



Arlene Gates Department of Nursing



Associate of Science in Nursing Program

Student Handbook
2025-2026

May 14, 2025

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Student Handbook 2025-2026

The content of this Associate of Science Nursing Program Student Handbook is provided for the information of the student. It is accurate at the time of printing but is subject to change as deemed appropriate by the nursing faculty of the Arlene Gates Department of Nursing, Dakota Wesleyan University, in order to fulfill its role and mission or to accommodate circumstances beyond its control. Any such changes may be implemented without prior notice and without obligation, and unless otherwise specified, are effective when made.

Nursing students are responsible to become familiar with and to follow the policies, requirements, standards, and regulations as printed in this student handbook, the University Catalog, the DWU Student Handbook, and any separate communications issued by Dakota Wesleyan University.

*Dakota Wesleyan University
Arlene Gates Department of Nursing Faculty*

**Arlene Gates Department of Nursing
Associate of Science Nursing Program**

Student Acknowledgement

Receipt and Verification of Reading Student Handbook – Nursing Program

Nursing students are responsible for reading and following the policies, requirements, standards, and regulations as printed in the 2025-2026 Nursing Program Student Handbook, the Academic Catalog, <https://www.dwu.edu/academics/academic-catalogs>, the DWU Student Handbook, <https://www.dwu.edu/student-life/student-handbook>, and any additional written communications issued by Dakota Wesleyan University and/or the department of nursing. Please direct questions to Penny Tilton, Administrative Chair of the Arlene Gates Department of Nursing.

I have access to the 2025-2026 Nursing Program Student Handbook.

By signing below, I am acknowledging that I have read the 2025-2026 Nursing Program Student Handbook and understand that I am responsible for following all policies, requirements, standards, and regulations of the A.S. Nursing Program at Dakota Wesleyan University.

Print Name: _____

Signature: _____

Date: _____



University Mission Statement

As an inclusive educational community, Dakota Wesleyan University provides a transformational learning experience that cultivates enduring intellectual growth, ethnically grounded leadership, intentional faith exploration, and meaningful service.

Our Mission is informed by our four values of learning, leadership, faith, and service. We implement our values within the nursing department to prepare nursing students for professional practice.

A.S. of Science in Nursing Program Purpose

The A.S. of Science in Nursing program purpose is to, in conjunction with the university, offer the body of academic knowledge and clinical experiences necessary to prepare students to:

- Meet the requirements to earn an Associate of Science in nursing degree (ASN).
- Be eligible to take the National Council State Boards of Nursing Licensing Examination for Registered Nurses (NCLEX-RN).
- Practice as professional nurse generalists in a variety of health care settings which could be local, state, national or global in nature.

Arlene Gates Department of Nursing Mission Statement

The Arlene Gates Department of Nursing, as an integral part of Dakota Wesleyan University, is aligned with its mission, vision, values, and philosophy. The nursing department aspires to prepare students for meaningful careers in professional nursing within a liberal arts setting. The nursing department aspires to cultivate a challenging learning environment based on Christian values and acceptance of diversity. The faculty foster lifelong learning, professional development, and responsibility to service.

Arlene Gates Department of Nursing Vision

The Vision of the Arlene Gates Department of Nursing is to strategically develop and grow DWU nursing programs to further the practice of professional nursing throughout the region.

Arlene Gates Department of Nursing Core Values

The Mission, Vision and Philosophy of the Arlene Gates Department of Nursing are carried out with guidance from AACN's Core Competencies for Professional Nursing Education (AACN, 2019). The core values for nursing are human dignity, integrity, autonomy, altruism, and social justice.

Program Outcomes/Goals

The Program Outcomes/Goals are driven by the Mission, Vision, and Core Values of the nursing department. The nursing faculty have set outcomes and goals for nursing students. The program outcomes and goals provide a clear means to measure the success of the nursing programs.

Program Learning Outcomes

The Program Learning Outcomes are supported by AACN's The Essentials: Core Competencies for Professional Nursing Education (AACN, 2019). Based on ten domains that represent the essence of professional nursing practice and expected competencies for each domain, four spheres of care are articulated. The domains, competencies and spheres of care lend a uniqueness to the profession of nursing, and diversity to practice (AACN,2019) while providing a guide for the nursing curriculum toward outcomes-based learning.

The four spheres of care are:

1. disease prevention/promotion of health and wellbeing
2. chronic disease care
3. regenerative or restorative care
4. hospice/palliative/supportive care across the lifespan

The domains and competencies allow the learner to build knowledge, skills, and abilities for entry into professional practice. The Essentials also features eight overarching concepts which are fundamental to professional nursing practice and are integrated within and across the domains and competencies. The Essentials serve as a guide for the DWU nursing programs' program learning outcomes.

The Program Learning Outcomes are as follows:

1. Teach graduates to independently provide culturally sensitive, competent nursing care in a variety of settings guided by a scientific concept-based curriculum and professional accountability.
2. Develop graduates who incorporate critical thinking and clinical judgement in the provision of holistic, evidence-based nursing care of clients throughout the lifespan.
3. Support graduates in the planning and providing of person-centered, coordinated nursing care that contributes to safe and high-quality care outcomes.
4. Facilitate graduates who communicate and collaborate with inter-professional teams, utilize health information technology, incorporate cost-effectiveness, and utilize educational principles to promote wellness and well-being.
5. Motivate graduates to be committed to lifelong learning and service, display leadership, and who participate in scholarships that advance the profession of nursing.

6. Produce graduates who exhibit caring behaviors and who uphold moral ethical and ethical competence in the practice of nursing.

Program Goals

- The programs' three year mean for NCLEX-RN pass rates will be at or above the minimum standard of 80% required by the accrediting body (ACEN) Accreditation Commission for Education in Nursing, which the program is actively seeking.
- The programs' three year mean for NCLEX-RN pass rates will be above the minimum standard of 75% required by the programs' licensing body the (SDBON) South Dakota Board of Nursing.
- Seventy percent (70%) of students admitted into the A.S. Nursing program will graduate on-time, within two years of starting the program. (ACEN criterion 5.2).
- Ninety percent (90%) of graduates who are actively seeking employment in nursing will be employed as a practicing registered nurse by twelve months post-graduation.
- At six to twelve months post-graduation all items on the graduate survey will receive a mean of 3.0 or higher.

Program Philosophy

The Arlene Gates Department of Nursing derives its philosophy and purposes from the mission statements of both Dakota Wesleyan University and the Department of Nursing. The Department of Nursing believes that professional nursing practice should enable students to acquire the knowledge and proficiencies necessary to practice culturally competent, congruent care in diverse settings to meet the changing needs of healthcare within the region and within society.

Nursing students are immersed in a liberal arts experience, within a Christian setting, that encourages spiritual growth and prepares graduates for constant changes in healthcare. The nursing programs are designed to provide experiences that will challenge students to pursue excellence, build self-confidence, develop interdisciplinary relationships, and have a passion for scholarship and service.

Learning is the continuous process of developing an individual's potential as a person, as a member of society, and as a professional nurse. Learning is facilitated by the nursing faculty utilizing a conceptual curriculum to promote expected behaviors and competencies that prepare the learner for generalist practice across the lifespan and with diverse populations. At DWU, learning is an active process that occurs in an environment which encourages the development of problem solving, clinical reasoning and judgement, self-assurance, and self-direction. Adult learning principles are incorporated into the educational process thereby

preparing the learner to be responsible for one's own learning, be accountable for nursing practice, and to be life-long learners. The philosophy of the Arlene Gates Department of Nursing expresses beliefs about the five concepts that define the discipline of nursing: human wholeness, health, healing and well-being, environment-health relationship and caring (Smith, 2019). These concepts are woven through the four spheres of care that support entry level practice and the spheres of care are evident within the Conceptual Framework.

Conceptual Framework

The conceptual framework is based on the four spheres of care and their definitions from The Essentials: Core Competencies for Professional Nursing Education (AACN, 2019). In the past, nursing education was based on education in the acute care setting. The future challenges educators to look ahead as it is evident that the delivery of care has changed and will take place within the four spheres of care. The spheres of care provide a guide for the framework of education in which students learn the concepts and competences needed to practice nursing now and in the future.

The constructs within the framework of the four spheres of care are defined below:

Disease Prevention/Promotion of Health and Well-Being- which includes the promotion of physical and mental health in all patients as well as minor acute and intermittent care needs of generally healthy patients (AACN, 2021, 2021, pg. 6).

Chronic Disease Care-which includes management of chronic diseases and prevention of negative outcomes (AACN, 2021, pg.6).

Regenerative or Restorative Care-which includes critical trauma care, complex acute care, acute exacerbations of chronic conditions, and treatment of physiologically unstable patients (AACN, 2021, pg.6).

Hospice/Palliative Care-which includes end-of-life care as well as palliative and supportive care for individuals requiring extended care, those with complex, chronic disease states, or those requiring rehabilitative care (AACN, 2021, pg. 6).

Student Learning Outcomes

The DWU department of Nursing Student Learning Outcomes stems from the Program Learning Outcomes, Program Goals, Conceptual Framework and Philosophy.

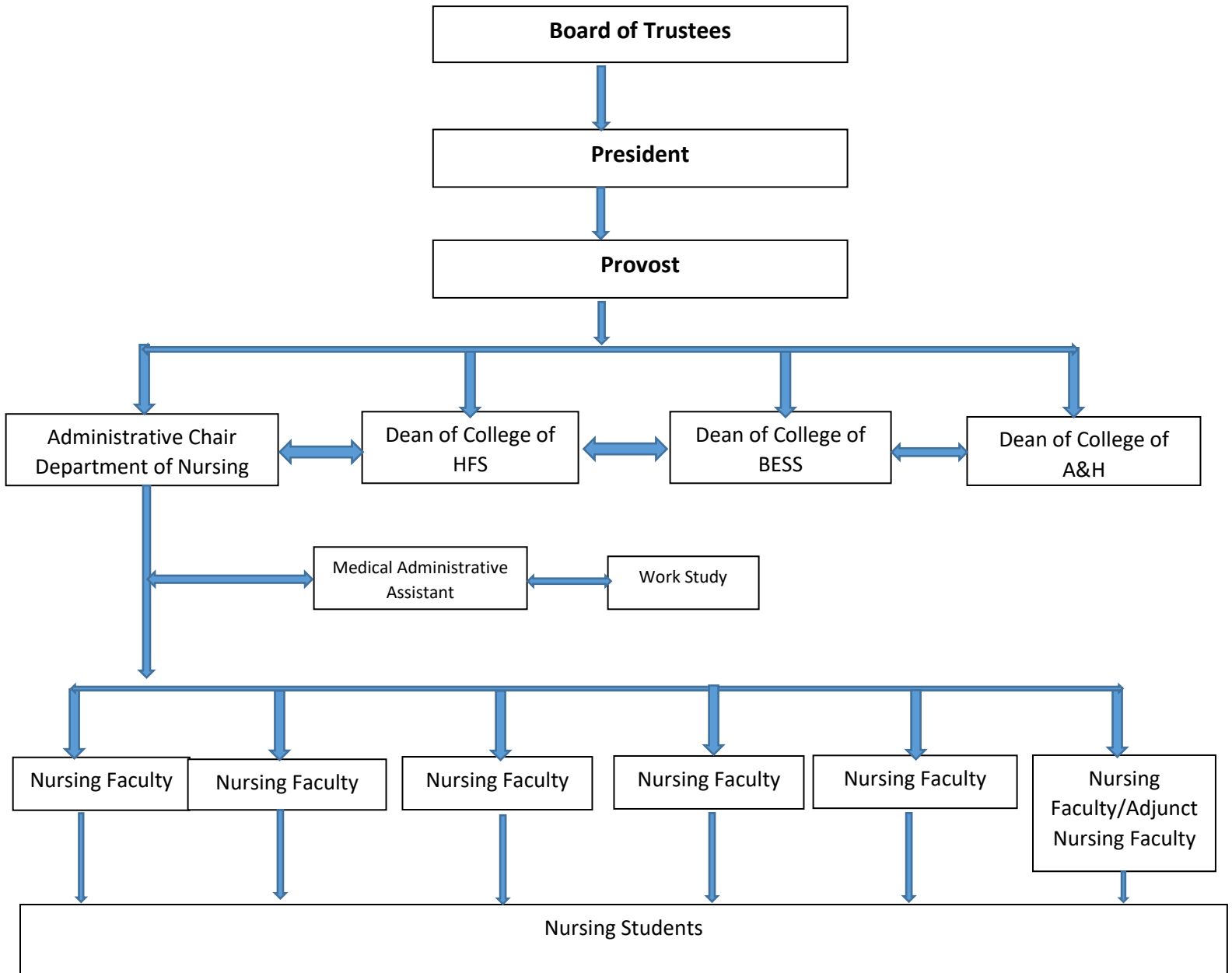
Student Will:

1. Integrate theoretical knowledge from the liberal arts, with respect to the humanities, social and natural sciences, and nursing in the holistic practice and delivery of nursing care.
2. Interact using effective communication and multidisciplinary collaboration in the healthcare environment.
3. Incorporate critical reasoning and clinical judgement in providing safe, competent, and culturally sensitive nursing care to individuals, families, communities, and populations in diverse settings across the lifespan.

4. Plan healthcare that is coordinated, person-centered and which results in quality care outcomes.
5. Analyze evidenced-based practice, current emerging technologies, and communicative methodologies to guide professional nursing practice.
6. Create responsibility for ongoing professional development and servant leadership through adherence to values and behaviors that are consistent with professional standards for nursing practice.



