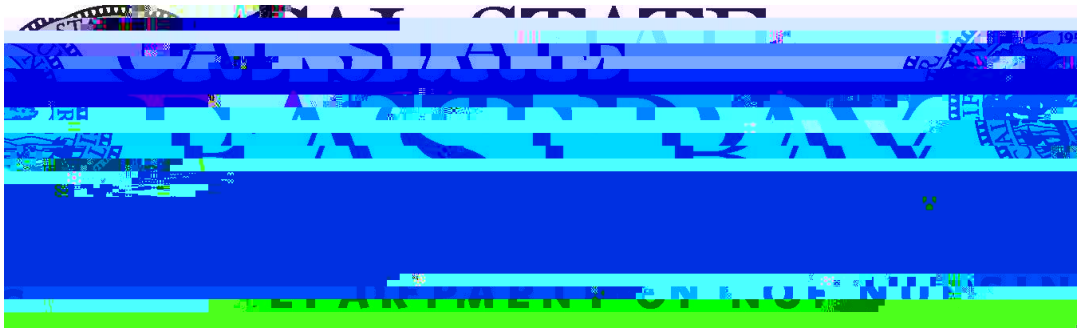

BSN PROGRAM

STUDENT HANDBOOK

2021 - 2022

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STUDENT AFFIRMATION FORM

I understand that as a nursing student I am a member of a profession, which places me in a position of confidence requiring the utmost discretion and professionalism to protect those with and for

PROGRAM INFORMATION

Mission Statement

The mission of the baccalaureate nursing program at Cal State East Bay is to prepare

Cal State East Bay Nursing Core Values

I. *CARING*: We believe Caring is essential to the practice of nursing and seek to treat

Student Learning Outcomes

Students graduating with a B.S. in Nursing from Cal State East Bay will:

- Synthesize knowledge from the natural, behavioral sciences and the humanities with current nursing knowledge and theory to deliver nursing care;
- Provide safe, compassionate nursing care to a diverse client population;
- Use critical thinking and communication skills to develop partnerships with clients and other health care professionals;
- Demonstrate responsibility and accountability for design, delivery, and evaluation of client care;
- Demonstrate professional behaviors in interactions with clients, families, colleagues, and the community.

5/2014

Nursing Program Curriculum Goals

Nursing Program Philosophy

The primary purpose of the Cal State East Bay Nursing Program is to prepare competent beginning professional nurses. In that regard, the faculty believe that nursing includes provision of care and support to sick clients, facilitation of preventive health measures, and promotion of high levels of health.

Clients, whether they are individuals, families, groups, or communities, are multi-dimensional with physiologic, psycho-emotional, social, spiritual, and cultural experiences. All of these factors have bearing on client well-being directly or indirectly as they may influence health care and lifestyle decisions. Like client needs, the healthcare system is complex. The faculty thus believe that interdisciplinary teams, characterized by collaboration among a variety of professionals, offer the richest approach to client care. Nurses bring a distinct set of knowledge, skills, and caring to such teams.

The faculty believe that caring is an essential element of nursing and that it requires sensitivity to clients' health and comfort across the dimensions of human experience. Caring requires respect for clients and belief in their fundamental dignity. Caring includes a commitment to assisting/supporting others. A sense of altruism forms the basis of caring.

Professional nurses are educated at the Baccalaureate level and draw on the discipline of nursing as well as other disciplines to create an amalgam of knowledge necessary to guide practice. The faculty values contributions from biological and behavioral sciences as well as arts and humanities. The faculty supports nursing science as the chief means of developing a codified knowledge base for the profession. A broad general education, knowledge base in supportive disciplines, and focused content in nursing theory, research and practice prepares the professional nurse for autonomous and interdependent practice.

Nurses use the nursing process to guide decision making with clients. Effective use of the nursing process requires communication and critical thinking skills such as analysis, interpretation, and drawing inferences from assessment data. The primary goal of the nurse in interaction with clients and other professionals is to promote adaptive exchanges. People are in constant interaction with their internal and external environments, but adaptive exchanges with the environment are those that move clients closer to ideal health: the best possible level of function, a sense of safety, and a satisfactory level of challenge. Adaptive exchanges are also characterized by willingness to change and to seek accommodation from others. Nurses support adaptive exchanges by intervening in the process by which health problems or barriers to health evolve. Nurses may eliminate problems or barriers to health, Increase the client's resistance to problems/barriers, and/or assist the client in dealing with the consequences of the problem. Nurses also may recruit others to intervene in the client's behalf or support the client's own efforts to help him, herself.

As designers of the structure in which learning takes place, faculty recognize that student learning styles differ. Because the faculty believe that active student involvement facilitates learning, we vary learning activities in order to address differing learning styles and engage students in active learning.

Human Development Requirement Policy and Procedure

Description:
Students must complete a course in Lifespan Human Development as part of their course requirements for the nursing major.

Policy:
Students must successfully complete a course in Lifespan Human Development prior to entering semester 3 of the nursing program. Students can meet the Lifespan Human Development requirement in one of the following ways:

1) Complete a Lifespan Human Development course at another institution. Such course must be approved by the Department of Nursing and be at least the equivalent of three semester units. If the student chooses this option, the student will need to complete an alternate Upper Division Social Sciences "D" course (UD-D) to meet the Cal State East Bay GE requirement.

OR

2) Complete HDEV 380 at Cal State East Bay.

Procedure:

1. Student transcripts will be reviewed with the student during their first advising appointment during Semester 1.
2. If the student has completed a Lifespan Human Development course, the faculty

Approved 5/2/19

Nursing Electives

1. *NURS 302 Success in Nursing (1U)*
   This seminar course explores learning strategies for the applied science of nursing by means of written and oral communication activities relevant to nursing major courses

2. *NURS 491 Environmental Health Nursing (2U)*
   This course explores how the environment impacts our health and how we impact the environment. Emphasis is put on medical waste/sustainability, climate change and environmental justice, and the role of the nurse in mitigating and responding to environmental health issues.

3. *NURS 492 Global Health Nursing (1U)*
   This course gives an overview of global health in nursing. Students will have the opportunity to read, interpret and evaluate concepts in global health to increase their knowledge, skills, and attitudes regarding global health

4. *NURS 493 Nursing Research in Global Health (1U)*
   In this overview of global health nursing research course, students will read, interpret and evaluate global health research publications. Emphasis is on women and infant health issues and critical analysis of research.

5. *NURS 494 Essentials of Critical Care Nursing (2U)*
   This course explores medical and nursing management of adult patients with multiple, complex medical and surgical diagnoses in various types of critical care units.

6. *NURS 495 Palliative Care in the Community (2U)*
   This course introduces concepts of palliative and hospice care. Students participate in collaboration and practice with a service partner to provide quality, interpersonal care to end-of-life patients and their families in the community.

