCL staff.

GUIDELINES for use of the CENTER FOR NURSING EXPLORATION

The Center for Nursing Exploration (CNE), at Malone University, is dedicated to providing healthcare education that focuses on patient-centered care, patient safety, and teamwork through simulation-based learning experiences using manikins, task trainers, simulated patients, or virtual reality. These creative learning experiences allow undergraduate as well as post graduate nursing students to practice clinical skills, decision making and communication techniques using high-quality educational tools and state-of-the-art technology in a safe learning environment.

The CNE uses a learner-centered approach that is based on experiential learning theories with the idea that students learn while doing. The use of simulation-based learning experiences (SBE) in nursing education helps to bring realism to students while giving the students a psychologically safe place to learn. The objective of all simulation-based learning experiences is to challenge the student to become competent and confident through experience. They are provided a variety of situations, varying in levels of complexity and designed to help link the knowledge gathered within the classroom to the psychomotor skills and attitudes needed to enhance critical thinking, develop clinical judgement, promote best practices and encourage self-reflection thus improving patient safety and patient outcomes.

Preparation and Professionalism

Students are expected to come to CNE prepared by having read the pre-scenario information, the objectives and done the required assignments prior to the start of the simulation. The simulation-based learning experiences are designed with the idea that professional integrity is maintained from the start to the finish of each scenario. Mutual respect is expected and supported from ALL participating in the experience. It is essential that students feel safe and at ease to take risks, make mistakes and step out of their comfort zone while in the scenarios.

Confidentiality of student performances and the simulation-based experience is required. Sharing the content, events, and actions (including mistakes) happening within the simulation to those not involved, outside of the sim room, can create uncomfortable situations between fellow students and can alter the learning experience of the participant.

Goals

1. Demonstrate a safe learning environment.
2. Develop student knowledge and application of skills.
3. Develop student ability to function as a team member.
4. Evaluate student competency.

During simulation, students should maintain an appearance that conveys a professional image and suitable for the clinical setting. Acceptable requirements for appearance include either the official Malone University nursing student uniform or professional attire appropriate for community and/or cultural simulations as instructed by your faculty member. Whenever participating in simulation, students are expected to conduct themselves in accordance with the code of conduct in the Malone University Student Handbook and as professional individuals.

Safety

Be aware of the safety of fellow students, faculty, and self. All learners must know and practice within safety guidelines at all times while in the CNE. Unsafe behavior will be reported to MU faculty. Proper handwashing techniques and maintenance of fingernails will be followed according to MU guidelines. Clean hands and short fingernails help to reduce tears, keeps manikins and equipment clean, reinforces the habit of handwashing, and decreases the chance of cross-contamination. Gloves should be worn by students during any contact with simulated body fluids or manikins. All sharps used in the CNE should be disposed of in the approved receptacle (sharps containers), which are mounted on the walls and are periodically on shelves in the CNE.

Students shall report any illness or physical limitations to the CNE staff or any of the designated instructors as soon as possible so that necessary actions or precautions may be taken. If needed, a student will be dismissed from the simulation. The course director may be able to work the student into another simulation day. A medical clearance is required before students with physical injuries, long illnesses, surgery, or communicable disease will be allowed in the CNE.

Simulators, skills trainers, and standardized patients are to be treated with care and respect as if they were real patients. Avoid use of ink pens, felt-tipped markers, iodine, or betadine near manikins. Never write or draw on the simulators because it will permanently remain on the skin. Do not discuss simulation events or student activities outside of the scope of the cCNE. Simulations are developed to help instill confidence and competence of future healthcare providers in an effort to effect patient safety and healthcare quality improvement. It is through this lens that the facility is focused on making a difference in the communities we serve and the patient's lives our students will come in contact with.

Simulation Staff

The simulation staff has been trained in all aspects of simulation techniques through various seminars, webinars, and training sites and may have a certification or masters in simulation. They follow simulation standards of best practice developed by the Society for Simulation in Healthcare (SSH) and the International Nursing Association for Clinical Simulation and Learning (INACSL). The simulated encounters or scenarios are set up to be as realistic as the facility can make them with the resources available. During the simulation session the student will encounter electronic manikin patients, task trainers, standardized patients or virtual reality situations that help students practice procedural and communication skills. Clinical faculty will also be present during each simulation encounter with the students.

GUIDELINES FOR WRITTEN WORK

Statement of Philosophy on Written Work

The faculty of the Department of Nursing believe that development of effective written communication skills is essential for the practice of professional nursing in contemporary society. Therefore, a variety of written assignments will be used throughout the curriculum to help students develop skill in expressing their ideas in writing. The following guidelines have been developed to clarify faculty expectations regarding acceptable format and standards for written work. Unacceptable work will be returned and must be resubmitted within the time frame designated by the course faculty. The letter grade of the resubmitted paper may be lowered upon the discretion of the faculty. These guidelines may be modified if specified in individual course syllabi.

Guidelines for Written Work

1. All work should be submitted on standard 8 ½" x 11" white paper or clean edged loose-leaf paper.
2. All formal papers such as term papers should be printed on one side of the page only.
3. Typing is expected for major papers. Neat, legible handwriting in blue or black ink is acceptable on other assignments at the discretion of course faculty.
4. **AT ALL TIMES, IN ALL CIRCUMSTANCES, AVOID PLAGIARISM**—your writing should be primarily your own words, with occasional, brief, direct quotes, appropriately referenced per APA.
5. Papers should be typed in Times New Roman, 12 point font with 1 inch margins throughout, unless otherwise specified by course faculty.
6. All work, both typed and handwritten, should be double spaced (nursing care plans excluded). This facilitates reading the work and allows for faculty comments.
7. The pages of an assignment or paper should be securely fastened together, preferable by stapling. Special binders or folders should not be used for assignments and papers unless so specified by the faculty member.
8. All papers shall follow APA guidelines for formal or student papers and shall include an introduction, body, and conclusion.
9. Correct sentence structure, paragraphing, spelling, and punctuation are expected. Faculty members will indicate their policies for grading these items. Errors will be called to the attention of students and students are expected to develop increased skill in writing correctly. Students may seek assistance from The Writing Center, which is free of charge. Faculty may require that students consult The Writing Center. (Refer to Malone University Catalog <http://catalog.malone.edu/>).

All assignments and papers should be proofread; many mistakes are identified in this process and therefore can be corrected before the paper is submitted. Reading the paper out loud prior to submission is helpful in identifying sentence structure problems. Common areas of difficulty include, but are not limited, to the following:

- Failure to use complete sentences. Complete sentences must have a subject and a verb, begin with a capital letter and end with a period.
- In a formal paper, a paragraph must contain at least two sentences. Likewise, avoid very long paragraphs as a paragraph should be no more than 25-30% of a page. Two to three paragraphs should appear on a page.
- Pronouns must have clear antecedents. The pronoun is always assumed to refer to the last noun preceding it. A single noun requires a singular pronoun; a plural noun requires a plural pronoun.
- Phrases and clauses cannot be treated as sentences.
- Spelling should be checked with care and in addition to using 'spell check' on computer applications, proof read for words that are missed.