Arlene Gates Department of Nursing Organizational Chart



Associate of Science Nursing Practice Statement

Students take courses within a liberal arts curriculum which leads to an Associate of Science in Nursing. The nursing courses are framed within a concept-based curriculum intended to foster positive healthcare outcomes and prepare the student for generalist nursing practice. The student integrates core disciplinary nursing knowledge to collaboratively provide care to diverse individuals, families, communities, and populations across the lifespan in a variety of settings. The student incorporates knowledge from a variety of disciplines into their practice and serves as an advocate within the healthcare system. The student is guided by ethical and legal standards and is committed to the practice of nursing care using the core values of human dignity, integrity, autonomy, altruism, and social justice as a guide.

Glossary of Terms

Advocacy: The act or process of supporting a cause or proposal: the act or process of advocating. Advocacy is a pillar of nursing. Nurses instinctively advocate for their patients, in their workplaces, and in their communities; but legislative and political advocacy is equally important to advancing patient care.

Care: A focused attention on, and when possible, engagement with a patient to determine a person's particular needs and the use of clinical judgment to meet those needs

Clinical judgment: The skill of recognizing cues regarding a clinical situation, generating and weighing hypotheses, taking action, and evaluating outcomes for the purpose of arriving at a satisfactory clinical outcome. Clinical judgment is the observed outcome of two unobserved underlying mental processes, critical thinking and decision making (NCSBN, 2018).

Clinical reasoning: Thought processes that allow healthcare providers to arrive at a conclusion.

Competence: The array of abilities (knowledge, skills, and attitudes) across multiple domains or aspects of performance in a certain context. Competence is multi-dimensional and dynamic (Frank, Snell, Cate, et al., 2010).

Competency: An observable ability of a health professional, integrating multiple components such as knowledge, skills, values, and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition (Frank, Snell, Cate, et al., 2010).

Concepts: A concept is an organizing idea or mental construct represented by common attributes. Rodgers (1989, p. 332) describes concepts as "an abstraction that is expressed in some form."

Core values: In nursing, core nursing values include human dignity, integrity, autonomy, altruism, and social justice.

Core disciplinary knowledge: The intellectual structures within which the discipline delineates its unique focus of vision and social mandate. AACN has identified core disciplinary knowledge as having three components: historic and philosophic foundations to the development of nursing knowledge; existing and evolving substantive nursing

knowledge; and methods and processes of theory/knowledge development (AACN, 2002, p. 289).

Cost effectiveness: A way to examine both the costs and health outcomes of one or more interventions; it compares one intervention to another (or the status quo) by estimating how much it costs to gain a unit of a health outcome, like a life year gained or a death prevented.

Critical thinking: The skill of using logic and reasoning to identify the strengths and weaknesses of alternative healthcare solutions, conclusions, or approaches to clinical or practice problems.

Cultural awareness: The deliberate self-examination and in-depth exploration of one's biases, stereotypes, prejudices, assumptions, and "isms" that one holds regarding individuals and groups who are different from them (Campinha-Bacote, 1998).

Cultural competence: The ability to effectively work within the client's cultural context. Structural competence is recognition of the economic and political conditions that produce health inequalities in the first place. It is the ability to understand how institutions, markets, or healthcare delivery systems shape symptom presentations and to mobilize for correction of health and wealth inequalities in society.

Culturally sensitive: "The ability to be appropriately responsive to the attitudes, feelings, or circumstances of groups of people that share a common and distinctive racial, national, religious, linguistic, or cultural heritage" (DHHS, OMH, 2001, p. 131).

Diversity: A broad range of individual, population, and social characteristics, including but not limited to age; sex; race; ethnicity; sexual orientation; gender identity; family structures; geographic locations; national origin; immigrants and refugees; language; any impairment that substantially limits a major life activity; religious beliefs; and socioeconomic status. Inclusion represents environmental and organizational cultures in which faculty, students, staff, and administrators with diverse characteristics thrive. Inclusive environments require intentionality and embrace differences, not merely tolerate them. Everyone works to ensure the perspectives and experiences of others are invited, welcomed, acknowledged, and respected in inclusive environments.

Evidence-based practice: A conscientious, problem-solving approach to clinical practice that incorporates the best evidence from well-designed studies, patient values and preferences, and a clinician's expertise in making decisions regarding a patient's care. Being knowledgeable about evidence-based practice and levels of evidence is important for clinicians to be confident about how much emphasis they should place on a study, report, practice alert or practice guideline when making decisions about a patient's care.

Family: An individual's closest support structure that is inclusive of birth family, single parent families, blended families, stepfamilies, and homosexual families to name a few. The concept of the contemporary family has evolved into a fluid ideology that is constantly shifting and changing throughout society.

Health Information Technology (HIT): The electronic systems healthcare professionals and patients use to store, share, and analyze health information. HIT consists of many types of applications such as Electronic Health Records, personal health records,

electronic prescribing, mobile applications, social networks, monitors, wearables, nanotechnology, genomics, and robotics (Office of the National Coordinator for Health Information Technology [ONC], 2018).

Healthcare team: The collective of individuals who contribute to the care and treatment of an individual, family, group, or population.

Informatics: The intersection between the work of stakeholders across the health and healthcare delivery system who seek to improve outcomes, lower costs, increase safety and promote the use of high-quality services. It is frequently confused with data science, big data, health information management and data analytics. Informatics is the overarching field of study that pulls all these subdomains into one discipline focused on improving health and healthcare. Emerging topics like artificial intelligence and machine learning are incorporating in the field of informatics (AMIA, 2021).

Integration: An experience designed to provide the student with an opportunity to synthesize the knowledge and skills acquired during previous and current coursework and learning experiences.

Interdisciplinary: Refers to a group of healthcare providers with various areas of expertise who work together toward the goals of their clients.

Interprofessional: Engagement involving two or more professions or professionals.

Interprofessional team: The cooperation, coordination, and collaboration expected among members of different professions in delivering patient- centered care collectively.

Lifelong learning: The provision or use of both formal and informal learning opportunities throughout one's life to foster the continuous development and improvement of the knowledge and skills needed for employment and personal fulfillment.

Managing disease: To improve the health of persons with chronic conditions and reduce associated costs from avoidable complications by identifying and treating chronic conditions more quickly and more effectively, thus slowing the progression of diseases.

Moral ethical behaviors: Prevailing standards of behavior used to judge right and wrong.

Nursing informatics: The specialty that integrates nursing science with multiple information and analytical sciences to identify, define, manage, and communicate data, information, knowledge, and wisdom in nursing practice (HIMSS, 2021).

Patient: The recipient of a healthcare service or intervention at the individual, family, community, or aggregate level. Patients may function in independent, interdependent, or dependent roles, and may seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of-life care (AACN, 2006).

Person-Centered Care: "Empowering people to take charge of their own health rather than being passive recipients of services." (WHO, 2021). This care strategy is based on the belief that patient views, input, and experiences can help improve overall health outcomes.

Population: A collection of individuals who have one or more personal or environmental characteristics in common.

Practice: Any form of nursing intervention that influences healthcare outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and healthcare organizations, and the development and implementation of health policy (AACN, 2004). Practice includes both direct and indirect care experiences (defined below).

Profession: An occupation (e.g., nursing, medicine, law, teaching) that is not mechanical or agricultural and requires special education.

Professional development: Taking purposeful action to engage in structured activities to advance career development, education, leadership, program management, and/or compliance initiatives.

Professional identity: The representation of self, achieved in stages over time during which the characteristics, values, and norms of a profession are internalized, resulting in an individual thinking, acting, and feeling like a member of the profession.

Responsibility: The state or fact of being responsible, answerable, or accountable for something within one's power, control, or management.

Scholarship: The generation, synthesis, translation, application, and dissemination of knowledge that aims to improve health and transform health care. Scholarship is the communication of knowledge generated through multiple forms of inquiry that inform clinical practice, nursing education, policy, and healthcare delivery. Scholarship is inclusive of discovery, integration, application, and teaching (Boyer, 1990). The hallmark attribute of scholarship is the cumulative impact of the scholar's work on the field of nursing and health care.

Service: is the action of helping or doing work for someone.

Social Justice: The expectation that everyone deserves equal economic, political, and social rights and opportunities. Equity, access, participation, and human rights are four principles of social justice including to ensure fair distribution of available resources across society, to ensure all people have access to goods and services regardless of age, gender, race, ethnicity etc.; to enable people to participate in decisions that affect their lives, and to protect individual liberties to information about circumstances and decisions affecting them and to appeal decisions believed to be unfair.

Spheres of Care: Encompass the healthcare needs of individuals, families, populations, and the care/services required to address these needs and promote desired health outcomes. In this document, four spheres of care are delineated 1) disease prevention/promotion of health and well-being, which includes the promotion of physical and mental health in all patients as well as management of minor acute and intermittent care needs of generally healthy patients; 2) chronic disease care, which includes management of chronic diseases and prevention of negative sequelae; 3) regenerative or restorative care, which includes critical/trauma care, complex acute care, acute exacerbations of chronic conditions, and treatment of physiologically unstable patients that generally requires care in a mega-acute care institution; and, 4) hospice/palliative/supportive care which includes end-of-life care as well as palliative and

supportive care for individuals requiring extended care or those with complex, chronic disease states or those requiring rehabilitative care (AACN, 2019).

Wellness and well-being: A state of being marked by emotional stability (e.g., coping effectively with life and creating satisfying relationships) and physical health (e.g., recognizing the need for physical activity, healthy foods, and sleep).

Definition of Didactic, Clinical, Lab, and Simulation

The university requirement is one credit equals one hour of instruction. This is how credit and clock hours are determined in the A.S. nursing program.

Essential Abilities, Skills and Characteristics

Required for the Dakota Wesleyan University Nursing Program

A candidate for licensure as a registered nurse must, therefore, have abilities and skills which enable the student to acquire essential specialized knowledge and to utilize this knowledge in planning and delivering nursing care. The use of a trained intermediary is not acceptable, in that the candidate's judgment must not be mediated by someone else's power of observation and selection. Faculties of nursing have responsibilities to students, clients, and society to prepare the best possible nurses.

The following abilities and skills are necessary to meet the requirements of the nursing curriculum at Dakota Wesleyan University:

- a. Observation: The candidate must be able to observe a client accurately at a distance and close at hand. Observation and assessment necessitate the functional use of the senses of vision, hearing, touch, and smell.
- b. Communication: The candidate must be able to speak, to hear, and to observe clients in order to elicit information; describe changes in mood, activity and posture; and perceive non-verbal communications. Communication includes not only speech but reading and writing. A candidate must be able to communicate effectively and efficiently with patients, their families, and all members of the health care team.
- c. Motor: The candidate must have sufficient motor function to obtain information from patients by palpation, auscultation, percussion, and other assessment maneuvers. A candidate must have sufficient motor skills to provide care to clients in a variety of care settings and to operate equipment central to the treatment of the client receiving care by a registered nurse. A candidate must also demonstrate the strength and endurance necessary to perform usual nursing activities for a complete nursing shift. Work can at times be heavy, requiring exerting up to 50 pounds of force occasionally, and/or up to 20 pounds frequently and/or up to 10 pounds consistently to push, pull, lift, carry or otherwise move objects. The majority of work requires manual dexterity and ability to grasp. Visual acuity and adequate hearing are needed to perform essential job functions.
- d. Intellectual, Conceptual, Integrative and Quantitative Abilities: These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of nurses, requires all the four previously mentioned abilities.
- e. Behavioral and Social Attitudes: A candidate must possess the emotional intelligence required for full utilization of the student's intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities, attendant to the care of the clients, and the development of mature, sensitive, and effective relationships with clients. A candidate must be able to tolerate physically taxing workloads and to function

effectively under stress. A candidate must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many clients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities necessary for nursing.

No applicant is barred from the nursing program because of sex, gender, race, creed, color, marital status or national origin. Individual consideration is given on a case-by-case basis to persons with special circumstances, or those who do not meet the entrance requirements as listed. However, each candidate must meet the abilities and skills as described in this document. Any handicapped applicant will be given individual consideration for admission according to these guidelines. In addition to the above abilities and skills, a Dakota Wesleyan University nursing student is expected to adhere to the principles of the "*Code of Ethics for Nurses with Interpretive Statements*," adopted by the American Nurses Association. The Code of Ethics for Nurses communicates a standard of professional behavior expected throughout the total nursing program and during each individual nursing course. Therefore, the Administration of the Department of Nursing reserves the right to dismiss any student for behaviors that are inconsistent with the Code of Ethics for Nursing.

**Dakota Wesleyan University
Arlene Gates Department of Nursing**

Professional Standards

Dakota Wesleyan University nursing program students will use the **American Nurses Association (ANA) Code of Ethics for Nurses with Interpretive Statements and Nursing Scope and Standards of Practice** to guide their practice of nursing. A student's conduct and behavior is held to these professional standards.

The following definition of nursing serves as the foundation for the ANA's scope and standards of nursing practice:

“Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, groups, communities, and populations” (ANA, 2015, pg. 1).

Arlene Gates Department of Nursing Civility Statement

Students should respect both their professors and their classmates. Students should expect professors to respect their intelligence, their privacy, and their rights as Dakota Wesleyan students. Expectations include paying attention in class, no cell phone use, social media, avoid computer distractions, and not carrying on conversations while the professor is talking, or a classmate is presenting. Often faculty may ask a student to turn off or put away technology so that everyone can focus on the class. Interacting with colleagues with compassion and respect is an essential element of the Code of Ethics for Nurses and your professors are committed to fair treatment, integrity and resolving conflict in a civil manner.

What faculty expects from students:

- Show respect for nursing professors, for your classmates and for this university in all settings.
- Attend all class sessions and arrive at class on time. When a student must be absent for a legitimate reason, the student should contact their professor via DWU email before class.
- Actively participate in class. This is above and beyond attendance, it includes listening, answering questions, and taking part in discussions.
- Check your DWU email and Canvas daily.
- Complete assignments by the due date.
- Actively participate in online courses.
- Manage conflicts with faculty or other students in a professional manner.
- Utilize the chain of command for conflict resolution.
 - The instructor of record of the course is the first person to contact with questions or concerns regarding the course.