7. *NURS 496 Introduction to Healthcare Informatics (1U)*
   The course surveys health care informatics issues and the technologies used in nursing practice, research, and administration.

BSN Program Semesters 1 & 2: General Information

I. Theory and Lab Courses

NURS 310, 311, 312, 313: Foundations of Professional Nursing, Nursing Interventions 1, Health Assessment & Health Assessment Lab
The first theory courses in the major are Nursing 310/311. All the basic social/behavioral frameworks used by nurses are introduced in this lecture course. Nursing Support of esupp hHealt (an

major classes of drugs, with emphasis on mechanisms of action; and 3) patient care implications based on an understanding of the pharmacological aspects of specific drugs.

NURS 322: Aging in Heath and Illness
This course will explore theories of aging, health problems common in the aging individual, and knowledge and skill acquisition needed to care for these patients

NURS 317, 327: Community Engagement Nursing(1, 2)
(1) This seminar course is focused on the delivery of culturally inclusive community-based healthcare, selected issues in primary care and health promotion. The course includes both in-class sessions and field experience in a community health facility or elder health site.
(2) Seminar focused on delivering culturally inclusive, community-based health care and on disparities in chronic care and health care outcomes. Includes both in-class sessions and field experiences in community health facilities and facilities serving older adults.

BSN PROGRAM-Semesters 3 & 4: General information

I. Theory And Practicum Courses

There are three clinical theory and practicum courses in the second year of the BSN

Appearance"). Each agency has slightly varying regulations. Helpful items are: stethoscope, small notebook for pocket, and pen with black ink.

- If you visit an agency at other than assigned clinical times, you must be dressed in clean, neat, conservative clothing. A white lab jacket is to be worn and your Cal State East Bay name pin must be affixed. Professional decorum is expected.

III. Evaluation

Theory course evaluations consist of multiple choice examinations and written papers. Clinical practice courses are evaluated according to specific behavioral objectives. The clinical instructor at the end of each rotation has a conference with the student and together they complete a written evaluation. Skills lab course grades are determined by multiple choice tests and skills performance scores.

IV. Other Nursing Courses

NURS 414: Legal Issues in Nursing Practice
This course is designed to acquaint the student with major legal concerns within the nursing profession today and with her/his rights and duties as a nurse. The course is also intended to serve as a catalyst for continuing examination of her/his legal status in this changing world. Topics highlighted in the course include standards of care, legal significance of expanded roles, nursing negligence, the nurse's role in deposition and trial, rights and obligations as an employee, patient rights, responsibilities towards the public at large, ethical dilemmas in nursing today, and legal issues of tomorrow's nurse. The student is expected to demonstrate knowledge of the impact law has on her/his role and responsibilities as a nurse and on the nursing profession. Demonstration will be through a midterm, one paper, and a final examination.

NURS 415: Transitions of Care
This course addresses key concepts of the transitions of care framework and related content on health care history, financing, care settings, nursing case management and coordination of care.

NURS 417, 427: Community Engagement (3, 4)

(1) This is a seminar course that focused on delivering culturally inclusive, community based healthcare and on disparities in health outcomes for families and children. Includes both in-class sessions and field experiences.
(2) This seminar focuses on the delivery of culturally inclusive, community-based healthcare and selected issues of disparities in health outcomes for adults with chronic or complex illness. Includes both in-class sessions and field experiences in settings serving adults.

NURS 422:Evidence Based Practice and Nursing Research
This course focuses on appraisal and integration of research evidence, evaluation of outcomes, development of evidence-based practice, and critique of quantitative and qualitative healthcare research with an emphasis on research utilization.

NURS 423: Leadership in Nursing
This course engages students in leadership and management theory and application to healthcare issues and nursing practice.

HIST 477 (C4) History and Trends in Nursing
This course is taught through the History Department, School of Arts, Letters & Social Sciences. This course is an introduction to both the history of nursing and its current applications and trends. A general picture of nursing's past, present, and future are presented. Nursing is viewed in contrast with other health professions. Considered are the changing roles of the nurse along with expectations of ethical behavior. Included are problems of confidentiality, relationships, and the nurses' code of conduct. Also presented are the importance of the historical aspects of ethics and professionalism.

NURS 490 Independent Study (1-2U)
Students may apply no more than 12 units of IS in the major department and 8 units in other departments toward a baccalaureate degree.

BSN PROGRAM- Semester 5: General Information

I. Theory and Practicum Courses

NURS 450/51 Community Health & Practicum
This course explores population-focused approaches to community health promotion, disease prevention and integration of complex concepts in community health systems and policies.

The practicum course applies concepts related to health promotion and disease prevention at the individual, family, community and systems levels. The focus is to promote health equity by addressing social determinants of health through the application of the nursing process. Students are assigned in clinical groups to a specific clinical agency, just as year 2. The clinical groups meet two days a week. Students need a car or other means of transportation to visit the homes of assigned clients. Clinical evaluation is credit/no credit. Expected clinical behaviors are identified in a written clinical evaluation in the syllabus. Dress: Conservative street clothes.

NURS 452/53 Preceptorship Seminar & Practicum
The Preceptorship is an intensive clinical experience that integrates nursing knowledge gained in all previous coursework. It assists students in making the transition from the academic to the professional work world. In the seminar course, students participate in a weekly on campus class activities designed to assess clinical competence and prepare for the NCLEX-RN Licensing Examination.

In the Preceptorship Practicum course the student will complete 180 hours consisting of two 12-hour or three 8-hr shifts per week which are spent in a clinical setting with a RN Preceptor over an 8 week period for half the Semester. A faculty liaison meets regularly with the student and Preceptor at the clinical facility. Students are advised not to take other classes concurrently with preceptorship. Many agencies have rotating shifts, which make it difficult to schedule other classes. A reduction in employment responsibilities is also advised.

Details of the preceptorship application procedure and clinical placement are distributed to students during informational meeting for incoming senior level students.

Cal State East Bay NON-DEGREE CERTIFICATE PROGRAM

LVN- RN LICENSURE OPTION

The “30 Unit Option” allows LVNs to sit for the NCLEX-RN (RN licensing exam) after successfully completing courses for 30 semester units. This program does not meet Cal State East Bay graduation requirements or admission requirements for the Nursing major. Students must declare their intent to enroll in this option to the Chairperson of the Department of Nursing prior to the nursing program application deadline. Clinical placement is offered on a space available basis. Students must also make an appointment with a Nursing advisor prior to the nursing program application deadline. Each applicant's previous education and work experience will be individually assessed.

The resulting RN license would be valid in California. It is important for students to understand that taking the NCLEX after completing the LVN-30 unit option means that your license to practice nursing may not be recognized in all 50 states.