References cited should be published within the last five (5) years or as designated by course faculty.

10. All written work is to be submitted at the designated time unless extenuating circumstances are discussed with the faculty member and alternate arrangements made in advance. Refer to Policy for late Class Assignments and Policy for Late Clinical Papers.
11. Careful documentation, through reference citations in text and a reference list, is expected at all times when source materials have been used and cited, quoted, or paraphrased. Failure to document the work of others involves plagiarism. Such an action will necessitate the student receiving a grade of “0” for the submitted paper or project. Plagiarism can also be the cause for legal action. It is also considered highly unethical to use the work, ideas, or words of another as if they were one’s own.

The following types of information should be documented with reference citations in the text and a reference list in alphabetical order:

- All direct quotations (3 words or more from another source)
 - All statistics
 - All data that are not common knowledge
 - All facts and ideas that are not common knowledge among the population for whom the paper is intended
12. Students who have difficulty with or questions about the preparation of written work are responsible for consulting with the appropriate faculty well in advance of the date the assignment is due.
 13. Format for formal papers should follow the current Publication Manual of the American Psychological Association.
 14. See attached sample title page as a guide for formal papers.

NURSING LITERATURE

Resources Available in the Library

A wide variety of nursing journals, books, and electronic resources are available in the Everett L. Cattell Library. Students can access these through the library website at <http://www.malone.edu/library>. Search the Malone Library Catalog (OPAL) for resources in a variety of formats (physical books, DVDs, CDs, electronic books, etc.). Searches can be limited to Malone only or expanded to include all OhioLINK libraries. Materials from other Ohio institutions can be conveniently ordered online for delivery to Malone's library in just a few days using the barcode on the Malone student ID.

Databases – Access to Nursing Journal Articles

Malone's library offers access to thousands of articles through our own individual subscriptions, through databases such as CINAHL and MEDLINE, and through our affiliation with OhioLINK resources such as the Electronic Journal Center. Search through all databases at once (Search Everything), select an individual database (Search Databases), or go to a specific journal title (Search Journal Titles) from the library's main web page. Use your Malone Xpress/Online learning log in to access library resources from off campus. If you need any journal articles that are not available through one of the library's resources, the library's interlibrary loan specialist can search a world-wide database to find a copy for you. Find additional help and more nursing resources on the Nursing Course Guide which is available through the Course/Research Guides tab.

General Guidelines

Classroom texts, library resources, and refereed journals should be utilized in the preparation of written work, e.g., formal papers, care plans, and learning activities. A selected list of refereed journals is included in this handbook. Journals which are not refereed are not generally acceptable in the preparation of written work. Generally, references should not be older than five years and should present current knowledge. An exception would be an assignment needing historical review and/or seminal works by a particular author. You can limit your search to refereed journals within a certain date range from the advanced search on the Search Everything tab. Assistance with APA documentation is found on the Nursing Course Guide

Help ~ Our Reference Librarians love to help! AND, they're great at it 😊 To connect with one, you can:

- Come to the library to talk to one of our reference librarians,
- Call the library 330- 471-8317,
- Use the chat option from the library web page, or,
- Contact us through email at libraryservices@malone.edu.

NURSING PROGRAM EVALUATION

**MALONE UNIVERSITY DEPARTMENT OF NURSING
ASSESSMENT OF OUTCOMES**

Assessment of Outcomes

The Department of Nursing baccalaureate nursing programs utilize a variety of measurement and evaluation tools to assess student achievement throughout the program as well as at the conclusion of the program. Those tools, which serve to assess the five student outcomes, are presented below.

- A. Course Evaluations – include teacher-made exams and student papers and projects.
- B. Clinical Evaluations – includes observation of student performance and student-faculty conferences regarding evaluation of performance.
- C. Standardized Nursing Exams – used at specific times throughout the program and assesses specific areas of nursing content and practice.
- D. Standardized Exit Exams (I and II) – assess program outcomes as well as students' level of readiness to take the NCLEX-RN; these exams are administered during the final semester.
- E. Program Evaluation and Exit Survey – these two questionnaires are completed by senior nursing students during the concluding weeks of their final semester. Students provide feedback about their perceptions of strengths and recommendations for the nursing program as well as their satisfaction with outcomes and achievements, professional goals, and future plans.
- F. Graduation rates – a report completed annually to determine graduation rates based on number of students starting sophomore nursing courses and graduating within a three-year period.
- G. National Council Licensure Examination (NCLEX-RN) - a standardized exam used to determine whether a pre-licensure program graduate (candidate) is prepared for entry-level practice; it is also known as the licensure examination.
- H. Employment rates – a survey completed annually the Office of the Provost to determine number of graduates employed in their field of study.
- I. Graduate Survey and Employer Survey – provides evaluation data regarding graduate practice at specific times following graduation.

EVALUATION OF CURRICULUM

The faculty believe that student evaluation along with faculty evaluation of the nursing curriculum is an essential component of course and program development. The faculty believe students should have the opportunity to express their views concerning nursing courses and the way in which the courses were taught. At the conclusion of each nursing course, students will be asked to complete a Nursing Course Evaluation. Students' constructive ideas and views assist the faculty in making meaningful course and curriculum revisions. Student grades are not affected by completed evaluations.

Students also have input to the curriculum and the program through the Department of Nursing committee structure. Student Representatives are invited to participate and/or provide input in selected Department of Nursing Committees, such as the BSN curriculum committee and MNSA. Student Representatives serve as a valuable link between the nursing student body and the Department of Nursing members of the faculty and staff.

A final evaluation is completed by each student prior to graduation. This is accomplished as each senior student completes (anonymously) a Program Evaluation Questionnaire and Survey at the close of their final theory course.

EVALUATION OF STUDENT PERFORMANCE

Student evaluations are based upon course and level outcomes. Students are expected to increase their responsibility and accountability behaviors as they progress through the program. Formal evaluation methods are presented for the student, course, level, and program outcomes in the Systematic Evaluation Plan. Although not formally evaluated but very much a part of the student's accountability is attendance at meetings and scheduled appointments with faculty, as well as active participation in class and clinical sessions.

Students are expected to become self-directed regarding the identification and meeting of their individual learning needs. Services are available to students to assist them in achieving academic success. These services are coordinated through the Center for Study and Testing (CST) and Center for Student Success (CSS) at no additional cost.