What a student can expect from the faculty:

- Be treated with respect.
- A completed syllabi and course calendar the first day of class. The instructor reserves the right to alter the course calendar as needed due to unforeseen events (examples include weather, Instructor illness).
- Guidance when the student has questions about the organization of the course.
- Prompt feedback – both written and oral. If you don't hear from a professor as expected, please contact them.
- Patience during lab, clinical, and simulation.
- Openness to new ideas.
- To be fair in the grading of assignments and exams. If questions arise about assignments or exams, contact the faculty member.

Student's Signature

Date

Academic Integrity Violation Policy

Dakota Wesleyan University is dedicated to the achievement of academic excellence, the building of character and the pursuit of lifelong learning. To be successful in realizing these goals, honesty and integrity must be a part of every learning opportunity on campus. Academic dishonesty breaks the trust necessary for the building of community, the promotion of authentic learning, and the nurturing of spiritual values. All members of the institution, including faculty, staff and students, share the responsibility to report incidents of academic dishonesty.

Academic dishonesty includes, but is not limited to, any act of cheating, fabrication, plagiarism, abuse of resources, forgery of academic documents, dissimulation, sabotage, and any act of facilitating or aiding any of the foregoing.

The following definitions are intended to clarify this policy and not to exhaustively catalog all possible forms of academic dishonesty.

- Cheating is using or attempting to use unauthorized materials, electronic devices, information, or study aids in any academic exercise. Examples: copying homework, copying someone else's test, using unauthorized information such as a cheat sheet, using a cell phone during an exam.
- Fabrication is the falsification or invention of any information or citation in any academic exercise. Examples: making up a source, knowingly giving an incorrect citation, intentionally misquoting a source.
- Plagiarism is the representation of the words and ideas of another as one's own in any academic exercise.
- Dissimulation is the disguising or altering of one's own actions so as to deceive another about the real nature of one's actions with respect to an academic exercise. Examples: fabricating excuses for such things as missing classes, postponing tests, handing in late papers, turning in a paper for one class that was originally written for another class (when original work is requested).
- Abuse of resources is the damaging of any resource material or inappropriate limiting of access to resource material necessary for academic work. Examples: destroying or hiding library materials; removing non-circulating material from the library; hiding or stealing another person's textbook, notes, or software; failure to return library materials when requested by the library.
- Forgery of academic documents is the unauthorized changing or construction of any academic document. Examples: changing transcripts, changing grade books, changing grades on papers that have been returned, forging signatures, signing other students in to class when they are not present.
- Aiding and abetting academic dishonesty is knowingly facilitating any of the activities described in this policy or any other incidents of academic dishonesty not specifically described here.

Instructors are encouraged to discuss this policy with their classes at the beginning of each course and to list the first paragraph of this policy in their syllabi, with references to the complete listing of the policy in this catalog and the DWU Student Handbook.

Violations of Academic Integrity Policy

Violations of this academic integrity policy will, at the discretion of the faculty member, result in one of the following:

- a reprimand (written or verbal) for unintentional violations;
- a zero (or other significant grade reduction) for the assignment (paper, exam, or project) for intentional or flagrant violations; or
- a grade reduction or failing grade in the course for intentional or flagrant violations.

Unintentional infractions may be reported to the provost at the discretion of the faculty member. All infractions deemed by a faculty member to be intentional must be communicated to the student and reported to the provost, using the required form. The provost shall keep a record of all reported infractions and accompanying sanctions in his or her office. The provost may use this information, at his or her discretion, to impose more severe penalties for students who violate the policy more than once (but who may do so in different classes and/or with different instructors). A second violation of the university's academic integrity policy shall, generally, result in failure for the course in question. A third violation shall, generally, result in expulsion from the university. The provost may modify these penalties at his or her discretion.

Not all academic integrity decisions are subject to appeal. First time decisions (i.e., those made by an individual faculty member for a first-time infraction) are not subject to appeal. Only second or third decisions (i.e., those made by the provost on the basis of knowledge of previous infractions) are subject to appeal.

A student wishing to appeal either a second or third violation of the university's academic integrity policy must submit his or her written appeal within five (5) business days of receiving his or her written communication from the provost. The appeal should be submitted to the office of the provost. Appeals will be reviewed by an academic integrity committee consisting of the two traditional college deans overseeing the colleges in which the most recent academic integrity violation *did not occur* and the director of student life. The decision of the appeals committee shall be final.

Admission Policies

A.S. Nursing Program

The nursing faculty selects applicants who are deemed to be best qualified to succeed in the nursing program. Prospective nursing students must meet certain standards to be admitted into the nursing program. These standards are not the same standards used for admission into Dakota Wesleyan University (DWU). Students can be denied admission into nursing but may be eligible for admission into other majors at DWU.

Rationale for nursing requirements: identified admission requirements are based on the emphasis of standardized exam skills needed for the National Council Licensing Examination for Registered Nurses (NCLEX-RN).

Admission Requirements

1. Admission to Dakota Wesleyan's A.S. in Nursing program is competitive. This means that, historically, there are more applicants than there are available seats in each program and cohort. The Nursing Faculty considers the following criteria in ranking applicants for admission to each track:

- **Priority Admission:**
 1. Students with a high school or college GPA greater than 3.0 at the time of application will be granted guaranteed admission to the ADN program. The most recent GPA will be evaluated.
- **Waitlist and Ranking:**
 1. Students with a GPA of 2.99 or below will be placed on a waitlist until the application deadline.
 2. On February 1st, all students on the waitlist will be assessed.
 3. Admission from the waitlist will be granted based on GPA ranking, starting from the highest GPA downward, until all available seats are filled.
- **Transfer Student General Admission the Nursing Program**
 1. Transfer students will be evaluated per their college GPA.
 2. Transfer students must provide documentation of earning a minimum grade of C in English composition and a C- in general education and support courses at an accredited college or university. No general education or support course can be repeated more than one time.
 3. Science courses must be completed in the past 10 years. Credit for science courses taken ten years ago or more must be validated by successful completion of a test or retaking the course.
- **Transfer from another Nursing Program General Admission to the Nursing Program**
 1. A student requesting to transfer from another nursing program into the DWU nursing program must meet the admission requirements to the DWU nursing program.
 2. Placement into the DWU Nursing program will be considered on a case-by-case basis pending a transcript review by the Administrative Chair.
 3. The Administrative Chair and nursing faculty reserve the right to approve, admit conditionally, or deny admission to any student requesting to transfer from another nursing program.
- **Seats Available:**
 1. A total of 32 seats are available in each admission cycle.
- **Additional Considerations:**
 1. Other admission factors such as prerequisites, application completeness, and background checks may be considered but are not explicitly part of this GPA-based priority system.
 2. Final admission decisions are subject to the program's capacity and compliance with accreditation standards.

Note:

Applicants are encouraged to maintain their GPA. If taking courses to improve chances of admissions it must include at least 6 credits of college coursework.

Other coursework completed at other colleges or universities that may meet one or more of the required general education and/or support courses must meet the following:

- The DWU Registrar department will evaluate an official transcript to ensure transferred credits meet one of the general education or support courses required for the degree.
- The credit can be no older than 10 years.
- All other catalog conditions for transfer credits must be followed.

Admission Appeal Process

An admission appeal process exists for students who do not meet nursing admission policies due to extenuating circumstances. Address written requests of appeal to the Administrative Chair of Nursing.

Medical Requirements for DWU Nursing Students

A student admitted to the DWU nursing program must present evidence of the following medical requirements. All nursing students are required to maintain currency of all required immunizations and tests. All nursing student health records are maintained by the University to document compliance with health care facility policies. A nursing student is not permitted to enter clinical areas of health care facilities until all medical requirements are met.

1. Student Health Form (Health History)

- a. Complete the Student Health/Immunization Form upon admission as a Dakota Wesleyan University student.
- b. ***Note: The Student Health Form is completed in your TigerGo account at <http://www.dwu.edu/tigergo>**

2. Major Medical Insurance

- a. A copy of the front and back of a major medical insurance card is required by DWU. Students who do not have private insurance coverage will be required to purchase insurance.
- b. Insurance **must** be confirmed or updated within the first week of **each** semester, as a part of the student's Semester Finalization.
- c. ***Note: Medical Insurance is submitted in your TigerGo account at <http://www.dwu.edu/tigergo>**

3. Immunization Records – One of the following is required

- a. Documentation of two MMR vaccines (Measles, Mumps and Rubella); OR
- b. If there is one documented MMR, the student needs to have a 2nd MMR vaccination; OR
- c. Documentation of titers (blood tests) indicating immunity to all three infections; OR
- d. Medical documentation of an allergic reaction that would prevent MMR vaccination.

4. Physical Evaluation

- a. New Physical Examination Documentation will be required for the following students:
 - i. New Nursing Students
 - ii. Nursing Students returning from taking greater than 4 months off or with a new medical diagnosis, or physical changes due to an accident.
 - iii. Nursing Students who have taken Medical Leave.
- b. The Physical Evaluation form can be found at the following link:
- c. <https://www.dwu.edu/student-life/campus-health/mandatory-health-forms>
- d. All questions referring to the Physical Evaluation please contact the Campus Nurse at 605-995-2957 or Donna.Gerlach@dwu.edu

5. Tuberculin (TB) Tests

- a. Incoming nursing students are required to complete a QuantiFERON TB blood test.
- b. Students who have not submitted required Annual TB test documentation, are not

permitted to participate in clinical experiences, until test is completed and documentation submitted to the Nursing Office.

6. Tdap Injection

- a. Documentation of a Tdap injection is required. Thereafter, Td's to follow per CDC recommendations.
- b. Nursing students are to follow the schedule for tetanus boosters, a Td or Tdap is required every 10 years from the last Tdap.

7. Covid-19 Vaccination– Per guidelines/ requirements of clinical facilities

- a. Documentation showing completed Covid-19 Vaccination Series.
- b. Acceptable documentation from a Healthcare Provider stating the condition which causes the student to be exempt from vaccination.
- c. If a student is unable to receive the Covid-19 vaccination, the student is required to wear a mask at all times during clinical rotations.
- d. Covid-19 regulations could change throughout the year per our clinical partners regulations.

8. Varicella (Chickenpox) Immunity – One of the following is required

- e. History of the disease noted in Section II of the Student Physical Form, OR
- f. Documentation of a Varicella titer (blood test) showing immunity; OR
- g. Documentation of two administered doses of Varicella vaccine

9. Hepatitis B Series & Hepatitis B Titer (Hep B Surface Antibody) – Provide documentation of each dose & titer results

- a. 1st dose: Students must receive the first dose to be permitted to attend clinical experiences.
- b. 2nd dose: due one month after first dose
- c. 3rd dose: due five months after second dose
- d. Titer: due 4 to 6 weeks after 3rd dose (a positive titer indicates immunity has been acquired.)

If the student did not complete a titer after three doses OR the titer was negative after three doses:

- e. See healthcare provider for booster (4th) dose or repeat entire 3-shot series per providers recommendations. A titer is due 4 to 6 weeks after last dose is received. If the Hepatitis B titer is positive, student has met requirement.
- f. If the titer is negative after booster (4th) dose:
 - 1. 5th dose: due one month after fourth dose
 - 2. 6th dose: due five months after fifth dose
 - 3. Titer: due 4 to 6 weeks after the 6th dose. Student will have met the Hepatitis B requirement after remainder of doses and titer.

Students who fail to follow the timeframe for Hepatitis B doses and titer cannot attend clinical experiences. The clinical absence policy will be followed until the student completes the required doses and/or titer. Any exceptions to this policy must be approved by the administrative chair of the department of nursing.

10. Annual Influenza Vaccination – One of the following is required by November 1st, Annually.

- a. Written documentation of annual flu vaccination.
- b. Written documentation from a healthcare provider indicating the reason why flu vaccination cannot be administered to student.
- c. If a student does not present annual flu documentation by the due date, the student will not be allowed to attend clinical rotations.

11. CPR Certification and Renewal

a. ASN

- i. Incoming nursing students must be CPR certified. The American Heart Association course, HeartCode® BLS (Basic Life Support for Healthcare Providers CPR), is required. HeartCode® BLS is an interactive E-learning and E-simulation course. **BLS must have a hands-on training component.**
- ii. Renewal of CPR Certification: After initial certification, all nursing students must keep their American Heart Association CPR certification (or American Red Cross certification only if employed by Avera) current by renewing it every two years.

Students who fail to keep CPR certification current and immunizations current cannot attend clinical experiences. The clinical absence policy will be followed until a student presents documentation of renewal of CPR or immunizations. Students are responsible for all costs related to initial certification and renewal.

Criminal Background Check

The criminal background check is required to protect public/client safety and meet the requirements of contract clinical agencies.

The Department of Nursing requires criminal background checks on all incoming nursing students before beginning clinical rotations in a health care agency. Students with questions regarding issues related to criminal records are to contact the SD Board of Nursing.

Criminal background checks will be completed only after the applicant has received written notice of admission to the nursing program. Each admitted nursing student is required to complete the criminal background check through Verified Credentials before taking the first nursing course.

Students who break enrollment with the DWU nursing program must complete the criminal background check upon reacceptance and enrollment in the nursing program.

Students who have felony convictions will not be accepted into the nursing program.

Major Medical Health Insurance

Dakota Wesleyan University's contractual agreements regarding clinical experiences with cooperating agencies require that all nursing students be covered under a major medical health insurance policy throughout the entire calendar year. Students, age 26 and under, who

are covered under a parent's medical insurance policy need to verify with their parent's insurance agent that coverage applies to the student while attending DWU.