Requirements

1. High school graduate or equivalent.
2. Current licensure as a vocational nurse in California.
3. Admission to the University as an “Undeclared Major”.
4. Completion of all health requirements.
5. Current malpractice insurance
6. Satisfactory completion of the following courses:

Prerequisites

BIOL 271 (Physiology) 4 units (with laboratory)

BIOL 230 (Microbiology) 4 units (with laboratory)

Nursing Prefix Courses – Take After Approved For Program

NURS 314/315 (Mental Health and Psych Nursing) 4 units

NURS 322/323 (Nursing Care of Adults I / Aging in Health & Illness) 6 units

NURS 420/421 (Nursing Care of Adults II / Medical/Surgical) 6 units

NURS 423 (Leadership in Nursing) 2 units

NURS 453 (Preceptorship Practicum) 4 units

NURSING DEGREE PROGRAMS

POST-LICENSURE CONCENTRATION

ADN/RN-BSN Program

Program Requirements

**All Policies and Procedures in the Student Handbook apply to Post-Licensure students. **

I. Prerequisite Courses (28 units)

1) BIOL 270, 271, 230 (12)
2) CHEM 161 or 165 (4)
3) COMM 100 or 104 (3)
4) ENGL 102 (3)
5) STAT 100 (3)
6) A course in Critical Thinking such as PHIL 100 (3)

II. Non-Nursing Courses to be completed prior to or concurrently (12 units)

1) PSYC 100 (3)
2) ANTH 100 (or 130) or SOC 100 (3)
3) HDEV 380 or other approved lifespan / human development course (3)
4) HIST 477 (3)
5) *any additional lower division GE will need to be completed prior to graduation*

III. Proof of completion of NCLEX exam (15 upper division units)

IV. NURS prefix courses (26 upper division units)

V. Upper Division GE (9 upper division units)*

*See Progression Guide next page.

Total units for B.S.N. degree = 120 (including up to 70 transfer units)

Post-Licensure Program Course Progression Guide

I. Post-Licensure Program = 35 units (26 NURS prefix units and 9 GE units)

Add 1-2 courses from list below each semester in addition to NURS classes. Do not exceed 17 units. It is highly recommended to take these courses when your unit load is lightest.

1) HIST 477 (3) *major requirement*
2) HDEV 380 (3) *major requirement*
3) Upper Division Science (GE Area UD-B) (3) *not required for 2nd Bachelors*

Below is the roadmap for part-time enrollment for incoming students fall 2021-2022

Course #	Semester 1 (Fall)	

Post-Licensure Capstone Project

Nursing Student Health Documentation

During your study in the Nursing program, you will visit partner facilities that mandate students meeting certain health requirements. In order to comply, we must have your current health documentation on file when you start the program. It is the student responsibility to keep track of all the listed requirements and submit proof of **currency** throughout the program. The Department and partner facilities have the right to decline your participation if you are not in compliance for any requirement.
For approval to participate in Nursing program, electronically submit these items by deadline to the nursing office.

I. Health-Related Items And Renewal Requirements

1) BLS CPR Certification
2)

1. Use appropriate grammar, vocabulary, and syntax.
2. Effectively communicate nursing actions.
3. Appropriately interpret client responses.
4. Initiate health teaching.
5. Demonstrate accurate nursing documentation.
6. Accurately report patient information to members of the health care team

E. Mobility and Stamina

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings.

1. Perform basic life support, including CPR.
2. Function in an emergency situation.
3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
4.

C. Note fluid levels in collection devices, syringes and infusion devices.
D. Read gauges that monitor patient progress (e.g. sphygmomanometer).
E. Discriminate colors for diagnostic purposes.
F. Assess movements of patients.
G. Observe patient behavior (e.g. in rehabilitation or psychiatric facilities).

I. Behavioral-Emotional Health

A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty, and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.
9. Communicate over the telephone.

12/2013

Students With Disabilities Or Limitations

The Department of Nursing follows the Cal State East Bay nondiscrimination policy, and students requesting accommodations in the classroom or in clinical internship placements must be registered with the Accessibility Services office. It is to the student's advantage to meet with their Accessibility Services counselor prior to the start of term in order for AS and the Nursing Program to collaborate on reasonable accommodations. Students requesting accommodations must demonstrate their ability to meet the Essential Functions. For more information see the Accessibility Services web page at:
http://www20.csueastbay.edu/af/departments/as/

If, after admission to the nursing program, a student develops a physical or mental disability that limits his/her ability to meet the Essential Functions, it is the student's responsibility to bring this information to the attention of the clinical faculty before they begin the clinical course. If unable to meet the clinical course objectives, the student will not be allowed to participate in clinical activities. The student must provide documentation from their physician prior to returning to clinical which states that the student is able to meet the Essential Functions.

Sample Physician's Statement Form can be found in Appendices.

University Policy on Academic Dishonesty

The University, like all communities, functions best when its members treat one another with honesty, fairness, respect and trust. Students should realize that deception for individual gain is an offense against the members of the entire community, and it is their responsibility to be informed of University regulation on Academic Dishonesty by reading the catalog. It is a duty of faculty members to take measures to preserve and transmit the values of the academic community in the learning environment which they create for their students and in their own academic pursuits. To this end, they are expected to instill in their students a respect for integrity and a desire to behave honestly. They are also expected to take measures to discourage student academic

1.2 **Plagiarism**

Students are expected to do their own work. Plagiarism consists of taking the words or specific substance of another and either copying or paraphrasing the work without giving credit to the source. Some examples are:

1.2.1 Failure to give credit in a footnote for ideas, statements of facts or conclusions derived from another.

1.2.2 Failure to use quotation marks when quoting directly from another whether it is a few words, a sentence or a paragraph.

1.2.3 Failure to reference close and/or extended paraphrasing of another.

1.3 **Other Forms of Academic Dishonesty**

1.3.1 Providing material or information to another person with knowledge that these materials will be used improperly.

1.3.2 Possessing another student's work without permission.

1.3.3 Selling or purchasing examinations, papers, laboratory work, computer programs or other assignments.

1.3.4 Altering another student's examination, term paper, laboratory work, computer program or other assignment

1.3.5 Knowingly furnishing false or incomplete academic information.

1.3.6 Altering documents affecting academic records.

1.3.7 Forging a signature of authorization or falsifying information on an official academic document, election form, grade report, letter of permission, petition, or any document designed to meet or exempt a student from an established University academic regulation.

Nursing Program Policy on Academic Integrity

Society has entrusted nurses and other health care professionals with the comfort and safety of its most vulnerable people. Therefore, the nursing profession requires people of absolute integrity.