SYSTEMATIC EVALUATION PLAN

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
A. ASSESSMENT OF LEARNING						
1. STANDARDIZED SPECIALTY EXAMS	Benchmark set as mean score of ≥ 850 for class	NALS Director Faculty	Each nursing student enrolled in applicable nursing courses	At the end of each semester in the junior and senior years	BSN Program Director BSN Curriculum Cmte	Faculty given detailed report of results by NALS Director. Data and trends reviewed at curriculum meetings for content strengths and areas for growth.
2. STANDARDIZED EXIT EXAMS	Benchmark set as mean score of ≥ 850 for class	NALS Director BSN Program Director Faculty	Each nursing student enrolled in senior level nursing courses	At end of spring semester senior year.	BSN Program Director BSN Curriculum Cmte	Faculty given detailed report of results by NALS Director. BSN Program Director makes detailed reports accessible to all BSN faculty for review. Data and trends reviewed at curriculum meetings for content strengths and areas for growth.
3. CLINICAL AND LABORATORY PERFORMANCE RECORD	Benchmark set as documentation of student achievement of all course objectives for each clinical course per OBN rule 4723-5-19.	BSN Program Director Clinical Faculty	Each nursing student enrolled in clinical courses	At the end of each clinical rotation.	BSN Program Director Clinical Faculty	Clinical faculty and instructors fill out performance record throughout clinical rotation. Students have opportunity to review record throughout the semester and provide comment. Clinical faculty collaborates with clinical instructors throughout rotation and verifies records of teaching assistants at the conclusion of clinical rotation.
B. PROGRAM EFFECTIVENESS AND COMPLIANCE						
1. NCLEX-RN	Benchmark set for first time pass rate as 95% of national mean per OBN rule 4723-5-23	BSN Program Director	Each nursing student to graduate from the Basic Program and who has completed the BSN program requirements.	Once graduate is released the state board notifies them of directions to register at a Testing Center.	BSN Program Director BSN Curriculum Cmte	BSN Program Director makes detailed NCLEX-RN report accessible to all BSN faculty. Data and trends reviewed at BSN Curriculum Committee BSN Program Director reports aggregate pass rates at Department Meeting
2. CURRICULAR ALIGNMENT	Effectiveness of overall curriculum is evidenced by compliance and alignment with CCNE standards, BSN essentials, OBN rules pertinent to curriculum (4723-5-13) and University Mission and Purposes of Undergraduate Education through	BSN Program Director	Faculty	Every 5 years and with any change to rules, standards or essentials. (year preceding CCNE visit or CIPR)	BSN Program Director BSN Curriculum Cmte	Curriculum committee will review courses and content to ensure all requirements are met and is developed by faculty. All curricular changes are reviewed by curriculum committee for compliance.

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
	corresponding documentation of the same in BSN student handbook, course syllabi, and curriculum map.					
3. COURSE OUTCOMES	Benchmark set for effective teaching and learning as mean scores on course evaluations > 3.0 for each outcome.	Dean BSN Program Director Faculty	Each nursing student enrolled in a theory or clinical course	At the conclusion of each semester	BSN Program Director BSN Curriculum Cmte	Course Evaluations distributed to students by course faculty Evaluations reviewed by course faculty. BSN Program Director/course faculty report any trends or recommendations to BSN curriculum committee as needed.
4. CLINICAL OUTCOMES	a. Benchmark set for effective teaching and learning as mean scores on student evaluations of clinical sites \geq 3.0 and faculty corroboration of same. b. Compliance with OBN rules pertinent to clinical contracts and qualifications of preceptors (4723-5-17; 4723-5-21) as documented in school records and corroborated by faculty.	Dean BSN Clinical Coordinator	Each nursing student enrolled in Clinical courses; clinical site faculty	All new sites then every other year (students); each semester site and preceptor used (faculty)	BSN Program Director BSN Clinical Coordinator	Clinical site evaluations distributed to students by course faculty per schedule. Site and preceptor evaluations distributed to faculty by clinical coordinator each semester. Reported and discussed at BSN Curriculum committee by clinical coordinator Clinical contracts and preceptor qualifications are verified each semester before students begin clinical rotation or preceptorship experience by clinical coordinator.
5. PROGRAM OUTCOMES	a. Benchmark set for student satisfaction and perception of outcome achievement as class aggregate responses on Exit Survey & Program Evaluation 90% satisfactory or higher for each item. b. Areas of weakness will be identified and improved within 3 academic years.	Dean BSN Program Director	a. Seniors enrolled in NURS 462 b. BSN Faculty	a. Annually in late spring for basic program b. Annually in the fall semester	Dean BSN Program Director BSN Curriculum Cmte	Program evaluation distributed to students by course faculty. BSN Program Director reviews detailed results with BSN curriculum committee. BSN Program Director reports outcomes in aggregate at Department meeting BSN Program Director shares applicable data with faculty. Drafts annual assessment report identifying strengths and weaknesses related to MSN PILOs. Report submitted to provost's office each fall.
6. ALUMNI, EMPLOYER SATISFACTION	Benchmark set for alumni and employer satisfaction r/t select items as mean scores >3.5	Dean Office of Alumni Relations	Graduates and immediate supervisor	6 months post-graduation 3 years post-graduation	Dean BSN Program Director	Initial survey distributed electronically annually in November through the office of Alumni Relations to alumni only. Third year survey distributed by nursing department electronically with link for alumni and their employer. Dean reports at Department meeting.