At finalization, all students will be required to provide the name of their major medical health insurance company along with the group number and/or policy number and provide a copy of the front and back of their insurance card. For questions regarding major medical insurance coverage, please contact Donna Gerlach, DWU Campus Nurse, 605-995-2957, or e-mail donna.gerlach@dwu.edu. ***Note: Medical Insurance is submitted in the student's TigerGo account at <http://www.dwu.edu/tigergo>**

Nursing students are responsible for their own medical expenses, whether due to an injury in a clinical experience agency or elsewhere, or to an illness which requires treatment. Nursing students assigned to any clinical experience area are not covered by that institution's workman's compensation liability insurance or by Dakota Wesleyan University. A student who is injured during a clinical experience is responsible for his or her own health care costs, even if those costs were incurred due to hospital policy regarding care following an injury or exposure to communicable disease. For example, if a student is involved in an incident or accident in the hospital and sent to the emergency department (ED) for treatment, the student is responsible to pay the costs of the ED visit. Dakota Wesleyan University assumes no liability for injury, infection, or illness that may occur because of clinical experiences.

Professional Liability Insurance

The department of nursing purchases professional liability insurance for all Dakota Wesleyan University nursing students. The student blanket liability insurance plan provides coverage up to \$1,000,000 per occurrence and up to \$5,000,000 per aggregate.

Communicable Disease Exposure

A nursing program student that suspects they have been in contact with a person with a communicable disease should report this to the clinical faculty and the administrative chair and to the DWU campus nurse. All students are responsible for their own health costs.

New medical diagnosis, or physical changes due to an accident.

Nursing students with a change in health status may be required to submit a health care provider's release allowing the student to return to class/clinical experiences. The Administrative Chair may recommend a medical leave of absence and/ or a treatment or follow-up plan pending circumstances.

Progression in the Associate of Science (A.S.) Nursing Program

In addition to all Dakota Wesleyan University policies regarding grading, proficiencies, progression, and graduation as contained in the DWU Student Handbook and University Catalog, all Dakota Wesleyan University Associate of Science (A.S.) degree. Nursing program students shall be governed and adhere to the following nursing department policies pertaining specifically to progression, grading, dismissal, and graduation.

All nursing students must have a cumulative grade point average (GPA) of at least 2.7 to be admitted into the nursing program. Students must take nursing courses in sequence. All nursing courses must be taken per the plan of study. No transfer credits will be accepted for nursing specific courses. Transfer courses of Research, Nutrition, Pathophysiology, and Medical Terminology may be considered on a case-to-case basis. See the DWU University student handbook for specific grade requirements related to all non-nursing general education and support courses. A grade of B- (79.5%) in nursing theory and a satisfactory rating in clinical must be achieved to successfully complete a nursing course.

Progression in the nursing program is accomplished by satisfactory completion of each nursing course in the plan of study.

AS Nursing Courses:

NUR 326:	Nursing Concepts in Pharmacology
NUR 310:	Fundamental Nursing Concepts I
NUR 321:	Health Assessment Nursing Concepts
NUR 342:	Mental & Social Health Nursing Concepts
NUR 320:	Fundamental Nursing Concepts II
NUR 426:	Nursing Concepts in Population Health
NUR 408:	Advanced Nursing Concepts
NUR 411:	Lifespan Nursing Concepts I (Maternal/Women)
NUR 412:	Lifespan Nursing Concepts II (Pediatrics)
NUR 423:	Complex Nursing Concepts
NUR 450:	Transition into Professional Practice

Prerequisites, co-requisites, and recommended previous courses are:

COURSE	PREREQUISITE	CO-REQUISITE
NUR 326	None	NUR 321
NUR 321	None	NUR 321
NUR 310	NUR 321, NUR 326	NUR 342
NUR 342	NUR 321, NUR 326	NUR 310
NUR 320	NUR 310, NUR 321, NUR 326, NUR 342	N/A
NUR 408	NUR 310, NUR 321, NUR 326, NUR 342, NUR 320	NUR 411, NUR 412
NUR 411	NUR 310, NUR 321, NUR 326, NUR 342, NUR 320	NUR 408, NUR 412
NUR 412	NUR 342, NUR 320, NUR 426, NUR 342, NUR 320	NUR 408, NUR 411
NUR 423	NUR 342, NUR 320, NUR 426, NUR 342, NUR 320, NUR 408, NUR 411, NUR 412	NUR 426
NUR 426	NUR 342, NUR 320, NUR 426, NUR 342, NUR 320, NUR 408, NUR 411, NUR 412	NUR 423

NUR 450	NUR 342, NUR 320, NUR 426, NUR 342, NUR 320, NUR 408, NUR 411, NUR 412, NUR 423, NUR 426	
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Nursing Course Fees

Additional nursing course fees are assessed per credit hour to help defray the cost of the nursing program's low faculty to student ratio, professional liability insurance for clinicals, and the specific requirements established by the accrediting agencies.

Nursing Lab

The nursing lab provides space for the practice of nursing procedures. If students wish to practice clinical skills outside of class, a time may be arranged with the nursing faculty responsible for the course.

Emergency Response Plan:

In the event of a fire or emergency that necessitates leaving the classroom:

1. Students should evacuate using the designated exits.
2. When the all clear is given, students will either return to the classroom or be dismissed.
3. Please consult the DWU handbook for emergency response policy.

Tobacco-Free Environment

In order to protect the health, safety, and comfort of university students, employees and visitors, it is the policy of DWU to prohibit smoking, the use of smokeless tobacco products and vaping, in facilities and on grounds owned and occupied or leased and occupied by the University. DWU supports education programs to provide smoking cessation and prevention initiatives to our students, employees, and other academic appointees. Nursing students also must follow the tobacco-free environment policies of clinical partners. Smoking, the use of smokeless tobacco and vaping are strictly prohibited prior to and during clinical, lab, and simulation. Violation of this policy on campus facilities or while at clinical may result in dismissal from the program.

OFFICE OF DISABILITY SERVICES AND THE AMERICANS WITH DISABILITIES ACT STATEMENT:

Any student who believes they may need academic accommodations or access accommodations based on the impact of a documented disability is encouraged to contact and register with Disability Services no later than three weeks after the first day of classes of a given semester or period. Disability Services is the office officially charged with assisting students through the process of disability verification and coordination of appropriate and reasonable accommodations. The accommodation letters generated by the Office of Disability Services are operative for a single semester, and students must request and receive a new letter from Disability Services each semester in order to receive accommodations.

The Americans with Disabilities Act (ADA) guarantees the privacy of students with disabilities. For more information, questions, and/or accommodation arrangement, please contact:

disabilityservices@dwu.edu

Phone:(605) 995-2499

Office: McGovern Library Room 23

ACADEMIC SUCCESS AND CAREER SERVICES CENTER

The Academic Success and Career Services Center is located on the second Floor of the McGovern Library. This center offers a wide range of academic support and career planning services. Services include selecting or changing a major, preparing for standardized tests, applying to graduate schools, tutoring, writing assistance, identifying strengths and talents, career preparation, and many more. The center is also a place for students to learn, collaborate, and study. For more information and/or questions, please contact:

Academic Success and Career Services Coordinator

Office: McGovern Library, Room 202

Phone: (605) 995-2904

SEX AND GENDER-BASED MISCONDUCT (TITLE IX):

In support of its mission, Dakota Wesleyan University is committed to maintaining a healthy and safe learning, living, and working environment that promotes responsibility and respect among all members and guests of the campus community. This is an environment in which no one is unlawfully excluded from participation in, denied the benefits of, or subjected to discrimination in any university program or activity on the basis of gender, sex, sexual orientation, sexual identity, gender identity, or gender expression. Individuals wishing to discuss a Title IX issue or file a formal complaint should contact the Title IX Coordinator.

Director of Student Life

Office: Rollins Campus Center

Phone: (605) 995-2160

Fax: (605) 995-2892

Use of Technology in Nursing Courses

All students are required to have a laptop or iPad. A laptop is preferred for in class as well as remotely proctored exams. Information on computer system requirements, such as required minimum hardware specifications, type of operating system, and software applications, can be viewed at this DWU Web page: <https://support.dwu.edu/support/home>

Canvas is the learning management system used for online course delivery. A student Canvas tutorial is available on this DWU Web page: <https://dwu.instructure.com>. Policies regarding online learning will be included within the course syllabus.

Technology support for students and faculty is available through Support Services, which can be accessed anywhere 24/7 through the Web portal at <https://support.dwu.edu>. Students and

faculty may log into the site with their individual Windows account information. This site allows an individual to submit and track requests to Support Services. Any e-mail sent to support@dwu.edu is also logged in this tool.

Helpdesk contact information:

Phone: 605-995-2900

Location: Smith Hall 207

Office Hours: Monday through Friday, 8:00 a.m. to 12:00 p.m.; 1:00 p.m. to 5:00 p.m.

Email: support@dwu.edu

Website: <https://support.dwu.edu>

Class Attendance

Class attendance is required, and roll will be taken. Non-attendance, greater than one week, is required to be reported to the Administrative Chair of Nursing. Absences may affect financial aid. The student is responsible for the announcements made and materials distributed during class time, as well as assignments, quizzes and tests, and any online content required in Canvas, textbook resources, or other online formats.

For class, you are expected to come to class prepared and ready to learn, which requires you to read and study the assigned reading before you come to class.

Class, Exam/Quiz Tardiness

In theory classes, a student will be considered tardy if the student arrives after content instruction has begun. Entry into the classroom after content has begun is at the discretion of the instructor. In the event of tardiness or absence on a testing day, without prior notification of the instructor of record, you will receive a zero on the exam/quiz.

EXCUSED ABSENCES

Students should not expect to be excused from class, lab, simulation, or clinical for personal/family events.

In extraordinary circumstances an absence may be granted at the discretion of the course faculty. Students must provide documentation supporting their reason for being late and/or absent. The request will be reviewed by the administrative nursing chair if necessary. This policy is designed for special circumstances, and it should not be considered a guarantee that a student will be granted permission.

If a student is diagnosed by a physician or APP with an infectious disease that would prevent the student from performing their duties, the student must submit documentation to the administrative chair, signed by a physician or APP.

The University recognizes there are times when students must miss class due to extraordinary circumstances. The following are considered excused obligations and are not to be counted as absences in the class.

- Jury duty
- Short-term military call-up.
- Participation in university athletics or other university-sanctioned events.

This activity must be documented, and documentation must be provided to the faculty in advance of the activity. The documentation must be verified by the administrative nursing chair.

Cell Phones/Electronic Devices in the Classroom

All electronic devices, including cell phones, must be turned off completely in the classroom and during exams. Smart watches cannot be worn during exams.

Tests and Quizzes

If a student will be absent for an exam at a scheduled time, the student must notify the course instructor a minimum of one hour prior to the exam. If the student fails to notify the course instructor of the absence, at least one hour prior to the exam, a zero will be given.

1. Tests must be taken when scheduled.
2. A student taking a test at an unscheduled time (make-up test) will be given an alternative test.
3. All make-up tests must be completed in a timely fashion as determined by the instructor.
4. Test review will not be available until all students have taken the test. Students are encouraged to make an appointment individually to review each test with faculty. Exam review will occur at the discretion of the primary course faculty member.
5. Tests may not be repeated.
6. When paper format is used, the Scantron answer sheet is the official record for determining student scores. The paper test is not used as documentation of a student's answer.
7. When testing online, once the student has chosen to "submit" the test for final grading, the student is not allowed to change his/her answers.
8. When testing online, students will not have any other document, app, file, folder, etc., active on their computer screen. Doing so will result in a zero on the given exam.

Late Assignment Policy:

All assignments (oral or written) including any plan of care, must be submitted on the specified due date. No credit will be given for assignments handed in late. This policy is enforced as deemed appropriate by the course instructor.

Nursing Course Grading

Nursing Department Grading Scale

92.5 & higher.....	A	72.5 to 77.4.....	C
89.5 to 92.4.....	A-	69.5 to 72.4.....	C-
87.5 to 89.4.....	B+	67.5 to 69.4.....	D+
82.5 to 87.4.....	B	62.5 to 67.4.....	D
79.5 to 82.4.....	B-	59.5 to 62.4.....	D-
77.5 to 79.4	C+	59.4 and below.....	F

1. Course accountability guides regarding grading and course requirements are prepared for each specific nursing course and included in each course syllabus.
2. A passing grade of B- (79.5%) in nursing theory and a B- (79.5%) and Satisfactory in clinical, lab and simulation must be achieved to successfully complete a nursing course.
3. All course requirements must be handed in and clinical make-up completed before the final exam in order to receive any credit.
4. A student who earns a grade of C+ to D+ (79.4% to 67.5%) in any nursing course or has an Unsatisfactory in clinical and simulation, regardless of a B- or better in theory will fail the course and cannot progress in the nursing program. If the student wants to return to the nursing program, the student will be required to make an application for readmission to the Dakota Wesleyan University nursing program following the steps outlined in "Dismissal with Eligibility to Request Readmission."
5. A student who earns a grade of D or below (67.4% or below) in any nursing theory course shall not be allowed to repeat that course and shall be dismissed from the Dakota Wesleyan University nursing program.

6. Course Grades: For Courses that DO include testing.

Theory course grades are determined as follows:

Testing*	80%
<u>Other course assignments</u>	<u>20%</u>
Total Course Grade**	100%

Course Grades: For Courses that DO NOT include testing.

Course grades are determined as follows:

Course Assignments	80%
<u>Signature assignment</u>	<u>20%</u>
Total Course Grade	100%

Course Grades: For Courses that DO include Testing plus HESI testing.

Course grades are determined as follows:

Unit Testing	80%
HESI Proctored Exam	5%

Other course assignments	15%
Total Course Grade**	100%

*Testing may include proctored tests, quizzes, EAQ, standardized tests and other items of faculty discretion.

**Faculty reserves the right to designate course assignments as testing or other course assignments. This will be noted on syllabus.