Nursing Progression Policies

The Nursing Program faculty have established policies regarding student progression from one course/level to the next. The faculty have also set limits on the number of "D" or "NC" grades earned to maintain enrollment in the program (see I.E. below). The intent of this policy is to assure student readiness for more complex courses and responsibility and to facilitate a successful transition from school to employment.

I. Nursing Course Grading Policy

- Graded nursing coursework will use the following grade scale where a grade of C- or higher is considered passing. Rounding method is not use for overall nursing course percentage.

- Course percentage associated with assigned course grade:

  93 – 100 A
  90 – 92 A-
  87 – 89 B+
  83 – 86 B
  80 – 82 B-
  77 – 79 C+
  73 – 76 C
  70 – 72 C-
  67 – 69 D+
  63 – 66 D
  60 – 62 D-
  59 and below F

Approved 6/2018

II. Nursing Course Progression

Policy:

Courses with a NURS prefix must be successfully completed or challenged in the proper sequence. "Successful completion" means earning a C- or better or CR in NURS prefix courses or an approved equivalent course. Students who earn two failing grades, defined as lower than C- or a NC, in NURS prefix courses will be dismissed from the nursing program. Students who withdraw from a NURS prefix course must follow the university's withdrawal policy and procedure and must successfully complete the course before progressing. Students who receive an Incomplete in a NURS prefix course must follow the university's incomplete policy and procedure and may need to successfully complete the course before progressing.

Procedure:

A. Nursing Theory and Clinical courses must be completed concurrently. See “Repeating Theory and Clinical Policy and Procedure”.

B. Nursing courses without an accompanying clinical course must be completed at Cal State East Bay unless the instructor, with approval from the Department Chair, has identified an equivalent course offered at another institution. Not all nursing courses will have an equivalent course outside of Cal State East Bay.

1. This applies to courses repeated due to course failure or course withdrawal.
2. Upon failure or withdrawal from a course, the instructor will advise the student on their options for retaking the course.

C. Certain Nursing course requirements or electives may be considered successfully completed if a pre-approved substitute course was taken prior to starting the nursing program. Students will not receive in-residence or upper division course credits for approved substitute courses. Students should consult with their nursing major advisors who have a list of pre-approved courses. Substitutions are currently allowed for these courses:

1. NURS Nursing elective - NURS 301 (3) Nutrition and Medical Nutrition Therapy
2. HDEV 380 (3) Lifespan Human Development (see Human Development Requirement Policy and Procedure 5/2/19)
3. NURS 316 (3) - Pathophysiology (for students in Post-Licensure Program only, if it was taken as a stand-alone course)

D. Students seeking credit for previous learning and/or experience for a NURS prefix course are to follow the “Credit for Previous Learning and/or Experience Policy and Procedure”.

E. Students who receive an Incomplete in a NURS prefix course follow the University policy on incomplete courses.

1. Consistent with Cal State East Bay policy, “an "I" must normally be made up within one calendar year immediately following the end of the term during which it was assigned. This limitation prevails whether or not you maintain continuous enrollment. You may not repeat a course in which you currently have an incomplete grade.”
2. If the course is required for progression in the Nursing program, additional conditions may apply, including an earlier completion date for required work.
3. Instructors will specify the work needed for completion and as part of the contract with the incomplete grade submission. When the required work is completed and evaluated, the instructor will submit a change of grade form and a final academic grade will be recorded. If the student does not complete the work within the allowed time limit, the grade will be recorded as an "IC" (See University Catalog Grading and Academic Standards: Incomplete).

III. Re-entering the Clinical Nursing Sequence

A. A written request for readmission to the clinical nursing sequence must be submitted by email or on paper to the Chair of the Department of Nursing. Requests are to be dated and include current contact information. In order to facilitate a decision based on sufficient background, a brief history including dates and reason for leaving the program should be included. This must be done by the end of the “add/drop courses” of the semester prior to the semester the student intends to return. This is typically the end of the first week of the semester; check the University calendar as dates may vary.

B. A student who withdraws or interrupts the clinical nursing sequence for physical and/or emotional reasons must present evidence (e.g., doctor’s letter) that his/her current health status is satisfactory to physically and/or emotionally care for patients in any clinical setting. The final decision for re-entry into the nursing sequence will rest with the Executive Committee of the Nursing Program.

C. A student who has earned a NC in a clinical course as the result of unsafe behavior might not be permitted re-entry to the nursing program. Unsafe behaviors may include, although not limited to, the following:
1) purposeful falsification of a client record,
2) blatant disregard of client confidentiality,
3)denying responsibility for one’s own deviation from standard practice,
4) act or threat of intimidation, harassment, or physical aggression,
5) actions, which places the client or others in physical or emotional jeopardy,
6) abusive behavior toward clients, faculty, staff, or colleagues,
7) failure to disclose actions that place the client or others in physical or emotional jeopardy**,**
8) ignoring the need for essential information before intervening, or
9) other behaviors deemed unsafe by the clinical instructor.

D. A student is not guaranteed that a request to repeat a clinical nursing course will be granted. This will depend on availability of clinical nursing practice space. First priority for repeating will be given to students who withdrew or dropped the course. Second priority will be given to those students who failed the course. The student must meet all new requirements in effect upon return to clinical nursing courses.

E. Students who allow two years to elapse between enrollments in clinical nursing courses will be subject to currency considerations. If a student is allowed to reenter the nursing program, he or she may be required to repeat or audit selected s -3 (am c)-2t-2 vl1 (ur)-c n

Repeating Theory and Clinical Policy and Procedure

Description:
The BRN requires theory and clinical courses to be completed concurrently.

Policy:

discretion. Course items will be provided to the student no less than two weeks before the start of the semester.

- Students must complete the challenge exam before the first week of the semester and before the registrar's "Add with Instructor Permission" period ends (check the University schedule, dates may vary).
- Students have only one opportunity to pass the challenge exam.
- Students must pass the exam with a 70% or higher.
- If the student scores below 70% on the challenge exam, they must register for the course.
- Students may petition to challenge more than one course, not to exceed 24 units total toward their baccalaureate degree.
- Students who pass the challenge exam will receive "credit by examination" on their transcript.
- Department office staff will oversee the petition process that is required to earn credit by examination. The department will submit the results to the office of the registrar by the fifth week of the semester.

If the request for a challenge exam is not approved, the faculty of record will notify the student and the AD or PLC or their designee in writing at least two weeks before the start of the semester. The written notification will identify the reason the request was denied and a copy will be kept by the department for auditing and evaluation purposes.