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
7. GRADUATION RATE; EMPLOYMENT RATE	Benchmark set for desirable graduation rate as > 70% (per CCNE parameters); benchmark set for post-graduation employment rate as > 70% (per CCNE parameters)	Office of the Provost Dean, BSN Admission & Progression Committee	BSN Graduates	Annually	Dean BSN Program Director Admission and Progression Cmte	Data collected by provost's office and published in fact book. Data also tracked by admission and progression committee annually. Reported and discussed in BSN Admission & Progression Committee Reported in aggregate at Department Meeting
8. SYSTEMATIC EVALUATION PLAN	Effectiveness and compliance of plan with OBN rule 4723-5-15 evidenced by continuous use of SEP for programmatic evaluation/improvement	Dean BSN Program Director	Faculty	Every 2 years	Dean BSN Program Director Faculty	Reviewed and revised by Leadership Council and Dean with input from faculty and staff. Reported and discussed at Department Meeting
9. PROGRAM ORGANIZATION	Compliance with OBN rule 4723-5-9 for BSN program administrator qualifications and responsibilities and CCNE standard II-D for Chief Nurse Administrator and faculty and student involvement in curriculum and policy.	Dean BSN Program Director	Dean BSN Program Director BSN Faculty Student representatives for each level	Prior to appointment of a new program administrator or Chief Nurse Administrator. Licensure verified with each renewal cycle. Each semester student representatives are sought for each level.	Dean BSN Program Director BSN Curriculum Cmte	Institution administration and Dean to review and verify candidate credentials and job description. Documentation sent to OBN and CCNE at time of any change. BSN Curriculum committee minutes and lists verify student and faculty participation. Student input and concerns brought by course faculty to BSN curriculum committee.
10. PROGRAM POLICIES	Effectiveness of Program Policies is evidenced by compliance with accreditation organization(s), regulatory agencies (OBN rule 4723-5-12 and 4723-5-13), and alignment with university Mission and policies/standards.	Dean BSN Program Director	Dean BSN Program Director BSN Faculty BSN Students	Every two years and with any policy changes.	Dean BSN Program Director BSN Curriculum Cmte BSN Admission and Progression Cmte	All approved changes in policy will be reflected in current student handbook and course syllabi. Changes impacting admission/progression/completion will be phased in per rule. Students notified of changes in summer letter and syllabi distribution.
11. PROGRAM RECORDS	Compliance with OBN rule 4723-5-21	Dean BSN Program Director Administrative Asst.	BSN Program Director BSN Clinical Coordinator BSN Cmte Deans Administrative Asst.	Faculty and preceptor files will be verified prior to hire/student engagement and reviewed annually. Student records	Dean BSN Program Director	Files maintained per record retention plan.

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
				and meeting minutes verified annually.		
c. RESOURCES						
1. CENTER FOR CLINICAL LEARNING (CCL)	Benchmark set for utilization and effectiveness of services as 90% satisfactory or higher for each item.	Dean NALS Director	BSN students	Annually and as needed	Dean BSN Program Director NALS Director BSN Curriculum Cmte Resource Committee	Program evaluation distributed to students by course faculty. Report to Nursing Resource Committee annually and as needed Report to BSN Curriculum Committee annually and as needed
2. CENTER FOR NURSING EXPLORATION (CNE)	Benchmark set for utilization and effectiveness of services as 90% satisfactory or higher for each item.	Dean Simulation Coordinator	BSN students	Annually and as needed	Dean BSN Program Director Simulation Coordinator BSN Curriculum Cmte Resource Committee	Program evaluation distributed to students by course faculty. Report to Nursing Resource Committee annually and as needed Report to BSN Curriculum Committee annually and as needed
3. CENTER FOR STUDY AND TESTING (CST)	Benchmark set for utilization and effectiveness of services as 90% satisfactory or higher for each item.	Dean NALS Director	BSN students	Annually and as needed	Dean BSN Program Director NALS Director BSN Curriculum Cmte Resource Committee	Program evaluation distributed to students by course faculty. Report to Nursing Resource Committee annually and as needed Report to BSN Curriculum Committee annually and as needed
4. LIBRARY SERVICES	Benchmark set for utilization and effectiveness of services as 90% satisfactory or higher for each item.	Dean NALS Director	BSN students Resource Cmte	Annually and as needed	BSN Program Director BSN Curriculum Cmte Resource Committee	Program evaluation distributed to students by course faculty. Resource committee members evaluate holdings and effectiveness of library services annually Report to BSN Curriculum Committee annually and as needed

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
D. FACULTY						
1. FACULTY TEACHING EFFECTIVENESS PROGRAM LEVEL INDIVIDUAL LEVEL	Benchmark set for teaching effectiveness of aggregate faculty (full-time and adjunct) as 80% of respondents will agree or strongly agree with select statements on Faculty Evaluation form. Teaching effectiveness is evidenced by individual faculty as 80% of respondents will agree or strongly agree with select statements on Faculty Evaluation form.	Dean BSN Program Director Faculty	Each student enrolled in BSN theory or clinical courses.	Each semester for two years for all new full- and adjunct faculty, then every two years in alternate semesters (fall, spring); full-time faculty up for promotion may have schedule amended as needed	Dean BSN Program Director	Faculty evaluations distributed to students by course faculty according to schedule. Evaluation results reviewed by Dean and BSN Program Director and shared with individual faculty members. Faculty evaluation data is reported in the aggregate for external agencies and at school meeting.
2. FACULTY QUALIFICATIONS	Compliance with OBN rule 4723-5-10 and CCNE standard II-E as evidenced by faculty credentials, licensure, and CV up to date and on file. Benchmark set for 100% of all faculty (full-time and adjunct) to be in good standing with regard to licensure, credentials, health & clinical requirements; CV up to date and on file. In addition, must demonstrate at least one of the following: current practice, professional certifications, demonstrated maintenance of expertise related to content area.	Dean BSN Program Director	All Full-time and Part-time faculty members teaching in the BSN program	Reviewed prior to hire and every 2 years for faculty with ongoing teaching assignments. Credentials, etc. for faculty who teach on an intermittent basis are verified prior the start of any semester during which they will teach.	Dean BSN Program Director	Faculty qualifications are verified on hire via CV, licensure verification, and transcripts (obtained by provost's office). Every two years (on licensure renewal years), faculty submit updated CV, along with any new certifications or completed degrees. Licensure is verified electronically with data kept on Nursing Shared Drive
3. FACULTY SCHOLARSHIP	Benchmark set for 100% of full-time faculty [aggregate] are involved two or more of the following categories: A. Professional and/or faculty development (conference attendance, present/exhibit) B. Membership in professional/disciplinary organizations C. Research, scholarly, or creative publications D. Development of new course and/or programs within discipline.	Office of the Provost	All full-time faculty members	Annually	Dean	Full-time faculty submit annual report to provost which is copied to Dean Shared as aggregate data at Department meeting annually

PROGRAM ASPECT	OUTCOME(S); BENCHMARKS	COORDINATOR	PARTICIPANT(S)	SCHEDULE	DECISION-MAKING	DATA REPORTING and PROCEDURES
4. FACULTY SERVICE	Benchmark set for 100% of full-time faculty [aggregate] are involved in each of the following activities: A. Institutional service (committees, organization, leadership roles) B. Church- or community –focused service, participation.	Office of the Provost	All full-time faculty members	Annually	Dean	Full-time faculty submit annual report to provost which is copied to Dean Shared as aggregate data at annual Department meeting
5. FACULTY RESPONSIBILITIES	Compliance with OBN rule 4723-5-19 and 4723-5-20 regarding faculty responsibilities in didactic and clinical teaching.	BSN Program Director Clinical Coordinator Clinical Faculty	All Full-time and Part-time faculty members	Each semester	BSN Program Director	Evidence of teaching responsibilities present in job descriptions and course syllabi. Clinical Course Faculty assign clinical groups of 10 or less students/instructor. Course faculty will review syllabus and rule with teaching assistants/preceptors each semester.