****When the final grade in a nursing course is 0.5 or greater of a whole number, the final grade is rounded up to the next whole number. A percent less than 0.5 is not rounded up.***

7. A B- (79.5%) and a Satisfactory in clinical, lab and simulation is required to progress.
8. In some courses, clinical skills testing is required. A minimum of B- (79.5%) is required for specified skills to successfully complete that nursing course. Students will be allowed one re-test on each skill. The re-test does not change the grade received on the original clinical lab test. If a student does not receive a B- (79.5%) on the re-test, a grade of Unsatisfactory will be given for clinical experiences. The student will then be assigned a course grade of C+ (79.4%) or less.
9. Only one nursing course may be repeated one time at Dakota Wesleyan University or at any college or university.
10. A nursing student who earns a grade below a C- (except C in English) in a general education or support course required for the nursing program may repeat it one time only. All other policies contained in the DWU Student Handbook and University Catalog pertaining to "repeating a course" apply to Dakota Wesleyan University nursing students.

Learning Contract Policy

A nursing student deemed to be at risk will be placed on a learning contract. A learning contract, including learning outcomes to be achieved by the nursing student, along with a specific plan to meet the outcomes, will be drafted by the nursing faculty member with input from the nursing student. The nursing student will receive a copy of the learning contract. The nursing faculty member and nursing student will review the learning contract on a periodic basis. Nursing students will be given verbal and oral feedback regarding his/her progress, along with the opportunity to evaluate his/her own progress each month.

Incomplete Grades

A grade of "Incomplete" is only given in very unusual circumstances and is not an option or a means to complete work that the student was unable to do during the regularly scheduled semester unless there is a severe medical or related emergency. Incompletes will not be given in courses that include clinical components that cannot be replicated.

Withdrawal from a Nursing Course

Students have the option to withdraw from a nursing course. However, withdrawing does not guarantee readmission to the nursing program. The administrative chair, in consultation with

the nursing faculty responsible for the course will review the reason for withdrawing. If a student withdraws due to non-academic extenuating circumstances, the student may apply for readmission to the nursing program. A withdraw does not count as a repeat of a course. A student may only withdraw from a nursing course once during the nursing program.

Credit/No Credit

All courses listed in a student's nursing plan of study must be taken for a grade. Courses taken as credit/ no credit will not be accepted towards the major.

Grade Appeal

Students have the right to appeal a grade. Refer to the current Dakota Wesleyan University Catalog.

Dismissal with Eligibility to Request Readmission

Any student who earns a C+ to a D+ (79.4% to 67.5%) in any nursing course or a final rating of Unsatisfactory in a clinical component of a nursing course, including simulation, shall be dismissed from the Dakota Wesleyan University nursing program. However, said students may make application for readmission to the Dakota Wesleyan University nursing program. Students who receive an Unsatisfactory for clinical due to unsafe, unprofessional, or unethical behavior or for confidentiality breaches are not eligible to request readmission.

Student requests for readmission to the nursing program must be received in writing by the administrative chair. [Student's readmission letters are due by February 1 for the fall semester and August 1 for the spring semester.](#) The request must describe the reasons for desiring an exception to the department of nursing policies, requirements, and standards.

Students seeking readmission are considered on an individual basis by the nursing faculty based on the following criteria:

1. Qualified candidates making initial application for admission to the DWU nursing program are given priority for available slots.
2. Satisfactory grades in general education and support courses.
3. Re-evaluation of the guidelines for admission to the nursing program.
4. Clinical space available.
5. Professional judgment of the nursing faculty as to potential for successful completion of the nursing program and passing the NCLEX-RN exam.
6. Faculty will review clinical achievement and evaluations, HESI exam scores, nursing exams, and other academic work in making their decision.

Nursing faculty will also consider student's attendance in course and clinical experiences, attitude, dependability, and responsibility. The nursing faculty assigning the course grade for which the student has been dismissed will be excluded from voting. Nursing faculty reserve the right to re-admit conditionally or deny readmission.

Requests for readmission to the nursing program must include:

1. An explanation of the circumstances surrounding the student earning an unsatisfactory nursing course grade or nursing course cumulative grade point average (GPA) below the benchmark; and

2. An explanation of how the student's circumstances are different now;
3. An explanation of how the student plans to be successful if readmitted.

Conditional Readmission

Students will be required to complete remediation prior to re-admission. The student will be required to complete EAQ questions and a physical assessment prior to being fully reaccepted into the DWU nursing program. Any learning materials required will be at the expense of the student. The student must meet the following criteria during conditional admission.

- Complete all EAQ questions at the specified level, they must be completed prior to the start of the semester or terms. Faculty will monitor student progress.
- A contract with learning objectives to be achieved by the nursing student shall be drafted by the nursing faculty with input from the student. The student will meet with the administrative chair to review the contract.
- Progress will be reviewed with the student on at least a monthly basis and possibly more frequently as determined by the nursing faculty with the student to evaluate successful completion of the contract. Nursing students shall be kept informed in writing by nursing faculty regarding his/her progress toward completion of the contract objectives.
- The nursing student will receive a copy of the contract. A conditionally readmitted nursing student may be denied readmission from the Dakota Wesleyan University nursing program if the nursing student has not met the objectives set forth in the contract.

Dismissal without Eligibility to Request Readmission

A student will be dismissed from the nursing program, and will not be permitted to return for unsatisfactory academic performance or for disciplinary reasons including, but not limited to:

1. A final grade of D or below in any nursing course.
2. A final grade below B- in the second attempt (repeat) of any nursing course. A nursing course may be repeated only once and only one course in the nursing curriculum may be repeated.
3. A final grade below a C- in the second attempt (repeat) of a general education or support course, except for a C in English composition.
4. Failure to meet the objectives set forth in the contract of a conditionally readmitted student.
5. Failure to continue to meet the abilities, skills, and characteristics essential for admission to and retention in the DWU nursing program outlined in this handbook.
6. Incompetent, unethical, dishonest, or illegal conduct, academically or clinically, that is inconsistent with the ANA Code of Ethics for Nurses.
7. Being found guilty of any act as outlined in the DWU Student Handbook or University Catalog as published by the University, including, but not limited to sections labeled Administrative Withdrawal, Academic Integrity Policy, Academic Probation and Suspension, and Community Expectations and Responsibilities.
8. Unsafe clinical practice.
9. Violation of HIPAA

Appeal Process for Readmission/Requests for Exceptions to Nursing Program Policies

A readmission appeal process exists for students who are denied requests for readmission or exceptions to nursing policies. Written requests for reconsideration of nursing faculty denials for readmission or exceptions to nursing policies should be addressed to the administrative chair and mailed to the department of nursing. The request will be taken to the entire nursing faculty for further consideration and final decision. The decision of the nursing faculty will be final.

Nursing Program Exit and Graduation Requirements

Students must meet the following requirements for exiting the nursing program and for graduation.

1. A student must take at least 44 credit hours of nursing courses at Dakota Wesleyan University in order to graduate from the nursing program.
2. All nursing courses per the student's plan of study must be completed successfully and recorded on the official transcript by the DWU registrar.
3. All financial obligations to Dakota Wesleyan University are to be paid in full to the business office. A nursing student will not be able to make an appointment for their exit interview with the administrative chair and/or program director or have their certificate of completion or official transcript mailed to a Board of Nursing if their financial obligation to DWU is not paid.

National Council Licensing Examination (NCLEX-RN) Readiness Policy

Completion of the DWU nursing program does not guarantee student success for taking the NCLEX-RN licensing exam. It is each nursing student's responsibility to successfully complete each nursing course and to prepare themselves to take the NCLEX-RN Exam.

DWU HESI SPECIALTY EXAM POLICY:

NOTE: The HESI Specialty Exam policy may be adjusted at the end of each course by the program chair in consultation with faculty according to student, faculty, or campus needs.

NOTE: STUDENTS WHO CONSISTENTLY SCORE BELOW 849 ON THE HESI SPECIALTY EXAMS MAY BE ASKED TO PURCHASE ADDITIONAL STUDY MATERIALS AND/OR BOOK SPECIFIC EAQ THROUGH ELSEVIER TO ALLOW FOR EXTRA REMEDIATION. THE PRODUCTS MAY INCLUDE ITEMS NOT INCLUDED IN THE REQUIRED TEXTBOOKS AND

MATERIALS.

HESI Specialty Exam Requirements:

Requirements for HESI Preparation for Specialty Exams:	<p>Preparation:</p> <ol style="list-style-type: none">1. The HESI Practice Exams and Quizzes serve to prepare the student to take the HESI Specialty Exams.2. The Practice Exams and Quizzes are a ticket to test prior to the administration of the HESI Specialty exam. Failure to complete both the HESI Practice Exam and Quiz prior to administration of the HESI Specialty Exam will result in denial of entrance to take the exam. <p>NOTE: Some Optional Preparation Resources may be assignments created by faculty. If this is the case, then students must complete those assignments as directed by the faculty with respect to due dates and grading.</p> <p>Optional Preparation Resources: Students can use the following optional resources in addition to the required preparation/remediation to prepare for the HESI Specialty Exams.</p> <ol style="list-style-type: none">1. Review all HESI Case Studies.2. Review all HESI Patient Reviews3. Work to be Proficient in all assigned EAQ's.	
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Required Specialty HESI Exam Scores and Remediation	Exam Scores: HESI Specialty Exam Scores will be 5% of overall grade. Score of 900 or above: Student receives 100% Score of 750-899: Student receives 90% Score of 600-749: Student receives 80% Score of 450-599 or below: Student receives 70% Score of 449 or below: 0%	Remediation: All students will remediate after specialty exam is complete. A HESI Student Remediation Packet will be sent to the student's Evolve Account. NOTE: Faculty will track student remediation activities and time through the HESI Assessment – Remediation Reports and Dashboard.
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Last Revised: 12/11/24

Purpose: Students in all DWU nursing programs are required to take Health Education Systems Incorporated (HESI) practice quizzes and exams throughout the nursing program. These assignments prepare the nursing student to take the proctored HESI exams.

HESI practice quizzes and exams are required in the following nursing courses:

- NUR 320 Fundamental Nursing Concepts II
- NUR 326 Nursing Concepts Pharmacology
- NUR 342 Mental and Social Health Nursing Concepts
- NUR 411 Lifespan Nursing Concepts I
- NUR 412 Lifespan Nursing Concepts II
- NUR 423 Complex Nursing Concepts
- NUR 426 Nursing Concepts in Population Health

Administration: HESI practice quizzes and exams can be taken in-person or as homework. Proctoring is not required. Practice quizzes and exams can be taken multiple times. The grade will be what is submitted by the student to Canvas.

Remediation: No remediation is required.

Grading: HESI practice exams and quizzes are worth 1-point per question recorded as course assignment. The total number of questions per practice exam and quiz varies by course.

HESI Testing (Proctored)

Last Revised: 12/11/24

Purpose: Students in all DWU nursing programs are required to take Health Education Systems Incorporated (HESI) proctored exams throughout the nursing program. These exams prepare the nursing student to take the NCLEX exam.

HESI proctored exams are required in the following nursing courses:

Score will be recorded as 5% of the overall grade after remediation is complete:

- NUR 320 Fundamental Nursing Concepts II
- NUR 342 Mental and Social Health Nursing Concepts
- NUR 411 Lifespan Nursing Concepts I
- NUR 412 Lifespan Nursing Concepts II
- NUR 423 Complex Nursing Concepts

Score will be recorded as a course assignment after remediation is complete:

- NUR 326 Nursing Concepts Pharmacology
- NUR 426 Nursing Concepts in Population Health

Administration: HESI proctored exams must be administered in-person. Students must complete the exam in one sitting. The exam can be taken only once per student.

Remediation: All students are required to complete individualized remediation based on their achieved HESI exam score. Students must complete the remediation as indicated in their Evolve HESI dashboard. Faculty are responsible for assigning students to complete all three remediation pieces within Evolve (HESI remediation essential packets, Case studies, and Clinical judgement skills). Students will complete the HESI remediation essential packets using the standardized form and submit the form to Canvas for grading.

Grading: HESI proctored exams are graded following the guidelines outlined in the DWU nursing student handbook. Final grades are calculated after student remediation is completed.

HESI Assessment and Review Policy
Student Acknowledgement
A.S. Nursing Program, Rapid City

Initial each statement and sign below:

_____ I have received a copy of and have read the HESI Assessment and Review Policy.

_____ I understand that it is my responsibility to utilize all the books, tutorials, and online resources available from HESI.

Student signature

Date

Student printed name

Clinical Experiences

Medication errors/occurrence

1. If the student has a medication error, they will be given an Unsatisfactory and put on probation. Refer to “Guidelines for Evaluation of Student Clinical Experiences.” Medication errors are always unsafe clinical practice. All medication errors or occurrences will be reported to the administrative chair.
2. The clinical agency’s procedure for occurrences is to be followed. If the student has more than one occurrence in a course, the nursing faculty in consultation with the administrative chair will give consideration to dismissal of the student from the nursing program.

Unsafe Behaviors-

1. It is essential that nursing students caring for patients be physically and mentally alert. If in the clinical instructor's judgment, the student does not meet the above criteria, the student will be sent home from clinical. This will be counted as a clinical absence. Unsafe behavior may include but is not limited to substance abuse, mental distress, emotional distress, or any incapacity that would inhibit the student’s ability to provide safe patient care.

The ability of students to provide safe care for patients is jeopardized by the use of mood and/or perception altering chemicals such as alcohol, marijuana and other drugs. A nursing student who reports to the clinical area, and who, in the judgment of the clinical instructor, demonstrates mental and/or physical signs of chemical use, such as odor of breath, dilated pupils, apathy, etc. will be referred out of the clinical area immediately. In addition, immediate referral will be made to the administrative chair of the nursing department and to the DWU director of student life. Absence from the clinical area for this reason will be handled as any other clinical absence. Further action in this matter is subject to the policy of the University. Students may be asked to take a drug test if substance abuse is suspected.

Any behavior that is considered to be negatively affecting students, patients, or others may result in dismissal from the program.