Post Licensure Program Course Substitution or Credit by Examination:

Lines of Communication And Procedures

For Grade Disputes and Other Academic Problems

Grade disputes and other academic problems are initially discussed between student and instructor. In addition, students may choose to consult with their advisor who can help a student by clarifying the issue, and provide information on how to proceed in order to resolve the problem. Most problems can be settled within the department between student, instructor, and, when needed, course lead, department chair and Program Executive Committee. If the student is not satisfied with the results of such meetings, or perceives that academic unfairness or discrimination has occurred, the student is directed to the Dean of the College of Science, who may send the issue back to the department chair for reconsideration, or refer the student to the University Grade Appeal and Academic Grievance Committee.

UNIVERSITY FAIRNESS COMMITTEE

DEAN, COLLEGE OF SCIENCE

EXECUTIVE COMMITTEE

DEPARTMENT CHAIR

ASSISTANT DIRECTOR

ADVISOR

INSTRUCTOR

STUDENT

Advising

All registered students in the nursing major are assigned a faculty advisor. Students are responsible for obtaining advisement from their assigned Faculty Advisors on a regular basis. Advising lists are posted on the Department bulletin board and Department website.

General advising may include: program planning course equivalency determination graduation evaluation, planning for preceptorship, withdrawal from course, request for incomplete, special test arrangements, scheduling issues, graduation procedures, RN licensure procedures, add/drop courses, general advising re: program requirements, or information about the university policy and procedures

Students should contact their advisor to schedule a meeting time during their advisor's stated office hours. If the office hours are inconvenient, usually a mutually agreed upon time can be scheduled. If such a time cannot be worked out, the Department will allow the student to select an advisor whose office hours are compatible with the student's schedule.

The faculty recommend that students also seek general education information from department GE Advisors. The Blackboard website is another resource for updates in University requirements. In this way students will keep abreast of University requirements.

07/2014

Student Retention Program

BACKGROUND: The faculty have developed a program to identify students at risk of failing nursing theory courses. The program provides guidance to assist students in

5. Misread the question.
6. Marked unintended answer.
7. Unknown.
8. Other (as specified by the student).

B. Secondary Analysis: The student then tabulates his/her errors and looks for content areas and types of questions which constitute specific or consistent problems for him/her. Possible causes for each problem must then be identified by the student. For example, if most items are missed because of insufficient study then the student, with the help of the advisor, will explore this area for the reason(s) or cause(s) for the student's insufficient study.

C. Amelioration Plan: Each student's corrective plan will vary according to student need. Here are some common problems presented by students:
   1. Some students report that they are easily distracted.
   2. Other students may seek advising because they need more time to complete an exam.
   3. The student may be studying in an inappropriate setting. For example, the student may benefit from studying on campus rather than at home.
   4. A student may be primarily an auditory learner and might benefit from taping lectures or taping readings and then re-hearing them.
   5. Some students report trouble retaining the implications of information. In some cases, recording potential examination questions while studying allows review before an upcoming exam.

D. Non-academic stressors often impede achievement and must also be assessed. A grade of "Incomplete" may be considered if a student needs more time to successfully complete a theory course in which successful passage has been jeopardized due to temporary, non- academic stressors.

GRADING INFORMATION AND RESPONSE TO CLINICAL PERFORMANCE

I. The following are instructor and student responsibilities associated with clinical (including skills lab and SIM).

A. Although Academic Improvement Plans are usually given for the purpose of providing supportive educational feedback, the faculty will follow appropriate professional guidelines in determining if the behavior warrants failure of clinical.

B. At the time of a clinical evaluation or the receipt of an Academic Improvement Plan, a student will sign the original form and a copy of the form will be provided to the student in a timely manner.

C. Clinical course evaluation forms are always used at the end of a clinical rotation and may be used for a midterm clinical evaluation. Academic Improvement Plans are used for students on an as needed basis and are provided as soon as feasible when a performance issue becomes evident.

D. When student performance is deficient, but not hazardous to patient safety, the student will be permitted to continue in the clinical setting. In this case the instructor will present the student with an Academic Improvement Plan clearly stating:
    i. what the area for improvement is; and
    ii. how the student will need to improve to succeed in the course

E. A student's signature on the clinical evaluation and/or Academic Improvement Plan signifies only that the student has read the document, not necessarily agreement. The student may promptly submit a response to the form. The instructor will make sure the response is attached to the report. If a student refuses to sign the form, the faculty will submit it noting the refusal.

F. All student evaluations and records shall be available to the student in the nursing office upon request. Students may examine these records in the office.

G. The following are behaviors that shall result in an Academic Improvement Plan being given:

- Any situation in which the student’s behavior represents a substantial performance deficiency for a student at that program level.
- Purposeful falsification of a client record and/or blatant disregard of client confidentiality.
- Denying responsibility for one’s own deviation from standard practice.
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6. If the investigation reveals that the impairing substance abuse/mental illness allegations are true, appropriate corrective action will take place for performance or conduct issues, if any, and the student will be reinstated assuming any substantiated conduct or performance issues do not warrant expulsion, and the student provides a written certification to the Department Chair from an official of a rehabilitation program or licensed specialist in mental health verifying that the student is/was treated and is now not a danger to herself or patients.
7. The final decision concerning reinstatement rests with the Executive Committee of the Department.

5/2008

Professional Appearance Guidelines

The purpose of these guidelines is to establish standards for Cal State East Bay nursing students. The dress requirements are standardized to meet requirements of the institutions we use and to establish the presence of our students. Students are expected to dress in a manner that is professional in style and appropriate to a work rather than a social setting whenever they are in a clinical setting. Additionally, any agency specific guideline may supersede the Cal State East Bay Professional Appearance Guidelines.

A. Clothing: Standard Cal State East Bay uniform: Students will wear a white tunic and dark grey scrub pants or skirt—tailored conventional style. A long- or short-sleeved white tee-shirt may be worn under the tunic. Only skin colored undergarments should be worn. No brightly colored undergarments that are visible thru the white tunic are allowed.

Uniforms may be purchased at any store or site that offers the approved colors. As a guideline the most commonly purchased scrub brands and color code for the appropriate shade of grey is provided below. If students are not sure, they should check with clinical faculty before the purchase. If an incorrect shade of grey pants is purchased without prior approval, students will be asked to purchase the correct shade.sc8 (f)- e sE0.96.3 0.5 229D12 -0 0 1256 (6 ref72 361.38 0.96 20ay)-1 (be pur)-3 ((i)1 (t)-3

Uniform Brand	Color Code
Cherokee	*PWTW, PWTB*

Footwear: When in the Cal State East Bay Standard Uniform shoes must be white, or black, or dark grey, and be clean, and polished if appropriate. They must provide safe and secure footing, offer protection against hazards, and be quiet for the comfort of patients (i.e., flat, closed toe and heel). Hosiery should be in accordance with agency policy. For psychiatric and community health rotations, footwear must be flat, closed toe and heel shoes. Sandals or heels are not permitted.