Revised 11/2011 ... 02/2014; 10/2014; 4/2018; 6/2018; 2/2020; 4/2024; Reviewed 5/2016, 8/2022

PROBLEM RESOLUTION

GUIDING PRINCIPLES FOR PROBLEM RESOLUTION AND CONFLICT MANAGEMENT

The following principles are suggested for use by nursing students when interpersonal problems occur. These guidelines should be used in conjunction with the policy and procedures describe in this handbook and/or the Malone University student handbook <https://www.malone.edu/student-life/office-of-student-development/student-handbook/> and University Catalog <http://catalog.malone.edu/>. The suggestions are based on the Lord's commandments to, "Love the Lord your God with all your heart, and with all your soul, and with all your mind. This is the first and greatest commandment. And the second is like it. Love your neighbor as yourself" (Matt. 22:37, 38).

Relationship to God, Self, and Others

Communication with God is essential for spiritual growth and maintenance of spiritual health. Relating to God on a regular basis will prepare the individual to relate to self and others. Jesus also said, "If you love me, keep my commandments" (John 14:15).

Love for self and caring for self is necessary to be able to reach out to others. Caring about yourself enables you to discuss a problem with another student.

The following principles should be used in relating to others:

1. "Love one another as I have loved you" (John 15:12).
2. "Honor one another above yourselves" (Rom. 12:10).
3. "Let nothing be done through strife or vainglory; but in lowliness of mind let each esteem other better than themselves. Look not every man on his own things, but every man also on the things of others" (Phil. 2:3,4).
4. "Be merciful as your Father also is merciful" (Luke 6:36).
5. "Wherefore comfort yourselves together, and edify one another, even as also you do" (I Thess. 5:11).
6. "Finally, be ye all of one mind, having compassion one of another, love as brethren, be pitiful, be courteous" (I Peter 3:8).

Suggestions for Problem Resolution

It is recognized that even with the application of the above principles that there may be times when a person may transgress against you. In these instances Matt. 18:15-17 shall be used as the guiding principles in dealing with the transgressor.

The following steps are encouraged:

1. First, go to the transgressor and calmly discuss the transgression. What was perceived by you to be a transgression may not have been intended by the transgressor. The transgressor may admit the transgression and ask for forgiveness.
2. Second, if there was a true transgression and the transgressor does not admit his transgression, then you should discuss the transgression with the person in authority over the transgressor. You and the person in authority over the transgressor should meet with the transgressor to resolve the situation.
3. Third, if the transgressor does not hear you and the person in authority, a committee will be selected to represent you and the transgressor. This committee will meet with you and the transgressor and will act upon the situation.

NURSING ACADEMIC GRIEVANCE PROCEDURE, FILING A FORMAL COMPLAINT

The purpose of a grievance procedure is to provide students an opportunity to process grievances regarding academic issues (Class or Clinical). A student wishing to pursue an academic grievance should follow the procedure described in the Malone University Undergraduate Catalog.

A formal complaint is a signed written document expressing a concern about the Department of Nursing. Formal complaints may also be received from a member of our constituency or a practice setting. This complaint would be addressed by utilizing a similar process to that described in the Malone University Undergraduate Catalog for academic grievances. Formal complaints should be submitted to the Chair of the Department of Nursing.

ACADEMIC PROBATION, SUSPENSION, AND DISMISSAL

Students are expected to become familiar with the policies in the Malone University Graduate Academic Catalog that address academic grievance, academic probation, academic suspension, and academic dismissal.

**NURSING BYLAWS
AND ORGANIZATIONS**

MALONE UNIVERSITY DEPARTMENT OF NURSING BYLAWS

NURSING FACULTY ORGANIZATION:

The governing body for the nursing programs shall be named the Nursing Faculty Organization and the meetings shall be named the Department of Nursing meetings. This group shall act in accordance with policies and governance of the University and in so doing will be responsible and accountable for the business of the Department as any other Department of the University.

Purpose: Oversee the business of the Department including the receipt of reports; making decisions regarding the curriculum; and sending recommendations from the Department to the appropriate University groups.

Membership: Membership of the Nursing Faculty Organization consists of all full-time nursing faculty members and professional (RN) staff. The voting members shall be those with full-time faculty appointments. Business for this organization shall be conducted at the Department of Nursing meetings with the Chair of Nursing convening. The secretary shall be appointed by the Chair of Nursing. Adjunct faculty members are welcome to attend the Department of Nursing meetings.

Responsibilities:

1. Receive and respond to reports from program directors, coordinators, advisors, committee chairs, and Chair of Nursing.
2. Receive recommendations from the committees, student nursing organizations, and from Nursing Faculty Organization members as appropriate.
3. Respond to recommendations through discussion, voting, and solicitation of feedback from other groups or persons as needed.
4. Assign special projects to committees or to an ad hoc group or to member(s) of this organization.
5. Receive reports regarding program evaluation and student assessment.
6. Conduct at least two meetings each semester and one end of year meeting for review and preview work.

Amendments:

Proposed amendments to the Department of Nursing Bylaws will be recommended in writing and distributed to full-time faculty at least one week before a vote. The voting may occur by mail during the summer months; otherwise it will occur at the next Department of Nursing meeting. Passage of motion requires a two-thirds vote.

LEADERSHIP COUNCIL:

Purpose: Provide leadership oversight, guidance, and support in all matters pertaining to the conduct of the nursing programs and supportive services (CCL, CNE, CST). This council serves as a school-wide platform for collaborative decision-making that flows in two directions: from the directors/coordinator and programs to the Chair of Nursing, and from the Chair of Nursing to the programs and directors/coordinator.

Membership: Chair of Nursing (committee chair), Nursing Program Directors.

Responsibilities:

1. Share periodic updates from Program Directors and Chair of Nursing.
 2. Review and act upon recommendations from university administration and entities, program faculty, students, and staff (professional and administrative).
 3. Collaboratively review and plan budgetary guidelines and allocations, incorporating relevant elements of elements of program, school, and university assessment, as well as the university strategic plan.
 4. Serve as a round-table for problem-solving and deliberation for program and curricular innovations.
 5. Serve as a venue for formal and informal professional leadership development opportunities.
 6. Review societal and professional issues and trends relating to health promotion and public health, health care, higher education, and accreditation, and consider the need to make recommendations to entities within and beyond the school for review, revision, development or further action.
 7. Coordinate and implement annual strategy for advisory groups.
 8. Report regularly to the Department of Nursing Faculty Organization.
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STANDING COMMITTEES

There are four standing committees for the Nursing Faculty Organization:

1. Pre-licensure BSN Curriculum Committee
2. Post-licensure Curriculum Committee
3. Nursing Admission and Progression Committee
4. Nursing Resource Committee

Membership: All faculty and staff (full-time and part-time) are eligible for membership on any of the standing committees. Should formal voting be needed at the committee level the committee should recognize faculty with full-time appointments as voting members. These bylaws designate the minimum requirements (number and type) for membership. Committee Chairs shall be appointed by the Chair of Nursing. Committee membership shall be determined by the Chair of Nursing and Committee Chairs using input regarding faculty and student choices.