2. Grossly unsafe or irresponsible behavior will result in immediate “probation” for the student. If deemed necessary, the clinical instructor may direct the student to leave the clinical area. The administrative chair of the nursing department will be notified of any student who was made to leave the clinical area or placed on probation and will request to meet with this student to discuss his/her behavior.
3. A student may be immediately dismissed from the nursing program if he/she displays incompetent, unethical, dishonest, or illegal conduct, academically or clinically, that is inconsistent with the ANA Code of Ethics for Nurses and the ANA Nursing Scope and Standards of Practice.

Needlesticks

Clinical Facility

- If a student is stuck with a needle or exposed to a significant body fluid, the policy for the facility should be followed by the student. The student should immediately report the incident to the clinical faculty and appropriate action initiated. The student is responsible for any expenses associated with the incident.

Campus Nursing Lab

- If a student is stuck with a sterile needle during practice in the campus nursing lab, the area will be washed with soap and water and a band-aid applied. If the needle is contaminated from a non-body substance source, the area will be washed with soap and water, cleaned with Betadine, and a band-aid applied. The student will be instructed to observe the area for any redness, warmth or other signs of infection or complications. If any complications occur, the student will be referred to the university campus nurse for evaluation and a referral to a physician. The student may choose to go directly to his/her own physician. DWU is not responsible for any medical expenses that may occur.

Nursing Student Uniform and Dress Code

The nursing student uniform and dress code provides guidelines that assist the student to recognize and adopt an appropriate professional appearance. The uniform standards were developed to comply with requirements of the health care settings in which student clinical learning experiences take place. The uniform allows for infection control in the health care environment.

The complete clinical uniform is to be worn during clinical experiences.

1. The required clinical uniform is a royal blue scrub top and pants purchased from an apparel company approved by the nursing department. A long-sleeved royal blue jacket may be purchased but is optional; however, no other jackets or sweaters are permitted. Students may wear a white or black shirt or turtleneck under their scrub top.
2. All nursing students are required to wear photo identification during clinical experiences. The photo identification badge must be worn above the waist and in clear sight. Only approved identification and badges can be worn at the clinical site. Each student's photo is taken at registration or finalization for their DWU ID card, and this same photo is used for the student's clinical photo ID. The nursing department provides the clinical ID for each student. A blue dot sticker will be worn on the badge to identify the clinical year of the student. This is provided by the nursing department.
3. Pants must be hemmed to an appropriate length and not dragging on the floor.
4. Clean, solid white or black tennis/athletic shoes and white or black socks are appropriate. Sandals, booties, Crocs, or any shoes with holes are not acceptable. Toes must be covered; only clogs with heel straps may be worn.
5. When in uniform all students must wear photo identification, have a black ink pen, a watch with a second hand, and a stethoscope.

Community Service Activity shirt: Students wear a nursing t-shirt and black pants or solid-colored khakis (appropriately hemmed, see previous) for community service activities and service-learning projects. The nursing t-shirt is ordered from the DWU Bookstore, and the shirt may be paid for at finalization.

Grooming for Nursing Students

1. Good oral hygiene and a clean body are essential qualities in a nursing student. Apply deodorant daily and as needed. Avoid the use of cologne, perfumes, and aftershave lotions; a student will be dismissed from the clinical setting if the odor of cologne, perfume or aftershave lotion is present. A student will be dismissed from the clinical setting if the odor of tobacco products is present.
2. Hair, clothing, and jewelry should not get in the way of patient care. A solid white or solid black headband is allowed to be worn. Jewelry is limited to a watch and one ring. No necklaces or decorative pins may be worn with the uniform.
3. No visible body piercing is allowed except in the ears. Nose, tongue, and/or eyebrow earrings must be removed during clinical experiences.
4. All tattoos must be covered.
5. Candy and chewing gum are prohibited during patient care activities.
6. No fingernail polish is allowed.
7. Artificial nails and nail tips are not allowed by the health care facilities. Fingernails should be trimmed to an appropriate length and not to exceed $\frac{1}{4}$ inch.
8. Hair must be neat, clean, and kept off the uniform collar. Only naturally occurring colors of hair are allowed. Long hair must be kept off the face and up whenever in uniform.

Cell Phones/Electronic Devices in Clinical Areas

All electronic devices, including cell phones, are not to be carried, turned on, and/or used in patient care areas.

Smoking during Clinical Rotations

Students are prohibited from smoking or using smokeless tobacco products immediately prior to and during clinical experiences. A student will be dismissed from the clinical setting if the odor of tobacco products is present.

Clinical Attendance and Absence Policies

(Pertains to each clinical associated with a nursing course)

1. Attendance at all clinical experiences is required as assigned, including any clinical held in the nursing lab, simulation experiences, clinical enrichments, competency testing, and HESI testing. If an absence is unavoidable, then the student is responsible for notifying the instructor or the assigned clinical area at least one hour BEFORE the scheduled clinical lab time.

2. If a student is unable to perform the expected clinical skills per policy (refer to Abilities, Skills and Characteristics), he/she will not be allowed to attend clinical and will be counted absent. Upon return to the assigned clinical area, a student may need a healthcare provider release to resume clinical responsibilities.
3. All absences from clinical experiences must be made up. **It is the responsibility of the student to contact the clinical instructor and the clinical unit before the scheduled lab or clinical time.** Clinical make-up must be coordinated with the clinical instructor. This make-up, including written clinical make-up when necessary, must be completed in a satisfactory manner prior to the end of the semester. If the make-up is not completed, the student will be given an Unsatisfactory for clinical until the work is completed.
4. If a student is absent from a clinical experience, including clinical held in the nursing lab, simulation experiences, clinical enrichments, competency testing, and HESI testing, the absence must be made up at a rate of \$35.00 an hour and be paid to the clinical instructor prior to the clinical make-up. Excused absences will be made up at faculty discretion.
 - **A 2nd clinical absence will result in the student being placed on probation.**
 - **A 3rd clinical absence will result in the student earning a grade of Unsatisfactory for clinical and a final grade of "F" for the course resulting in the inability to progress in the program.**
5. If absences are due to schedules required by Dakota Wesleyan University extracurricular activities, arrangements for clinical make-up must be made in advance, and no fee will be charged. This specific absence will not be tallied in the total clinical absences for each clinical course.
6. In the clinical setting, students who arrive more than 1 minute late, but within 15 minutes of the state start time of clinical, will be considered tardy. They may be allowed to stay and participate in clinical at the instructor's discretion. On the fourth incident of tardiness, and with all future tardiness, the student will be considered absent. Students who arrive between 15 and 30 minutes late for their clinical experience will be considered absent but may be allowed to stay and participate in clinical. Students between 15 and 30 minutes late will not need to make up clinical hours but will have an absence on file. Three absences will result in dismissal from the program. Students who arrive more than 30 minutes late will be considered absent and will not be allowed to stay and participate in clinical.
7. Students may be allowed to trade clinical for an anticipated absence if it is deemed appropriate by the clinical instructor.
8. Students who acquire injuries that include needing medical devices such as: (walker, walking boot, crutches, etc.) for longer than two clinical experiences will be required to take a leave of absence.

Clinical Class Size

Clinical class size is based upon the availability of sites for clinical experiences. The faculty/student ratio in the clinical area will be 1:8. During the final nursing course, NUR450, a 1:1 ratio will be used.

Plan of Care

A plan of care is due by midnight of the third day from the time care was delivered. A plan of care handed in after the due date will receive no credit. If a student scores less than a 79.5% on a care plan, they will be required to complete another care plan. The original score will be the official score in the gradebook.

Cancellation of Clinical Laboratory Experience

Clinical laboratory experience will be cancelled for nursing students at local clinical facilities if the University cancels classes due to weather or other emergencies.

Medication Calculation Quiz

Before NUR310 and NUR320 clinical each semester, students will be required to take a medication calculation quiz. The quiz is worth 10% of the NUR310 and NUR320 lab grade. The first score is recorded in the grade book. Students must earn greater than 90% on the medication calculation quiz. If the student does not earn a 90% on the first attempt, they are required to meet with the tutor for a remediation session. The student cannot pass medications at clinical without earning a 90% on the medication calculation quiz. For each clinical the student cannot give medications, an NI will be given. Further remediation is at the discretion of the instructor.

**Dakota Wesleyan University
Arlene Gates Department of Nursing**

Confidentiality Agreement

I understand confidential care and treatment is the right of all patients. All information, including names, room numbers, diagnosis, treatment, and all other information concerning a client is considered confidential. I understand that even the presence of a client in a clinical agency or their ability to pay their bill is considered to be confidential information.

In addition, I understand confidential information also includes information:

1. concerning an employee;
2. concerning a physician or other practitioner;
3. concerning quality of care.

I agree that I will not at any time disclose or discuss any part of my experience which is of a confidential nature to anyone other than those involved in that person's care. I also agree not to seek or obtain information regarding confidential matters which is not necessary to perform my assigned duties or observation.

I recognize my disclosure of confidential information may cause irreparable injury to an individual and/or clinical agency, and may result in a civil lawsuit. I understand my disclosure of any confidential information in an unauthorized manner can result in my immediate termination as a student at the clinical agency. The student will abide by HIPAA regulations at all times. In addition, a breach of confidentiality will result in dismissal from the DWU Nursing Program.

By my signature below I certify that:

1. I have read this Confidentiality Agreement;
2. I have had the chance to ask any questions I might have;
3. I understand the Agreement; and
4. I agree to be bound by its terms.

Nursing Student Signature

Date

Please Print Name _____

Witness Signature

Date

Guidelines for Evaluation of Student Clinical Experience

The Dakota Wesleyan University nursing program clinical evaluation system is designed to assist the nursing student in meeting standards necessary to provide safe, high quality nursing care. Evaluation of student clinical performance is used to support student progress toward attainment of course learning outcomes.

Evaluation is an ongoing process and the final decision regarding student achievement of clinical learning outcomes is made at the completion of the course. The role of the clinical instructor is to observe and evaluate clinical performance by gathering and analyzing data to determine if the desired outcomes of the clinical course have been successfully achieved by the nursing student.

Each nursing course uses Clinprep as the clinical evaluation tool, except NUR 450 Transition into Professional Practice which will utilize a separate clinical evaluation tool. Clinprep includes the course clinical learning outcomes. All clinical learning outcomes must be met at a satisfactory level at the end of the course for the student to receive a final grade of satisfactory for the clinical portion of the course. The student is required to adhere to the program requirements as outlined in the respective nursing program student handbook and the ANA Code of Ethics for Nurses and ANA Nursing Scope and Standards of Practice.

The Evaluation of the Student's Achievement of Clinical Learning Outcomes form is a record of the clinical instructor's/instructors' observations and indicates the instructor's/instructors' professional judgment of a student's performance in the clinical setting. The form identifies the course learning outcomes that are to be successfully met at the completion of the course. Listed under each outcome are behaviors that lead to attainment of the outcome. The behaviors may be considered critical and marked with an asterisk (*) and must be satisfactorily attained by the completion of the course to verify safe nursing practice. Those behaviors not marked with an asterisk (*) are highly desirable for competent nursing care and are strongly recommended for progression. At the completion of each week's clinical experience, the clinical instructor makes an evaluation of the performance of the behaviors by making comments in the spaces provided. Each student is responsible for reading and acknowledging these comments each week. Each student will receive a grade at the end of each clinical rotation which counts as their course clinical grade.

Students may request a conference with their clinical instructor to review their progress at any time during the semester. Students are encouraged to meet with their clinical instructor for assistance and/or clarification of any comments appearing on their clinical evaluation form. A conference form will be utilized for student/clinical instructor meetings to discuss areas of nursing care that need improvement and recommendations for the student to improve nursing abilities. The student is responsible for following through on instructor recommendations before the next scheduled clinical.

In addition to the clinical evaluation form, a Conference Form may be utilized for "Needs Improvement" and will be utilized for all "Probation" and "Unsatisfactory" ratings. The conference form will indicate the problem, when it occurred, and the instructor's description of the problem. The form will be signed by the instructor and placed in the student's folder. The instructor will keep a copy in the student's personal file located in the nursing department. The student has the responsibility to act on "Needs Improvement" or "Probation" ratings before the next scheduled clinical time.

The conference form provides space for the student to document his/her perception of the problem and their signature verifying they have read the evaluation. The student signature does not indicate that he/she agrees with the instructor's documentation. It is the student's responsibility to contact the individual instructor for discussion of the problem and to problem-solve appropriate interventions to rectify the unsatisfactory behavior. Before the next scheduled clinical the student must confirm with the clinical instructor that any required remediation was implemented. If required remediation has not been accomplished, the student will not be allowed to return to the clinical setting.

Grading Criteria for Student Clinical Performance

Grading of clinical performance on all levels will be based on criteria described below. Students will be expected to achieve a satisfactory final evaluation to progress to the next level. The final evaluation of the student's course clinical performance is indicated by a "Satisfactory" or "Unsatisfactory" rating. Students also receive a course grade for written work submitted. An unsatisfactory rating in clinical performance or a grade below B- (79.5%) will result in a final grade of "F" in the nursing course and dismissal from the nursing program without eligibility to apply for readmission to the nursing program.

The student's clinical performance will be evaluated at designated intervals throughout the clinical experience as follows: Exceptional (E), Successful (S), Needs Improvement (N), Unsatisfactory (U), Probation (PR), or Not Observed (NO). Student behaviors that have not been observed will not penalize a student's clinical grade. Clinical grading rubrics are as follows:

Successful (S)

- Students who regularly meet and sometimes exceed clinical expectations and role requirements.
- Demonstrates depth and breadth of nursing knowledge.
- Demonstrates fundamental performance of nursing skills.
- Consistently connects nursing knowledge to practice.
- Consistently interacts well with peers, staff, and members of the interdisciplinary team.
- Consistently shows initiative.
- Work is regularly complete and meets the standards for quality.