C. Hygiene and Grooming: Cleanliness is more than a matter of appearance; it is also a matter of health and safety. Students must be clean and free of offensive body odor, including the odor of tobacco.
   - Hands must be washed regularly.
   - Nails should be well groomed and less than ¼" from the tip of the finger. Artificial nails or nail polish are not permitted.
   - No strong scents may be worn to clinical (i.e., lotions, hair products, fragrance, perfume, aftershave, deodorant).
   - No chewing gum while at the clinical agency.

D. Hair/Jewelry/Adornment: Hair must be clean, neat and be kept in a conservative style. Bright, artificial hair color is not permitted. For safety and hygiene, hair that is shoulder length or longer must be tied back/up. Side burns, mustaches, beards and other facial hair must be neatly trimmed, shaped and clean. All jewelry worn while on duty must be safe, unobtrusive and inoffensive to patients, family, visitors, colleagues and faculty. This includes items worn in body piercings and earrings. Tattoos may need to be concealed.

E. Name Pins, IDs, and Emblem Patches: Students are required to wear the Cal State East Bay Nursing name pins and carry their Cal State East Bay photo ID during all clinical rotations. When a white tunic is the required top, an arm emblem patch is also required. The emblem patch is to be sewn on the left upper sleeve of the tunic, approximately two finger widths from the top seam. The Cal State East Bay Nursing name pins and emblem patches are available for purchase from the Pioneer Bookstore (University Bookstore).

F. Equipment: Students will be required to have the following equipment with them during clinical rotations: Wrist watch that counts seconds, Stethoscope with a diaphragm and a bell, and Black ball point pen

<u>Recommended equipment</u> may include: clipboard, fanny pack, bandage scissors or hemostat

Reporting Emergencies And Earthquake Procedures

General Information

- DIAL 911. Notify Public Safety that assistance is needed.
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Credit For Community Service

The purpose of this policy is to outline the procedure for nursing students wishing to receive academic credit for community service outside the scope of their regular studies.

A Credit will be awarded on a basis consistent with the CSU standard of 1 unit of credit per 30 hours of time on task (including direct preparation time). In the case of credit for community service; preparation to contact time should not be greater than 10 hours preparation time to each 20 hours of contact time in the actual service.

B Credit may be accumulated over a time period greater than one term but not
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E. *Horizon mass e-mail*--The Horizon mass e-mail feature is reserved for emergencies, and for other communications that have a legitimate educational need for direct communication, and without such direct communication would put students at a disadvantage, and/or hinder their academic success and progress. Requests for Horizon mass e-mail to students should be directed to the Executive Director of Enrollment Services for approval. When necessary, the Assistant Vice President of Enrollment Services can convene an ad hoc appeals committee to resolve a dispute over appropriate use of Horizon mass e-mail. An appeals committee will typically include one student member of University Information Technology (UIT) Advisory Committee, one dean, one Student Affairs representative, and the Associate Vice President of Information Technology.

F. *Authentication for confidential information--*The University does not send, or request,

Infection Control & Standard Precautions

The following information is from the CDC website from 2007-2013. All data are current guidelines, regulations or policies of the CDC (www.cdc.gov).

Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered. These practices are designed to both protect health-care providers (HCP) and prevent HCP from spreading infections among patients. Standard Precautions include: 1) hand hygiene, 2) use of personal protective equipment (e.g., gloves, gowns, masks), 3) safe injection practices, 4) safe handling of potentially contaminated equipment or surfaces in the patient environment, and 5) respiratory hygiene/cough etiquette. Each of these elements of Standard Precautions are described in the sections that follow.

A. Hand Hygiene

Hand hygiene procedures include the use of alcohol-based hand rubs (containing 60-95% alcohol) and handwashing with soap and water. Use of alcohol-based hand rub as the primary mode of hand hygiene in healthcare settings is recommended by the CDC and the World Health Organization (WHO) because of its activity against a broad spectrum of epidemiologically important pathogens. Alcohol-based hand rub is the preferred method for decontaminating hands, except when hands are visibly soiled (e.g., dirt, blood, body fluids), or after caring for patients with known or suspected infectious diarrhea (e.g., *Clostridium difficile*, norovirus), in which case soap and water

2. Indications for Hand Hygiene

Always perform hand hygiene in the following situations:

- Before touching a patient, even if gloves will be worn
- Before exiting the patient's care area after touching the patient or the patient's immediate environment
- After contact with blood, body fluids or excretions, or wound dressings
- Prior to performing an aseptic task (e.g., accessing a port, preparing an injection)
- If hands will be moving from a contaminated-body site to a clean-body site during patient care
- After glove removal

B. Personal Protective Equipment

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Goggles, Face Shields

Wear eye protection for potential splash or spray of blood, respiratory secretions, or other body fluids.

- Personal eyeglasses and contact lenses are *not* considered adequate eye protection
- May use goggles with facemasks, or face shield alone, to protect the mouth, nose and eyes

Respirators

If available, wear N95-or higher respirators for potential exposure to infectious agents transmitted via the airborne route (e.g., tuberculosis).

- All healthcare personnel that use N95-or higher respirator are fit tested at least annually and according to OSHA requirements

2. Recommendations for Donning PPE

- Always perform hand hygiene before donning PPE
- If wearing a gown, don the gown first and fasten in back accordingly
- If wearing a facemask or respirator:
    - Secure ties or elastic band at the back of the head and/or neck
    - Fit flexible band to nose bridge
    - Fit snug to face and below chin
- If wearing goggles or face shield, put it on face and adjust to fit
- If wearing gloves in combination with other PPE, don gloves last

3. Recommendations for Removing PPE

- Remove PPE before leaving the exam room or patient environment (except respirators which should be removed after exiting the room)
- Removal of gloves:
    - Grasp outside of glove with opposite gloved hand; peel off
    - Hold removed glove in glove hand
    - Slide ungloved fingers under the remaining glove at the wrist; peel off and discard
- Removal of gowns: Remove in such a way to prevent contamination of clothing or skin
    - Turn contaminated outside surface toward the inside
    - Roll or fold into a bundle and discard
- Removal of facemask or respirator
    - Avoid touching the front of the mask or respirator
    - Grasp the bottom and the ties/elastic to remove and discard
- Removal of goggles or face shield
    - Avoid touching the front of the goggles or face shield
    - Remove by handling the head band or ear pieces and discard
- Always perform hand hygiene immediately after removing PPE

C. Respiratory Hygiene and Cough Etiquette

To prevent the transmission of respiratory infections in the facility, the following infection prevention measures are implemented for all potentially infected persons at the point of entry and continuing throughout the duration of the visit. This applies to any person (e.g., patients and accompanying family members, caregivers, and visitors) with signs and symptoms of respiratory illness, including cough, congestion, rhinorrhea, or increased production of respiratory secretions.