Each committee should conduct at least two meetings per semester. (Exception is the Post-Licensure Student Committee that meets one time each semester.) The agenda is to be determined according to committee responsibilities and requests from the Chair of Nursing. The Committee Chair shall serve as committee secretary, appoint a committee member as secretary, or have a staff member (appointed by the Chair of Nursing) serve as secretary. Minutes are to be completed and copies provided to committee members and the Chair of Nursing as well as one copy filed in the School offices. The Committee Chair is responsible for the completion of a summary report at the conclusion of the school year. This report is to be presented in May or September at a scheduled meeting. Proposed agenda for the committee is to be approved at the first or second School meeting in the fall. The purposes, membership, and responsibilities of the eight standing committees are presented.

Pre-licensure BSN-Curriculum Committee

Purpose: Monitor, review, evaluate, and recommend regarding all BSN curriculum matters. This committee serves as the intermediary between the BSN program faculty and the Faculty Organization.

Membership: Program Director, Level/Course Coordinators, specialty faculty as necessary, and Chair of Nursing (ex officio)

Responsibilities:

1. Review, monitor, and evaluate all BSN nursing curriculum including support courses for the nursing major.
 2. Receive reports and act upon recommendations from program faculty, Level/Course Coordinators, Program Director, and Chair of Nursing.
 3. Receive input and act upon recommendations from student representatives.
 4. Report regularly to the Department of Nursing Faculty Organization.
 5. Recommend curriculum change to the Department of Nursing Faculty Organization.
 6. Communicate directly with all faculty members regarding curriculum matters.
 7. Request special assignments for designated faculty to address selected issues and topics and report to this committee as designated.
 8. Review societal and professional issues and trends relating to health care, higher education, and nursing education.
 9. Evaluate standardized test score reports and aggregate data reports regarding the evaluation and assessment of the BSN curriculum and program.
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Post-licensure Curriculum Committee

Purpose: Monitor, review, evaluate, and recommend regarding all MSN curriculum matters. This committee serves as the intermediary between the MSN program faculty and the Faculty Organization.

Membership: Program Director, MSN track coordinators, one faculty member, and Chair of Nursing (ex officio)

Responsibilities:

1. Review, monitor, and evaluate all post-licensure nursing program curricula.
 2. Receive reports and act upon recommendations from Program Director, program faculty and Chair of Nursing.
 3. Receive input and act upon recommendations from student representatives.
 4. Report regularly to the Department of Nursing Faculty Organization.
 5. Recommend curriculum change to the Department of Nursing Faculty Organization.
 6. Communicate directly with all faculty members regarding curriculum matters.
 7. Request special assignments for designated faculty to address selected issues and topics and report to this committee as designated.
 8. Review societal and professional issues and trends relating to health care, higher education, and nursing education.
 9. Evaluate standardized test score reports and aggregate data reports regarding the evaluation and assessment of the MSN curricula and programs.
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Nursing Admission and Progression Committee

Purpose: Recommend admission, progression, and retention policies and procedures for the nursing programs at Malone University. Implement approved policies. Student review occurs at the committee level for any unusual situation deemed necessary by the Committee Chair and/or Program Director. Committee review is not necessary for those decisions regarding students who meet all of the required criteria. Decisions outside the committee may be made by the Committee Chair and/or Program Director and the Chair of Nursing with a summary report given at the next scheduled committee meeting.

Membership: Four full-time nursing faculty members, including Committee Chair, Program Directors and Chair of Nursing.

Responsibilities:

1. Receive reports from Committee Chair regarding current student admission and progression status.
 2. Review, revise, and develop admission, progression, and retention policies for the nursing major, make recommendations to the Nursing Faculty Organization, and implement following approval.
 3. Receive requests from faculty and nursing student representatives regarding admission, progression, and retention policies.
 4. Provide recommendations for student recognition awards as requested.
 5. Review programmatic graduation rates, employment rates, attrition/retention rates, and certification/licensure pass rates (program outcome).
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Nursing Resource Committee

Purpose:

Provide oversight, guidance, and support in matters pertaining to supplemental resources that may be made available to students, professional staff, and faculty within the Department of Nursing for the purpose of enhancing learning and program outcome achievement. This is a department-wide standing committee that monitors, reviews, evaluates, and recommends resources in collaboration with institutional and departmental leadership.

Membership:

Director of Nursing Academic and Clinical Support Services (chair), Coordinator of Nursing Simulation, 1 faculty representative from each program, invited guests from departments of interest on an as-needed basis (e.g. Library Services, Distance Learning, Information Technologies, University Relations)

Responsibilities:

1. Review and evaluate all nursing and program-relevant materials and resources within the Center for Study and Testing, Center for Clinical Learning, Center for Nursing Exploration, Center for Research and Scholarship, and the Everett L. Cattell Library on a regular basis.
 2. Review and evaluate clinical site and preceptorship opportunities.
 3. Collaboratively review and develop budgetary recommendations pertaining to resources within those entities as they pertain to nursing programs, incorporating relevant elements of program, department, and university assessment and strategic planning.
 4. Collaborate and support grant acquisition and fund raising initiatives pertaining to resources within those entities.
 5. Make and/or facilitate resource acquisitions as indicated or requested by the faculty. This committee shall periodically solicit requests for needed resources.
 6. Report regularly to Department of Nursing Faculty Organization.
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NURSING STUDENT ORGANIZATIONS

There are two campus organizations specifically available for Malone nursing students: the Malone Nurses Christian Fellowship (MNCF) and the Malone Nursing Student Association (MNSA). Each of you is encouraged to be an active member and to use these organizations to assist you with your professional and spiritual growth and development. Please refer to the MNCF Bylaws and the MNSA Bylaws and to the elected student officers for further information (<http://ncf-jcn.org>).

You are also encouraged to seek membership in the National Student Nurses Association (NSNA) and the Ohio Nursing Student Association (ONSA) and to participate at the state and national levels. Participation will provide you with an understanding of the political process and establish a sound foundation for your continued professional growth after graduation. Information is available at National Nursing Student's Association (www.nсна.org) or www.choosenursingoh.com.