Needs Improvement (NI)

- Students who have not learned the required role knowledge and have not yet mastered key clinical expectations and role requirements.
- Depth and breadth of nursing knowledge is average.
- Demonstrates performance of nursing skills with high levels of instructor prompting
- Inconsistently connects nursing knowledge to practice.
- Interactions with peers, staff and members of the interdisciplinary team require prompting from the instructor.
- Shows initiative with prompting.
- Work is complete and meets the minimal standards for quality, sometimes s misses deadlines.

Unsatisfactory (U)

- Students who have not mastered key nursing responsibilities.
- Inconsistently demonstrates the required role knowledge and requires supervision by the instructor.
- Takes little to no initiative, even with prompting.
- Requires more than the expected level of supervision due to lower quality work or level of learning required to complete role successfully.
- Inconsistent interactions with peers, staff, and members of the interdisciplinary team
- Work is regularly incomplete and/or does not meet the minimal standards for quantity or quality; often misses deadlines.

Probation (P)

- Students who have not mastered key nursing responsibilities and/or who have clinical infractions that warrant probation as outlined in the nursing student handbook.
- Inconsistently demonstrates the required role knowledge and requires constant supervision by the instructor.
- Takes little to no initiative, even with prompting.
- Requires more than the expected level of supervision due to lower quality work or level of learning required to complete role successfully.
- Inconsistent or no interactions with peers, staff, and members of the interdisciplinary team
- Work is almost always incomplete and/or does not meet the minimal standards for quantity or quality; usually misses deadlines.

Not Observed (NO)

- Students did not encounter the clinical activity or skill during the assigned clinical experience.

A conference form will be completed, and the faculty member will meet with the student on probation. The administrative chair and/or program director will be notified of any student being placed on probation and may request to meet with this student to discuss his/her behavior. A student on probation is at risk to receive an "Unsatisfactory" grade for the final clinical grade and must take immediate steps to demonstrate ability to provide safe and competent nursing care. An "Unsatisfactory" grade in clinical performance will result in a final grade of "F" in that nursing course and dismissal from the nursing program without eligibility to apply for readmission to the nursing program.

**Dakota Wesleyan University
Arlene Gates Department of Nursing**

Conference Form

Theory _____ Clinical _____ Other _____

Student Name _____

Subject _____

I have discussed the information above with the student.

Faculty Signature _____ Date _____

I have read the information above.

Student Signature _____ Date _____

STUDENT COMMENTS

Dismissal

The administrative chair reserves the right to immediately dismiss a nursing student from the nursing program, when in the professional judgment of the administrative chair, in consultation with the nursing faculty of the nursing course/s, the student:

- Fails to comply with or meet the established probation requirements.
- Fails to comply with regulations regarding client confidentiality. All the information regarding patients, clinical staff, clinical agencies, and fellow students is confidential and is to be discussed only in the formal learning environment. Nursing students are required to sign a confidentiality agreement annually before beginning clinical experiences. Any breach of confidential information in an unauthorized manner can result in immediate termination as a student at the clinical agency and may result in dismissal from the DWU nursing program.
- Displays behaviors which jeopardize client safety or the safety of others.
- Displays incompetent, unethical, dishonest, or illegal conduct, academically or clinically, that is inconsistent with the ANA Code of Ethics for Nurses and ANA Nursing Scope and Standards of Practice.

Student Concerns and Formal Complaints

A student should first contact and share concerns with the nursing faculty involved in a specific situation. If the issue is not resolved, or the student is uncomfortable approaching the faculty member involved in the situation, the student should next share concerns with the administrative chair, who will mediate and work towards resolving the concern. If the issue is not resolved to the satisfaction of all parties, the student may submit a signed written statement describing the concern to the dean of the Donna Starr Christen (DSC) College of Healthcare, Fitness and Sciences for further action.

Student concerns may also be referred to either of the two student representatives who are selected by classmates. Student representatives are invited to attend level/faculty meetings where nursing student(s) concerns are presented to nursing faculty. Student concerns are reviewed by faculty and a response and resolution related to the issue is shared with students by the administrative chair. If the issue is not resolved to the satisfaction of all parties, the student may submit a signed written statement describing the concern to the college dean for further action.

Formal Complaint

A formal complaint is defined as a written statement of an alleged unfair, biased treatment, or lack of due process related to a policy and/or procedure of the nursing program. Any party who has a formal complaint will need to submit a timely and thorough written description of the complaint to the administrative chair, who will present the complaint to the nursing faculty for review and discussion.

If the party who has a formal complaint is uncomfortable submitting it to the administrative chair, the party may submit the formal complaint to the college dean, who will facilitate the review and resolution process.

A response and resolution shall be decided upon by the nursing faculty. The administrative chair will share this information with the party initiating the complaint. If the complaint is not resolved to the satisfaction of the party initiating the complaint, the party may appeal to the college dean for further action. Formal complaints and documentation of the response and resolution shall be kept in a locked filing cabinet in the department of nursing office.

Informing Students of Policy Changes

1. Nursing faculty review all nursing policies annually and ongoing for congruency and accurateness. Policy revisions are included in nursing program faculty and student handbooks published each academic year.
2. Any policy changes directly affecting nursing students are presented in writing through email, or in person by the administrative chair before implementation of the new policy.
3. Policy changes related to student admission into the nursing program are forwarded to the admissions office for inclusion in promotional materials.
4. Policy changes related to student health requirements are referred to the campus health nurse.

Reference and Recommendation Letter Writing

Students may sign a release form authorizing the nursing faculty at DWU to release written personal information about students for the purpose of scholarship applications, announcements, media releases, awards, organizations, or recommendations solicited by a potential employer, etc. This will become part of the student's permanent educational file for one year after graduation.

Nursing students who plan to use nursing faculty members as references must obtain permission from the faculty members to do so. Nursing faculty can provide written or oral (telephone) clinical references for DWU nursing students/graduates who have signed a release of information consent form for up to one year after the date of graduation. Nursing students may request academic references as needed.

Release Form for Student Information

Having knowledge of the provisions of the Family Educational Rights and Privacy Act of 1974 ("FERPA"), §513 of P.L. 93-380, as amended, and outlined in the University Catalog and DWU Student Handbook which provides that the institution will maintain the confidentiality of student education records and includes: "...the right to prevent disclosure, with certain exception, of personally identifiable information...."

In compliance with FERPA, as amended, I authorize the disclosure of personally identifiable information contained in my student education record while enrolled in the nursing program at Dakota Wesleyan University by the nursing faculty administrative chair or designee.

RELEASE OF INFORMATION for such purposes as: Scholarships, Honors, Awards, Media Releases, Activities, Recommendations solicited by potential employers and/or other academic institutions, etc.

OFFICIAL STUDENT NAME: _____

SIGNATURE: _____ **ID#:** _____

DATE: _____

NOTE: This release form will be maintained as part of your nursing educational file for one year after graduation.

Pre-Professional Organizations

DWU Student Nurses Association (DWU SNA)

All nursing students are encouraged to become actively involved in the activities of DWU SNA. This local organization offers nursing students opportunities for development of leadership skills in professional nursing and increased awareness of nurses' responsibility for health care of people in all walks of life. The goals of DWU SNA functions are to promote professional growth of nursing students, demonstrate the Dakota Wesleyan University mission value of service to others, and encourage collaborative relationships with nursing and health related organizations, such as the South Dakota Nurses Association (SDNA). Participation in community health fairs and service projects are beneficial in creating a "bond" between nursing students while increasing their awareness of nursing roles in the community.

All nursing students are encouraged to participate in professional nursing activities such as local and state SDNA activities, conferences, and Nurses Day at the Legislature, the annual South Dakota Student Nurses Association (SNA) convention, and the quarterly South Dakota SNA executive board meetings.

Officers of the DWU SNA executive board are elected in May and include president, vice president, treasurer, secretary, projects chairperson, and newsletter correspondent. DWU SNA annual membership is determined by each nursing student's participation in six DWU SNA activities approved by the DWU SNA executive board and adviser(s).

National Student Nurses Association (NSNA) and SD Student Nurses Association (SDSNA)

NSNA/South Dakota SNA membership fees include dues for both organizations. Nursing students at Dakota Wesleyan University are encouraged to become members at the state and national level. Joining NSNA/South Dakota SNA provides many member benefits, such as receiving the NSNA's official magazine, Imprint, and networking opportunities at the state annual convention and national mid-year conference.

South Dakota SNA members at Dakota Wesleyan University elect one delegate for each 15 members to represent them at the annual South Dakota SNA convention.

Nursing faculty recognize the level of nursing student commitment of time and energy to attend a national mid-year conference or serve as a state or national officer. Any nursing student interested in these leadership opportunities is to maintain a B- average in current nursing courses.

Dakota Wesleyan University Candidate for Outstanding Nursing Student SD Student Nurses Association (SDSNA)

Eligibility Requirements

1. The candidate must be in his/her last year of nursing school.
2. The candidate must be a member of NSNA/South Dakota SNA and actively participate in DWU SNA activities.
3. The candidate must be in the upper one-half of his/her class scholastically as designated by local school standards.
4. The candidate shall write a 250 to 500-word essay. The topic of the essay is decided on a yearly basis. Six copies of the essay are to be prepared. One is given to the administrative chair of the candidate's school. Five copies are sent to the Outstanding Nursing Student chairperson to be given to the judges prior to the annual convention.
5. Each candidate submits a personal synopsis and a black and white photograph to the Pacemaker Editor(s) prior to the convention issue deadline.
6. The candidate must attend the annual convention. At the convention, he/she will have a personal interview with the judges. The candidate will receive notification of the exact time and place of the interview.

Personal Qualifications

1. Be neat in appearance.
2. Possess the ability to work well in team relationships.
3. Have the ability to recognize and meet physical, social, psychological, and spiritual needs of patients.
4. Demonstrate a sense of responsibility in carrying out nursing assignments.
5. Have an understanding of the nursing organizations.
6. Possess knowledge of current events and a range of interests extending beyond nursing.

Process/Timeline for electing DWU Candidate for Outstanding Nursing Student (ONS)

November

1. Administrative chair or SNA adviser will present a list of eligible nursing students to nursing faculty. Nursing faculty will select up to four individuals.
2. Administrative chair or SNA adviser will contact the individuals selected by the nursing faculty to verify each individual is willing to have their name placed on the ballot.
3. The individuals selected will be included on the ballot and presented to the 4th year nursing class.

4. The 4th year nursing class shall vote by ballot to select the DWU candidate for outstanding nursing student. The student will represent DWU at the South Dakota SNA annual convention.

January

1. DWU candidates will submit essay, personal synopsis and photograph to the DWU SNA adviser.
2. Administrative chair or SNA adviser will submit completed outstanding nursing student nomination form and all materials to the South Dakota SNA convention committee responsible for the ONS competition.

February

1. DWU candidates will attend the South Dakota SNA annual convention and participate in ONS competition at the convention.

Dakota Wesleyan University Candidate for Exceptional Nursing Student Student Nurses Association (SNA)

Eligibility Requirements

1. The candidate must be in his/her last year of nursing school.
2. The candidate must actively participate in Dakota Wesleyan University Student Nurses Association activities and attend regular meetings.
3. The candidate must have a minimum of one point from the beginning of the nursing program at Dakota Wesleyan University.
4. The candidate must exemplify qualities of leadership, involvement, and service.
5. The candidate must possess the desire to be a mentor to his/her peers.

Personal Qualifications

1. Possess the ability to work well in team relationships.
2. Demonstrate compassion in volunteer opportunities.
3. Have an understanding of the nursing organization.

Process of Selection

Student Nurses Association members will choose three graduating seniors that are eligible for this award. Once three students have been nominated, the nursing faculty will vote for a student based on leadership, dedication, and compassion. This student will show a desire to volunteer with good intention to help the community. An example of what the faculty are looking for:

- A student that meets the requirements to be considered for this award.
- A student that is active in volunteering.
- A student that has a desire to make a difference in the community.

The award will be presented at pinning to one student. The student will select a local organization to donate \$100 from the Student Nurses Association funds. This student will be recognized on a plaque that will stay within the nursing department for future students to observe.

**Dakota Wesleyan University
Arlene Gates Department of Nursing**

Learning Contract

Reason for contract: _____

Student personal goals to achieve success in this course: _____

Plan of action for course/clinical:

Instructor input: _____

Student input: _____

Conference form completed: _____ (attach to copy of learning contract if applicable)

Next meeting scheduled: _____

Referral to tutors: _____ Follow-up completed of contact: _____

Referral to other support systems: _____ (which systems) _____

Student adviser notified: _____

Adviser Signature

Date

Student Signature

Date

Instructor Signature

Date

Simulation Lab Policy

The goal of the Dakota Wesleyan University simulation lab is to provide a safe learning experience that promotes successful understanding in all aspects of health care.

DWU's faculty and administration are here to make the student's clinical experience educational and enlightening and to serve the best interest of the student. Simulations and case scenarios are designed to help the student develop problem-solving and decision-making skills. The simulation lab coordinator and faculty will attempt to include all environmental factors to make the student's learning experience realistic and authentic. For enhanced learning, all students are expected to come to the lab prepared. The faculty will provide students with positive feedback and debriefing of their performance, while students will self-analyze their own performance and use critical thinking during the reflection process.

The following guidelines maintain safety while using the DWU simulation lab. It is expected that all involved in classrooms, clinical skills, and simulation activities will adhere to these guidelines. The simulation coordinator will update the contents of this manual as needed. All students, faculty and staff will be advised of these revisions.

SIMULATION

Simulation is an attempt at replicating reality. In healthcare education, simulation tries to replicate nearly some or all of the essential aspects of a clinical situation so that the situation may be more readily understood and managed when it occurs for real in clinical practice. The simulation lab environment allows students to participate in life-like situations. Simulation can be used as a teaching method to help assess a student's skill acquisition. Simulating real life experiences for students in a safe environment is conducive to developing critical thinking, clinical reasoning, and clinical judgement skills. Practicing in such an environment will increase the probability that those skills will be used in the real-world setting.