1. Identifying Persons with Potential Respiratory Infection

- Facility staff remain alert for any persons arriving with symptoms of a respiratory infection
- Signs are posted at the reception area instructing patients and accompanying persons to: Self-report symptoms of a respiratory infection during registration; Practice respiratory hygiene and cough etiquette (technique described below) and wear facemask as needed

2. Availability of Supplies

The following supplies are provided in the reception area and other common waiting areas: Facemasks, tissues, and no-touch waste receptacles for disposing of used tissues; Dispensers of alcohol-based hand rub.

3. Respiratory Hygiene and Cough Etiquette

All persons with signs and symptoms of a respiratory infection (including facility staff) are instructed to:

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- Accompanying persons who have symptoms of a respiratory infection should not enter patient-care areas and are encouraged to wait outside the facility

5. Healthcare Personnel Responsibilities

- Healthcare personnel observe Droplet Precautions, in addition to Standard Precautions, when examining and caring for patients with signs and symptoms of a respiratory infection (if suspicious for an infectious agent spread by airborne route, refer to Airborne Precautions).
- These precautions are maintained until it is determined that the cause of the symptoms is not an infectious agent that requires Droplet or Airborne Precautions
- All healthcare personnel are aware of facility sick leave policies, including staff who are not directly employed by the facility but provide essential daily services
- Healthcare personnel with a respiratory infection avoid direct patient contact; if this is not possible, then a facemask should be worn while providing patient care and frequent hand hygiene should be reinforced
- Healthcare personnel are up-to-date with all recommended vaccinations, including annual influenza vaccine

TRANSMISSION-BASED PRECAUTIONS

In addition to consistent use of Standard Precautions, additional precautions may be warranted in certain situations as described below.

A. Identifying Potentially Infectious Patients

- Facility staff remain alert for any patient arriving with symptoms of an active infection (e.g., diarrhea, rash, respiratory symptoms, draining wounds or skin lesions)

If patient calls ahead:

- Prioritize placement of patients in single-patient rooms. Give highest priority to those patients who have conditions that may facilitate transmission, e.g., uncontained secretions or excretions. When single-patient rooms are not available, cohort patients with the same MRSA in the same room or patient-care area.
- Perform hand hygiene before touching patient and prior to wearing gloves
- PPE use:
  - Wear gloves when touching the patient and the patient's immediate environment or belongings
  - Wear a gown if substantial contact with the patient or their environment is anticipated
- Perform hand hygiene after removal of PPE; *note:* use soap and water when hands are visibly soiled (e.g., blood, body fluids), or after caring for patients with known or suspected infectious diarrhea (e.g., *Clostridium difficile*, norovirus)
- Handle used patient-care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other patients and environments. Ensure that reusable equipment is not used for the care of another patient until it has been appropriately cleaned and reprocessed and that single-use items are properly discarded. Clean and disinfect surfaces that are likely to be contaminated with pathogens, including those that are in close proximity to the patient (e.g., bed rails, over bed tables) and frequently-touched surfaces in the patient care environment (e.g., door knobs, surfaces in and surrounding toilets in patients' rooms) on a more frequent schedule compared to that for other surfaces (e.g., horizontal surfaces in waiting rooms)
- Instruct patients with known or suspected infectious diarrhea to use a separate bathroom, if available; clean/disinfect the bathroom before it can be used again (refer to Section IV.F.5. for bathroom cleaning/disinfection)

C. Droplet Precautions

- Apply to patients known or suspected to be infected with a pathogen that can be transmitted by droplet route; these include, but are not limited to:
- Respiratory viruses (e.g., influenza, parainfluenza virus, adenovirus, respiratory
  - Syncytial virus, human metapneumovirus)
- Bordetella pertussis
- For first 24 hours of therapy: *Neisseria meningitides*, group A streptococcus
-

    - Perform hand hygiene before and after touching the patient and after contact with respiratory secretions and contaminated objects/materials; *note:* use soap and water when hands are visibly soiled (e.g., blood, body fluids)
- Instruct patient to wear a facemask when exiting the exam room, avoid coming into close contact with other patients, and practice

E. Injection Safety

Injection safety includes practices intended to prevent transmission of infectious diseases between one patient and another, or between a patient and healthcare provider during preparation and administration of parenteral medications. Implementation of the OSHA Bloodborne Pathogens Standard has helped increase the protection of HCP from blood exposure and sharps injuries, but there is room for improvement.

b)

Student Injury Policy

A. If a student is injured in the clinical setting and needs medical attention, the student must have medical insurance to cover the cost or pay cash.

B. A Student Non-Employee Accident/Injury Report Form (see Forms section of Risk Management website) must be completed by the student and the clinical faculty person.

C. Report the accident/Injury to your Department Chair within 8 (eight) hours.

Copies of the Accident/Injury Report should be distributed to Dept. office and Risk Management (SA RM4700) within 24 hours of date of Accident/Injury. This form is placed in the student's department file.

D. The student is not covered by Workman's Compensation because she/he is not an employee.

E. DO NOT FILE WORKMAN'S COMPENSATION FORMS

F. Student injury form can be found in Appendices.

RN Licensure Graduation Procedure

1. Board of Registered Nursing RN Licensure packets will be distributed to Pre-Licensure students by the Department Office. A group meeting will be scheduled in Fall or Spring depending on the cohort. The purpose of the meeting will be:

- To orient students to the licensure procedure;
- To distribute and assist students in completing the paperwork; and,
- Inform students of documentation which must accompany application for licensure.

2. Post-Licensure students can print out necessary paperwork related to the Public Health Nursing Certificate from the Board of Registered Nursing website and drop it off in the Department Office for processing, once BSN degree is conferred and appears on transcripts.

3. Taking Boards As A Graduate Or Non Graduate

A. Students may choose to take the Board exam as graduate or non-graduate
B. In order to be eligible to take Boards as a non-graduate, students must have completed all course work required by the nursing major (all courses listed on your major check sheet) before taking the test. It is important for students to understand that taking the NCLEX after completing the LVN 30 unit option means that your license to practice nursing may not be recognized in all 50 states.
C. Taking Boards as a graduate requires the official graduation date to occur before the Boards exam MCID 25 >(ent)-3 9 MCID 2ed Nre ts yo-1 (i)1 (m)-3 (por)-(om)-3 (n)-5 (i)-4 2t(

CAL STATE EAST BAY STUDENT RESOURCES AND SERVICES

Student Affairs

A The East Bay Student Nurses Association (EBSNA) contributes to the student's professional identity and professional involvement. Goals of the organization are to:

a. establish a professional network among students, faculty, and alumni.
b. reduce fragmentation and provide consistency for student concerns.
c. integrate the theories and processes of professional nursing into extracurricular activities.