PI CHI CHAPTER – SIGMA THETA TAU INTERNATIONAL

The Pi Chi Chapter of STTI is Malone University's chartered organization within this nursing honor society. The purposes and development of leadership qualities foster high professional standards, encourage creative work, and strengthen commitment to the ideals and purposes of the profession. The chapter bylaws are in accordance with Sigma Theta Tau International and are included in the student and faculty handbooks.

Those eligible for membership include the highest 35% of the class in scholarship, with a minimum gpa of 3.0 on a 4.0 scale. In the prelicensure program, students are eligible in the senior year, while in the BSN Degree Completion Program, those eligible will be in the fourth or fifth semester of the program.

Notification and instructions are mailed/e-mailed to those eligible students in early Fall for the October induction. Students who would like more information about becoming an active member are encouraged to contact a Faculty Counselor of the Pi Chi Chapter.

Scholarly activities and programs provided through the Pi Chi Chapter are open to all nursing students and the community-at-large (membership is not required). For more information, see [Pi Chi Chapter at Malone University](#).

MALONE NURSES CHRISTIAN FELLOWSHIP CONSTITUTION

Article I. Name

The name of this organization shall be Malone Nurses Christian Fellowship (MNCF), the Malone University chapter of Nurses Christian Fellowship.

Article II. Basis of Faith

Section 1. The Basis of Faith of this organization is as follows:

- a. The unique, divine inspiration, entire trustworthiness and authority of the Bible.
- b. The deity of our Lord Jesus Christ.
- c. The necessity and efficiency of the substitutionary death of Jesus Christ for the redemption of the world and the historic fact of His bodily resurrection.
- d. The presence and power of the Holy Spirit in the work of regeneration.
- e. The expectation of the personal return of our Lord Jesus Christ.

Section 2. All officers of this organization, leaders of Bible study groups and speakers must subscribe without reservation to the above Basis of Faith.

Article III. Purpose

The purpose of this organization is:

- a. To witness to the Lord Jesus Christ as God incarnate, and to seek to lead others to a personal faith in Him as Lord and Savior.
- b. To deepen and strengthen the spiritual life of members by the study of the Bible, prayer and Christian fellowship.
- c. To present the call of God to the world mission of the church; to help students, faculty, and staff to discover God's role for them.
- d. To help students become increasingly aware of their potential as Christians in the practice of nursing and to recognize their responsibility for active participation in the profession.

Article IV. Membership and Dues

Membership in this organization shall be open to all nursing students and faculty members who are committed to NCF's Basis of Faith, to its purpose and to its life. All nursing students or faculty who express interest may participate in the meetings of this organization.

The annual dues for Malone Nurse's Christian Fellowship members shall come from the MNCF budget.

Article V. Officers and Duties

The elected officers of this organization shall be a president and secretary-treasurer (and any others as the group needs, not to exceed four officers).

- a. The President shall preside over all meetings of the association. The President shall appoint Committee Chairpersons and fill vacancies. He/she shall be responsible for the execution of work and proper performance of duties assigned to other officers and committees.
- b. The Secretary-Treasurer shall keep accurate records of all meetings of the Malone University Nurses Christian Fellowship and shall retain and keep up to date all records of the association, including the official copy of the constitution. The Secretary-Treasurer will also make all official correspondences for the Malone University Nurses Christian Fellowship. In the absence of the Faculty Advisor, the Secretary-Treasurer shall make a copy of the minutes for him/her. The Secretary-Treasurer shall request payment of necessary expenses from the Student Senate in accordance with Senate Policies. The Secretary-Treasurer shall act in the absence of the President.

Article VI. The Executive Committee

- Section 1. The Executive Committee shall consist of the officers and others whom the chapter may add.
- Section 2. The responsibilities of this committee are:
 - a. To carry out the purpose, general policies and program of this organization as efficiently as possible.
 - b. To call the annual meeting for selection of new officers and for submitting of reports of the activities of the year.
 - c. To be responsible for the continuance of this organization from year to year.

Article VII. Meetings

- Section 1. Meetings for the transaction of business shall be called by the Executive Committee or upon request of three members.
- Section 2. Meetings for Bible study and prayer shall be held at times decided by the members. Bible studies will usually be held bi-weekly. Prayer meetings and spiritual education meetings will be held as announced.
- Section 3. Other meetings designed to further the purpose stated herein shall be held regularly, usually bi-weekly or monthly.

Article VIII. Nominations and Election of Officers

- Section 1. The Nominating Committee shall consist of the officers and two non-officers, who shall present to the members their slate of nominees.
- Section 2. The Nominating Committee shall also receive nominations from any member of the chapter. These nominations shall be submitted in writing to the Committee prior to the annual business meeting.
- Section 3. The officers shall be responsible to see that all nominees subscribe to the Basis of Faith as herein provided.
- Section 4. All nominations shall be presented to the members a week in advance of the annual business meeting for their prayerful consideration. Officers shall then be selected at the business meeting for a term of one year by a majority vote of the members present.
- Section 5. The annual business meeting shall be held during the month of April.

Article IX. Constitution and Amendments

- Section 1. This constitution shall be adopted upon receiving a two-thirds vote of the committed membership.
- Section 2. This constitution may be amended by a two-thirds vote of committed membership.
- Section 3. Amendments to this constitution shall not become valid until a copy of said amendment has been placed in the office of Nurses Christian Fellowship, Professional Chapter Liaison, PO Box 7895, Madison, WI 53707-7895.

MALONE NURSING STUDENTS' ASSOCIATION

CONSTITUTION

Article I. NAME

The name of this organization shall be the Malone Nursing Students' Association (MNSA).

Article II. PRINCIPAL OFFICE

The principle office of the association shall be:

Department of Nursing
Malone University
2600 Cleveland Ave. NW
Canton, OH 44709

Article III. PURPOSE AND FUNCTIONS

The purpose of the Malone Nursing Students' Association is to:

- A. Assume responsibility for contributing to nursing education in order to provide for the highest quality health care.
- B. Provide programs representative of fundamental and current professional interest and concerns,
- C. Aid in the development of the whole person, and his/her professional role, and his/her responsibility for the health care of people in all walks of life.
- D. Assist with student recruitment and retention, coordinate selected student events.

The functions of the Malone Nursing Students' Association shall be to:

- A. Have direct input into standards of nursing education and influence the education process.
- B. Influence health care, nursing education and practice.
- C. Promote and encourage participation in community affairs and activities towards improved health care and the resolution of related social issues.
- D. Represent nursing students to the consumer, to institutions, and other organizations.
- E. Promote and encourage students' participation in interdisciplinary activities.
- F. Promote and encourage recruitment efforts, participation in student activities, and educational opportunities regardless of persons' race, color, creed, sex, lifestyle, national origin, age or economic status.
- G. Promote and encourage collaborative relationships with nursing and related health organizations.
- H. Plan and implement special programs collaboratively with students (i.e., Dedication, Pinning, Spiritual Formation opportunities, etc.)
- I. Review student policies (non-academic) and recommend changes as needed.
- J. Monitor effectiveness of communication line between classes, between programs, student groups and alumni groups and propose changes as needed.

Article IV. MEMBERS

- A. All students who declare their major as nursing at Malone University shall be members of the association. Dues shall come from the annual Malone University student activity fee.
- B. The rights of the members shall be to:
 - 1. Attend all meetings of the association to be held in the manner provided by the Bylaws.
 - 2. Vote on all matters submitted to a vote of the membership. Voting by proxy shall not be permitted.
 - 3. Vote for the association's officers and representatives as provided by the Bylaws.
 - 4. Vote on any proposed change in the association.

5. Hold office in the association as provided in the Bylaws.

C. All members are encouraged to become members of the Ohio Student Nurses' Association and the National Student Nurses Association.

Article V. EXECUTIVE COMMITTEE

- A. The official policy-making body of the association shall be the Executive Committee.
- B. The Executive Committee shall consist of the President, Vice-President, Secretary-Treasurer, Chaplain, Membership Coordinator, Committee Chairpersons, and Faculty/Staff Advisor.
- C. The Executive Committee shall meet as provided in the Bylaws.
- D. The Executive Committee shall have the authority to determine the majority of its members.
- E. A vacancy on the Executive Committee during the term of office shall be filled in the manner provided in the Bylaws.

Article VI. BYLAWS

The Executive Committee, by majority vote and secret ballot, in a regular or special meeting called for that purpose, shall have the power to adopt and amend, as may be deemed necessary, Bylaws for the proper government of the association.

Article VII. AMENDMENTS

- A. A proposed amendment to this Constitution shall be presented to the Executive Committee at least sixty (60) days prior to its proposed adoption.
- B. The text of the proposed amendment shall be printed and sent to all Malone Nursing Students' Association members at least thirty (30) days prior to the consideration.
- C. This Constitution shall be amended only by the vote of two-thirds (2/3) of the members voting by secret ballot
- D. Unless otherwise provided, all amendments shall take effect at the beginning of the membership year following their adoption.

BYLAWS

Section I. MEMBERSHIP

Membership shall consist of all Malone University Nursing Students.

Section II. RIGHTS AND RESPONSIBILITIES OF MEMBERS

- A. Members shall have the right to vote and to hold elective office or appointive positions.
- B. Members shall have the right to receive any publications of the Malone Nursing Students' Association.

Section III. MEMBERSHIP YEAR

The membership year shall be September 1 through August 31.

Section IV. MEMBERSHIP DUES

The annual dues for Malone Nursing Students' Association members shall come from the annual Malone University student activity fee.

Section V. EXECUTIVE COMMITTEE

- A. The Malone Nursing Students' Association shall be responsible for guaranteeing open nominations in the conduct of the election of the Executive Committee.
- B. The Executive Committee shall meet at least twice a semester. Special meetings may be called at the request of the President. A majority of the members duly elected shall constitute a quorum at any meeting of the Executive Committee.
- C. Any member may be elected to the Executive Committee except the office of Vice-President, which shall be a Sophomore or Junior student.
- D. The Vice-President shall fill the office of President the year following that which he/she served as Vice-President.
- E. The Vice-President, Secretary-Treasurer, Chaplain, and Membership Coordinator shall be elected by the members. Said officers and the President shall serve as officers of the association.
- F. Committee chairpersons shall be appointed as necessary by the President.
- G. In case of a vacancy in the office of the President, the Vice-President shall succeed to the office of President, serving for the balance of the year.
- H. In case of a vacancy in the office of the Vice-President, Secretary-Treasurer, Chaplain, and Membership Coordinator, the vacancy shall be filled by the association from among its members in an election by secret ballot and majority vote.
- I. The duties of the Executive Committee shall include, but are not limited to, the determination of policies and procedures for the organization and the implementation of said policies and procedures.
- J. The term of office shall be one year from the adjournment of the annual meeting at which officers are elected to the adjournment of the annual meeting at which their successors are elected.

SECTION VII. OFFICERS AND DUTIES

- A. The officers of the association shall consist of a President, Vice-President, Secretary-Treasurer, Chaplain, Membership Coordinators, Committee Chairpersons and the Faculty Advisor. These shall serve on the Executive Committee.
- B. The President shall preside over all meetings of the association. The President shall appoint Committee Chairpersons and fill vacancies. He/she shall be responsible for the execution of work and proper performance of duties assigned to other officers and committees.
- C. The Vice-President shall aid the President and act in the absence of the President. The Vice-President will also serve on committees appointed by the President. The Vice-President should plan the programs and make all necessary arrangements.
- D. The Secretary-Treasurer shall keep accurate records of all meetings of the Malone Nursing Students' Association and shall retain and keep up-to-date all records of the association, including the official copy of the Constitution. The Secretary-Treasurer will also make all official correspondence for the Malone Nursing Students' Association. In the absence of the Faculty Advisor, the Secretary-Treasurer shall make a copy of the minutes for him/her. The Secretary-Treasurer shall request payment of necessary expenses from Student Senate in accordance with Senate Policies.
- E. The Chaplain shall make arrangements for devotional exercises for each meeting.
- F. The Membership Coordinator shall keep accurate records of all members and assist with the duties of the Vice-President.
- G. The Faculty/Staff Advisor shall be a faculty or professional staff member of the Department of Nursing shall be appointed by that department.

Section VIII. REPRESENTATION TO THE OHIO NURSING STUDENTS' ASSOCIATION DELEGATE ASSEMBLY AND THE NATIONAL STUDENT NURSES' ASSOCIATION DELEGATE ASSEMBLY.

Malone Nursing Students' Association representatives to the Ohio Nursing Students' Association Delegate Assembly and the National Student Nurses' Association Delegate Assembly shall be active members of the Ohio Nursing Students Association and the National Student Nurses' Association and shall be elected by the members.

SECTION IX. MEETINGS

The time, date, and place shall be decided upon by the members of the Executive Committee.

Section X. AMENDMENTS

- A. A proposed amendment to the Bylaws shall be presented to the Malone Nursing Students' Association Executive Committee at least thirty (30) days prior to its proposed adoption.
- B. The Bylaws shall be amended only by the vote of two-thirds (2/3) of the members of the Malone Nursing Students' Association Executive Committee voting by secret ballot.
- C. Unless otherwise provided, all amendments shall take effect at the beginning of the membership year following their adoption.

9/89, Revised 10/89, 6/06, 2/24

Reviewed 5/04, 6/06, 7/08, 7/09, 7/14, 7/16, 8/18, 4/20, 5/22