SIMULATION SCENARIOS

Simulating case scenarios in the simulation lab involves active participation for all students. All students and faculty will adhere to the simulation center rules (see attached). Manikins are to be used with respect and treated as if they were live patients. The simulation lab is a learning environment. Situations simulated in the lab are to be used as a learning tool and no discussion of the actions of fellow students should take place outside the lab. A debriefing session will be provided for all simulation experiences. After the debriefing session, the student should fill out an evaluation form to give them the opportunity to reflect on the situation and to provide constructive criticism for further enhancement of the simulation.

INTEGRATION INTO CURRICULUM

At Dakota Wesleyan University simulation is an essential part of the learning process. Careful selection of simulation material is used. Resources for sim material such as NLN online or simulation textbooks are utilized to ensure credibility of simulation. Simulation is strategically

placed into the curriculum where they will best fit through curriculum mapping. The simulation is evaluated by faculty prior to the start ensuring that it aligns with course content, course goals, and program goals. Simulation scenarios increase in complexity throughout the nursing program to allow students to reinforce and expand on curriculum concepts and learning outcomes.

WHAT IS DEBRIEFING?

The debriefing session involves the immediate feedback and a reflective critical thinking analysis and communication tool for participants of the simulation exercise. The purpose of the debriefing assessment provides an intense post conference and active evaluation process driven by instructors and peers. The focus of the debriefing should be on positive aspects and should allow the student to answer critical thinking questions.

The debriefing session involves the immediate feedback and a reflective critical thinking analysis and communication tool for participants of the simulation exercise. The purpose of the debriefing assessment provides an intense post conference and active evaluation process driven by instructors and peers. It is learner centered and uses reflection to promote learning by examining both the actions and the meanings of actions during a simulation experience. The focus of the debriefing should be on positive aspects and should allow the student to answer critical thinking questions. This is done to improve understanding and reasoning skills as well as prepare students for future experiences.

EVALUATION

The staff and faculty are continually working to improve and streamline processes in the Nursing Simulation Lab. Students evaluate their simulation experience after every simulation day and after selected learning activities via DASH evaluation forms of simulation scenario through their post clinical reflection in ClinPrep. This data is used to identify areas of opportunity to improve our lab and simulation program. Faculty also discuss simulations at faculty level meetings to determine strengths and weaknesses of the simulation.

GENERAL SIMULATION LAB GUIDELINES

Lab conduct/behavior

1. All users of the simulation lab must act in a manner that does not disturb the academic activities occurring in the lab.
2. No eating or drinking is allowed in the simulation lab.
3. Do not use the equipment for any purpose other than specified; anyone who fails to comply with this request will be asked to leave the simulation lab.
4. Any equipment malfunction or abuse must be reported to the lab coordinator immediately.

5. Adherence to the dress code is expected. You must be in uniform or discipline specific clinical dress to participate in simulation.
6. All beds should be lowered to the ground with bed rails down after each use. Linens should be properly placed back on the manikin after each use as if caring for a real patient.
7. Do not remove the manikin from the bed unless instructed to do so.
8. All electronics including cell phones, cameras, camera phones, and video recorders are prohibited during simulations.
9. When working with the manikins, students must wash their hands and wear gloves.
10. Supplies and equipment must not be taken out of the lab unless instructed by an instructor.
11. Equipment should be disposed of appropriately. (sharps containers, biohazard trash containers, etc.).

CONFIDENTIALITY

In order to preserve the realism of the scenarios used in the simulation lab and to provide an equitable learning experience for each student, all persons using the simulation lab will be required to sign a confidentiality agreement (see attached copy of confidentiality agreement). Because every simulation has the possibility of being recorded, manikin accessibility will be treated like a real patient. Students are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPPA) and any other federal or state laws requiring confidentiality. Students agree to report any violations to the faculty or instructor.

DRESS CODE

Students participating in the simulation lab will adhere to the same clinical dress code as they would for their respective discipline. Students performing mandatory clinical skills in the laboratory are expected to come prepared with proper clinical attire, stethoscope, and a watch with a second hand. Students performing make-up work must also wear clinical attire.

INVENTORY & SUPPLIES

Supplies needed for each simulation will be provided. When supplies are running low, the simulation lab coordinator should be notified. All supplies should be returned to the cabinet in which they were found. Many supplies are reusable and should be restocked when not being used. Needles/sharps are never to be reused under any circumstance and should be disposed of in the sharps containers.

CLEAN- UP

The lab should be left in the manner in which it was found, so that the following class may enjoy the lab experience. Beds should be remade and left in the lowest position with the bedrails down. Manikins are to be left in the bed or on chairs unless working on a skills assignment (i.e., lifting, moving, etc.). Curtains should be placed back up against the wall and bedside tables are to be placed at the foot of the bed. Any bedpans, urinals, or basins need to be washed, dried, and placed in the bedside drawers.

SAFETY GUIDELINES

Infection Control

Participants in simulated scenarios need to be mindful of all standard precautions and transmission specific precautions (contact, droplet, airborne). Any piece of equipment that comes in contact with simulated patient body fluids are considered contaminated and need to be handled appropriately. Gloves will be worn with all manikin interaction and non-sterile gloves should be disposed of in trash cans. If a sharps container is full, please inform lab coordinator so it may be replaced.

Latex Warning

Students and faculty need to know that some of the equipment in the simulation lab contains latex. Those with a known sensitivity/allergy to latex need to contact the lab coordinator. Every effort will be made to replace equipment with latex-free substitutions. All users who suffer from latex allergies should take precautions while using or handling the latex parts by wearing non-latex gloves.

Lab Safety

All students should be instructed on safe handling techniques prior to practice and demonstration. Any person should use caution when practicing lifting skills and should not lift a manikin or heavy object without assistance. The wheels of all equipment (beds, wheelchairs, stretchers etc.) are to be locked during practice and after use. There is a first aid kit located in the laboratory classroom if needed.

Simulation Lab Overview

As part of your clinical experiences, you will be involved in simulation exercises at different points during your academic year. The goals of these experiences are to offer you the opportunity to practice synthesizing and applying concepts and principles of nursing care delivery in a safe environment. Simulation experiences have been integrated into your curriculum as a way to develop and refine your clinical decision-making skills. These experiences should be seen as unique and complex learning opportunities in which you will be allowed to make mistakes, and learn from them, without the risk of physical harm to patients.

Student Expectations

The following list is a general guide of student expectations in the simulation lab. Your instructors may have further expectations as outlined to you prior to your specific experience.

- Simulation lab days are treated as clinical days. If you are absent, you will be required to make up the time. Any absences will be recorded as clinical absence time. Please refer to the Bachelor of Science Nursing Program Student Handbook for clinical absence criteria.
- You will be assigned one of 4-6 roles during your lab experience. You will learn your role the day you arrive for the simulation. Roles may include primary nurse, secondary nurse, client care tech, family member, observer/evaluator, or other members of the healthcare team.
- Prior to coming to your assigned simulation day, you will be expected to research the specific topic/diagnosis being covered that day. This is to better prepare you for the encounter in order to enrich the overall experience.
- After each scenario, we will “debrief” in your small group. This will be a time to identify “positives” from the experience, as well as areas for possible improvement/change. We will focus on the “group process” not individual student performance.
- During debriefing, we will address pathophysiology, lab values, medications, priority nursing diagnoses, collaborative problems, delegation, supervision, professional communication, therapeutic communication, priority setting, sorting out relevant data, etc. Each scenario will contain these elements.
- Your client may not survive...be prepared to know how to respond to potential complications in your scenarios.
- Students are not expected to be “expert clinicians”. Simulation scenarios are for practice and role-playing. The goal is that this practice will help your performance during complicated situations in the “real” clinical setting.

Simulation General Instructions for Student Participants

- Treat the manikin like a real client. Talk to it, explain what you are doing, respect privacy, communicate therapeutically, demonstrate caring, etc.
- Treat the “family member” with respect and understanding.

- Perform nursing assessments and conduct your health history as you would with a real client. You will have to prioritize interventions. Don't tell your instructor your interventions; actually do them.
- Anticipate client and family needs.
- Implement physician orders (prioritized appropriately).
- Assess as often as appropriate (time may be sped up by your instructor with statements such as "an hour has passed", etc.). Remember vital signs, lung sounds, O2 sats, heart rhythm, etc. may change with interventions needed based on changes.
- As lab results come back, interpret significance and intervene if necessary.
- Communicate with the physician as needed, either when he/she comes to the unit or via telephone.
- Assess the whole environment-don't assume equipment, etc. will be correct.
- Several students will be assigned various roles in the simulation experience. If you are assigned to the primary nurse role, remember that you may have a charge nurse you can ask for help as needed, and also an LPN or nursing assistant you can delegate to.
- The evaluators (usually 1-2) are assigned the task of assessing and critiquing the situation. This is a VERY important role. They will be leading the debriefing process following the simulation. Critique is for learning purposes, not a time to be negative.
- When assigned the role of a family member, have fun, but also think about how a family member really does feel, what would be helpful to you, how is the nurse communicating with you, etc.
- You may be asked to perform a "handoff" report in which you will give verbal report to the next caregiver(s). Be prepared to use your SBAR communication strategies.
- Respect confidentiality as you would for a real client. Please do not share information with your peers, in order to preserve the best learning experience for everyone.
- Respect your peers, interact professionally, help each other, and learn from each other. We don't expect you to be clinical experts at this point, but we do expect you to be prepared for and engaged in your learning experience, no matter your assigned role.
- During debriefing, we will explore what happened during the simulated experience. We expect lots of questions and high-level critical thinking, as well as discussion regarding the synthesis and application of data.
- We hope to offer a challenging, yet fun experience to all students.

Questions you should be asking yourself prior to, during, and after simulated experiences

- What is my foundational knowledge regarding the pathophysiology of this disease, standards of practice as a registered nurse, skills required to care for this type of client, and other professional roles related to the care of this type of client?
- What should I know about lab values?
- What should I know about diagnostic tests?
- What should I know about expected medical interventions?
- What should I know about specific nursing interventions?
- What should I know about specific medications?
- What are the potential complications r/t this diagnosis?
- What other members of the healthcare team would be important to collaborate with?
- What cues am I receiving from the client and/or family member?
- Based on my observations, what decisions should I be making: wait/watch? Should I inform someone, if so, who? Who should I be consulting with?
- Has the client's condition changed based on interventions made?
- How can therapeutic communication be integrated into this situation?
- What strengths do I bring to this scenario? What weaknesses?

Role Descriptions and Functions

Primary Nurse

- You are the nurse assigned to this client situation. You may delegate to other staff; however, do not assume they know what you are asking them to do.
- You must perform a focused assessment and health history based on the client's priority needs; as you would in a real situation.
- Implement dependent, interdependent, and independent interventions in priority order.
- Communicate with others involved (i.e., physician, family, other staff, etc.).
- You may be receiving and implementing new physician orders.
- Remember that the client's condition may change, necessitating modifications in your plan and interventions.
- You are not expected to be a clinical expert, but you must be prepared.

- Be prepared to discuss and/record your self-evaluation following the experience. In particular, take note of things you know you did well, as well as areas you need to continue to grow and learn.

Family Member

- Remember you are to observe as a person who cares deeply about the client in the scenario.
- You do not have a medical background or understand medical jargon.
- Be prepared to discuss your observations of the situation during debriefing.
- What were some helpful things nursing staff did for you during the simulation experience?
- What was your perception of the nurse's caring and concern for you and your family member?
- Do you believe you were well informed of what was going on in this situation? What was helpful r/t communication? What was not so helpful?
- Did the staff's behavior make you feel confident in the care your family member was provided?
- What could nursing do better to help families in this situation?

Supporting roles (Resource nurse, LPN, nursing assistant, etc.)

- Come prepared to support the care of the client based on direction from the primary nurse.
- Have a basic knowledge of the diagnosis and be prepared to contribute to the scenario based on that knowledge.
- Was I utilized to my role's full potential? If not, how could I have been utilized in a more meaningful way?
- How can nursing staff delegate care effectively?
- Was delegation utilized in an effective way during the scenario? If not, how can we do better with this?

Evaluator Role

Record your observations related to prioritization, delegation and/or supervision, therapeutic communication, professionalism, nursing interventions/care/knowledge (anything relevant to delivering quality care).

You will fill in a form such as this:

Positive things I observed occurring:

- Prioritization
- Delegation/Supervision
- Communication
- Nursing Intervention/care/knowledge

Areas/issues where further teaching/reinforcement could be helpful: How would you address this?

- Prioritization
- Delegation/Supervision
- Communication
- Nursing Intervention/Care/knowledge

**Dakota Wesleyan University
Arlene Gates Department of Nursing**

Confidentiality Statement and Permission for Simulation Videotaping and Recording

I, _____, agree to keep the information derived from this scenario confidential. I will not share the scenario details with other students, and I will not discuss the performance of my classmates during the scenario with others. This includes client history information obtained prior to the actual simulation experience, as well as information obtained and used in the pre- and post-conferences. Students are not to share information about their simulation experience with other students, so everyone gets an equal opportunity for learning. Violation of this confidentiality statement is a violation of the DWU Nursing Program's Professional Conduct/ Confidentiality Agreement and will lead to consequences for the student, possibly up to and including dismissal from the nursing program.

I also give permission to be recorded during the simulation scenario. I understand that this recording will be used for educational purposes only and that other classmates and instructors may view this recording. By critically evaluating my performance through the viewing of the recordings, I understand that my learning can be maximized.

I acknowledge that I am at least eighteen (18) years old, I have read and understand this Confidentiality Statement and Permission for Simulation Recording Form, and I am voluntarily signing it. This statement is binding to all users of the Arlene Gates Department of Nursing Simulation Lab.

Signature

Date