EBSNA is part of the California Nursing Students' Association (CNSA). Students will be oriented to CNSA and invited to participate during orientation to the clinical nursing program.
There are two EBSNA Chapters, one active on each campus: Hayward & Concord. They each have their own set of officers and run their own campuses club.

B Career Education: This is available through the AACE office in Hayward. In addition to providing service for preparation of resumes and helping students prepare a professional file, jobs are listed for professional nursing students. Further information can be obtained at SA 3200, 510-885-3621.

C Associated Students, Inc. (ASI):2 Tc 0.004 Tw 12 -0 0 123 >>BDC 12 -0 0vierThere are tes anTa

Student Center For Academic Achievement (SCAA)

The Student Center for Academic Achievement (SCAA) provides FREE tutoring for math, writing, and statistics and other student learning services and programs. The SCAA's mission is to help students improve their skills and to become self aware, confident,

Cost And Financial Aid

Tuition and Fees

Tuition and fees are based on residency status, class level (undergraduate, graduate, doctorate or credential) and the number of enrolled units. *Tuition and fees are Subject to Change*

For any updates to cost and tuition after this academic year, please see the Cost of Attendance link from the Financial Aid, Prospective Students web page.

Estimated Tuition and Fees for Full-time Students

The following table illustrates the tuition and fees for full-time students for two semesters:

Type of Student	Estimated Tuition and Fees
Undergraduate	$6995
Graduate / Second Bachelor	$8429
Western Undergraduate Exchange (WUE)	$9986
Non-Resident (U.S. and international)	$396 per unit in addition to California Resident fees

SIGMA's NU XI At Large Chapter

Sigma, formerly known as Sigma Theta Tau International, is an international nursing honors society founded in 1922. The society represents excellence in nursing which is reflected in the achievements of individual members and by the accomplishments of its collective chapters. Sigma's mission is to advance world health and celebrate nursing excellence in scholarship, leadership, and service. Sigma's vision is to be the global organization of choice for nursing. For decades, most full-time faculty at Cal State East Bay Nursing have been Sigma members, as have many of our students at or upon graduation.

Sigma's Nu Xi At-Large Chapter, henceforth Nu Xi, was established in 1992. Nursing programs from Cal State East Bay, Samuel Merritt University, and Holy Names University worked collaboratively to establish an official chapter to serve the East Bay Nursing Community. Members of the Nu Xi Chapter have various professional opportunities including: the ability to collaborate with a variety of accomplished nurse members who live and work throughout the East Bay region; potential participation in national and international conferences hosted by Sigma, and exclusive access to Sigma's job boards. The Nu Xi Chapter has been recognized for its exemplary accomplishments by Sigma in various ways, including but not limited to being honored with Sigma's prestigious Chapter Key Award.

At Cal State East Bay, nursing faculty will determine which students have met the high standards consistent with being invited to join Sigma. If you are among those students, Cal State East Bay will forward your contact information to Sigma so that you may receive a formal induction invitation. Your address will only be shared with Sigma if you have given the nursing department permission to do so.

The criteria for induction into the Nu Xi Chapter of Sigma changes periodically, since it is governed by Sigma's international by-laws. Historically, the requirements to be inducted have included the following:

1. **For Undergraduate Nursing Students:** completed at least half (≥50%) of the nursing curriculum; a cumulative nursing GPA in the top 35% of the class (with at least a 3.0 GPA); and meet academic integrity standards.

2. **For an MSN/Graduate Nursing Student must have:** completed at least one fourth (≥25%) of the nursing curriculum, have achieved academic excellence (at schools where a 4.0 grade point average system is used, this equates to at least a 3.5)

04/2018

Malpractice Insurance

A In California, no student nurse is “under” his or her nursing instructor’s license. Every student nurse is directly liable for his or her acts or omissions that cause harm or injury. This means that a patient or the patient’s legal representative can file a Civil Medical Malpractice lawsuit against CSU and student nurses who were in the vicinity of the incident or at the time of the incident. Even if you don’t have patient care responsibility, you could be included as a party in a lawsuit as a result of your role on the health care team. The court will decide who is liable.

B Students enrolled in Nursing, Allied Health, Social Work, or Education credentialing programs of the CSU who also perform community service or volunteer work for academic credit are covered by the Student Professional Liability Insurance Program (SPLIP). This is a “claims-made” policy. Coverage is only provided for claims arising from Professional Services which are rendered or Incidents which occurred during the Policy Period. The National Student Nurses Association (NSNA) recommends that students obtain an occurrence liability policy for incidents that occurred during the policy period, but the claim may be filed after the student nurse has graduated. For further information, go to

https://www.nso.com/malpractice-insurance/individual

6/2015

APPENDICES

Sample Physician's Statement Form

The following statement can be printed for use by your physician to document your ability to return to clinical:

Dear Physician:

There are minimum entry level qualifications required for professional nursing practice for students in the nursing program at California State University, East Bay (CSUEB). _____ is a student in the Cal State East Bay Undergraduate Nursing program and should provide you with a copy of the Essential Functions for Nursing Practice. Please complete the following:

To the Chair of the Nursing Department:

_____ (student name) has been under my care for a

Medical Condition on _____(date) I have reviewed the Essential

Functions for Nursing Practice and certify that:

1. The student is capable of performing Cardiopulmonary Resuscitation without limitations. Yes/No (circle one)

   Comments:

2. The student may return to clinical practice with no limitations. Yes/No (circle one)

   Comments:

_____ _____ _____

Physician's Name Physician's Signature Date

Cal State East Bay: Photographic Release Form

Please initial in the spaces below what uses of photographs of you are consented to, and sign at the end of the release form. Photos will only be used in the ways you consent to. Your name will not be identified in these photos

1. ____Photographs can be reviewed by the designated individual or individuals.
2. ____Photographs can be used for project illustration (i.e., yearbook, DVD).
3. ____Photographs can be used for promotional materials, such as brochures or fliers.
4. ____Photographs can be used for classroom presentations.
5. ____Photographs can be used for academic conference presentations.
6. ____Photographs can be used for fundraising presentations/proposals.
7. ____Photographs can be used for newspaper or magazine publication.
8. ____Photographs can be posted on a web site for promotional purpose

NAME_____

SIGNATURE_____

DATE _____

(*This form can be individualized to the occurrence.)

Cal State East Bay Pre-Licensure Nursing Program (BSN)

Academic Improvement Plan (AIP)

Student _____ Course _____ Date _____
Faculty _____

General Area(s) of Concern: